

# 2025 AVASLP Conference Program

WEDNESDAY, April 9, 2025

<b>Presentation</b>	<b>Learning Objectives</b> At the end of the presentation, participants will be able to:
<b>KEYNOTE:</b>	<ol style="list-style-type: none"><li>1. List 3 strategies for building resilience after deployment.</li><li>2. Recognize the psychological costs of war/deployments through the speaker's sharing of war stories and the enduring impact of military service in time of war.</li><li>3. Describe at least one struggle veteran's face transitioning back to civilian life following military service and how serving in combat changes once entire world view and their ways of interacting with the unfamiliar world of the home front.</li></ol>
<b>Behavioral Interventions for Dysphagia in Patients Living with Dementia: Overview and Case Studies</b>	<ol style="list-style-type: none"><li>1. Describe current evidence-based approaches to dysphagia management in persons living with dementia.</li><li>2. List 2 ways in which behavioral intervention can address swallow function in persons living with dementia.</li><li>3. Identify considerations for using behavioral interventions for dysphagia to support persons living with dementia and their caregivers.</li></ol>
<b>Exploring Speech Pathology Care within HBPC Through Case Studies</b>	<ol style="list-style-type: none"><li>1. Describe the Speech Pathologist's care opportunities within the HBPC program.</li><li>2. Summarize Age-Friendly care and its utilization within HBPC.</li><li>3. Examine interdisciplinary collaboration to enhance Veterans' overall quality of life</li></ol>
<b>A Strategic Framework for Implementation of Value Based Dysphagia Care</b>	<ol style="list-style-type: none"><li>1. Recall the main concepts of the value-based healthcare framework.</li><li>2. Describe novel dysphagia risk prediction models and their application in clinical practice.</li><li>3. Recall and describe evidence based clinical care options for Speech-Language Pathologists to consider in their dysphagia practice under the domains of Dysphagia 1) prediction, 2) prevention, 3) detection, and 4) treatment.</li></ol>

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<p><b>Deep Dive into Laryngeal Cancer: Did the Pendulum Swing?</b></p>	<ol style="list-style-type: none"> <li>1. Compare advanced larynx cancer treatment options of laryngeal preservation and primary laryngectomy.</li> <li>2. Analyze the functional implications of treatment for laryngeal cancer.</li> <li>3. Describe the multidisciplinary approach to treatment planning and the considerations that influence planning and counseling provided to the patient.</li> </ol>
<p><b>Introduction to Artificial Intelligence in Speech Language Pathology</b></p>	<ol style="list-style-type: none"> <li>1. Provide a basic definition of AI.</li> <li>2. Identify 2 ethical considerations for the use of AI in healthcare.</li> <li>3. Create functional therapeutic materials using CHATGPT and identify errors in materials generated.</li> </ol>
<p><b>Cultivating the Future of Speech-Language Pathology: Helping Budding Clinicians Get Growing</b></p>	<ol style="list-style-type: none"> <li>1. Identify the relevant literature and evidence-base supporting clinical supervisory techniques.</li> <li>2. Compare evidenced-based supports/tools to manage supervisor-supervisee expectations and communication.</li> <li>3. Assess clinical critical thinking skills for the supervisee through the use of example frameworks discussed</li> </ol>
<p><b>National ALS ORH Comprehensive Care: Framework of Current Evidence Based Practices</b></p>	<ol style="list-style-type: none"> <li>1. Identify 2-3 evidence based patient reported outcome measures for pALS.</li> <li>2. Describe 2-3 performance based telehealth options for evaluation of dysphagia in pALS.</li> <li>3. Summarize 2-3 proactive AAC interventions with pALS.</li> </ol>

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Thursday, April 10, 2025

<p><b>Presentation</b></p>	<p><b>Learning Objectives</b> At the end of the presentation, participants will be able to:</p>
<p><b>Ethics and Person-Centered Rehabilitation</b></p>	<ol style="list-style-type: none"> <li>1. Define ethics and its key components.</li> <li>2. Describe the ethical significance of person-centered rehabilitation.</li> <li>3. Explain how a focus on satisfying the needs for autonomy, competence, and relatedness supports both ethical clinical practice and person-centered rehabilitation.</li> </ol>
<p><b>Improving Proactive Head and Neck Cancer Care through the VA Intensive Dysphagia Treatment Program</b></p>	<ol style="list-style-type: none"> <li>1. Describe the use of clinical pathways for management of head and neck cancer patients.</li> <li>2. Analyze standardized outcomes tools that can be used to monitor patients throughout and following treatment to measure change in swallowing and swallowing related quality of life.</li> <li>3. Summarize challenges in follow-up as reported by patients and clinicians</li> </ol>
<p><b>BREAKOUT SESSIONS START</b></p>	
<p><b>TRACK 1: COGNITION/TECH: Cognition &amp; The Media Myth: Are Smart Devices Helping or Hurting Our Outcomes?</b></p>	<ol style="list-style-type: none"> <li>1. Identify the ways social media and technology can impact attention and cognitive skills.</li> <li>2. Describe 2 behaviors that may be placing clients at risk for overuse of media/technology.</li> <li>3. Identify 3 strategies to support healthy relationships with social media/smart devices.</li> </ol>
<p><b>TRACK 2: AAC: Assistive Technologies to Support Life Participation in People with Aphasia</b></p>	<ol style="list-style-type: none"> <li>1. Define the theoretical frameworks supporting the use of assistive technology in increasing engagement of PWA in meaningful activities.</li> <li>2. Identify key technologies that support all language modalities (verbal/written expression, auditory/reading comprehension) in PWA.</li> <li>3. Describe future directions of assistive technologies in aphasia intervention.</li> </ol>
<p><b>TRACK 3: ADMIN: Clinic Improvements: Using Data Principles to Gain Leadership Support</b></p>	<ol style="list-style-type: none"> <li>1. Identify how to link VHA and facility strategic priorities to requests.</li> <li>2. Define Gestalt principles that improve data visualization.</li> <li>3. Identify 3 or more tools that improve chances of success when making requests to leadership.</li> </ol>

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<p><b>TRACK 4: ADMIN: From SLP to MHA: An SLP's Journey from Clinical Practice to Hospital Administration</b></p>	<ol style="list-style-type: none"> <li>1. Describe the process for applying to an MHA program and explain why having prior clinical experience and medical background is a plus!</li> <li>2. Compare the coursework and topics covered in an MHA program.</li> <li>3. Identify 3 unique skills SLPs bring to hospital administration.</li> </ol>
<p><b>BREAKOUT SESSIONS STOP</b></p>	
<p><b>Supporting Motivation During Treatment Using Self-Determination Theory</b></p>	<ol style="list-style-type: none"> <li>1. Describe the history, objectives, and methods of the National VA Intensive Dysphagia Treatment Program.</li> <li>2. Identify common challenges to implementation of a standardized quality improvement project that incorporates standardized patient assessment, treatment, and outcomes reporting.</li> <li>3. Demonstrate comprehension of strategies for patient enrollment, clinic scheduling, workflow development, and data reporting that can facilitate local success in implementation of the VA IDT program.</li> </ol>
<p><b>Updates in Clinical Practice Recommendations for Care of Veterans with Tracheostomy</b></p>	<ol style="list-style-type: none"> <li>1. Analyze considerations for evidence-based assessment and management of persons with tracheostomy.</li> <li>2. List best practices for dysphagia assessment and management in persons with tracheostomy.</li> <li>3. Describe the importance of training and interdisciplinary care to maximize positive outcomes for people with tracheostomies.</li> </ol>
<p><b>National VA Intensive Dysphagia Treatment Program at Cincinnati VAMC: How We Do It and Lessons Learned</b></p>	<ol style="list-style-type: none"> <li>1. Describe the history, objectives, and methods of the National VA Intensive Dysphagia Treatment Program.</li> <li>2. Identify common challenges to implementation of a standardized quality improvement project that incorporates standardized patient assessment, treatment, and outcomes reporting.</li> <li>3. Demonstrate comprehension of strategies for patient enrollment, clinic scheduling, workflow development, and data reporting that can facilitate local success in implementation of the VA IDT program.</li> </ol>

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<b>POSTERS</b>	
<b>Poster 1: Role of Speech-language pathologist in memory screening for patients over the age of 65</b>	<ol style="list-style-type: none"> <li>1. Identify the prevalence of dementia in the veteran population.</li> <li>2. List three risk factors of memory deficits in the veteran population.</li> <li>3. Describe PACT and SLP screening process</li> </ol>
<b>Poster 2: Reducing the percentage of patients in Speech Therapy who are not served in their preferred language</b>	<ol style="list-style-type: none"> <li>1. Participants will be able to demonstrate an increase in on preferred process to increase Speech therapy services in the veteran's preferred language.</li> <li>2. Participants will be able to identify one way to improve health outcomes related to speech therapy services in bilingual populations.</li> <li>3. Participants will be able to identify a process for veterans to receive speech therapy services in their preferred language.</li> </ol>
<b>Poster 3: An Open-label Feasibility and Acceptability Pilot of Hypnosis and Mindfulness Meditation for Cancer Pain in Veterans</b>	<ol style="list-style-type: none"> <li>1. Describe how pain associated with treatment for head and neck cancers can have a potential impact on swallowing and communication.</li> <li>2. Identify at least 2 possible interventions that may be helpful to address pain in patients with head and neck cancers.</li> <li>3. Describe the process to introduce self guided interventions patients may engage in with support from medical team.</li> </ol>
<b>Poster 4: IDDSI implementation at Walter Reed National Military Medical Center: A circuitous path to success</b>	<ol style="list-style-type: none"> <li>1. Identify possible sources of error with IDDSI diets.</li> <li>2. Discuss mitigation strategies to address and eventually reduce errors in IDDSI implementation.</li> <li>3. Discuss ongoing collaboration techniques for implementation of IDDSI</li> </ol>
<b>Poster 5: Functional Language Maintenance Plan Outcome Measures in Dementia</b>	<ol style="list-style-type: none"> <li>1. Identify at least one benefit of using the RSSCD as an evaluation for veterans with dementia.</li> <li>2. Discuss one benefit of using the RSSCD as an outcome measure tool.</li> <li>3. List 2 potential components of a Functional Language Maintenance Program.</li> </ol>
<b>Poster 6: Utilizing FEES in HBPC</b>	<ol style="list-style-type: none"> <li>1. List at least 2 justifications for instrumental evaluation within the home-based setting</li> <li>2. Identify cost savings associated with portable instrumental</li> <li>3. Describe means to obtain state specific instrumental assessment requirements</li> </ol>

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<p><b>Poster 7: Efficacy of Semantic Priming to Improve Comprehension and Expression of Sentences (SPICES), a Novel Telehealth Treatment Approach.</b></p>	<ol style="list-style-type: none"> <li>1. Describe the theoretical underpinnings of SPICES, the SPICES protocol as delivered via telehealth, and how it differs from other existing aphasia treatment approaches.</li> <li>2. List 2 considerations for virtually delivered SPICES treatment candidacy.</li> <li>3. Describe the results of the ongoing single subject design research on the administration of SPICES via telehealth.</li> </ol>
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## FRIDAY, April 11, 2025

<p><b>Presentation</b></p>	<p><b>Learning Objectives</b> At the end of the presentation, participants will be able to:</p>
<p><b>Voice Care for Veterans: Outcomes from National Virtual Clinical Improvement Project</b></p>	<ol style="list-style-type: none"> <li>1. Summarize the current voice care needs of the Veteran population.</li> <li>2. Discuss outcomes of voice care in the Veteran population.</li> <li>3. Demonstrate an understanding of the personal mixing board as an outcome tool and therapeutic intervention</li> </ol>
<p><b>Clinician Stories: How Our Personal Histories Inform and Strengthen our Care for Veterans</b></p>	<ol style="list-style-type: none"> <li>1. Identify ways their own history/background may contribute to their personal biases.</li> <li>2. List specific practices to improve visibility, compassion, and sensitivity for colleagues.</li> </ol>
<p><b>Treating the Unseen: Using A Symptom Based Approach with the AHI Population</b></p>	<ol style="list-style-type: none"> <li>1. Identify at least three symptoms commonly reported by patients with a suspected Anomalous Health Incident.</li> <li>2. Summarize the main recommendation for development of a treatment plan to address cognitive symptoms in this patient population.</li> <li>3. Describe the role of the speech language pathologist on the interdisciplinary team.</li> </ol>
<p><b>Training Tomorrow's Leaders: A Perspective on a Speech Team Approach in Head and Neck Cancer Populations</b></p>	<ol style="list-style-type: none"> <li>1. Describe the benefits of a speech team approach for HNC populations.</li> <li>2. Identify feasible ways to create a speech team approach, specifically with incorporation of Intensive Dysphagia Treatment.</li> <li>3. Discuss the key roles of speech team members, including an SLPA's role in HNC populations.</li> </ol>

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<b>VHA BREAKOUT: Speech Pathology Program Office/Field Advisory Council Updates</b>	<ol style="list-style-type: none"><li>1. Learn about strategic vision and priorities of VHA and how they relate to Speech pathology clinical, professional training, and clinical educational programs.</li><li>2. Discuss and learn about specific issues related to clinical practice, administration, and clinical education that impact the unique VA Healthcare System.</li></ol>
<b>DHA BREAK-OUT: Current State of Affairs of Speech Pathology in the Defense Health Agency: Two Years in Review: An Opportunity to Ask Questions, Share Knowledge Experiences, and to Collaborate</b>	<ol style="list-style-type: none"><li>1. Learn the current DHA caseload requirements for SLPs.</li><li>2. Describe the DHA Market structure.</li><li>3. Learn how to find out who their market leads are.</li><li>4. Learn how to access colleagues' templates in GENESIS for documentation.</li></ol>
<b>Feeding or Breathing? The Debate Over Feeding on Noninvasive Respiratory Support in the NICU</b>	<ol style="list-style-type: none"><li>1. Compare and contrast different types of noninvasive respiratory support/noninvasive ventilation (NIV) used in the NICU.</li><li>2. Explain the impact of noninvasive respiratory support on the oropharyngeal structures.</li><li>3. List at least one objective evaluation that could be utilized to determine readiness to feed while on NIV.</li><li>4. Identify potential impacts of feeding on noninvasive respiratory support, methods to mitigate potential impacts of deferring feeding, and potential impacts on the future feeding success of military dependents.</li></ol>