

Communication Visual Aid Tool to Support Completion of the COPM®

Completed by:

☐

Patient

☐

Healthcare Provider

☐

Family/Caregiver

☐

Other:

Patient Name:

Date Completed:

Communication Visual Aid Tool: Instructions for Clinicians

The purpose of this tool is to help patients identify occupational performance issues (OPIs) related to their stroke recovery and the importance of their OPIs

- It is important to capture the patients' voice throughout their stroke recovery journey. The first page can be used to support conversations about the impact of their stroke and what they need to do to return home
- The visual rating scale can be used to identify the importance of each OPI. Place the scale under the image that is being discussed to focus the conversation on one OPI at a time. An alternate vertical scale is available on the reverse side and can be utilized with patients who have perceptual and/or visual field impairments
- A grey–yellow rating scale was used as it is easier for people with aphasia to understand – grey feels negative and yellow feels positive. This approach is based on research by the Aphasia Institute with and for people with aphasia.^{1,2}
- Prioritize the OPIs based on their importance rating
- This information can be used to complete the Canadian Occupational Performance Measure (COPM)©

Note: Clinicians are strongly encouraged to use supported conversation strategies (e.g., Supported Conversation for Adults with Aphasia [SCA™]) to ensure meaningful and person-centred dialogue. *Please see resources on the reverse side.*

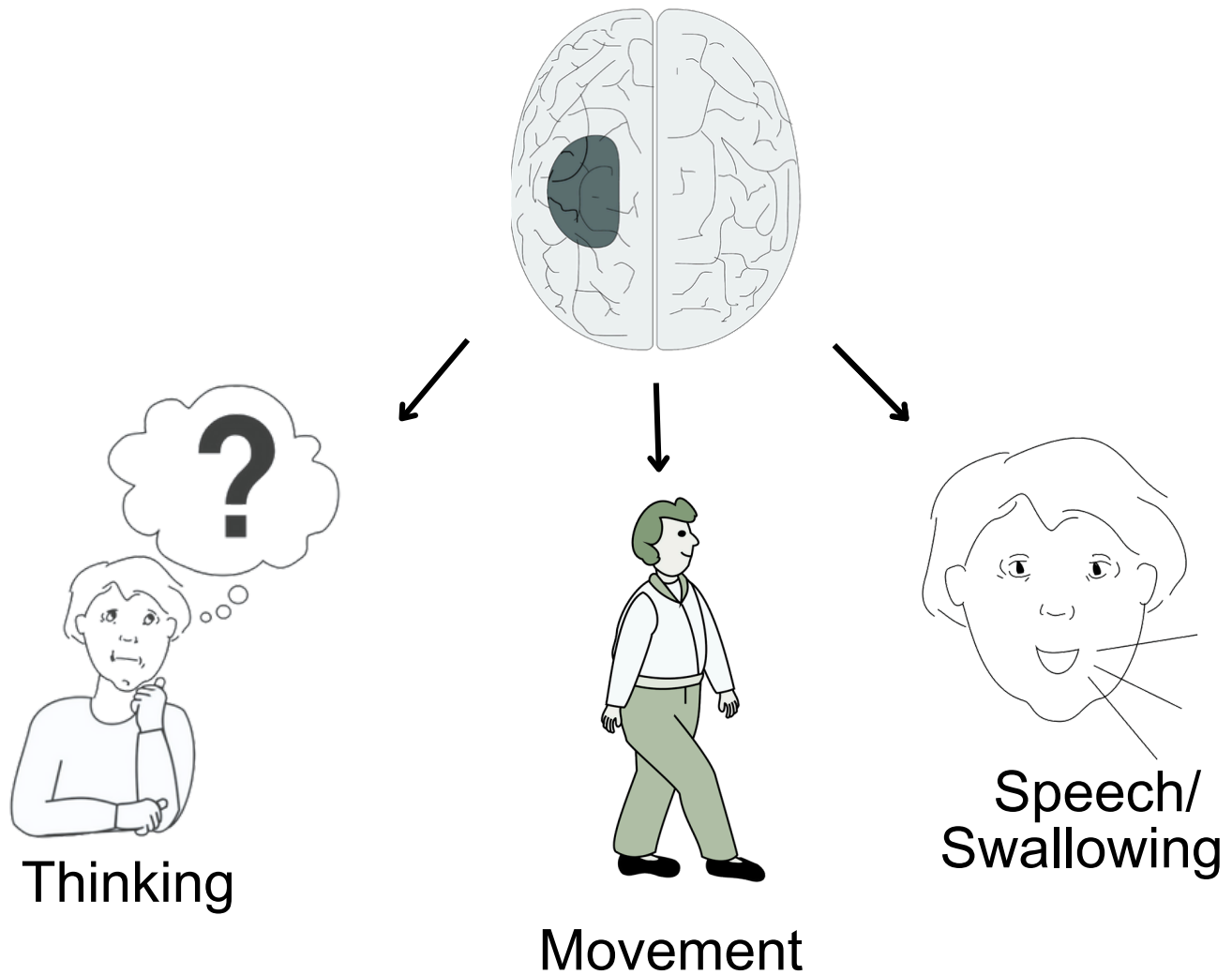
Resources

- **Toronto Stroke Networks' Supported Conversation for Adults with Aphasia (SCA™) Initiative:**
<https://tostroke.com/for-professionals/education-and-profession-development/toronto-stroke-networks-supported-conversation-for-adults-with-aphasia-initiative/>
- **Introduction to SCA™ Free eLearning Module:** <https://www.aphasia.ca/health-care-providers/education-training/self-directed-elearning/>
- **Additional Free Resources from the Aphasia Institute:**
 - <https://www.aphasia.ca/health-care-providers/resources-and-tools/free-resources/>
 - **"Talking About Series"** – topic-specific pictographic booklets on health care issues (e.g., daily living, fall prevention, medications, recreation and leisure): <https://www.aphasia.ca/working-together-series-request/>
 - **"Yes/No?" card:** https://aphasia-institute.s3.amazonaws.com/uploads/2022/03/YES_NO_WRONG-TRACK_Card_FILLABLE.pdf

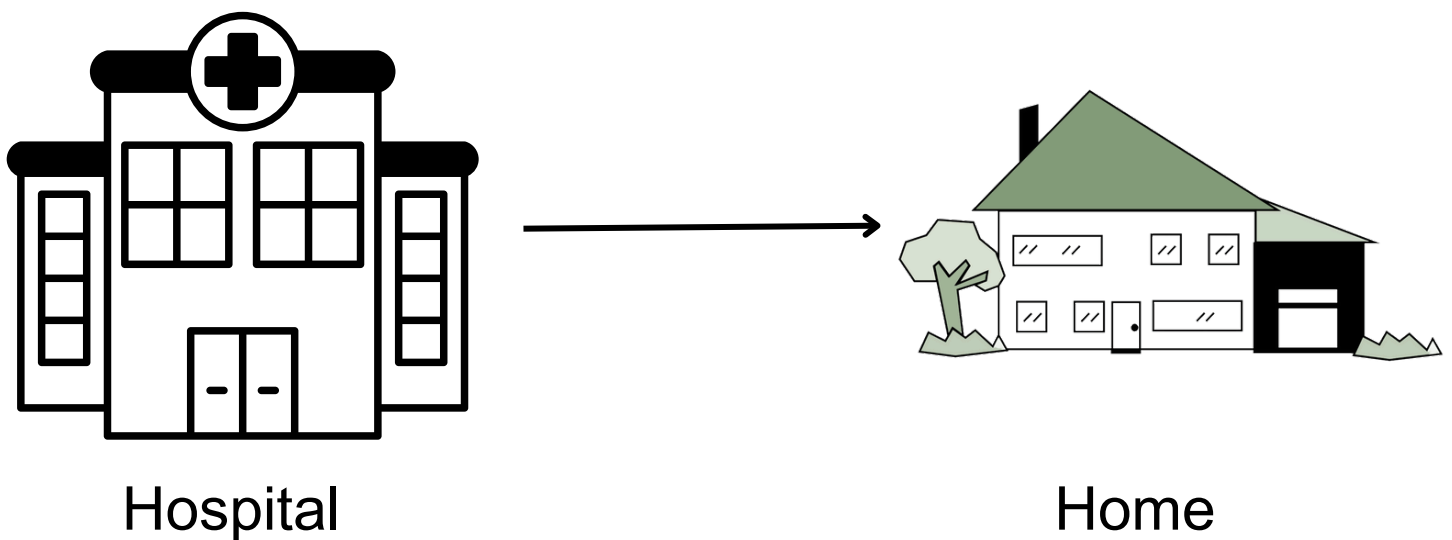
References

1. **Assessment for Living with Aphasia:**
 Simmons-Mackie, N, Kagan, A., Victor, J. C., Carling-Rowland, A., Mok, A., Hoch, J. S., Huijbregts, M., Streiner, D.L. (2014). *The Assessment for Living with Aphasia: Reliability and construct validity*. *International Journal of Speech-Language Pathology*, 16(1), 82-94. <https://doi.org/10.3109/17549507.2013.831484>
2. **Basic Outcome Measure Protocol for Aphasia:**
 Kagan, A., Simmons-Mackie, N., Shumway, E., Victor, J. C., & Chan, L. (2021). *Development and evaluation of the Basic Outcome Measure Protocol for Aphasia (BOMPA)*. *International Journal of Speech-Language Pathology*, 23(3), 258-264. <https://doi.org/10.1080/17549507.2020.1784278>
3. **Communicative Access Measures for Stroke (CAMS):**
 Aphasia Institute. (n.d.). *Communicative Access Measures for Stroke (CAMS)*. <https://cams.aphasia.ca/>
 Kagan, A., Simmons-Mackie, N., Victor, J.C., & Chan, M.T. (2017). *Communicative Access Measures for Stroke: Development and Evaluation of a Quality Improvement Tool*. *Archives of Physical Medicine and Rehabilitation*, 98(11), 2228-2236. <https://doi.org/10.1016/j.apmr.2017.04.017>
4. **Introduction to Supported Conversation for Adults with Aphasia (SICA™) eLearning module:**
 Kagan, A., Shumway, E., Thesenvitz, J., Brookman, C., Han, S., Gierman, N., Draimin, R., Kant, L., & Chan, M. T. (2025). *Aphasia Institute: Introduction to Supported Conversation for Adults with Aphasia (SCA™) eLearning (Second Edition)*. Aphasia Institute.
<https://www.aphasia.ca/health-care-providers/education-training/self-directed-elearning/>
5. **Canadian Stroke Best Practice Recommendations:**
 Heart and Stroke Foundation of Canada. (2025). *Canadian stroke best practice recommendations: Rehabilitation and recovery following stroke – Rehabilitation to improve language and communication*. <https://www.strokebestpractices.ca/recommendations/stroke-rehabilitation-delivery/7-language-and-communication>
6. **Yes/No/?/Wrong Track card:**
 Aphasia Institute. (2016). *Yes/No/?/Wrong Track Card (Fillable PDF)*, excerpted from 'What is Aphasia?: An information booklet for adults with aphasia, their families and their caregivers (3rd Ed.)'. https://aphasia-institute.s3.amazonaws.com/uploads/2022/03/YES_NO_WRONG-TRACK_Card_FILLABLE.pdf

Stroke Can Affect



What do I need to do to go home?



Suggestions for Introducing the Canadian Occupational Performance Measure® to Persons with Stroke



- There may be some changes since you had your stroke
- There may be changes with:
 - Your thinking
 - How you move
 - The way you talk or swallow
- I would like to know:
 - What are the things you need and want to be able to do again?
 - What is important to you in order to go home?
 - What do you want to focus on during your recovery/ rehabilitation?

In Acute Care



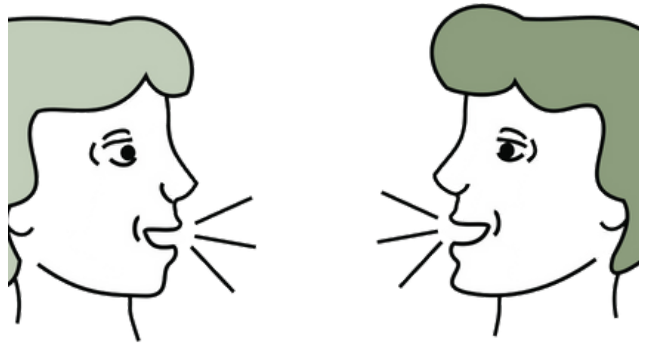
- I will share this information with your care team so that everyone knows what is important to you
- When you are ready to go to rehabilitation, we will share this information with the rehabilitation team
- If you think of anything else that you need/want to be able to do, please let us know

In Rehabilitation

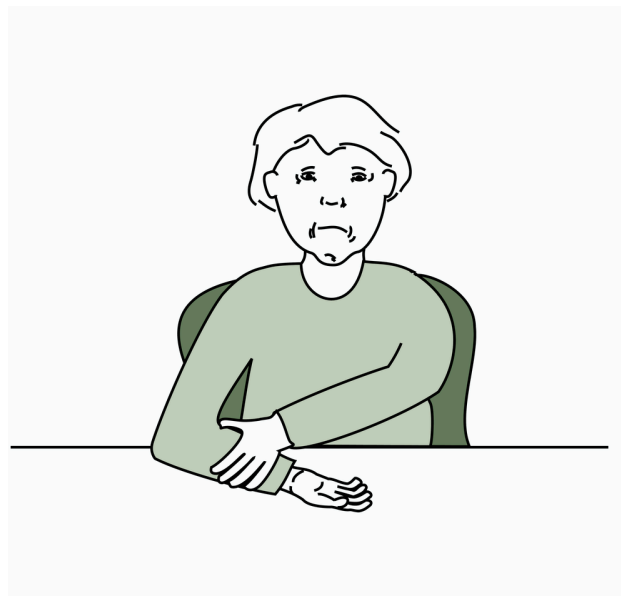


- I will share this information with your care team so that everyone knows what is important to you
- We can use this information to develop rehab goals with you
- We will re-visit this towards the end of your rehab stay to find out how you are doing with the things that are important to you

Talking



Using My Weak Arm



Walking



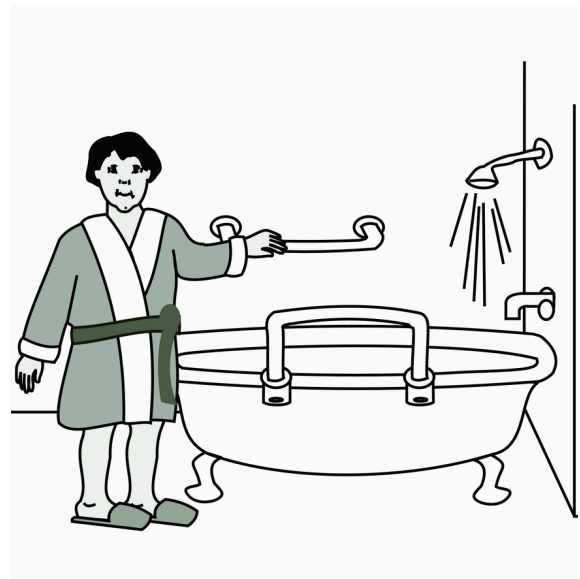
Eating



Toileting



Showering

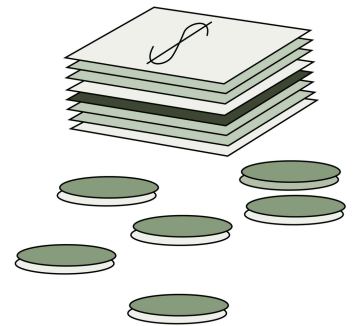


Managing Medications



Paying Bills

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Returning to Work



Dressing



Grooming



Cooking



Hobbies



Sexual Relations



Driving



Thinking

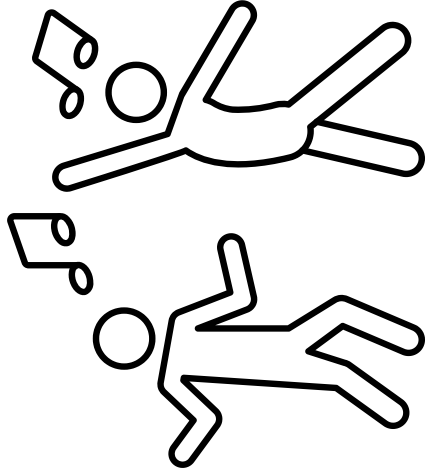
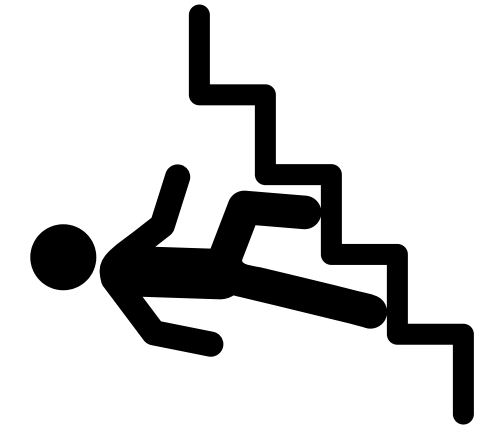


Fatigue

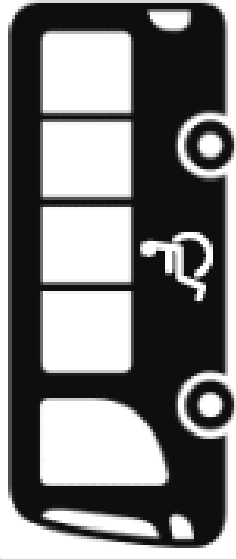
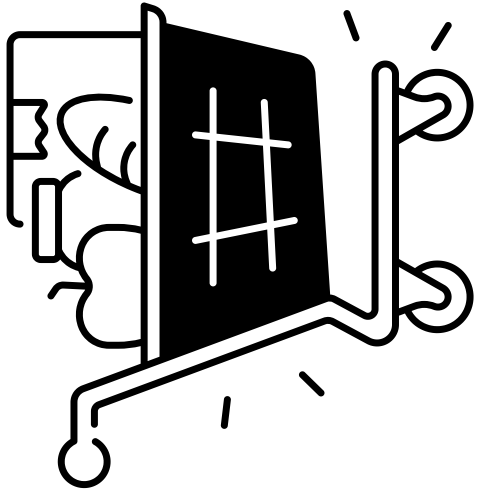


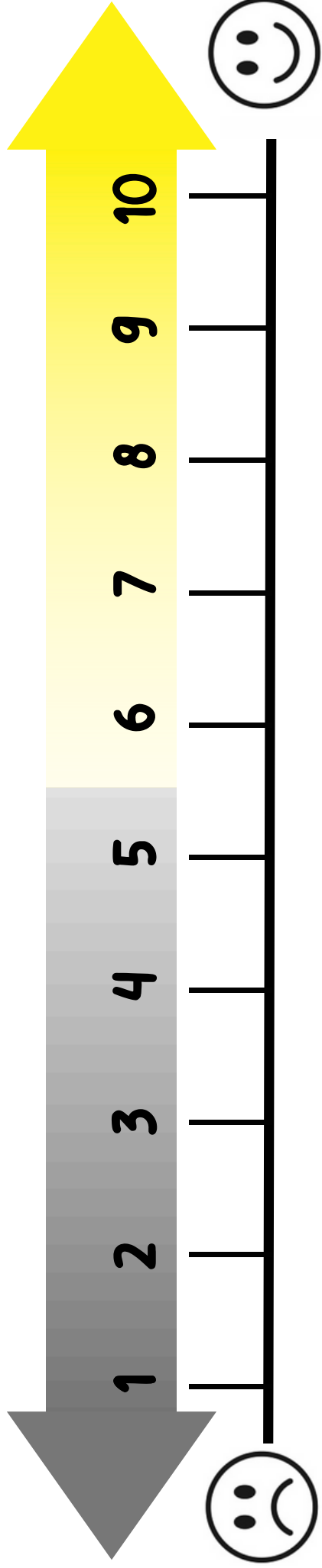
Mood





Other ?



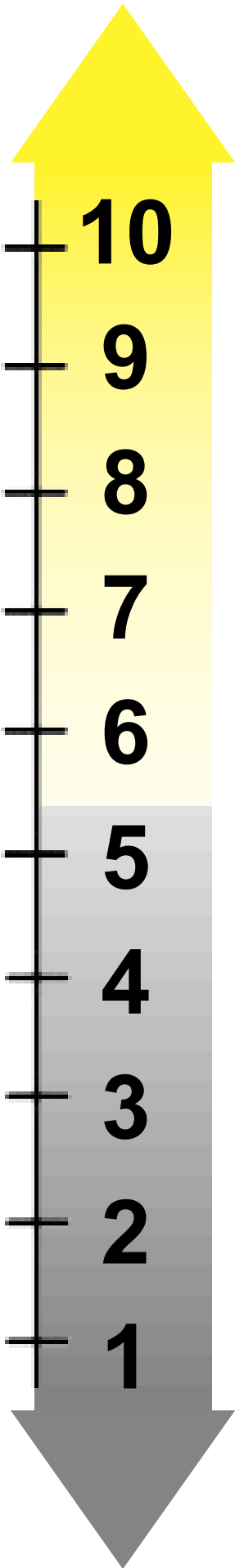


Not important

Most important

Optional Scale (e.g. for patients with neglect)

Most important



Not important