Especially for Parents: Getting Acquainted with AAC

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What is AAC??

- Communication: “a technique for expressing ideas effectively”
  - Many types of communication are effective (e.g., gestures, facial expressions, vocalizations, etc.)

- Augmentative: “able to make greater, more numerous, larger, or more intense”
  - AAC builds on those communication abilities already present, does not replace them

- Alternative: “different from the usual or conventional”
  - Usual/ conventional communication is speech
  - AAC therefore can be symbols, sign language, recorded speech, synthesized speech, etc.

* Merriam-Webster.com definitions
Who can benefit from AAC?

- Children who are not speaking
- Children who are physically unable to speak
- Children who should be speaking more
- Children with “specific” diagnoses whose speech is very difficult to understand
  - Cerebral Palsy
  - Down Syndrome
  - Autism
  - Developmental Delay
  - Severe Apraxia
What is AAC? I need examples!

- “Low-Technology”
  - PECS (Picture Exchange Communication System, Pyramid Educational Consultants)
  - Communication Book (using symbols/photos)
  - Big Mack (AbleNet, Inc.)
High-Technology Examples

- PRC Devices
  - Springboard Lite
  - Vantage/Vantage Lite
  - Vanguard
  - Eco-14
Common AAC Myths

1. AAC should be introduced only after giving up hope of natural speech development.

   **FACT:** You can continue to work on natural speech development while encouraging AAC use for communication. (Beukelman & Mirenda, 1992)

2. AAC decreases the motivation to work on speech.

   **FACT:** Often, hearing the verbal model constantly on an AAC device will encourage children’s natural speech development. (Romski & Sevcik, 1993; Silverman, 1980)

More information and resources at http://aac.unl.edu/yaack/
3. If present, verbal speech should be used exclusively.

   **FACT:** Requiring exclusively verbal speech may underestimate the child’s true ability.

   **FACT:** Children who use AAC have shown improvements in behavior, attention, independence, self-confidence, class participation, academic progress and social interaction. (Abrahamsen, Romski, & Sevcik, 1989; Van Tatenhove, 1987)

4. There are language/cognitive prerequisites that need to be met first in order for AAC to be successful.

   **FACT:** Children with severe cognitive deficits are capable of learning and benefiting from AAC (Beukelman & Mirenda, 1992; Romski & Sevcik, 1993; Kangas & Lloyd, 1988)
## Common AAC Truths

1. **Supportive teams with multiple professionals and family members helps lead to successful AAC users.**

   *Phone calls, emails and personal visits with therapists/teachers help build a team environment.*

2. **Squeaky wheels get the oil.**

   *Parents must be advocates for their children.*

   *Be versed in parental rights within your district; in all states there are free resources for writing/disputing IEPs. Google your state board of education.*

3. **Not all SLPs/educators are well-versed in AAC evaluations/therapy.**

   *AAC is not always a requirement for SLPs or teachers during their graduate coursework.*
Common AAC truths (cont.)

3. Of those SLPs/educators who are comfortable with AAC, there are differences in their knowledge of equipment, language paradigms, access, etc.

   There is so much equipment available, some support personnel are often comfortable with just one or two devices, companies, etc.

4. Once an AAC device is received, there are vast differences in how SLPs/educators implement them in the classroom.
How do I start looking at AAC?

- LANGUAGE, LANGUAGE, LANGUAGE, LANGUAGE

- Our wishes for our children’s communication:
  - Communicate anytime
  - Communicate anything
  - Communicate with anyone
An AAC language system should…

- Be able to start where the child is now
  - Vocabulary
  - Sentence structure
  - Language Use (e.g., labeling, requesting, etc.)

- Grow easily over time
  - Limit amount of programming
  - Have a system already in place for vocabulary location
## Language: What to look for?

<table>
<thead>
<tr>
<th>How language is represented</th>
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<tbody>
<tr>
<td>◦ Can be represented by letters, single words, phrases, sentences.</td>
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<tr>
<td>◦ Should be primarily single words, some phrases and few common sentences.</td>
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<table>
<thead>
<tr>
<th>Which words are emphasized</th>
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<tbody>
<tr>
<td>◦ Primarily core vocabulary (verbs, descriptors, pronouns)</td>
</tr>
<tr>
<td>◦ Some fringe vocabulary (nouns, specific to your child)</td>
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</tbody>
</table>
A sample of 3-year old language

- The **project** I like doing is… I like making **snowstorms**.
- Um, we paint them and then we put **pretend snowflakes** on it.
- The whole thing falled off and almost got my **shirt**.
- **Can you** please get me another bite of that **apple**?
- **I think** that’s a big, huge one.
- **Is that good Mommy**?
- **Are you** full now?
Look at the differences:
Ability to grow language
Communication throughout activity
Use in more than one environment
AAC Device Access

- You can have the best language system in the world, but if your child can’t access it, it doesn’t matter.

- Work with therapists to determine how your child can quickly and efficiently access a device. This might be:
  - Using fingers (or toes!)
  - Using a switch (single or dual)
  - Using a joystick
  - Using head movement
  - Using eye movement
Other notes on access…

- Don’t try and push a form of access that is not comfortable for your child. Accessing an AAC device is not therapy, but should be an easy motor movement.
- If a child needs support to access a device, that is not independent communication. Work quickly to withdraw that support.
- Access points may change, so plan ahead as necessary (e.g., muscular dystrophies)
Necessities vs. “Niceties”

- **Necessities:** Language and Access
- **Niceties:**
  - MP3 capability
  - Importing digital photos
  - Relationship with computer
    - Internal computer?
    - External computer?
  - Environmental Controls
  - Visual Scenes
## Other factors in device selection

- **Device warranty**
  - Standard versus purchased?
  - Availability of loaner
- **Company tech support**
  - Online access to support
  - Phone support/ hours
- **Company consultants**
  - Device trainings
  - Implementation trainings
  - Troubleshooting in-person/ online/ phone
  - Educational background/ prior experience of consultants is important
Evaluation/ funding process

- Varies according to state and/or funding source.
- Primary funding sources for children:
  - **State Medicaid**
    - Generally funds 100%; child owns device
  - **Private Insurance**
    - Generally funds 50-80% (if funds at all); child owns device
  - **Schools**
    - Varies according to state/ district policy; generally, school owns device
  - **Other** (community organizations, state agencies, etc.)
General funding timeline

- Speech-Language Pathologist (SLP) completes AAC evaluation
- SLP, in conjunction with parents/teachers/other therapists, decides on desired device.
  - Trial of several devices may be appropriate
  - Consultation from device company may be helpful.
Funding timeline (continued)

- SLP writes extensive report, documenting need for device.
- Other items for funding packet include:
  - Doctor’s prescription
  - Letters of support from parents, teacher, etc.
  - Child demographic information
  - Copies of insurance cards
- Packet is submitted to funding source, or, where applicable, to device company and they will submit directly.
Funding timeline (continued)

- If funding is approved, family makes co-pay (where applicable) and device is shipped!
- If funding is denied, appeals process begins.
  - Appeals are often successful.
- For more funding information, visit:
  - http://funding.prentrom.com
  - http://www.aacfundinghelp.com
I have a device – what now?

- **Training/ therapy begins!**
  - Via SLP (varies)
  - Via device company (varies)
  
  - Online, real-time trainings (group)
  - Online, real-time trainings (personalized)
  - In-person trainings
  - Online, self-study, as-needed

- **Not just specific device training, but ideas for implementing it at home/ school, etc.**
Overview of PRC devices/services

- **Springboard Lite** – emergent communicator, recorded speech
- **Vantage Lite** – emergent to proficient communicator, computer and recorded speech
- **Vanguard** – emergent to proficient communicator, computer and recorded speech
- **Eco-14** – emergent to proficient communicator, full-functioning laptop computer as well as communication device.
Overview of PRC devices/ services

- All devices feature Unity, a “Language for Life”
  - Word-based
  - No pre-requisites required
  - Faster than spelling or page-based systems
- Unity Toolset makes learning language easy and fun!
  - Icon Tutor
  - Contextual Scenes
  - Vocabulary Builder
Overview of PRC devices/services

• Warranty:
  ◦ Standard 1 year, all-inclusive warranty
  ◦ Up to 5 year warranty available for purchase

• Tech support:
  ◦ Available 8 am – 7 pm EST weekdays
  ◦ Available weekends via remote technician (device user)
  ◦ Full web portal of service-related questions at http://support.prentrom.com
## Overview of PRC devices/ services

- **Regional Consultants**
  - All consultants have professional background providing AAC services in the field (e.g., SLPs, special educators, OTs)
  - Available to assist in selection of PRC products, specific device training, and implementation training (all FREE!)
  - Find your local consultant online at [www.prentrom.com](http://www.prentrom.com) or call 800-848-8008
Good AAC resources

- [www.aacinstitute.org](http://www.aacinstitute.org)
- [www.aacfundinghelp.org](http://www.aacfundinghelp.org)
- [www.aactechconnect.com](http://www.aactechconnect.com)
- [www.askaspeechtherapist.com](http://www.askaspeechtherapist.com)

Blogs:
- [www.schuylersmonsterblog.com](http://www.schuylersmonsterblog.com)

Message Boards/ Listservs
- [www.speakshare.com](http://www.speakshare.com)
- [www.aacinstitute.org](http://www.aacinstitute.org) (google group, click on “Parents Corner”)

More information a click away

- **General information**
  - 800-262-1984
  - info@prentrom.com
  - www.prentrom.com

- **Seminars/Consultants**
  - 800-848-8008
  - www.prentrom.com/training

- **Funding/Insurance Info**
  - 800-268-5224
  - funding@prentrom.com
  - http://funding.prentrom.com

- **Tech Support/Service**
  - 800-262-1990
  - service@prentrom.com
  - http://support.prentrom.com

- **Sales/Rentals**
  - 800-262-1933
  - sales@prentrom.com
  - http://store.prentrom.com
References