DYSPHAGIA GOALS

LONG TERM GOALS - SWALLOWING

- Client will maintain adequate hydration/nutrition with optimum safety and efficiency of swallowing function on P.O. intake without overt signs and symptoms of aspiration for the highest appropriate diet level
- Client will utilize compensatory strategies with optimum safety and efficiency of swallowing function on P.O. intake without overt signs and symptoms of aspiration for the highest appropriate diet level

Swallow Study

- Complete a Modified Barium Swallow/Fiberoptic Endoscopic Evaluation of the Swallow to fully assess physiology and anatomy of the swallow and to determine the appropriate diet and/or rehabilitation exercises.
- Complete a Clinical Swallow Evaluation to determine appropriateness of current diet/need for MBS...

Mastication

- Patient will masticate food adequately to safely consume least restrictive diet with (min/mod/max) verbal, visual and tactile cues

Jaw Coordination/Sensation

- The patient will complete daily oral-motor exercise to increase buccal tension to within functional limits to eliminate pocketing of food in the anterior and lateral sulci with (min/mod/max) verbal, visual and tactile cues and ___% effectiveness
- The patient will complete daily oral-motor exercise to increase jaw closure and reduce anterior loss to keep food/liquid in the mouth while eating with (min/mod/max) verbal, visual and tactile cues and ___% effectiveness

Oral Coordination/ Sensation

- Patient will complete daily oral-motor exercise to increase oral sensitivity to a functional level for bolus formation and optimum safety with (min/mod/max) verbal, tactile and visual cues with ___% effectiveness
- The patient will demonstrate a swallow delay of only 1-2 seconds following thermal tactile stimulation on 10/10 therapeutic trials to reduce the risk of food residue falling into the airway
- Patient will utilize thermal tactile stimulation to increase oral sensation for safe consumption of least restrictive diet with (min/mod/max) verbal, visual and tactile cues
- The patient will move the bolus to the back of the mouth and propel the food and liquid in a timely manner with thermal tactile stimulation to safely consume least restrictive diet with (min/mod/max) verbal, visual and tactile cues

Lip Coordination/Sensation

- The patient will complete daily oral-motor exercise to increase labial function (min/mod/max) verbal, tactile and visual cues with ___% effectiveness to prevent food or liquid spillage from the oral cavity
- The patient will keep food and liquid in the mouth while eating without losing the bolus out of the front of the mouth to safely consume least restrictive diet with (min/mod/max) verbal, visual and tactile cues

Lingual Coordination/Sensation

- The patient will complete daily oral-motor exercise to increase lingual range of motion, strength and coordination with (min/mod/max) verbal, tactile and visual cues with ___% effectiveness for effective bolus formation and to reduce the risk of food residue falling into the airway
- The patient will complete daily oral-motor exercise to increase lingual strength and range of motion for adequate lingual elevation and anterior to posterior movement with (min/mod/max)
verbal, tactile and visual cues with ___% effectiveness to reduce the risk of food residue falling into the airway

• The patient will form food and liquid into a cohesive bolus as demonstrated by lack of residue on the tongue and in the lateral and anterior sulci after the swallow to safely consume least restrictive diet with (min/mod/max) verbal, visual and tactile cues

**Diet Trials/ Therapeutic feedings**

• The patient will tolerate diet upgrade trials without signs and/or symptoms of aspiration with to safely least restrictive diet with (min/mod/max) verbal, visual and tactile cues

• Patient will safely ingest diet trials during therapeutic feedings with the SLP without signs and/or symptoms of aspiration with to safely consume least restrictive diet with (min/mod/max) verbal, visual and tactile cues

**Techniques**

• The patient will complete _____ swallowing maneuver (supraglottic swallow, Mendelson maneuver, effortful swallow, etc.) to improve oral motor weakness, tongue base retraction, hyolaryngeal excursion, airway protection, and/or clearance of the bolus through the pharynx with (min/mod/max) verbal, visual and tactile cues

**Compensatory**

• Patient will perform compensatory swallow strategies (chin tuck, multiple swallows, head turn, etc.) to eliminate s/s of aspiration of _________ least restrictive diet with (min/mod/max) verbal cues and no more than ___# reminders per meal.

• Patient will perform compensatory swallow strategies (chin tuck, multiple swallows, head turn, etc.) to eliminate s/s of aspiration of _________ liquids (min/mod/max) verbal cues and no more than ___# reminders per meal.

• The client will demonstrate the ability to adequately self-monitor swallowing skills and perform appropriate compensatory techniques to reduce s/s of aspiration and to safely consume least restrictive diet with (min/mod/max) verbal, visual and tactile cues

• The patient will alternate liquids-solids bites to clear stasis in buccal cavity with (min/mod/max) visual, verbal and tactile cues
SPOKEN LANGUAGE COMPREHENSION

Long-term goal:

Client will comprehend communication related to basic medical and social needs and utilize compensatory strategies to maintain safety and participate socially in functional living environment.

(1) Single words and simple expressions

- Patient will comprehend and imitate gestural use of objects in response to a model/use of functional self-care objects with ____ (min/mod/max) verbal/tactile/visual cues and ___% accuracy
- Patient will localize to name/tactile/auditory/olfactory stimulation ___ times/session given (min/mod/max) (verbal/tactile) cues.
- Patient will follow stimuli visually through left and right visual fields given (min/mod/max) (verbal/tactile) cues.
- Patient will match pictures/objects within a visual field of ___ with ___% accuracy and (min/mod/max) cues for scanning, attention, etc.
- Patient will identify objects in a visual field of ___ with ___% accuracy and (min/mod/max) cues for scanning, etc.
- Patient will identify body parts with ___% accuracy and (min/mod/max) cues for ___.
- The patient identifies verbally named objects/pictured objects within his/her environment out of a visual field of 2/3/4 as with ___% accuracy.
- The patient identifies verbally named written words out of a visual field of 2/3/4 with ___% accuracy.
- The patient identifies body parts named by the clinician with ___% accuracy to improve communication with medical staff.
- When given action pictures out of a visual field of 2/3, the patient identifies the correct picture following a spoken sentence with ___% accuracy.
- The patient will gesture appropriate use of functional items with ____% visual, verbal and tactile cues in order to increase gestural expression of wants and needs in functional living environment.

(2) Simple directions and conversation about immediate environment.

- Patient will match pictures/objects within a visual field of ___ with ___% accuracy and (min/mod/max) cues for scanning, attention, etc.
- Patient will identify objects in a visual field of ___ with ___% accuracy and (min/mod/max) cues for scanning, etc.
- Patient will follow ___-step commands related to functional living environment with ___% accuracy and (min/mod/max) cues in order to increase functional integration into environment.
- Patient will answer complex yes/no questions with ___% accuracy and (min/mod/max) cues.
- The patient identifies verbally named objects/pictured objects within his/her environment out of a visual field of 2/3/4 as with ___% accuracy.
- The patient identifies verbally named written words out of a visual field of 2/3/4 with ___% accuracy.
- The patient identifies body parts named by the clinician with ___% accuracy to improve communication with medical staff.
- When given action pictures out of a visual field of 2/3, the patient identifies the correct picture following a spoken sentence with ___% accuracy.
- The patient identifies the appropriate object/picture following a verbal description of 2-3 clues with ___% accuracy.
- The patient will accurately answer biographical/functional yes/no questions using words/head nods/or pointing to written words with ___% accuracy.
- After listening to a 1-3/2-5 sentence paragraph, the patient will answer simple yes/no and “wh” questions with ___% accuracy.
(3) Directions/conversation about daily activities

- Patient will follow ___-step commands related to functional living environment with ___% accuracy and (min/mod/max) cues in order to increase functional integration into environment.
- The patient will accurately answer biographical/functional yes/no questions using words/heads/or pointing to written words with ___% accuracy.
- The patient will comprehend and respond appropriately via speech, writing, or gesturing to what/who/where/when/why/how questions with ___% accuracy.
- After listening to a 1-3/2-5 sentence paragraph, the patient will answer simple yes/no and “wh” questions with ___% accuracy.

(4) Most complex or abstract directions/conversation

- Patient will answer (yes/no, wh-questions) regarding ___-paragraph length (related/simple/complex/abstract) information with ___% accuracy and (min/mod/max) cues for active listening, repetition.
- Patient will answer open-ended questions regarding situational/biographical/environmental information with ___% accuracy and (min/mod/max) cues.
- The patient will accurately respond to complex-abstract yes/no questions requiring comparison/contrast and visual imagery with ___% accuracy.
SPOKEN LANGUAGE EXPRESSION

Long-term goal:

Client will develop functional, cognitive-linguistic-based skills and utilize compensatory strategies to communicate wants and needs effectively to different conversational partners, maintain safety and participate socially in functional living environment

(1) Via total communication
- Patient will demonstrate non-meaningful vocalizations in response to pain/discomfort.
- Patient will indicate preference (yes/no, choice of 2) via eye gaze/pointing ___x per session with ___% accuracy given (min/mod/max) cues for attention, etc.
- Patient will use gestures/pointing to communicate basic wants and needs with ___(min/mod/max) verbal/tactile/visual cues and ___% accuracy

(2) Single words regarding basic daily wants, needs, ideas
- Patient will demonstrate non-meaningful vocalizations in response to pain/discomfort.
- Patient will indicate preference (yes/no, choice of 2) via eye gaze/pointing ___x per session with ___% accuracy given (min/mod/max) cues for attention, etc.
- Patient will recite ___# of automatic speech tasks given (min/mod/max) cues for ___.
- Patient will produce content words/phrases in response to egocentric/situational/background information (immediately after review/5 minutes after review...) with ___% accuracy and (min/mo/max) cues for initiation, voicing, etc.
- Patient will complete (simple/complex) (phrases/sentences) with ___% accuracy and (min/mod/max) cues.
- Patient will name opposites with ___% accuracy and (min/mod/max) cues.
- Patient will name/describe objects/pictures with ___% accuracy and (min/mod/max) cues for forced choice, phonemic/semantic cueing, gestural/contextual cues.
- The patient will respond to ____ (simple/complex....wh-questions, yes/no questions, open-ended questions) with ___% verbal, visual and tactile cues and compensatory strategies to increase communications within functional living environment
- Patient will repeat functional phrases (incorporating Melodic Intonation Therapy) with ___% accuracy and (min/mod/max) cues for voicing, etc.
- Patient will provide ___# of members in a given category with ___% accuracy and (min/mo/max) cues in the form of a visual aid, semantic/phonemic cueing, etc.
- The patient will name objects, pictures, people and/or activities verbally with ___% verbal, tactile and visual cues to improve verbalizations

(3) Sentences regarding daily wants, needs, ideas
- Patient will complete (simple/complex) (phrases/sentences) with ___% accuracy and (min/mod/max) cues.
- Patient will name/describe objects/pictures with ___% accuracy and (min/mod/max) cues for forced choice, phonemic/semantic cueing, gestural/contextual cues.
- Patient will express ___# of basic wants/needs/ideas per session after initial cue, (min/mod/max) cues for choice of 2, etc.
- The patient will respond to ____ (simple/complex....wh-questions, yes/no questions, open-ended questions) with ___% verbal, visual and tactile cues and compensatory strategies to increase communications within functional living environment
- Patient will repeat functional phrases (incorporating Melodic Intonation Therapy) with ___% accuracy and (min/mod/max) cues for voicing, etc.
- The patient will name objects, pictures, people and/or activities verbally with ___% verbal, tactile and visual cues to improve verbalizations
- The patient will verbally communicate sequences/steps and perform multi-level daily living tasks with ___% verbal, visual and tactile cues in order to complete activities of daily living
- The patient will perform sentence/phrase completion tasks related to ADL’s and safety verbally with ___% visual, tactile and verbal cues to increase automatic verbalizations in functional living environment
- Client will formulate sentences with given words related to his/her personal needs, ADL’s and safety with ___% effectiveness.
- Patient will provide 3-4 words to describe a given picture/event in (immediate environment/removed environment) with (min/mod/max) cues for initiation, word retrieval.
- Patient will answer with ___-length responses to questions/topics with ___% accuracy and (min/mod/max) cues for attention to detail, completeness, conciseness, expansion, etc.
- Pt will name objects/pictures/people (with sentence completion/description of the object/gestural use of the object/written cues) for expressing basic wants/needs with ___% accuracy.
- Pt will name items by category with ___% accuracy. (body parts/grooming items/everyday objects/food/family members).
- The patient will appropriately name functional objects/pictures with self-cueing strategies learned in therapy/independently with ___% accuracy.
- The patient will expressively produce 3+ word phrase to state an objects function with ___% accuracy when given a picture/spoken word.
- Patient will respond appropriately to (basic/personal/basic needs/comparative relationship/judgment and safety) yes/no questions with ___% accuracy.
- The patient will use the PACE technique to increase communicative effectiveness with ___% accuracy.

(4) Complex and abstract ideas, Conversation, clearly and fluently
- Patient will express ___# of basic wants/needs/ideas per session after initial cue, (min/mod/max) cues for choice of 2, etc.
- Patient will provide ___# of words to describe a given picture/event (immediate environment/removed environment) with (min/mod/max) cues for initiation, word retrieval.
- Patient will demonstrate oral expression of situational/biographical/environmental information (independently/immediately after review/after 5 minutes) with ___% accuracy and (min/mod/max) cues for external aid, use of memory book, awareness, decreased impulsivity).
- Patient will define abstract words/concepts with ___% accuracy and (min/mod/max) cues for expansion, attention to detail, conciseness, etc.
- The patient will expressively produce 3+ word phrase to state an objects function with ___% accuracy when given a picture/spoken word.
- Patient will compose a short novel sentence when given 1/2 functional target word with ___% accuracy.
- Patient will respond appropriately to (basic/personal/basic needs/comparative relationship/judgment and safety) yes/no questions with ___% accuracy.
- The patient will expressively produce appropriate “wh” questions in various situations with ___% accuracy.
- The patient will appropriately participate in a short (5-10 minutes), one-to-one conversation with ___% accuracy.
- The patient will appropriately participate in turn-taking with the speaker during short conversational exchanges with ___% accuracy.
- The patient will maintain the topic of conversation appropriately over 5/10/15 minute conversational exchanges with ___% accuracy.
- The patient will use the PACE technique to increase communicative effectiveness with ___% accuracy.
PROBLEM-SOLVING

Long-term goal:

Patient will demonstrate functional problem solving skills and provide appropriate solutions to problems in order to improve safety and awareness in functional living environment.

Identifying Problems:
- Identify that a problem exists in a picture/verbally presented situation with ___ cues for ___.
- Identify (#) causes/effects of situations with ___ cues for ___.

Generating Solutions:
- Provide an initial step to facilitate completion of a task with ___ cues for ___.
- Complete analogies with ___ cues for ___.
- Provide ___ appropriate solutions to problems of daily living with ___ cues for ___.
- Prioritize (#) potential solutions to problems of daily living with ___ cues for ___.
- Complete a (simple/moderate/complex) deductive reasoning puzzle with ___% accuracy and ___ cues for ___.

Evaluating Solutions:
- Identify appropriate solutions to a problem when presented in a field of ___ with ___% accuracy and ___ cues for ___.
- Evaluate solutions to problems of daily living with ___ cues for ___.

Executing Solutions:
- Sequence ___ steps to a task verbally/with pictures/given written choices with ___ cues for ___.
- Organize/prioritize daily tasks with ___ cues for ___.
- Organize personal space supplies with ___ cues for ___.
- Plan and carry through with a community outing in a group setting with ___ cues for ___.
- Verbalize a sequence of daily events/morning care routine/etc. with ___ cues for ___.
- Identify and problem solve barriers within the community to facilitate community reintegration with ___ cues for ___.

Math Reasoning:
- Solve simple (addition, subtraction, multiplication or division) problems with ___% accuracy and ___ cues for ___.
- Solve (simple, moderate, complex) functional max problems with ___% accuracy and ___ cues for ___.
- Complete a checkbook balancing task with ___% accuracy and ___ cues for ___.
- Identify and perform appropriate role in managing personal finances with ___ cues for ___.

General Problem Solving
- The patient will demonstrate functional problem solving and safety awareness with ___% verbal, tactile and visual cues for daily living tasks in order to increase safe interaction with environment and decreased assistance from caregivers.
- Client will complete simple/complex reasoning tasks to improve problem solving and safety awareness with ___% accuracy and ___ cues.
**ORIENTATION**

Long-term goal:
Patient will be appropriately oriented to (person, place, time, and situation) with/without cues (for external aid) to improve safety and awareness in functional living environment.

Personal Information:
- Answer (yes/no vs. open-ended) questions regarding basic personal information with ___% accuracy and ___ cues for __.

Orientation Information:
- Answer (yes/no vs. open-ended) questions regarding orientation information with ___% accuracy and ___ cues for __.
- Express orientation information with ___% accuracy and ___ cues for ___ minutes/immediately after review.
- Client will improve orientation by communicating mental awareness of daily routines, personal information and recent events with ___% accuracy and ___ cues.

Memory Book & Memory Aids:
- Client will use external memory aids and compensatory strategies to recall routine, personal information and recent events to improve orientation to time & recall daily events with ___% accuracy and ___ cues.
- The patient will use a memory book to respond to questions about events and give information with ___ (no/min/mod/max) verbal/ visual/tactile cues and ___% effectiveness

Topographical Orientation:
- Locate hospital room with ___ cues for __.
- Locate all treatment areas with ___ cues for __.
- Use environmental cues to navigate the hospital with ___ cues.
- Direct therapists to various areas with (min/mod/max cues).
ATTENTION

Long Term Goal:
Patient will develop functional attention skills to effectively attend to and communicate in simple daily living tasks in functional living environment.

Short-term Goals:

- Patient will demonstrate localized responses to min/mod/max auditory/visual/tactile/olfactory/painful stimulation in ___% of trials (or ___# times per session).
- Track ___ auditory/visual stimuli in ___% of trials with ___ cues.
- Complete a ___ minute auditory/visual sustained/alternating/selective/divided attention task with ___% accuracy and ___ cues.
- Demonstrate focused/selective attention by attending/monitoring salient task details for ___ minutes with ___ assistance (or no more than ___ cues) in a quiet/structured/unstructured/individual/group/distracting environment.
- Demonstrate alternating attention by being able to shift the focus of attention between tasks/activities/ideas with ___ assistance (or no more than ___ cues) in a quiet/structured/unstructured/individual/group/distracting environment.
- Demonstrate sustained attention by maintaining focus during a task for ___ minutes with ___ assistance (or no more than ___ cues) in a quiet/structured/unstructured/individual/group/distracting environment.
- Demonstrate divided attention by responding to multiple tasks or details within tasks at the same time with ___ assistance (or no more than ___ cues) in a quiet/structured/unstructured/individual/group/distracting environment.
MEMORY

Long-term goal:
The client will use appropriate memory strategies to schedule and recall weekly activities, express
needs and recall names to maintain safety and participate socially in functional living environment

Working Memory:
• Repeat a ____ word list of functional words/phrases related to activities of daily living immediately after presentation (min/mod/max) verbal, visual and tactile cues and ___% accuracy
• Identify the item that does not belong in a list of ___ presented auditorily with ___% accuracy and(min/mod/max) verbal, visual and tactile cues
• Complete two step math problems auditorally with(min/mod/max) verbal, visual and tactile cues and ___% accuracy

Recent Memory:
• Recall a ___-part functional message related to ADL’s with ___ (min/mod/max) verbal, visual and tactile cues for immediately after review and ___% accuracy
• Recall daily activities via retellings/answering questions with ___ cues for ___.
• Recall information discussed during therapy session via retelling/answering questions with ___ (min/mod/max) verbal, visual and tactile cues and ___% accuracy
• Recall information discussed in therapy ___ days/hours earlier with ___(min/mod/max) verbal, visual and tactile cues and ___% accuracy

Compensatory Strategies:
• Describe/demonstrate/initiate use of ___# of memory strategies with ___(min/mod/max) verbal, visual and tactile cues and for ___ (without review vs. ___ minutes/immediately after review).

Using Memory Book for Daily Tasks:
• Client will use external memory aids and compensatory strategies to recall routine, personal information and recent events to improve orientation to time & recall daily events with ___% accuracy and ___ cues.
• The patient will use a memory book to respond to questions about events and give information with ___ (no/min/mod/max) verbal/visual/tactile cues and ___% effectiveness
• Client will recall strategy of locating and utilizing personal memory book to improve orientation & reduce repetitive question asking behaviors in ___% of trials with ___ (no/min/mod/max) verbal/visual/tactile cues

General Memory
• The patient will demonstrate recall of functional information following a/an (immediate, short-term, long-term) delay with ____ cues in order to increase functional integration into environment
LONG-TERM GOALS - COGNITIVE FUNCTIONS/COMMUNICATION

- Client will develop functional reading skills and utilize compensatory strategies to maintain safety during ADL’s and read and understand everyday adult material independently

Letters/Numbers:
- Identify letters/numbers in a field of ___ with ___% accuracy and ___ cues for ___.
- Match letters/numbers in a field of ___ with ___% accuracy and ___ cues for ___.

Single Words:
- Match pictures/objects to written words in a field of ___ with ___% accuracy and ___ cues for ___.

Phrases/Sentences:
- Match pictures to phrases/sentences in a field of ___ with ___% accuracy and ___ cues for ___.
- Complete phrases/sentences from a field of ___ with ___% accuracy and ___ cues for ___.
- Answer (open ended/yes-no/multiple choice) questions regarding sentence length material with ___% accuracy and ___ cues for ___.
- The patient will recall ____ facts from (sentence, paragraph, several paragraph, page) length material with ___% accuracy and ___ cueing.

Paragraphs:
- Patient will read and answer (open ended/yes-no/multiple choice) questions regarding # sentences/paragraphs with ___% accuracy and ___ cues for ___.
- The patient will read and recall ____ facts from (sentence, paragraph, several paragraph, page) length material with ___% accuracy and ___ cueing.

Functional Information:
- Patient will read and answer (open ended/yes-no/multiple choice) questions regarding ___ (amount; e.g. ½ page) functional information (signs, menus, etc.) with ___% accuracy and ___ cues for ___.
- Patient will read and utilize organized scanning techniques via (line guide, tactile cue, etc) to locate answers to questions regarding functional information with ___% accuracy and ___ cues for ___.
- The patient will read and recall ____ facts from (sentence, paragraph, several paragraph, page) length material with ___% accuracy and ___ cueing.
WRITING

Long-term goal:
Client will develop functional writing skills related to routine daily activities and utilize compensatory strategies to communicate basic medical wants and needs in functional living environment

Letters/Numbers:
- Trace shapes/letters/numbers with ___% accuracy and ___ cues for ___.
- Copy shapes/letters/numbers with ___% accuracy and ___ cues for ___.
- Write letters/numbers on command with ___% accuracy and ___ cues for ___.

Single Words:
- Write single words on command with ___% accuracy and ___ cues for ___.
- Write single words to identify pictures with ___% accuracy and ___ cues for ___.
- Write an associated word/opposite given a target word with ___% accuracy and ___ cues for ___.

Phrases/Sentences:
- Write a single phrase/sentence to describe a picture with ___% accuracy and ___ cues for ___.
- Formulate well-organized sentences regarding a picture/question/topic with ___ cues for ___.

Paragraphs:
- Formulate well-organized paragraphs regarding a picture/question/topic with ___ cues for ___.

Functional Information:
- Write personal/orientation/situational information with ___% accuracy and ___ cues for ___.
- Write brief notes in memory notebook with ___% accuracy and ___ cues for ___.
- Write brief notes to communicate to others with ___% accuracy and ___ cues for ___.
- Outline paragraph/page/multi-level information with ___ cues for ___.
- Take notes on (amount) auditory/visually presented information with ___ cues for ___.
- Client will demonstrate functional writing skills (grocery lists, etc.) at sentence level using compensatory strategies to complete daily activities during 80% of trials.
PRAGMATICS

**Long-term goal:**
Patient will demonstrate appropriate social interaction skills in routine daily living activities to communicate basic social and medical needs in functional living environment

**Maintaining topic:**
- Initiate __ statement/questions appropriate to audience/subject matter/prioritization for setting in 1:1/small group/unstructured conversational context with __cues per session.
- Maintain/extend topic for __ turns in unstructured/structured topic in 1:1/small group context via statements and questions with __ cues per session.
- Demonstrate appropriate change of topic via appropriate discourse connectors in structures/unstructured setting with __ cues per session.
- Terminate topic/conversation with appropriate transitional discourse in 1:1/small group setting with __ cues.
- Demonstrate conversational repair (tangentially/perseveration) with verbal/visual cues via appropriate discourse transition with __ cues per session.

**Turn-Taking:**
- Demonstrate appropriate turn-taking in discourse/activity in 1:1/small group structured/unstructured setting with __ cues.
- Initiate responses (volunteer information) to group-directed questions with appropriate timing and sensitivity to other group members with __ cues.
- Initiate and involve all group members in small group discourse in a structured/unstructured setting.

**Nonverbal:**
- Demonstrate appropriate eye contact during 1:1/small group conversation.
- Demonstrate appropriate proximity in 1:1/small group context.
- Demonstrate appropriate affect for basic social exchanges/extended conversation.
- Demonstrate appropriate volume (with regard to agitation/awareness of context) in 1:1/small group context.
- The patient will use **appropriate eye contact with a speaker/attend to a therapy task** in a distraction-free environment during a 5/10/15 minute conversation with __% accuracy.
- The patient will maintain **eye contact/topic of conversation** during a conversational exchange with __% accuracy.
- The patient will identify various **emotional states/body language** exhibited by various speakers with __% accuracy.
EXECUTIVE FUNCTIONS

Long-term goal:
Patient will demonstrate use of (Self awareness, Goal setting, Planning, Initiation, Self-monitoring) during daily living activities to improve safety and awareness in functional living environment

Demonstrate self awareness by:
- demonstrating intellectual awareness when answering questions regarding situational information and etiology given ___ cueing.
- demonstrating emergent awareness by identifying (#) deficits and their cause given ___ cueing.
- identifying # cognitive/physical strengths and limitations with ___ assistance.
- identifying factors affecting ability to attend, organize remember and problem-solve with ___ assistance.
- verbalizing/completing activities regarding general knowledge of memory and/or attention elements and functions with ___ assistance.
- verbalizing general knowledge of TBI/stroke and their effects with ___ assistance.
- demonstrating anticipatory awareness by verbalizing compensatory strategies and/or anticipated needs during structured/unstructured settings with ___ assistance.

Demonstrate goal setting by:
- identifying elements of the problem with ___ assistance.
- dividing the problem into parts to create an easier problem with ___ assistance.
- prioritizing the problem into parts to create an easier problem with ___ assistance.
- generating a potential solutions (an alternative solutions) with ___ assistance.
- identifying the pros and cons in making a choice based on those judgments with ___ assistance.

Demonstrate planning by:
- identifying the time, materials, and location of the activity with ___ assistance.
- organizing the plan into sequenced steps with ___ assistance.
- planning and carrying through with a group activity using established strategies with ___ assistance.
- determining a method of tracking progress with ___ assistance.

Demonstrate initiation by:
- commencing and persevering as long as is needs to complete a task with ___ assistance.
- exhibiting mental flexibility by responding to changing circumstances with ___ assistance.
- completing planned activities by estimating time required, creating time schedules and revising the schedule when needed with ___ assistance.
- avoiding premature action in therapeutic or everyday situations with ___ assistance.

Will demonstrate self-monitoring by:
- identifying strengths and weaknesses and their impact in daily life with ___ assistance.
- performing self-correction with ___ assistance.
- performing self-evaluation with ___ assistance.
- utilizing # seconds of “wait time” during structured/unstructured tasks given ___ visual/verbal cueing.
- The patient will demonstrate the ability to plan, schedule and follow through with events/activities with ___% accuracy and ____ cues.
VISUAL SCANNING

Long-term goal:
- Patient will demonstrate appropriate visual scanning/awareness of objects and during functional reading activities to maintain safety and awareness in functional living environment

Environmental:
- Demonstrate awareness of communication partners in L/R visual field via initial/maintained eye contact in 1:1/small group/unstructured setting with ___ cues
- Demonstrate awareness of objects in L/R visual field during therapeutic sessions with ___ cues.
- Client will recall and demonstrate use of compensatory strategies for L-side neglect to improve reading & writing skills in functional activities.
- The patient will visually scan left to right during reading and writing tasks with max/mod/min cues with ___% accuracy.
- The patient will attend to stimuli placed within the left visual field during functional activities of daily living with max/mod/min cues with ___% accuracy.

Functional Reading:
- Locate items left/right of midline at page level for target cancellation tasks/trail-making/visual closure/address checking/editing/reading sentences (aloud)/paragraphs/signs/maps with ___ cues.
- Verbalize compensatory strategies to be used for visual scanning.
- Initiate use of compensatory strategies (line guide, margin guide, page rotation, lens, visual marker) during functional reading tasks in structured 1:1/ small group/unstructured setting.
- Demonstrate adequate visual-perceptual skills during ____ (scanning/written) tasks with ___ cues.
- Client will recall and demonstrate use of compensatory strategies for L-side neglect to improve reading & writing skills in functional activities.
DEMENTIA

LONG TERM GOALS - DEMENTIA
- Client will develop functional, cognitive-linguistic-based skills and utilize compensatory strategies to communicate wants and needs effectively, maintain safety during ADL’s and participate socially in functional living environment

LONG TERM GOALS – FUNCTIONAL MAINTENANCE PROGRAM
- Resident will express wants, needs, and feelings through establishment of an effective maintenance program to maximize functional communication
- Resident will appropriately interact with staff/peers given _____ assist for initiation, turn-taking, and topic maintenance for communication
- Resident will demonstrate appropriate behavior to meet needs with staff and support of communication needs

SHORT-TERM GOALS FUNCTIONAL MAINTENANCE PROGRAM GOALS
- Patient will follow simple one-step directions utilizing compensatory strategies with 80% accuracy
- Patient will express wants/needs when presented with two verbal options with 80% accuracy
- Patient will answer yes/no questions with 80% accuracy
- Patient will exhibit no more than 2 _____ in 60 minutes time given structured reinforcement program by caregivers for three consecutive days
- Patient will engage in conversation with at least 3 turn-taking exchanges in a group setting given_____ assist from caregivers X3 days
- Patient will generate wh-questions to meet needs given cues/prompt with _____assist from caregivers with 80% accuracy
- Patient will respond to wh-questions given two verbal options with 80% accuracy
- Patient will utilize audible voice in environmental noise for three settings over period of three days
- Patient will initiate communication exchanges 3 times/day with staff/family/peers for three consecutive days
- Patient will voluntarily/willingly participate in 3 social activities a week for 2 weeks
- Patient will voluntarily/willingly be available for social interaction with staff/peers for 30 minutes a day over three days
- Patient will demonstrate cognitive-linguistic baseline skills for design and implementation of functional maintenance program
MOTOR SPEECH GOALS

LONG TERM GOALS: APRAXIA & DYSARTHRIA
- **Client will develop functional and intelligible speech and utilize compensatory strategies through the use of adequate labial and lingual function, increased articulatory precision and speech prosody.**
- **Client will develop functional motor programming, articulatory proficiency and utilize compensatory strategies to express wants and needs for intelligible speech and functional prosody in the functional living environment.**

APRAXIA
- Following a visual model, the patient will produce 10/15/20 repetitions of the oral motor movement with __% accuracy and ___(min/mod/max) verbal/visual/tactile cues
- The patient will independently produce oral motor movements (20 rep/3-5x per day).
- The patient will produce the target phoneme/phonemes in the initial/medial/initial position(s) with __% accuracy and ___(min/mod/max) verbal/visual/tactile cues
- The patient will fill in carrier phrases/completion automatic speech tasks with __% accuracy and ___(min/mod/max) verbal/visual/tactile cues
- The patient will produce words/phrases/sentences with MIT/spoken in unison with the clinician with __% accuracy and ___(min/mod/max) verbal/visual/tactile cues
- The patient will produce original, short sentences when given a target word with __% accuracy and ___(min/mod/max) verbal/visual/tactile cues
- The patient will use appropriate articulatory accuracy and speech rate when reading/speaking with __% accuracy and ___(min/mod/max) verbal/visual/tactile cues
- The patient will use appropriate speech prosody during imitated sentence productions with __% accuracy and ___(min/mod/max) verbal/visual/tactile cues
- The patient will use appropriate prosody independently during the therapy session with __% accuracy and ___(min/mod/max) verbal/visual/tactile cues
- The patient will appropriately hum/voice/grunt in unison with the clinician/follow a model with __% accuracy and ___(min/mod/max) verbal/visual/tactile cues
- The patient will produce functional, monosyllabic words with/without ____ cueing with __% accuracy and ___(min/mod/max) verbal/visual/tactile cues

DYSARTHRIA
- **Phonation**
  - The patient will utilize phonation at the ____ (word, phrase, sentence) level with __% verbal, visual and tactile cues in functional living environment in order to increase functional speech intelligibility.
- **Respiration**
  - The patient will improve respiratory support and the use of respiration for the production of ____ (words, phrases, sentences) with ____ verbal and visual instructions/cues in functional living environment in order to increase functional speech intelligibility.
  - The patient will imitate appropriate phrasing and breath coordination in connected sentences/conversation with __% accuracy.
- **Articulation**
  - The patient will articulate consonants at the ____ (word, phrase, sentence) level with __% verbal, visual and tactile cues in order to increase articulatory precision and intelligibility in conversational speech.
  - The patient will demonstrate adequate ____ (tongue control for tongue tip sounds t, d, n, l/ lip control for labial and bilabial sounds m, p, b & w/ oral and facial muscle controljaw control) to produce 20 understandable and functional ____ (words, phrases, sentences) related to basic medical, personal and hygienic needs.
  - The patient will discriminate between intelligible and unintelligible speech with __% accuracy.
  - The patient will accurately produce vowels/consonants (bilabials/velars/palatals) in isolation/initial position/medial position/final position with __% accuracy.
  - The patient will accurately imitate/independently produce 2/3/4 syllable words.
- The patient will exhibit intelligible speech at the phrase/sentence level with/without visual/verbal/tactile cueing with ___% accuracy.
- The patient will use the (over articulation/slow rate/writing key word/elongation of the vowel/increased loudness/phrasing) strategy to improve speech intelligibility with words/phrases/sentences/in conversation with ___% accuracy.

**Voice**
- The patient will demonstrate the ability to produce clear vocal tones sufficient to support ___(word, phrase, sentence) production to execute successful sender/receiver communication in the functional living environment

**Other**
- Pt. will respond to verbal/visual cues to “inhale more deeply” before beginning an utterance on phrase/sentence imitation/ phrase and sentence level responses/ during conversational speech attempts on ___ out of ___ trials.
- Pt. will respond to verbal/visual cues to “let the air out slowly” when imitating a phrase level utterance/ on phrase/sentence level responses/ during conversational speech on ___ out of ___ trials.
- Pt. will respond to verbal/visual cues to begin speaking at the onset of exhalation on phrase level imitation/ using phrase/sentence level responses/ in conversation (with/without cues) on ___ out of ___ trials.
- Pt. will repeat vowels using hard glottal attack on ___ out of ___ trials.
- Pt. will repeat vowel-initiate words using hard glottal attack on ___ out of ___ trials.
- Pt. will produce continuous tone from top of pitch range to bottom/ from bottom of pitch range to top of pitch range on ___ out of ___ trials.
- Pt. will use high phonatory effort level when speaking for ___ minutes.
- Pt. will use yawn-sigh to reduce tension in the vocal mechanism on ___ out of ___ trials.
- Pt. will complete ___ head rolls to reduce extrinsic laryngeal muscle tension.
- Pt. will use easy onset to produce vowels.
- Pt. will use continuous phonation on a vowel/series of vowels/ VCV sequences/ when repeating phrases/ in conversational speech to maintain steady pitch and/or loudness on ___ out of ___ trials.
TRACH/VENT GOALS

SHORT TERM GOALS - TRACH/VENT PATIENTS
- Patient will demonstrate the ability to deflate cuff and apply speaking valve prior to oral intake to increase airway protection during the swallow with 80% effectiveness (8 out of 10)
- Patient will demonstrate ability to increase airway protection during swallow by independently occluding tracheostomy tube during swallow with 80% effectiveness (8 of 10)

Electrolarynx
- Patient will demonstrate proper activation/deactivation of electrolarynx in conversational speech with 80% consistency by (date) (t)
- Without visual cue, listener will understand patient’s conversational speech with 80% consistency by (date) (t, l, v)
- Patient will demonstrate proper placement of electro larynx with 80% consistency during a 3-4 word response task by (date)
- Patient will verbalize proper technique for battery charging x3 by (date)
- Patient will use electrolaryngeal speech in conversation without audible stoma noise with 90% consistency by (date)
- Patient will demonstrate proper placement of electrolarynx with 90% consistency by (date)

Leak Speech
- Given visual cue from ventilator and verbal cue from clinician, the patient will demonstrate the ability to restrict airflow through the glottis on inspiration (maintaining peak inspiratory pressure of >25cm H2O) with 70% consistency by (date) (v)
- Patient/Caregiver will demonstrate ability to independently deflate and inflate tracheostomy tube cuff x3 by (date) (v)
- Patient will demonstrate ability to speak on exhalation in a phrase repetition task given visual cue from ventilator with 70% consistency by (date). (t, v)
- Caregiver will independently demonstrate proper five steps toward cuff deflation associated with providing patient with verbal communication by (date). (v)
- Patient will tolerate cuff deflation (oxygen saturation of >90%; and respiratory rate of 16/ for 15 minutes x5 by (date) (v)
- Patient will independently perform 3 adduction exercises x10 by (date) (t, v)

Talking Tracheostomy Tubes
- Patient will demonstrate proper activation of gas supply with 70% consistency by (date)
- Patient will maintain a volume rating of >3 (Trating scale 1 to 5: 1=poor, 5=excellent) with 80% consistency by (date) (l, v)
- Patient will achieve voicing with talking tracheostomy tube with 50% consistency by (date) (l, v)
- Patient will respond to yes/no questions within 3 seconds beginning with hand in neutral position with 80% consistency by (date) (e)
- Caregiver will demonstrate proper cleaning procedure for talking tracheostomy tube x3 given written instructions by (date)
- Caregiver will demonstrate the ability to instruct and assist in patient’s completion of 10 oral exercises given written instructions by (date) (e, l, v)

One-way Speaking Valve
- Patient will tolerate one-way speaking valve (demonstrated by an oxygen saturation of >95%) for 20 minutes by (date)
- Patient/caregiver will demonstrate the ability to independently apply and remove one-way speaking valve x4 by (date)
- Given verbal cues, patient will demonstrate the ability to clean one-way speaking valve by (date)
- Patient/caregiver will demonstrate the ability to independently inflate and deflate tracheostomy tube cuff x3 by (date) (l)
- Patient will demonstrate adduction technique during one-way word responses to questions with 80% accuracy by (date) (l, t)
- Given written cues, the patient and/or caregiver will demonstrate the ability to make changes in ventilator settings to accommodate the one-way speaking valve x3 by (date) (l)

Indicates goals can be used for other methods of communication
e- electrolarynx   l- leak speech   t- talking tracheostomy tube   v- one way valve

Other
- Patient will manage oral secretions with (min/mod/max) cues for lip closure and/or swallowing.
- Patient will tolerate a minimal cuff technique for ___ minutes/hours/all day as determined by placement of a stethoscope to determine upper airway patency.
- Patient will tolerate total cuff deflation with appropriate SPO2 and heart rate while on the ventilator for ___ minutes/hours/all day.
- Patient will tolerate a Passy-Muir Valve with/without supervision and with appropriate SPO2 and heart rate (while on the ventilator) for ___ minutes/hours/all day.
- Patient will phonate vegetative sounds/vowels/one syllable words/sentences while wearing a Passy-Muir Valve/Montgomery Speaking valve/Blom Speaking valve.
- Patient will coordinate speech production with the ventilator to maximize meeting wants and needs with (min/mod/max) cueing to watch/listen for the ventilator.
- Patient will complete respiratory exercises/use of a respiratory trainer to improve vocal quality, length of phrases/sentences, and or increase overall endurance.
- Patient will produce ___ # of words on one breath with (min/mod/max) cues.
- Patient will direct self-care of speaking valves or perform self-care for speaking valves with (min/mod/max cues).
VOICE GOALS

Long-term goal:
Patient will demonstrate improved vocal quality/loudness/intonation for sustained vocalization/speech at word/phrase/sentence/conversational level to communicate basic medical and social needs in functional living environment

Short-term Goals:

- Sustain vowel for __ seconds with __ cues.
- Demonstrate less than 2% perturbation for sustained vowel /a/ for __ seconds via visual feedback.
- Demonstrate controlled pitch variation (gliding ascent/descent) when given model and visual feedback (Visi-Pitch configuration)
- Demonstrate over 250Hz range for isolated, sustained low and high tone vowels with appropriate vocal quality.
- Complete vocal adduction exercises with visual/verbal feedback/model
- Demonstrate controlled loudness variation (gliding ascent/descent) given a model and visual feedback (Visi-Pitch configuration)
- Demonstrate eight incremental increases in pitch (octave) with adequate vocal quality for gender and control with model and visual feedback.
- Demonstrate less than 1.4 s/z ratio (norm 1.0)
- Maintain appropriate loudness for sustained vowel/dictated sentence/running speech with visual feedback.
- Imitate/Demonstrate contrastive stress in sentences/running speech with visual feedback.
- Produce/maintain voice for __ words/phrases/sentences in __ setting with __ cues per session.
- Learn and apply easy onset with words/phrases/sentences/in running speech with min/mod/max cues.
- Lean and apply head voice resonance technique with words/phrases/sentences/in running speech with min/mod/max cues.
- Patient will verbalize strategies to reduce vocal hyperfunction with min/mod/max cues.
- Client will demonstrate breath control for a minimum of 3 seconds when expressing personal needs
- Patient will demonstrate ability to produce clear vocal tones sufficient to support words related to medical needs with 70% accuracy (70 of 100)
- Patient will demonstrate ability to produce two tones above and two tones below optimal pitch when communicating basic medical needs
AAC GOALS

LONG-TERM GOAL
Patient will utilize communication board to effectively comprehend and communicate basic medical and social needs during routine daily activities in functional living environment

SHORT-TERM GOALS

- Demonstrate ability to master basic maintenance and operations of device (on-off, adjusting menu features such as voice and display) with 100% accuracy (within 2 weeks)
- Demonstrate ability to program stored messages independently with 100% accuracy (within 2 weeks)
- Convey basic needs/make requests to caregivers, by spelling or retrieving pre-programmed message on device, independently and with 100% accuracy (within 2 weeks).
- Initiate social greetings, offer information, ask questions, express feelings and opinions through spelling and retrieving stored messages on device, during 1:1 and group situations with familiar and unfamiliar partners, independently and with 100% accuracy (within 3 weeks).
- Use strategies on device to expedite message production when sharing information or asking questions of medical personnel, independently and with 100% accuracy (within 3 weeks).