

Supplemental Material S1. Survey Codebook.

Training in Cognitive-Communication (Cog-Comm)

Graduate School: received training in cog-comm during graduate school or through graduate school coursework

Course: indicated cog-comm training occurred in a dedicated graduate school course or part of a course

Specified Course: indicated the name of the course in which they received cog-comm training

Continuing Education: received training in cog-comm through general continuing education opportunities

Course: indicated that continuing education included a specific course

Conference: indicated that continuing education included a specific conference

Training/Certification: indicated that continuing education included a specific training or certification program

Workshops: indicated that continuing education included a workshop

Job Training/Mentorship: indicated that they received training in cog-comm at their place of work or received mentorship from another professional experienced in cog-comm (e.g., neuropsychologist)

Independent Learning: indicated they received training in cog-comm via self-studying, reading journal articles, or another mode of learning that was independently led

Training in Mild Cognitive Impairment (MCI) or Early-Stage Dementia due to Alzheimer's Disease (AD)

Graduate School: received training during graduate school or through graduate school coursework

Course: indicated training occurred in a dedicated graduate school course or part of a course

Specified Course: indicated the name of the course in which they received cog-comm training

Continuing Education: received training through general continuing education opportunities

Course: indicated that continuing education included a specific course

Conference: indicated that continuing education included a specific conference

Training/Certification: indicated that continuing education included a specific training or certification program

Workshops: indicated that continuing education included a workshop

Job Training/Mentorship: indicated that they received training at their place of work or received mentorship from another professional experienced in MCI, dementia, or aging (e.g., geriatrician)

Independent Learning: indicated they received training via self-studying, reading journal articles, or another mode of learning that was independently-led

General Clinical Practices and Needs for MCI or Early-Stage Dementia

Assessment Needs: indicated the need for an assessment measure or methods to assess deficits, symptoms, or functioning

Better Tests: indicated that assessments should be more sensitive to a cognitive domain, specified to a population, standardized, normed, or formal; tests should better assist with diagnosis

Standardized: described that assessments should be more standardized, norm-referenced, or formal

Sensitivity: described that assessments should be more sensitive to a cognitive domain or to deficits of the targeted population

More Feasible: indicated that assessments should be more apt to a clinical environment, conditions, and expectations

Time: described current barriers with assessment time and/or need for assessments to be considerate of the time in clinical settings

Cost: described current assessments are too expensive or that future assessments should be less expensive

Digital: described a need for digitized assessments

Functional Measures: indicated for a need for functional assessments or a way to assess more functional or person-centered tasks

Strategy Measures: indicated assessments should consider the use of compensatory strategies in scoring or measure the use of strategies in some capacity

Patient-Reported Outcome Measure (PROM): indicated the need for patient-reported outcome measures or surveys or questionnaires

Unsure: stated that they were unsure how to answer questions and/or unsure of their needs

Treatment Needs: indicated need for treatment or interventions

Standardized: described that treatments should be more formalized, standardized, or evidence-based

More Feasible: described that treatments should be more apt to the clinical environment, conditions, and expectations

Time: described current barriers with treatment time and/or need for future treatment to be considerate of the time in clinical settings

Cost: described current treatment manuals and/or materials are too expensive or that future treatments should be less expensive

Digital: described a need for digitized treatment

Functional: indicated a need for treatments that are functional and/or related to the client's specific needs or daily functioning

Compensatory: indicated a need for treatments to include or address compensatory strategy use

Goal Development: indicated a need for tools to interpret assessments, support goal/treatment development, treatment justification, and/or progress monitoring

Educational Tools: indicated a need for tools to educate or teach patients, families, or others

More Functional Not Otherwise Specified (NOS): indicated a need for more functional tools but did not specify treatment or assessment tools

Standardized Tools NOS: indicated a need for more sensitive tools but did not specify treatment or assessment tools

Sensitivity Tools NOS: indicated a need for sensitive tools but did not specify treatment or assessment tools

Cost NOS: indicated current tools are too expensive or that future tools should be less expensive but did not specify assessment or treatment tools

Time NOS: indicated current barriers with time and/or need for future tools to be considerate of the time in clinical settings but did not specify assessment or treatment tools

Assessment Practices for Everyday Living Skills for MCI or Early-Stage Dementia

Interview: indicated ADL information was gathered through interview or speaking with a stakeholder

Caregiver: described interview specifically occurred with a family member or caregiver

Patient: described interview specifically occurred with the patient

Other Team Members: described interview specifically occurred with another team member or through reading other team member reports

Informal Tasks: indicated ADL functioning was assessed through informal tasks that they created

Medication Management Task: task example mentioned medication, pillbox, managing medications, or other related ideas

Financial Management Task: task example mentioned money/financial management or other related ideas

Cooking Tasks: task example mentioned cooking or other related ideas

Safety Tasks: task example included activities related to safety or safety awareness

Personal Care Tasks: task example mentioned activities related to personal care (e.g., bathroom activities, use of call light, and/or grooming)

Appointments/Scheduling Tasks: task example mentioned appointments, calendar, scheduling, or other related ideas

Telephone/Email Tasks: task example described the use of telephone or email

Shopping Tasks: task example mentioned shopping in any form (e.g., grocery shopping)

Observation: indicated ADL assessment occurred by watching or observing the patient complete activities as part of their daily routine (which were not created or simulated by the therapist purposefully) or during other therapies (e.g., occupational therapy)

Performance-Based Measure: indicated ADL assessment occurred with the use of a performance-based measure or part of a performance-based measure; these types of assessments require the patient to perform a task

Assessment of Language-Related Functional Activities (ALFA): described use of the ALFA as a measurement tool for ADLs (Baines et al., 1999)

Allen's Cognitive Levels Screen: described use of the Allen's screen as a measurement tool for ADLs (Allen & Blue, 1998)

Assessment of Motor and Process Skills (AMPS): described use of the AMPS as a measurement tool for ADLs (Fisher, 1995)

Communication Activities of Daily Living (CADL): described use of the CADL as a measurement tool for ADLs (Holland, et al., 1999)

Cognitive Linguistic Quick Test (CLQT): described use of the CLQT as a measurement tool for ADLs (Helm-Estabrooks, 2001)

Functional Standardized Touchscreen Assessment of Cognition (F-STAC): described use of the F-STAC as a measurement tool for ADLs (Cognitive Innovations, 2021)

Ross Information Processing Assessment (RIPA): described use of the RIPA as a measurement tool for ADLs (Ross-Swain, 1996)

Scales of Cognitive and Communication Ability for Neurorehabilitation (SCCAN): described use of the SCCAN as a measurement tool for ADLs (Milman & Holland, 2012)

Texas Functional Living Scale (TFLS): described use of the TFLS as a measurement tool for ADLs (Cullum et al., 2009)

Woodcock Johnson: described use of the Woodcock Johnson as a measurement tool for ADLs (Schrack et al., 2014)

Informal Questionnaire: indicated that ADL information was gathered through a set of questions (e.g., survey, questionnaire) that they developed but no formal or published form was identified

Team Collaboration: indicated specific collaboration with rehabilitation team members to assess ADL functioning which goes beyond the passive observation of tasks

Published Survey: indicated that ADL assessment used all or a portion of a published set of questions to assist with the identification of needs. This includes self-reported, observer-reported and clinician-reported measures.

American Speech-Language-Hearing Association Functional Assessment of Communication Skills for Adults (ASHA FACS): described use of the ASHA FACS as a measurement tool for ADLs (Frattali et al., 2017)

Functional Independence Measure (FIM): described use of the FIM as a measurement tool for ADLs (Uniform Data Set for Medical Rehabilitation, 1996)

Informant Questionnaire on Cognitive Decline in the Elderly (IQCODE): described use of the IQCODE as a measurement tool for ADLs (Jorm, 2004)

Lawton Instrumental Activities of Daily Living Scale (Lawton IADL): described use of the Lawton IADL as a measurement tool for ADLs (Graf, 2008)

Multifactorial Memory Questionnaire (MMQ): described use of the MMQ as a measurement tool for ADLs (Troyer & Rich, 2018)

Reasons for No Assessment Practices for Everyday Living Skills

Occupational Therapy Scope: indicated that ADL assessment is the responsibility of the occupational therapist

Not Appropriate: indicated that ADL assessment is not appropriate for participant setting

Limited Knowledge: indicated they have limited knowledge or no appropriate tools to assess ADLs

Goals for MCI or Early-Stage Dementia due to AD

Named Interventions: indicated any type of intervention as part of their goal

Compensatory Strategies: described the use of a strategy, compensatory strategy, or indicated a specific internal or external aid

External Aids: described external aids or indicated a specific external aid

Memory/Communication Book: described memory and/or communication book and/or page

Calendar: described use of a calendar, planner, or other scheduling aid

Phone/Computer: described use of a phone, computer, or tablet

Technology: described technology as an external aid but did not specify what type of technology

Internal Aids: described internal aids or indicated a specific internal aid

Association: described use of association as a strategy

Repetition: described use of repetition or rehearsal as a strategy

Visualization: described use of visualization as a strategy

Communication Strategies: described communication strategies broadly

Environmental Modification: described adapting or modifying the clients' environment as a strategy

Spaced Retrieval: described using spaced retrieval

Errorless Learning: described using errorless learning

Cognitive-Communication Domains: described a cog-comm domain; this code and subsequent level codes were only applied if the cog-comm domain was specified; researchers did not assume domains if it was not explicitly identified

Memory: described memory or recall broadly, or listed a specific type of memory

Naming/Word Finding: described naming or word-finding

Working/Short-term Memory: described working memory or short-term memory

Executive Functions: described executive functions broadly or listed a specific function

Problem-Solving/Reasoning: described problem-solving/reasoning

Organization: described organization

Sequencing: described sequencing

Attention: described attention broadly or listed a specific type of attention

Alternating: described alternating attention

Selective: described selective attention

Sustained: described sustained attention

Divided: described divided attention

Language: described language broadly

Functional: described functional or client-centered goals

ADLs: described basic or independent activities of daily living

Medication Management: goal example mentioned medication, pillbox, managing medications, or other related ideas

Daily Routine: goal example mentioned routines, activities found in daily routines of the client, or other related ideas

Money Management: goal example mentioned money/financial management or other related ideas

Scheduling/Appointments: goal example mentioned appointments, calendar, scheduling, or other related ideas

Safety: described safety or safety awareness

Orientation: described time, and/or general orientation

Home Exercise Program: described the creation of, completion of, or general mention of home exercise program

Counseling+: described activities related to counseling, collaboration, prevention, and wellness (Lanzi, Ellison, & Cohen, 2021)

Education: described education or teaching

Caregiver: described education was provided to family or caregiver

Patient: described education was provided to the patient

Caregiver Training: described goals directed towards caregiver training to improve functioning, participation, or communication

Awareness: described the awareness of deficits

Other Goals: described other goals not related to the other established codes

Assessment: described goals that address and/or complete continued assessment or staging

No Goals: stated they do not create any goals

Swallowing: described swallowing function

Voice: described voice function

Treatment for MCI or Early-Stage Dementia due to AD

Named Interventions: described any type of intervention

Compensatory Strategies: described the use of a strategy, compensatory strategy, or indicated a specific internal or external aid

External Aids: described external aids or indicated a specific external aid

Memory Book: described memory book and/or page

Calendar: described use of a calendar, planner, or other scheduling aid

Phone/Computer: described use of a phone, computer, or tablet

Technology: described technology as an external aid but did not specify what type of technology

Internal Aids: described internal aids or indicated a specific internal aid

Association: described use of association as a strategy

Repetition: described use of repetition or rehearsal as a strategy

Visualization: described use of visualization as a strategy

Communication Strategies: described communication strategies broadly

Circumlocution: described use of circumlocution as a strategy

Scripting: described use of or teaching scripts or scripting as a strategy

Communication Aids: described use of communication aids as a strategy

Metacognitive Strategies: described use of metacognitive strategies

Environmental Modification: described adapting or modifying the clients' environment as a strategy

Spaced Retrieval: described spaced retrieval

Errorless Learning: described errorless learning

Cognitive Stimulation: described cognitive stimulation or other isolated restorative cognitive approaches

Worksheets/iPad Apps: described use of worksheets or apps to stimulate cognition or to address cognitive functioning

Motivational Interviewing: described motivational interviewing

Semantic Feature Analysis: described semantic feature analysis

Goal-Plan-Do-Review: described goal-plan-do-review

Attention Process Training: described attention process training

Chaining: identified chaining

Life Participation: described using the life participation approach or approach similar to life participation approach for aphasia

Reminiscence Therapy: described reminiscence therapy

Mindfulness: described use of mindfulness, mind-body connection, or meditative techniques

See-Do-Review: described see-do-review

Stop Think Plan: described stop think plan

Step-by-Step: described step-by-step

Read Attentively Summarize Review: described read attentively summarize review

Functional: described functional or person-centred approaches

ADLs: described basic or independent activities of daily living

Daily Routine: task example mentioned routines or activities found in daily routines of client

Medication Management: task example mentioned medication, pillbox, or managing medications

Scheduling/Appointments: task example mentioned appointments, calendar, scheduling, or prospective memory

Financial Management: task example mentioned money or financial management

Safety: described safety or safety awareness

Orientation: described time, and/or general orientation

Home Exercise Program: described the creation of, completion of, or general mention of home exercise program

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Memory: described memory or recall broadly, or listed a specific type of memory

Naming/Word Finding: described naming or word-finding

Executive Functions: described executive functions broadly or listed a specific function

Problem-Solving/Reasoning: described problem-solving/reasoning

Organization: described organization

Sequencing: described sequencing

Attention: described attention broadly or listed a specific type of attention

Divided: described divided attention

Counseling+: described activities related to counseling, collaboration, prevention, and wellness (Lanzi, Ellison, & Cohen, 2021)

Education: described education or teaching

Caregiver: described education was provided to family or caregiver

Patient: described education was provided to the patient

Caregiver Training: described goals directed towards caregiver training to improve functioning, participation, or communication

Awareness: described treating awareness of deficits

Assessment: described that their treatment addressed continuation of assessment or staging