Cognitive-Communication Intervention for Neurocognitive Disorders

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Project ECHO Dementia
Memory and Brain Wellness Center
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Role of Speech Pathology

Who do we evaluate and treat?

 Patients diagnosed with Mild and Major NCD:
- Mild Cognitive Impairment (MCI)
- Dementia (Alzheimer’s, FTD, LBD, Vascular)
- Parkinson’s Disease (PD)
- Primary Progressive Aphasia (PPA)
- Other neurodegenerative diseases (e.g., ALS, MS, etc.)
Role of Speech Pathology

What do we evaluate and treat?

**Cognition**
- Attention
- Memory
- Reasoning
- Problem Solving
- Executive Functions

**Language**
- Auditory Comprehension
- Verbal Expression
- Motor Speech
- Reading Comprehension
- Written Expression
- Pragmatic Communication

**Caregiver Training/Education**
- Compensatory strategy use
- Safety
- Partner training
- Augmentative/Alternative tools/devices
- Future Planning

**Swallowing**
- Diet Modifications
- Postural Strategies
- Family Training
Referral to Speech Pathology

Yes, IF a patient can:
– Demonstrate ability to learn and implement new strategies
– Identify functional goals
– Be accompanied to all appointments by a family member or caregiver (for implementation and carryover)

No, IF a patient:
– Is residing in a skilled nursing facility (SNF)*
– Cannot demonstrate ability to learn or adequately participate
– Has limited social support or other psychosocial barriers that prevent consistent participation

* Patient should be served by facility (SNF) SLP
Bonus!

Prior to SLP referral, we would prefer:

- Completed medical work-up (brain scans, lab work, etc.)
- Completed Neuropsychological Evaluation
- Completed Family Conference
- Community Resources from Social Work (SW)
- Please advise family/caregiver that they must be present for SLP sessions (to facilitate history and carryover)
Cognitive/Language Intervention

Restoration vs. Compensation

When is each one appropriate?
(Well, it depends...)
**Restoration vs. Compensation**

**Restoration:** Aim to improve the process/system itself

**Compensation:** Use of strategies to problem solve specific barriers in the environment
Treatment Principles

> Because of the neurodegenerative nature of the disease process, favor focusing on use of compensation strategies to maintain (or improve) current level of function and promote safety

> Strategy training with emphasis on consistency and durability over time

> Trial strategies sequentially, targeting most problematic issues first

> Provide suggestions to encourage generalization

> Determine appropriate follow-up (may be months from now)
Cognitive Techniques (Restoration)

- Spaced retrieval – useful for more impaired individuals (e.g., repetitive questioning)

- Errorless learning – can be utilized in training for other compensation strategies
Case Example – “Robert”

> 74 y/o male with vascular dementia referred from UW Memory and Brain Wellness Clinic (MBWC)
> Retired high school teacher
> Lives with his wife at home on their farm
> Complaints: “Short term memory”, being “forgetful” of doctor’s names, appointments, and content of recent phone/conversations
> Neuropsychological Evaluation completed
Case Example – “Robert”

> Patient’s/Wife’s Goal: “Learning memory strategies”

> Intervention:
  – Introduced and developed memory book which included bio page, calendar/schedule, emergency numbers, photos/contact info of medical providers, family tree/contact info, common phone numbers, medication chart, Zoom instructions, etc.
  – White (dry erase) board for daily priority tasks/events
  – Trial of “phone log” (notebook) for recording important information from conversations
Case Example – “Robert”

- Provided time between sessions for trial/implementation of strategies (modify as needed)
- 4 sessions completed, with option for re-referral in future as needed
Memory/Communication Books

Name: Dorothy Hamilton
Address: 4433 24th Ave W
Seattle, WA 98199
Home phone: 206-363-5578
Birth date: February 18, 1939
Blood type: O positive
Allergies: Peanuts & penicillin

In case of emergency contact:
Kelly or Lawrence Parker
Home phone: 206-363-5578
Kelly cell: 206-458-2965
Lawrence cell: 206-557-8639

Medical contacts
Dr. Michael Pratt (primary care physician)
235 5th Avenue, Suite 400
Seattle, WA 98101
Office phone: 206-576-2838

Dr. Dana F. (neurologist)
2575 60th Ave SE
Bellevue, WA 98004
Office phone: 425-773-8555

Julie Carm (home health aide)
86 Happy Lane
Redmond, WA 98056
Cell: 425-378-8376

Gloria Reeds (speech-language pathologist)
512 16th Ave E
Seattle, WA 98102
Office phone: 206-668-1836

Evergreen Physical Therapy
165 Western Avenue
Seattle, WA 98101
Office phone: 206-638-1638

Rite Aid Pharmacy
125 Queen Anne Avenue
Seattle, WA 98101
Phone: 206-337-5276

Important people
- Jon (husband)
- Me
- Kelly (daughter)
- Morgan (daughter)
- Lawrence (son-in-law)
- Griffin (son-in-law)
- Mark (grandson)
- James (grandson)
Long Term Follow-Up

> Patients with progressive diagnoses often need to be followed over time
> This does not mean they are receiving therapies the entire time
> May complete a re-evaluation and multiple sessions of follow up for education and modifications to home environment and other tools/systems they are using
> Patients/families MUST HAVE specific functional goals!
Questions?

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