

Pediatric Feeding and Swallowing



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

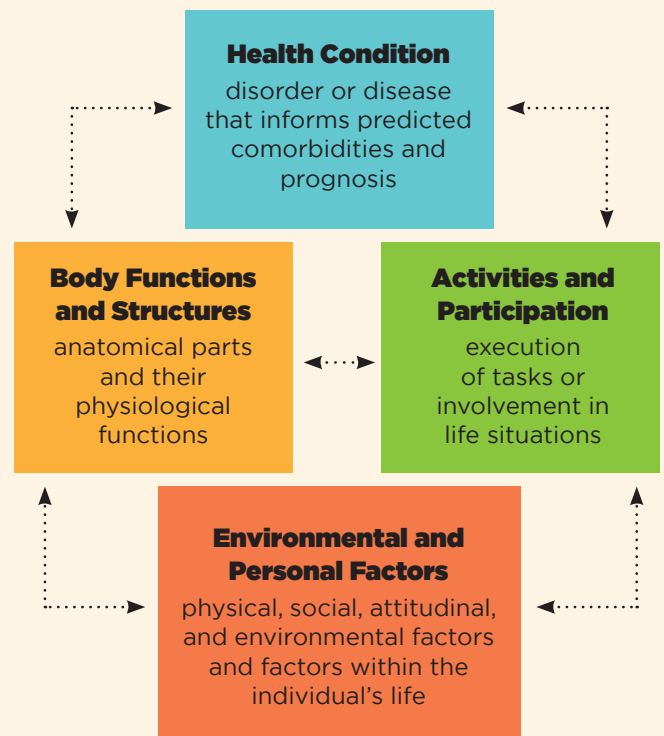
Why target person-centered functional goals?

- 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



Person-Centered Focus on Function: Pediatric Feeding and Swallowing

Case study: Hannah

Health Condition: Moderately Severe Cerebral Palsy

Assessment Data

Body Functions and Structures

Moderately Severe Cerebral Palsy

- Ambulatory with forearm crutches; able to self-feed; average intelligence

Assessments Sources

- Case history; parent interview; school feeding team checklist
- Clinical evaluation of feeding and swallowing; Videofluoroscopic Swallow Study (VFSS)

Assessment Findings

- History of swallowing problems
- Coughing/choking during meals; recent repeated respiratory infections
- Poor bolus formation and movement
- VFSS: evidence of aspiration; improves with upright posture, effortful swallow, and food/drink modifications

Activities and Participation

- Hannah has missed a significant amount of school due to repeated respiratory infections and pneumonia.
- She is falling behind academically due to absences.
- She has difficulty finishing snacks and lunch in a timely manner and is often not ready to transition to classroom activities or recess with peers.
- She is unable to fully participate in classroom activities due to fatigue and has difficulty completing in-class assignments.

Environmental and Personal Factors

- Hannah is 7 and is in 2nd grade.
- She is motivated to do well in school.
- She wants to enjoy snacks and lunch with friends and be ready for classroom activities or recess afterward.
- Hannah receives speech-language services for her feeding and swallowing needs.
- She has minimal swallow safety awareness.
- Teachers, support personnel, and family are trained to implement Hannah's safe swallow protocol at school and at home.

Clinical Reasoning

What impairments most affect function in the current setting or at discharge, based on clinician assessment and the individual's self-report?

What activities are most important to the individual in the current or discharge setting?

What environmental/personal characteristics help or hinder participation in activities or situations in the current or discharge setting?

Goal Setting

Hannah's Functional Goals

Long-Term Goal:

- Hannah will consume snacks and meals safely and efficiently to eliminate aspiration risk and to maintain nutrition and hydration throughout the day so that she can fully participate in academic activities.

Short-Term Goals:

- Hannah will independently maintain upright posture to establish central alignment and stability for safe swallowing 90% of the time during snacks and lunch by mid-year.
- Given prompts, Hannah will successfully chew gum or cheese wrapped in cheese cloth 3 times on each side to improve bolus formation and movement in 9 out of 10 trials during feeding/swallowing therapy by mid-year.
- Hannah will independently take smaller bites and use effortful swallowing to facilitate bolus clearance in 9 out of 10 opportunities during feeding/swallowing therapy by mid-year.
- Hannah will independently alternate bites of food with sips of water to facilitate bolus clearance in 9 out of 10 opportunities during feeding/swallowing therapy by mid-year.

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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.