Aphasia United Best Practice Recommendations for Aphasia

- **People with aphasia** may find these recommendations *useful*. They outline what they have a *right to expect from treatment*.

- **Aphasia United** is an *international aphasia organisation*.

- **Our 10 best practice recommendations** outline the *ideal treatment* of **people with aphasia, their families** and **caregivers**.

- These recommendations are **aimed at** **health professionals** across the world.

Each recommendation has a rating:

- **A**  *Very strong* evidence supporting
- **B**  *Strong* evidence supporting
- **C**  *Some* evidence supporting
- **D**  *A little* evidence supporting
- **GPP**  *Good Practice Point: Not much evidence* but most **health professionals** agree this **should** be done
Assessment and diagnosis

1. All patients with stroke or progressive brain disease should be screened for communication problems. Screening involves a short test to see if there are any problems. 

2. People with suspected aphasia from screening should be fully assessed by a qualified professional. This assessment should determine what type of aphasia they have, how severe it is and how it will affect their lives.
Treatment

3 People with aphasia should receive information about aphasia, stroke and therapy options throughout their treatment.

4 No one with aphasia should be discharged from services without some means of communicating his or her needs and wishes or a documented plan for how and when this will be achieved.

Example: AAC Communication Book
People with aphasia should **all be offered treatment**, and this treatment should **continue as long as needed**.

**People with aphasia** should be offered **treatment** which is:

- **individualized** - There are many types of treatments to choose from. These should be chosen based on the **individual** and their **aphasia**.

- **intensive** – therapy should be **frequent**.

- designed to have a **meaningful impact** on the person’s **communication** and **everyday life**.

- under the supervision of a **qualified professional**.
Support for family and caregivers

6 Communication partner training should be provided to improve communication of the person with aphasia. [A]

7 Families or caregivers of people with aphasia should be included in the rehabilitation process. They should receive education and support regarding the causes and consequences of aphasia and learn to communicate with the person with aphasia. [A]
People with aphasia in the community

8 Services for people with aphasia should be **culturally appropriate** and **personally relevant**. The person should feel that their **personal circumstances** and **preferences** are **respected** and **included** in treatment.

9 **All health and social care providers** working with people with aphasia should be **educated about aphasia** and trained to support communication in aphasia.
Information intended for people with aphasia should be available in aphasia-friendly / communicatively accessible formats.

Source information from Aphasia United, adapted to aphasia-friendly format by Caitlin Brandenburg. Pictures from pixabay.com and shutterstock.com