Interventions to improve functional outcomes in cerebral palsy

**BEST PRACTICE PRINCIPLES**

When working with children and young people with cerebral palsy who have functional goals, the following best practice principles are recommended, with the aim of maximising functional outcomes.

1. **Client chosen goals should be set**
   - Intervention should begin with understanding what is important to the child, and setting functional goals that focus on improving the child’s participation in those activities. Goals should be functional, meaningful and achievable within a short timeframe. A written copy of goals should be provided. Goals should be measured at the beginning and at end of the intervention.

2. **Factors limiting goal achievement should be determined**
   - Clinicians should observe the child attempting the goal to determine factors limiting goal achievement. This may include a discussion about when and where the child wants to participate in the activity, and consideration of aspects of the task and environment that may help achieve goals.

3. **Intervention should include direct practice of the whole goal**
   - Active practice of the child’s goal should be the focus of intervention, rather than focussing on underlying impairments. This includes the clinician taking a ‘hands-off’ approach, and providing feedback to support the child to successfully carry out their goal.

4. **Intervention should be enjoyable and motivating for the child**
   - Intervention should be enjoyable and motivating for the child and challenging enough that the child improves. Interventions that are painful or distressing should be modified and alternative interventions be considered.

5. **Practice of goals should occur within the home and community**
   - Achievement of the goal is more likely to be carried over into every day life when practice occurs in real life environments. When this is not possible, intervention should be adapted so that practice reflects the environments and resources relevant to the child’s goals.

6. **Parent-delivered intervention is a key component of all intervention**
   - Clinicians should provide information and coach families to be actively engaged in their child’s intervention. A structured home program adapted to suit each individual, combined with ongoing support and reviews will maximise practice outside of therapy sessions.

7. **Children and parents should be empowered to make decisions**
   - Clinicians should share their knowledge with families and provide up to date evidence to enable families to make informed decisions about interventions. Clinicians should consider the individual child and recommend only feasible, effective interventions that are supported by evidence.

8. **A high enough dose of practice should be planned for goal achievement**
   - It is important to consider how much practice will be needed to achieve goals, and partner with families to plan for how the amount of practice needed can be achieved. Certain interventions may require a higher dose of practice and it is important to consider this when intervention planning.

9. **A team approach should be used**
   - A team approach (with the child and family as part of the team) to setting goals and intervention planning is recommended. Clinicians/providers communicating effectively and working towards common goals can reduce the pressure on families.