

Our AAC Panel

Facilitator: Carole Zangari

- Christopher Bugaj, Specialized Instructional Facilitator, Loudoun County Public Schools
- Vicki Clarke, SLP/CEO, Dynamic Therapy Associates, Inc.
- Caroline Musselwhite, Literacy & AAC Specialist
- Gail VanTatenhove, SLP/CEO, AACell, Inc.

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Learning Objectives

- Learning Objective #1: Identify 2 current issues and/or trends related to AAC implementation
- <u>Learning Objective #2</u>: Describe at least 3 AAC implementation challenges
- <u>Learning Objective #3</u>: Discuss at least 3 solution strategies to address AAC implementation challenges

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Responding to Implementation Challenges

- Chris
 - Transitions & Turnovers: Killers of Language Learning
 Progression
 - Keeping Up With The Training Demand
- Vicki
 - Addressing Opportunity Barriers to Participation
- Facilitator Attitude, Knowledge, & Skill Barriers



Responding to Implementation Challenges

- Caroline
 - Facilitating Generalization
 - Age-Respectful and Engaging Materials/Activities for Adolescents & Teens
- Gail
 - Providing Person-Specific AAC Design in an App/MAP • Happy World
 - The Aging of AAC Users with Intellectual/Developmental • Disabilities

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Speaker Disclosures

Chris co-hosts the Talking With Tech podcast which features discussions about AAC. He receives revenue from sponsors of the podcast & from courses at Xceptionaled.com

CISTIVE



Chris receives royalties for the sale of the book The New Assistive Tech: Make Learning Awesome For All! and other authored works.

You can see all of Chris's disclosures for ATIA (and any other endeavor) at http://bit.ly/cbdisclosures.











Let's list some reasons why? Go!

http://bit.ly/setturnover







Myth of Progress

- Measuring progress one year at a time.
- Given no other choice, students make gains on any AAC system but, in the end, that approach rarely results in students having learned how to say whatever they want to say, whenever they want to say it.

The Story of Three Different Boys



LAMP:WFL for three years, with three different teachers and three different SLPs. Transitioned to MS where Proloquo2go was implemented.



LAMP:WFL for three years, with three different teachers and three different SLPs. ES wanted to change the system. AT person talked them out of it. Transitioned to another ES with a teacher who attempts to embed core ALL DAY LONG.



LAMP:WFL for three years, with three different teachers and three different SLPs. Transitioned to MS where PECS was implemented.













Barriers (Binger and Kent-Walsh)

- Focusing on what is "wrong" with the partner instead of improving client behaviors.
- Trying to change too many partner behaviors at once.
- Trying to change too many client behaviors at once.
- Trying to change client and/or partner behaviors in too many settings or situations at once.
- Failing to link changes in partner behaviors with identifiable, measureable changes in the client.



Examples of techniques/skills

- Least to Most Prompting
- Read, Ask, Answer, Prompt
- Predictive Chart Writing
- Partner Assisted Scanning
- Song Boards
- Open Ended Questioning

What else?





M - Motivate
A - Accept Multiple Modalities
S - Statements>Questions
T - Time (Wait)
E - Engage Naturally
R - Response Not Required
Listen! http://bit.ly/twttable

MASTER PAL - Tabi Jones-Wohleber





Potential Solutions

- 1.Measure language growth over time using a shared protocol (not just annual goals).
- 1.Shared portfolio to collect evidence of progress (like a Team Drive in Google, for example)

Brown's 14

Use Brown's Grammatical Morphemes to target specific linguistic structures. Construct activities to focus on one particular type of morpheme (like *Irregular Past Tense Verbs*) and then, in the future, target the next morpheme based on the order of typical age of mastery (like *Possessives*).

Morpheme	Example	Approximate Age of Mastery (In Months)
Present Progressive -ing	Mommy driving	19-28
In	Ball in cup	27-30
On	Doggie on sofa	27-33
Regular plural -s	Kitties eat my ice cream.	27-33
Irregular past	Came, fell, broke, sat, went	25-46
Possessive's	Mommy's balloon broke.	26-40
Uncontractible copula (Verb to be as main verb)	He is. (Response to "Who is sick?")	28-46
Articles	I see a kitty.	28-46
Regular past -ed	Mommy pulled the wagon.	26-48
Regular third person -s	Kathy hits	28-50
Irregular third person	Does, has	28-50
Uncontractible auxiliary	He is.	29-48
Contractible copula	Man's big	29-49
Contractible auxiliary	Daddy's eating	30-50

1	1.0 - 2.0	12-26 mos
II	2.0 – 2.5	27-30 mos
ш	2.5 - 3.0	31-34 mos
IV	3.0 - 3.75	35-40 mos
v	3.75 - 4.5	41-46 mos
V+	4.5 +	47+ mos



			C Go	bals	Grid	2 (DAGG-2)
In the chart below		dual's Ability Lev	el for each skill i	icture" view.		
	Emergent	Emergent Transitional	Context- Dependent	Transitional Independent	Independent	Notes:
Understanding	())	(1)	(1)	(1)	(0)	
Expression	0		0)	0	0	
Social Interaction			-	**		
Literacy Skills	(1)	(1)	0	(1)	0	
Other			-			http://bit.ly/dagg2aad







2005 - ImPAACT Program developed by Kent-Walsh and McNaughton



The 8 Steps of the ImPAACT Program

- 1. Pretest and solicit the partner's commitment to learning the targeted strategy.
- 2. Describe the strategy (ex. RAAP RAAP RAAP).
- 3. Demonstrate use of the strategy.
- 4. Provide verbal practice of the strategy steps.
- 5. Practice implementing the strategy in controlled contexts (ex. role playing)
- 6. Practice implementing the strategy in natural contexts (ex. reading book with the children).
- 7. Complete posttest and solicit the partner's commitment to long-term
 - implementation of the strategy.
- 8. Demonstrate generalized use of the strategy.

Even More Solutions

7. Focus training on parents and family members. They don't leave as often as other educators.

- 8. Online modules
- Google Classroom
- XceptionalEd.com



And Even More Solutions 9. Build the school culture to get EVERYONE involved involved in using AAC. Make learning language using AAC a part of everything for every student! 3.16

What do these all have in common?









The best kept secret in education is...



What are some ways to build school culture? Go!

1. Project- based learning

And Then There Is This Solution...

10. Use Mass Feature Matching to move AAC from Tier 3 only tool to become a Tier 1 tool by adopting a Specific Language System First approach, and then customizing per individual from there.



Mass Feature Matching Examine the needs of most students and find tools and strategies to support everyone.





BUILD A CULTURE

Adopt a district-wide "SLS-First" approach using Mass

Feature Matching

- SLS = Specific Language System, e.g. Minspeak, ChatPower, LAMP:WFL, Proloquo2Go etc.
- Most students have same system.
- Easier for Aided Language Stimulation.
- Turnover & transition concerns are minimized.
- During interview ask about familiarity with the system.
- Training becomes easier & sharing materials becomes easier.
- Implement a Language Based Curriculum.
- ALL students benefit (not just users of AAC) Everyone becomes better readers



























Modeling Practices













Speaker Disclosure: Dr. Caroline Ramsey Musselwhite

- Caroline Musselwhite has worked with a number of companies providing free and paid consulting. This includes: Don Johnston, AbleNet, Attainment, TobiiDynavox, Prentke-Romich, and Panther Technology.
- I also have a company, <u>www.aacintervention.com</u> through which I provide workshops and classroom consulting, and sell books and software.
- I am not showing any of my products during this session.

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Complim	ents 1 - Tic To	ic Talk			
Great	Nice	Cool			
Pretty FREE		Like	ents 1 - Tic <u>Ta</u>	c Talk	
Excellent	Good	Great!	Cool!	Yeah!	
		Crazyl	FREE	Sorry!	
ATIA 2019		Oopsl	Fun.	Okay.	

Compli	ments 1 - Tic To	ic Talk	ments		
You look greatl	Nice	Cool			
You look pretty.	FREE	Great			
So prettyl	Like that!	Love t	That is so	This is funny.	I really like that!
			That is very bad.	FREE	So sorry.
ATIA 2	010		Oh no! That is bad.	Very funny!	I don't like that.





PRACTICE: Key Features

- Student gets to use words from rehearsal
- BUT, they aren't talking to a real person
- Reduces stress
- Goal = Growing motor automaticity while thinking about what to say

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MODEL: Key Features

• Real conversations, but in 'safe' settings (therapy, classroom, with Communication Circle, with family, etc.)

- Can include Role Play
- Partners should model their parts

• Goal = Growing motor automaticity while thinking about what to say and WHO to say it to



MODEL: Real Compliments

Around The Table Me: Leila, you look nice. I like your <u>scarf</u>.

Leila: Alexa, that is a pretty hat.

Alexa: Kennedy, your shirt is cool.

NOTE: After 2 – 3 models, target student gets EVERY OTHER TURN!!!

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GO! Key Features

- Real conversations, real world
- Facilitators should be mostly out of sight
- Partners should speak naturally to person who uses AAC
- Goal = Putting it all together, and with less familiar partners



	GO!	Data	Form		
Name Adina	Compliment I like your hat. It is cool.				
		(Names)	Questions Who do you like?	Interview Where do you go?	What do you do?
		Caroline	all of you	-X Camba	? hike
		Kennedy Adina	Kea Layla	pad Suim	play
ATIÁ	2019	Lean	Kea	part	slap bio





















STORY RETELLING		FarFaria
He puts on his top hat; he didn't see his shadow; spri come early.	ng will	Phil's Big Day
He takes a bow; he goes back in his little home		
We use our shadows to tell people when spring is cor	ning	
I don't see why not		
3/13/17 EADING	_	
	Horse	e Babies
EADING story retelling Compare horse & human babies	Horse	e Babies







Gail's Current Thinking on a couple of Best Practices in Implementing AAC Tools and Strategies

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Challenge 1: Providing Person-Specific AAC Design in an APP/MAP Happy World

Challenge 2: The Aging of AAC Users with Intellectual/Developmental Disabilities





App/MAP Pre-Stored Vocabulary Program Options

- APP APP lications available in mobile technology platforms and SGDs that use single meaning pictures organized across multiple pages (e.g., Proloquo2Go, Communicator, Picture Word Power, Touch Chat, etc.)
- MAP Minspeak Application Programs available in mobile technology and SGDs that use multiple-meaning icon sequences (e.g., Unity[®], LAMP[®] Words for Life, Core Scanner[®], Unidad[®])

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Why is this a concern for me in 2019?

- Customization is ESSENTIAL for highly complex people (access issues, vision issues, late language learners)
- Seeing VERY LITTLE customization of APPs or MAPs for most people (who really need it)
 - Don't know that it is permissible
 - Don't know how
 - Customization that is happening is
 - Minimal (a couple of words, gender/ethnicity for 1st person pronouns)
 - Not monitored by a system manager, resulting in nonrule driven changes that create chaos in the APP/MAP

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A History of Early SGDs

- Most SGDs of the past DID NOT come with pre-stored vocabulary programs (Exceptions: Handivoice 110, Handivoice 120)
- In mid 1980s, Prentke Romich Company introduced Minspeak
 Application Programs
 - Words Strategy[®]
 - Interaction, Education, and Play[®]
 - Power 'N Play[®]
- Purpose
 - To address the difficulty/expertise required to develop a well organized, custom designed AAC system
- Released to mixed reactions from the professional community

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"Customization Camp"

- Concerns
 - "You can't pre-select words for someone because you need to design systems that are as unique as the people using them."
 - "It takes a while to select the vocabulary, find appropriate pictures, create an organization plan, and program in all the words, but you get a system that's a match for the person."
- Best Practices of the Day
- Do a vocabulary inventory
- Select or draw pictures unique for the person
- Create a custom designed organizational system
- Program the vocabulary gradually as the person needs and learns it

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"Language Camp" Response

- "Yes, you can pre-select words for someone because
 - there is plenty of evidence about the most frequently used words used by speaking people."
 - providing those words in a well designed, pre-stored program provides the opportunity for more immediate intervention."
- Best Practices of the Day
 - Provide a robust set of pre-stored core vocabulary words
 - Provide pre-stored extended vocabulary for a range of noun categories
 - Create an architecture that supports easy personalization and customization
 - Focus on implementation instead of customization

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Strategy 1: Identify a System Manager Who....

Understands the issues (physical/visual/language) that are challenging in use of an APP/MAP

Has the ability and boldness to think "out of the box" when necessary

Defines the "rules" and architecture of the system in order to renovate the design without causing harm

Does all the initial system re-design

Does or oversees any on-going changes to the AAC system

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Case Example: JB

- 19 year old male with significant physical challenges, but good cognitive/receptive language
- Not successful accessing a SGD (history of multiple devices and access methods tried)
- Using a PODD book with Partner Assisted Scanning most communication is 1 word
- Exposed to Unity®60, but wants the language of Unity®144
- Recommendation: Go back to scanning, but with deep customizations, building on familiarity with Unity®60 and adding features to better accommodate scanning

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Strategy 2: Justify Solutions to Challenges

- More keys (144) means shorter icon sequences
 - Shorter icon sequences means less time spent scanning
- More keys (144) means more words in activity rows and on pages
 - More words means less navigations to deeper levels of rows and pages (with less time scanning)
- More keys (144) means no more need for combined icons
 - Cleans up the "semantic network" coded by each icon, simplifying the vocabulary coding
- Auditory scanning means less need to focus vision with motor movements (increasing accuracy with switch and language produced)

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If and When MAJOR changes are needed

- In an ideal world, do those changes before introducing the APP/MAP
- In the real world, (after you've already been working on a program and are invested in it)
 - collect data on why the changes are needed
 - get consensus from everyone to try the changes
 - bite the bullet and do it
 - document outcomes
 - make more changes (hopefully only minor) as needed

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JB's Reaction to the Major Change

- After 1 hour using it, resisted ANY suggestion to go back to his former access method (eye gaze) and vocabulary configuration (Unity®60)
- Pride in his demonstrate of his knowledge of the Unity[®] codes he knew (but couldn't access reliably before)
- Increased expressive language output by 3 fold (MLU-M of 1.38 to MLU-M of 4.92)
- Adamant about less communication partner supports (e.g., "mom" "quiet" "I can" "myself" "talk")
- Requested device mounts for ALL seating options
- Increased time in independent exploration and learning

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Strategy 3: Implement Simple Customizations

- Simple Customization = maintain the arrangement and architecture of the program, primarily adjusting vocabulary, symbols/icons, and auditory prompts
- Vocabulary
 - Add key people, places, and things (e.g., family names, favorite community places, favorite things)
- Symbols/Icons
 - Add the picture of the person/name of person
 - Adjust any pictures for gender/cultural background
 - Adjust color code (change, add more)
- Prompts
 - Customize auditory prompts, as needed

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Strategy 4: Do Deeper Customizations

- Icons/Symbols
 - More appropriate for CVI
 - Icon Arrangements
 - Move symbols around
 - Add blank spaces (checkerboard, etc.)
- Scanning: Access "Escapes" in each row
- Vocabulary Codes/Navigational Paths
 - Order of Icon Sequence for Closed Class Words (Unity)
 - Adding Words in a Page-Based System = maintain gaps for the addition of words to not mess up motor plans

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Adults using AAC systems have many of the same health issues as the rest of the aging population.

There are many health care disparities for aging adults with I/DD.

They are a vulnerable and underserved population.

AAC intervention plays a role in helping them deal with their aging and the aging of their parents.

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AAC Strategies

Advoca

CHANGES

AHEAD

Support health care advocacy

Program sentences into the device for talking with doctors

 Teach about and include vocabulary for all health issues and medications

Role play medical visits to practice talking with medical

Monitor changes in communication skills which may signal physical or health issues • RS – tracking RATE of communication and MLU-M to

monitor motor skill changes • KA – tracking ERRORS and AMOUNT of communication to track vision changes

All – tracking CONTENT to monitor depression, pain, etc.

Aging of *Parents* of a Person with I/DD

• There are almost 1 million families in which adults with I/DD are living with aging caregivers.





- Parents and their adult children with I/DD are growing older together in a mutually dependent relationship
 - Companionship

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- Share household chores
- Financially share household expenses
- Siblings/family are compound caregivers ("sandwichers")
 - Dual stress and exhaustion
 - Fewer financial resources
 - Competing demands for their time
 - Concerns about the next generation taking over if the sibling with I/DD survives them



A crisis may ... be at hand as aging caregivers, (whose adult children with intellectual disabilities and complex communication disorders live at home), can no longer care for them. According to The State of the States in Developmental Disabilities (2013), in 2011, 71.5 percent of people with these disabilities lived with family caregivers. Over the next few decades this group will flood the group home system (or go into nursing homes – GVT) as their parents age.

Carrie Kane, SLP at the Good Shepherd Rehabilitation Network in Allentown, Pennsylvania, "As Adults With Intellectual Disabilities Live Longer, They Need More AAC Support," ASHA Leader.

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Talking about Death & Managing Grief

http://www.intellectualdisability.info/mentalhealth/articles/managing-grief-better-people-with-intellectualdisabilities)

- Be open & honest about death and grieving
- Listen and be there for them (as they are for you)

The Power of Relationships

... Every time I come back from a trip to Wisconsin, I can count on Duncan asking me about my parents, particularly my dad. And Robin will ask about my mom. Faye is always offering prayer and spiritual support. And Jonah and his mom continually remind me to "take care of your parents and don't worry about us."

During 1:1 chat times, my adults with I/DDhave told me to take care of myself (e.g., Duncan told me to go home and sleep because I looked tired). They have used their AAC devices to pray for me and my family (e.g., Ken said God could hear him in his mind, but I needed to hear the words too, so he used his AAC device)......



https://gvantatenhove.wordpress.com

Talking about Death & Managing Grief <u>http://www.intellectualdisability.info/mental-</u> <u>health/articles/managing-grief-better-people-with-intellectual-</u> <u>disabilities</u>)

- Prepare them to participate in cultural rituals (e.g. funeral/memorial service)
- Respect photos and memories (e.g., add stories to notebooks in devices, record their stories via StoryCorps, etc.)
- Assist in searching behaviors (e.g., revisit childhood places, go to cemetery "place gone dirty")
- Support observance of anniversaries of family events

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Talking about Death & Managing Grief http://www.intellectualdisability.info/mental-health/articles/managing-grief-better-people-with-intellectual-disabilities) Upon the death of a parent/caregiver Minimize change (for at least 2 months) Placement – provide AAC services in new place Provision of services – find new funding for AAC services Avoid immediate assessment for future services

Seek specialists, as needed, for support services
 Grief counselor

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Upon the Death of a PWUAAC

- Do a final Memory Transfer of their AAC program
 - Take device back to Default if donating/selling it
- Do a final download of the last things they said (LAM in PRC devices)
 - Print and share with family (if desired)
- Assist family in dissolution of technology bits & pieces
 - Donation
 - Private sale

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