

Developing communication assessment skills to inform intervention for behaviours of concern in people with acquired and developmental disabilities.

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Communication and BOC

In recognition of the growing evidence supporting a significant link between communication difficulties and challenging behaviour, comprehensive assessment of behaviour should be informed by a recent and detailed communication assessment (ideally undertaken by a qualified speech pathologist)

Balandin, S (2002) Editorial, ISAAC Bulletin, 67, 2.

NSW Department of Aging ,Disability and Home Care.

Behaviour Support: Policy and Practice manual. Guidelines for provision of behaviour support services for people with an intellectual disability. Part1: Policy and practice, January, 2009, p21.

What are the issues?

1. Does everyone who is identified as having a BOC have a communication assessment?
2. If a communication assessment is done, is it applied to the Behaviour Support Plan or is it a recommendation that emerges out of the plan?
3. Are speech pathologists actively involved in the development of the BSP and the intervention process?
4. What is the role of the speech pathologist?
5. Are they trained and equipped to fulfill the role?

Who is referred?

The current strategy in the OSP roll out of Positive Behaviour Support, is to equip house supervisors/managers with skills to develop and implement a BSP for a resident, if required.

Where the behaviour is severe the resident may be referred to the Behaviour Intervention Support Team or a specialist consultant, who may or may not involve a speech pathologist.

What should the speech pathology assessment include?

1. Identify communicative functions of the behaviour
2. Profile communication abilities to inform communication based intervention
3. Observe and identify environmental barriers

Aims: Building Foundations for Communication Assessment

1. Identify the foundations of effective communication assessment through the development of a resource kit to support assessment and intervention in relation to communication and behaviours of concern,
2. Increase the capacity of speech pathologists to provide practice support to direct disability staff and others involved in the support of people subject to restrictive interventions through a training workshop.
3. Undertake an evaluation of the tool kit in a natural practice setting i.e., a residential support service

How?

1. A review of relevant literature and practice tools.
2. Undertake a mapping of current practices
3. Develop a communication assessment kit
4. Build capacity of professionals (speech pathologists) who can use the kit directly, whilst also using the kit to build capacity in others.
5. Establish networks for professional development.
6. Undertake a research study examining the experiences of speech pathologists and direct support workers in the context of a collaborative speech pathology approach for behaviours of concern.

Mapping questionnaire

- Survey compiled to explore the extent to which speech pathologists working with adults and school aged children are involved in assessing and developing intervention strategies in relation to behaviours of concern.
- Survey mailed to 400 + speech pathologists across Victoria

Results

- **Response rate: 37/400 Vic speech pathologists**
 - 54% (20) worked with adults (18+)
 - 32% (12) worked with school-age children (+special education) ,
 - 14% (5) worked with mixed aged groups.
- **Most frequent client type in a case load:**
 - multiple disability
 - Intellectual disability
 - Autism (with/without ID)
 - neurological degenerative disease
 - post stroke

Results

Place of Work:

- 30% (n=11) Special Education
- 22% (n=8) NGO Disability Services
- 14% (n=5) Government Disability Services
- 11% (n=4) Private Practice
- 23% (n=8) Other

Reason for referral

	Regularly	About 50%	infrequently
Improve the person's ability to express themselves	1	6	30
Improve the person's ability to understand communication	7	10	20
Determine the functions of behaviours of concern	25	6	6
Develop interventions to reduce behaviours of concern	20	7	9
Eligibility for adult service/ support	1	1	28
Eligibility for child education placement or support.	22	4	5

Who refers clients to the speech pathologist?

Service	No. of Therapists
Community Health	9
General Practitioner	8
Speech pathologist from a disability service	6
BIST	3
Private Psychologist	1

Most frequent assessments used

Observations of client, may include observation of others	15	
Triple C- Checklist of Communication Competencies (Bloomberg, West, Johnson & Iacono)	14	
Informal Assessment/ checklist (developed self)	7	
Interviews of people who know the client well	6	
Clinical Evaluation of Language Fundamentals -4	6	
Pragmatics Profile (Dewart & Summers), includes modified version from CRC	5	
Motivation Assessment Scale	4	

Training interest

	yes	unsure	no
Functional communication training	18	4	12
Range of Assessment tools	27	1	6
Identify communicative functions of behaviours	23	2	10
Rel. between medical condition & BOC	28	2	5
Rel. between mental health & BOC	31	1	3
Rel. between sensory & BOC	20	6	8
Behavioural interventions	26	1	7
Strategies for supporting staff/carers	24	4	9
Other service models for participation/inclusion	26	5	5

Purpose of the Kit

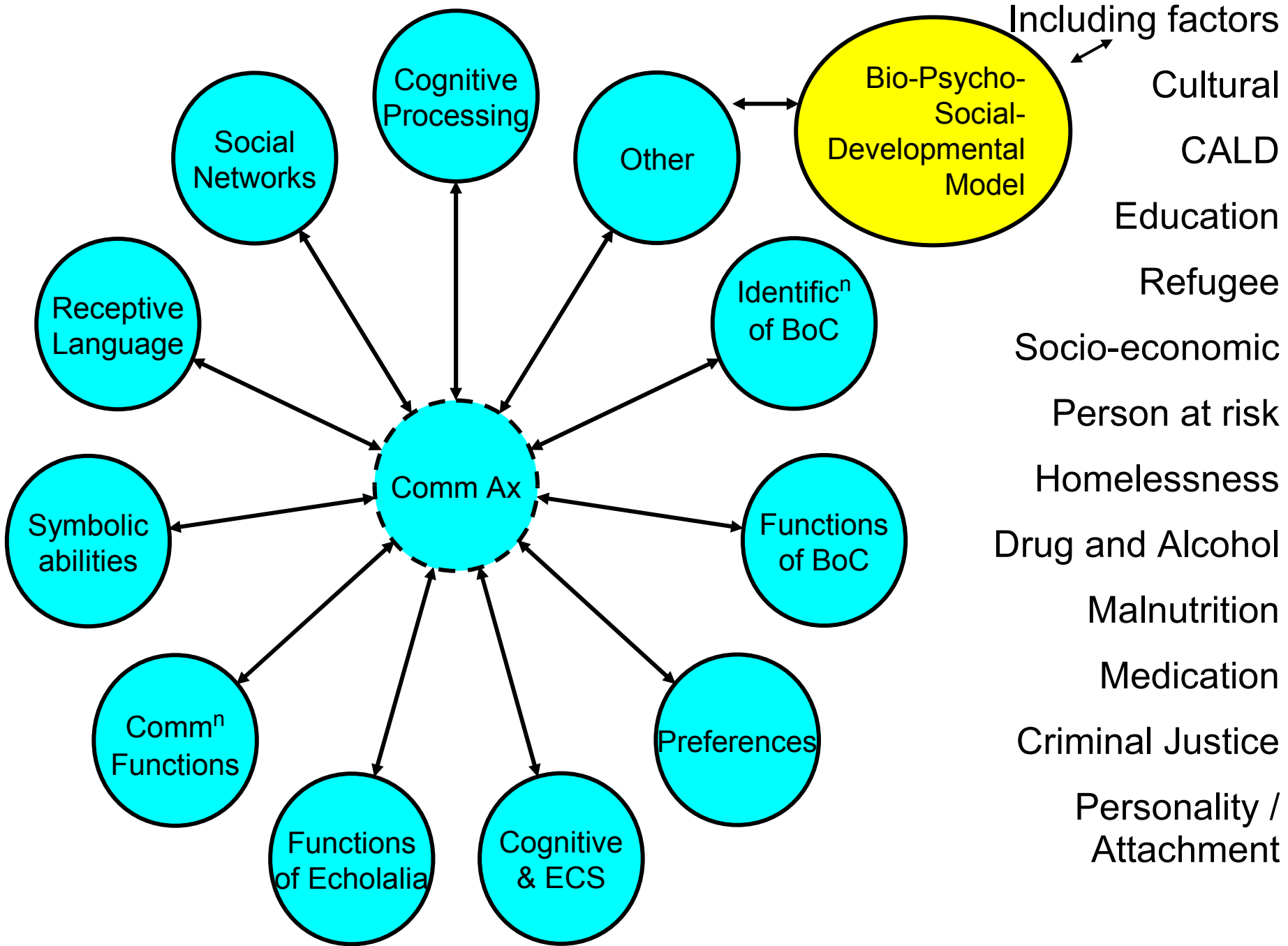
- Develop resources for a communication assessment for someone with behaviours of concern (BOC)
- Use by speech pathologists new to working with people with BOC
- Include a range of assessment types
 - Structured norm based tests
 - Informant interviews
 - Structured sampling strategies
 - Structured observation
 - Informal Assessment

Criteria for inclusion

- Suitable for use by speech pathologists
- Test needed to meet *most* criteria for inclusion
- Information can be obtained from the individual and or informants
- Formal and informal measures are included that require skill in
 - Administration
 - Scoring or recording responses
 - interpretation

Criteria for inclusion

- Provides information in one of the key areas identified
 - Identification of the functions of the BOC
 - Profile of communication (Receptive, expressive, pragmatic skills)
 - Social and physical barriers and enablers (Knowledge & attitude of key individuals, system supports, physical environment)
- Appropriate for 1 or more of the following groups:
 - Children / adults with Dev Disabilities including ID,CP & autism
 - Children / adults with acquired disability including ABI, aphasia, degenerative neurological conditions
- Available at no or reasonable cost
- Easy to obtain
- Information on validity and reliability if possible



Content of Kit: Folder plus Resources

- 23 Tests divided into 10 sections
- Fact sheets on
 - Functional Communication Training
 - Each assessment
- Score sheets and tests

Contents of folder to be available as a free download.

www.scopevic.org.au

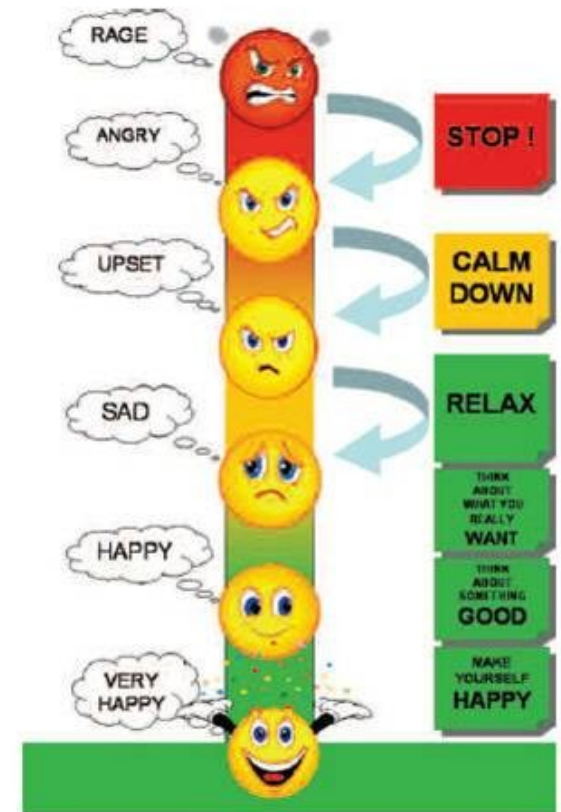
Review of Kit content

- Review by 2 expert speech pathologists
- Experienced in developmental & acquired / progressive disability
- Changes made
- Seminar at National Speech Pathology Australia conference

Review of each test

BOC seminar at Speech Pathology Australia National conference

- 70 attended (2 x 1.5 hr sessions)
- Worked in groups looking at assessments
- Provided case studies and a behavioural assessment approach



Assessment kit responses

Test	Strengths	Weaknesses	Ratings
Echolalia protocol	Free informal Assessment	Very few guidelines how to set it up	8
Communication Matrix	Online Useful for unintentional communicators	Not as simple to administer as it looks Needs practice and training	9
Overt Behaviour Scales	Social withdrawal seen as BOC	Wordy but concrete examples	7

Seminar evaluation

- 30 responses
- 25 found it very useful (time for assessments)
- 28 want more training in behavioural management
- 14 want a multi professional special interest group
- 3 want to provide leadership/mentoring
- 1 wants to do collaborative research

Trial of the Kit - 11 speech pathologists

Feedback sought:

- Sample report
- Settings
- Which assessments used /how used
- Involvement of other professionals
- Did assessments contribute to
 - Identifying motivation for BOC
 - Information to reduce BOC
- General comments

Feedback from therapist

- Five groups of Speech pathologists (n=11) utilised the kit when assessing people with BOC
- Responses from 3 groups , 1 acquired & 2 developmental
- All used some items from kits-and identified others e.g literacy (APAR) ; DisDat- pain

Recommendations from therapists

- Tests were useful – however
 - Needed assistance in understanding manuals
 - Needed more detail in explanations given with several tests.
 - Needed suggestions on working with familiar people to complete tests/tools
- Area of BOC complex and new therapists need mentoring and training
- Worker safety
- Flow chart confusing

Next steps

- Revision of flow chart
- Finalising assessment kit and putting on web
- Development of training module
- Developing a community of practice

