What are person-centered functional goals?

• Goals identified by the client, in partnership with the clinician and family, that allow participation in meaningful activities and roles

Why target person-centered functional goals?

• To maximize outcomes that lead to functional improvements that are important to the individual
• To optimize the individual’s potential to participate in meaningful activities
• To facilitate a partnership that ensures the individual and family have a voice in the care received and outcomes achieved
• To demonstrate to the payers the value of skilled services

What is the ICF, and how does it help?

The International Classification of Functioning, Disability and Health (ICF)—developed by the World Health Organization (WHO)—is a framework to address functioning and disability related to a health condition within the context of the individual’s activities and participation in everyday life.

ICF: International Classification of Functioning, Disability and Health

Health Condition
 disorder or disease that informs predicted comorbidities and prognosis

Body Functions and Structures
 anatomical parts and their physiological functions

Activities and Participation
 execution of tasks or involvement in life situations

Environmental and Personal Factors
 physical, social, attitudinal, and environmental factors and factors within the individual’s life

ADDITIONAL RESOURCES: asha.org/slp/icf/ • who.int/classifications/icf/en/
### Person-Centered Focus on Function: Tinnitus Management

#### Case study: Mr. S

#### Health Condition: Tinnitus

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<tr>
<th><strong>Assessment Data</strong></th>
<th><strong>Body Functions and Structures</strong></th>
<th><strong>Activities and Participation</strong></th>
<th><strong>Environmental and Personal Factors</strong></th>
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|                     | *(Audiologic diagnostic exam, tinnitus assessment, hearing aid fitting)* | • Difficulty focusing attention on specific stimuli and concentrating  
• Difficulty receiving spoken messages due to tinnitus  
• Difficulty engaging in all aspects of work  
• Difficulty participating in community/social life due to tinnitus  
• Difficulty in interpersonal interactions and relationships, because others do not understand tinnitus and its impact | • Is 45 years old  
• Has noise-induced hearing loss  
• Is depressed  
• Receives limited family/friend support for understanding sounds others cannot hear  
• Has benefitted from hearing aids and tinnitus maskers  
• Has benefitted from audiology services  
• Has limited access to rehabilitation services |

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<tr>
<th><strong>Clinical Reasoning</strong></th>
<th><strong>What impairments most affect function in the current setting or at discharge, based on clinician assessment and the individual’s self-report?</strong></th>
<th><strong>What activities are most important to the individual in the current or discharge setting?</strong></th>
<th><strong>What environmental/personal characteristics help or hinder participation in activities or situations in the current or discharge setting?</strong></th>
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<tr>
<th><strong>Goal Setting</strong></th>
<th><strong>Mr. S’s Functional Goals</strong></th>
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</table>
|                   | **Long-Term Goal:**  
Mr. S will fully participate in life by accepting tinnitus.  
**Short-Term Goals:**  
• Mr. S will describe the causes, incidence, and impact of tinnitus on activities of daily living.  
• Mr. S will keep a diary for 2 weeks to record which sounds exacerbate and/or minimize the impact of tinnitus.  
• Mr. S will make appointments with other professionals to explore treatment/counseling for depression and lack of family support.  
• Mr. S will use sound therapy to reduce the prominence of the tinnitus at bedtime so that he can get a good night’s sleep. |

For clinical and documentation questions, contact healthservices@asha.org.  
The interpretation of ICF and examples above are consensus based and provided as a resource for members of the American Speech-Language-Hearing Association.