



Nov 10 SPLASCH Use Case Update

Date of last SPLASCH Discussion: 11/2 & 11/9

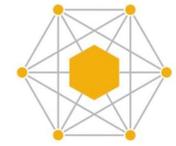
Topic: determine minimally viable product for testing for Jan Connectathon

Prep for January Connectathon:

- [Track proposal](#) submitted 11/9
- Working on Track Schedule, which is due 11/16

Key Considerations Discussed during Meetings:

- Using ASHA FCM's as a guide, group identified data for exchange between scenes 2 and 3.
- Team Identified the following FCM's: (see additional slides for details)
 - Spoken Language Comprehension: Tasks 4 and 6
 - Spoken Language Expression: Tasks 5, 6, 7
 - Swallowing: Task 4
- However, may not focus on all for first Connectathon
- Specific Data Elements to be Exchanged
- Pending Discussion:
 - Finalizing specific data elements to be exchanged
 - Cardinality of data elements
- **Meetings are now weekly on Tuesdays from 3-4PM EST**
 - Seeking additional technical expertise and input on the SPLASCH use case calls. If you are interested, please let Brian Meshell know by emailing bmeshell@mitre.org.



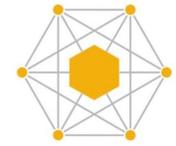
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FCM Spoken Language Comprehension (6+) To be used with patients ages 6 and above Instructions: Based on your assessment, please answer the following questions about the individual's spoken language comprehension skills in low and high demand situations. For all questions, consider chronological age expectations when rating the individual.

- **Low demand situations** are defined as verbal interactive situations where communication demands are reduced (e.g., familiar setting, familiar conversation partner, known context). For children this may include language content and forms acquired at a younger age than the child's current age.

- **High demand situations** are defined as verbal interactive situations that provide minimal support and have inherently more communication demands or rules to follow (e.g., unfamiliar conversational partner or setting, unknown contexts, group conversation). For children this may include language content and forms representing more recently acquired or expected structures for the child's current chronological age.

- **Task#4** understand complex messages, as expected for chronological age, in HIGH demand situations (e.g., story/lecture, sequencing of events, drawing appropriate conclusions, inferences, humor, subtle references)?
- **Task #6** participate in communication exchanges WITHOUT additional assistance from communication partner (no more than would be expected for chronological age)?



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FCM Spoken Language Expression (6+) To be used with patients ages 6 and above Instructions: Based on your assessment, please answer the following questions about the individual's spoken language expression skills in low and high demand communication exchanges. For all questions, consider chronological age expectations when rating the individual.

- **High demand situations** are defined as interactive situations that provide minimal support and have inherently more communication demands or rules to follow (e.g., longer messages, unfamiliar conversational partner or setting, unknown contexts, group conversations/activities). For children this may also include verbal messages requiring language, content and forms that are more recently acquired or expected for the child's current age.

- **Task#5** produce verbal messages with appropriate **FORM** in HIGH demand situations (e.g., academic or work-related tasks)? Note: consider phonology, morphology and syntax when assessing functional level.
- **Task #6** produce verbal messages with appropriate **CONTENT** in HIGH demand situations (e.g., academic or work-related tasks)? Note: consider semantic meaning when assessing functional level.
- **Task #7** participate in communication exchanges **WITHOUT** additional assistance from communication partner (no more than would be expected for chronological age)?



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FCM Swallowing To be used with patients of all ages
Instructions: Based on your assessment, please answer the following questions about the individual's swallowing. For all questions, consider chronological age expectations when rating the individual.

• **Note:** This scale should be used for individuals whose primary concern is risk for aspiration or swallowing safety due to oral pharyngeal dysphagia. Dietary levels should be judged only on swallow function, and any influence of poor dentition should be disregarded.

- **Task #4** How often does the individual exhibit difficulties with oral containment or secretion management?