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An iPad for AAC? What You Need to Know

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- [Amy] Once again, welcome to our event today. The title of the event is An iPad for AAC: What you need to know. And our presenter today is Dr. Stephanie Meehan. She's

a clinical assistant professor at the University of Kansas. She currently leads a team of clinical practicum students on the promoting access and advocacy to communication and education or PACE team which serves clients in a local school district as well as in the university speech language hearing clinic. Stephanie also teaches the introduction to AAC class to SLP Masters students. Her primary professional interests include preservice education and training in the area of AAC and issues of diversity, equity and inclusion in the field of speech language pathology. So Stephanie, it's a real pleasure to have you back with us again today. Welcome and I will turn over the floor to you.

- [Stephanie] Thank you so much Amy and thank all of you for making some time out of your busy schedules to be with me today to talk a little bit about using the iPad and an application for an AAC device. As Amy said, I am Dr. Stephanie Meehan. I work at KU in the Speech Language Hearing department, and I am honored to lead a team clinical practicum students that serve clients across a lifespan from preschoolers up to people on their 30s. I serve clients with developmental disabilities, many of which have an AAC device. I wanted to briefly discuss today's topics. I'm gonna give a short introduction around iPads and AAC, we're gonna talk a bit about comprehensive assessments, some options for AAC on an iPad or other tablets, something called just in time programming, some resources I think that are necessary for successful implementation of the iPad, communication partner training and some various resources.

We have learner outcomes today or after this course participants will be able to list comprehensive and robust AAC applications and accessibility features available on the iPad, identify common communication partner behaviors and describe methods of training and describe 'just in time' programming. I think it's important to begin with some foundational beliefs that I hold when I consider AAC services for people who need it. And they include this here on the screen. Some of you might be familiar with some of these, they're related to some frequently dispelled AAC myths but first off

communication is a human right. I think we all deserve a way to communicate beyond our wants and needs but also our thoughts and feelings, we need ways to reject and protest and develop close relationships with those around us. There are definitely no prerequisites to accessing AAC, specifically hi-tech dynamic and robust AAC systems. Some of you might have heard things like kids and adults, they need to be able to attend et cetera et cetera but we're operating under the assumption that there are no prerequisites. We know that AAC does not hinder verbal communication in any way. If anything, the research suggests that it will help people become verbal communicators if they're meant to be, and it's also never too early or too late to begin AAC intervention. I think that some of us might think that someone is too young but I've seen people who use AAC around one, two years of age. And certainly it's never too late even if someone has developed other systems of communications throughout their life. We're all multimodal communicators so it's always helpful to add a method of communication even if someone is a proficient communicator in a different mode. And I wanna encourage you to start with what you have right now.

So if all you have access to is paper-based, no-tech AAC systems or a 32 overlay LEO or GoTalk 9, that's a good start while you prepare more comprehensive AAC system or for an assessment. So AAC and the iPad. I wanna make sure we're on the same page here. iPads are awesome. A lot of you probably own your own iPad, I definitely own my own iPad, I use it for a variety of different reasons. They're great because they're relatively inexpensive especially if you get a refurbished iPad or a used iPad, a few hundred dollars, maybe 1000 bucks and you're pretty well set up to access a lot of different things and be connected in a variety of different ways. They're also socially acceptable, both by our peers, our younger kid's peers, they're used in schools for almost everything. There are some schools in Kansas where I'm from and live that are essentially no paper schools. They do everything on a computer or a tablet. They're readily available in the sense that you could go out today and probably acquire one, maybe through a Best Buy or a Target, you can order them online in Apple Store and

they're also relatively portable. They fit in most bags, they're light, a typical iPad size is 10 inches corner to corner. But it's also important to remember what iPads aren't and that they're not AAC devices. The tablet itself isn't a device. What makes an iPad AAC accessible is the application that you choose. They're also not accessible to all in a variety of different ways meaning that not everyone can afford an iPad even though they are relatively inexpensive, a few hundred, 800, 900 bucks, it's still not gonna be accessible to everybody. And they're also not literally accessible to everyone. So up until recently iPads could only be accessed through direct selection and that obviously left out a whole population of folks that we serve. They're also not particularly durable. The cases have become much more durable over time.

So if you get the right case, an iPad could survive a toss across the room but also if that screen gets cracked, you pretty much would have to replace the screen and sometimes the whole iPad. So durability isn't they're strongest suit and they're absolutely not universally funded which is related to accessibility by a lot of insurance companies as of yet which hopefully will change. Before we even begin to talk about iPads as an AAC device we have to remind ourselves that as speech language pathologists it is in our scope of practice to complete a comprehensive AAC assessment that is essentially mandatory to deciding which AAC device is appropriate for somebody. I did say, start where you are with what you have right now and that is I stand by that but you also have to keep in mind that an assessment is necessary to compare different AAC systems to make sure you're choosing the right one through a method of feature matching.

I wanted to include some AAC assessment resources here. The ASHA Practice Portal for AAC is really excellent. If you haven't visited that website or explored the resources available there, I highly encourage you to do so. It lists the steps of assessment with various resources for each step. I find that very helpful. I've referred my students to that almost on a weekly basis. The second website PrAACticalAAC.com is a website

run by Carole Zangari and it's a blog that different people write in for that has tons of AAC resources around assessment and otherwise, video examples, materials, therapy ideas. I highly recommend that. The communication matrix is an assessment tool to easily understand communication status and measure progress that's freely available to everyone on the internet. It's available in English and Spanish and it's particularly useful for students who are non verbal or in the early stages of communication, and it's nice because you can fill it out yourself as a practitioner, you can have family members fill it out, teachers and you can send them the link and then the communication matrix will collate that information for you to give you a better more comprehensive picture of what kind of communicator your client is in different environments. And then it also has an online community which is always nice to bounce ideas off of other people, how they're using the matrix.

And then that fourth resource there is essentially the primary text for AAC. It's the textbook I use in my class, *Augmentative and Alternative Communication: Supporting Children and Adults with Complex Communication Needs* by Dave Beukelman and Pat Mirenda. And that's also a highly recommended resource. And then finally there the AAC Evaluation Genie is an informal diagnostic tool that includes 13 subtests in the areas of vision, vocabulary, co-vocabulary, picture description and word prediction. It's also available in English and Spanish and is available for under \$20 in the App Store or on iTunes that you can use on your iPad which gives you a lot of information that's important for an AAC assessment, and because it's used on an iPad you can get a sense for how good someone is at direct selecting and their range of motion on an iPad screen especially if you're thinking of an iPad for an AAC device.

What you're looking at here is a graph of the participation model for AAC which is found in the Beukelman, Mirenda text. And it's a little bit challenging to read, I believe, on your screen but this is easily found on the internet. But it essentially guides you through the assessment process and you can see that it's a circular process. So you

start here by identifying participation patterns and communication needs, you work your way down to identify a system and then you're constantly evaluating if that system is working for someone and starting the process over. Because as different things change in that person's life, both intrinsically and extrinsically, you might have to make adjustments to their system. What you'll see here are access barriers. And that's related to things that are intrinsic to the person.

So when we're thinking about doing an assessment, we wanna make sure we're assessing things in different profiles: motor, cognitive, linguistic profile, literacy and sensory and perceptual. And we're building a capability profile with a strength-based approach. So you're all professionals, speech language pathologists most likely and you know how to assess for language and literacy. Those things would necessarily be very different for someone that needs an AAC assessment. We're also thinking about cognition, motor skills, sensory, when I say sensory I mean things like hearing and vision, to develop a profile features that someone might need in an AAC assessment. Not gonna go too far into this because that's not what we're talking about today.

But I'm happy to talk to anyone about an assessment for AAC if you have further questions at a later time. Primarily, when we enter into an AAC assessment process we're thinking about feature matching. And if you're unfamiliar, feature matching is defined by Costello and Shane in 1994 as a process in which a person who uses AAC strengths and needs are evaluated and matched to specific features of AAC symbols, strategies and devices. And a primary way to make sure that feature matching is helpful is to be very familiar with what's available on the market currently.

And so feature matching provides this framework that we make our clinical decisions based on what we know about the person and what's available and not other outside influences. For an example, access is a very important feature that we need to consider when we're thinking about AAC assessments meaning that how is that person

going to make the device work. Are they gonna touch it, are they gonna use their eyes, are they gonna use the switch, head pointing, joystick? Whatever it might be, we need to know what's going on and traditionally iPads have only been accessible via direct selection. However, this is changing and those methods are getting better. You can use Bluetooth capability to use different switches. And the iPad or Apple is developing a lot of accessibility features for the iPad and other i devices including Apple Watches to use eye gaze capability. That's currently pretty limited but I'm hopeful that that will grow over time as the technology improves. When you develop your comprehensive AAC assessment you can certainly include iPad applications in the assessment process. However, no assumption should be made about what the outcome of the assessment should be.

So you might be very familiar with any given iPad application or even any AAC dedicated device. However, that shouldn't be the assumption that that person is going to use it at the end of the assessment. For example when I do an assessment, I'm very familiar with a specific device company. I usually try to introduce that specific device, second or third in my assessment to counterbalance any potential bias I might have, excitement or enthusiasm I might have for that specific system. To make sure you're providing a providing AAC assessment that can include iPad applications but you may not have access to a variety of different devices or even iPad apps. Definitely reach out to your device and application manufacturers to see if you can get the device for an assessment period or a free copy of an application for assessment purposes. A lot of companies will give speech language pathologists with their Cs some apps for free which is awesome. We have to keep in mind though that iPads are not always fundable.

So while it's great to include them in an assessment, especially because not all insurance companies fund devices at all, we would love to know if an iPad is an option so we don't have to bring that person in for a second assessment. Assessments

should include three separate dedicated devices. And I'm sure you're familiar but dedicated devices refer to devices, AAC systems that sole purpose and use is for communication. So that's why an iPad is not considered a dedicated device. It's because I can use my iPad for a variety of different things, getting on the internet, playing games, watching Netflix but also using my iPad application for communication. I think this will change over time but until now, as of right now, iPads are not always fundable. So you wanna add the iPad applications onto your assessment that includes three separate dedicated devices.

I wanna spend some time going over some of the primary AAC applications for the iPad as it stands. I'm gonna briefly run through this list. I'm gonna share some features of each app, the price of each one and just so you're more familiar with some of the iPad applications on the market right now. So the first one is the Language Acquisition through Motor Planning Words for Life application through the Prentke Romich company. This app is based on Unity. It's available in Spanish and English. It's primarily based on a core word platform and the concept of motor planning. And motor planning is the idea that each vocabulary word exists through a unique motor plan just like our mouth articulates individual speech sounds. So each navigation pattern will be unique to each specific word. Each word in LAMP Words for Life can be found with three or fewer hits.

You can back it up using iSharePRC. So you can back it up to the cloud. So in case something happens to it. It costs \$300 and comes with no company support meaning that if you can't reach out to the regional reps for support in your classroom or calling the company to help troubleshoot the app. PRC does offer something called PRiO which is a fundable tablet that comes with a ChatWrap case. That's considered a dedicated device and is switch accessible. And it's about \$4000 and you can fund that which is awesome. It's significantly cheaper than a dedicated accent device like that company offers even though you can also get LAMP Words for Life on the Accent

series devices. So you can buy that app alone through the iTunes Store or do the PRiO which is a fundable tablet which is awesome. The second one I'm gonna talk about is TouchChat. And they have a few different versions, a lite version that doesn't speak at all so it'd be considered a low-tech version. They also have the full version of TouchChat that comes in English, Spanish, Hebrew, Arabic and Canadian, French as well as TouchChat with WordPower which is a text-base only system. It's a grid system that use symbol sticks. It does have a head pointing setting. It's \$150 and you can purchase additional support plans.

And you use the chat editor to create page sets and then transfer them via the cloud so you don't have to take the device from someone to make individual customizations. And then the TouchChat Express is available on an iPad with the ChatWrap and you do get services from the company. The third one we're gonna talk about is the Grid through a Smartbox. You can get that through a monthly service fee for \$10 a month or pay \$350 to single time. It's available for a variety of ages and conditions and literacy levels. This one's nice because it comes in 15 different languages and you can also do that remote editing. I love devices and iPad applications that you can edit from afar because we never want to take someone's advice if we don't have to. And then with the Grid Smartbox there are core words and activity-specific vocabulary.

A lot of the apps are similar in the sense that they do offer core vocabulary and activity-specific vocabulary. Most of the differences come in the layout of the system, the symbols that the system uses and the color coding and then different functional features like how you edit pages and things like that. The fourth one is Snap Scene by TobiiDynavox right there. This is \$50. It's scene-based communication which we'll talk about more briefly later. You can upload different photos for the symbols and you create hotspots using a familiar voice, so you record your own voice over the hotspots and there's essentially no navigation burden which is helpful for especially younger users. And we'll talk about how to implement that more later. And the Snap and Core

First also by TobiiDynavox is nice because you get the Snap Scene like I just mentioned but also core first pages. It's \$50 for the app, it's 15 languages, has a core word framework with a variety of page sets which are specific to activity or topic, quick phrases, behavior supports, there's just word lists and a keyboard available and there are 12 grid sizes available in the Snap and Core First. Speak for Yourself is an interesting application for the iPad. It was created by speech language pathologists. The home screen is 119 core words. I find that the symbols used on Speak for Yourself as really transparent.

So when sort of see, when you look at that picture you can make a lot of guesses about what the word is gonna represent or mean as opposed to the symbols on LAMP Words for Life that people would call maybe more opaque and less iconic. So this one and some of the others might be more intuitive right away. Some of the features that are specific to Speak for Yourself that I think are really helpful, you can open and close the buttons. Other devices have similar or other applications have similar features. So if you have a new user who's learning something for the first time you might hide some of the vocabulary and open it when they're exploring the device on their own it you wanted to focus on a specific set of words during your specific therapy time. This is also based on motor planning. It has upwards of 13000 words. Everything is completely customizable from the text to the images. A neat feature for Speak for

Yourself is the bubble feature which is for exploration. If you set the Speak for Yourself app into bubble you would be able to access all the vocabulary words by pressing any other of the vocabulary words. And then you can see lots of words by pressing unrelated words which is good for kids as their first learning to use the device because they might see something that interests them, press that word, learn that motor plan, learn what that word sounds like. You can also lock in edit mode. And there's also no duplication features. So if you go to add a word that already exists, a message window will pop up and it will remind you that that word is already in there because Speak for

Yourself is modeled after that motor plan like LAMP Words for Life is, they're gonna encourage you not to duplicate words so each word has its specific motor plan. Another cool feature Speak for Yourself is Hold That Thought which means someone can program a message, save it for later and then share it with you or a family members. That would be a cool intervention activity. And then you can change the symbols. The next one we're gonna talk about it Proloquo2Go which many of you are likely familiar with. Proloquo2Go is sort of iconic as far as an iPad application goes. It's available in four different languages, English, Spanish, French and Dutch. It's \$250, it's based on a Crescendo Core Word vocabulary which is part of the Project Core which I'll talk about in a couple apps. And then it also has a neat feature, progressive language.

So it starts with a limited view. Maybe just a few words and then you can gradually open it up as that person becomes more proficient. It operates with a motor plan but also has folder organization. So you will find words in multiple places on Proloquo2Go. Additionally, the symbols are very transparent and iconic. CoughDrop is kind of interesting too because it's open source. So that means the code is available to anyone to help improve it. It also works a little bit like Boardmaker Online in the fact that people can upload boards, communication screens essentially, grids, to the site that you can download for your user also. I'm seeing a question here that says what is meant by iconic.

And when I use that word iconic, I mean that the icon or the picture used for the symbol. So for example eat might be represented by a food that you eat or play by a toy or a boardmaker symbol that has the action represented for the action. So when I use that word, that's what I mean. So sorry. And the CoughDrop is also Android friendly which is cool. And they offer a free two month trial which is awesome for those assessment periods. Sometimes we can identify a good system for someone and a three, four-hour assessment period or that persons endurance or attention span might

not lend itself to link the assessment. So having things available that are free or low cost for longer term trials can really help us identify the best system for somebody especially when we're talking about iPad applications. After that two-month trial you can either choose to pay six dollars a month or 200 flat fee for the life of the application or however long you need it. So Project Core refers to a lot of things. It's something developed out of UNC Chapel Hill with Karen Erickson and Penelope Hatch. And Project Core is awesome because they have developed a core vocabulary based on commonly read text in school.

So this is a very academic set of core words. And that website is full of resources that I highly encourage you to check out. Just google Project Core and it will pop right up. It has also professional developed modules. But Project Core has developed this universal core that they consider to be widely accessible in use so it may not necessarily be the core like we see in other devices which are based on the 300 to 500 most frequently used words but you can download a core key for your own personal use but you can also find this universal core in a variety of different other applications some by Clicker Communication, the TobiiDynavox, PRC, Speak for Yourself, Smartbox, CoughDrop and Proloquo2Go, all can utilize a universal core key user area which is awesome. So I highly recommend checking that out. And then the final one I'm gonna talk about today is AACorn or AAC Corn and that's \$70. And this uses a lot of predictive text but with pictures.

So when a child or an adult identifies their selection or their word, it will automatically bring up the most likely option and the app starts to learn patterns. So the most likely option will become personalized over time. So it's based on word associations and the nice thing about AACorn is there's no internet required. So all of that is available within app and there's also live chat in the app for support which is really nice. I think that regardless of the AAC system that we choose for our clients and our families, the kind of support that the app has is really critical to consider when you're making

recommendations because not everything is intuitive as even we think it might be and that's why involving the family in this decision is really really important. I'm seeing another question that I might answer right now which is do you have to have special training to evaluate for AAC? And that's a tricky question to answer because AAC assessments are within our scope of practice. So technically all speech language pathologists have the capacity to do AAC assessments.

However, if you received your training maybe prior to the last 50 years, which the majority of working speech language pathologists are over the age of 35 meaning that they likely did not receive comprehensive AAC instruction in their masters programs. You may not feel capable today to do so. But there are a lot of resources to empower you. I encourage all of you to learn, take different CEs, use that ASHA practice portal to develop the skill sets you need to do AAC assessments because there are a lot of people out there that need AAC devices that don't have them because speech language pathologists either don't feel confident or comfortable providing AAC assessments even though you have all the training and especially the foundational work around language and language learning that you need to do an AAC assessment.

So several times I mentioned this word core vocabulary. And I just wanted to touch on it briefly because it's a buzz word, I wouldn't call it new. But essentially when I use that term, core vocabulary, what I'm saying is that 80% of the language that we use is really made up of a very small list of words which is about 300 to 500 words. So that means that we're using words like and, of, the, over, under, on, way more than we're using words like Tyrannosaurus rex, chocolate chip cookie, velvet, volcano. So all the words in that second list are what we would consider fringe words and all of those words are much more personal and individualized based on the lives that we lead or the context that we exist in. And it's really important to keep in mind that core words offer us a little bit more bank for our buck but fringe words offer that interest, individuality and sort of excitement around language. So we all need both in our AAC systems to be successful

but systems and applications based on core vocabulary are going to be more widely used and more easily generalized across environments. So it's really both but core vocabulary is really important. So I wanted to talk about just in time programming. So this is also relatively new. I know some of you may have heard this. Janice has been presenting on this and there are a few papers out there to explore on your own time, but just in time programming is a concept that has been researched by Janice Light and her colleagues at Penn State.

And what it does is it enables communication partners, family members, professionals to program timely relevant vocabulary to whatever is occurring right now. And just in time programming takes advantage of visual scene displays which are scenes of natural life, things happening in that person's life right now or in the past and then it capitalizes on what's called hotspot technology. The nice things about just in time programming is that it significantly reduces operational demands meaning that you only need to know how to take a picture with an iPad and then create the hotspot within the application.

So one that I mentioned earlier was Snap Scene by TobiiDynavox and that's really nice. It's really easy to use, it comes also with a Snap and Core First where you just snap a picture of whatever's going on, you use a little highlight tool to circle something on the picture, and I'll show you an example in a second and then you program that hotspot to act as a button. So you would label it or have it say something relevant to the picture. It's really flexible. The research around just in time programming has found that it can increase turn taking and also families find it very easy to use. If we know nothing else about AAC, it's that we know that if it's not used, it's not going to work. So we want things that families find easy to use. Visual scene displays are typically recommended for very early communicators. So our toddlers, our young kids that exist very much in the moment. And then also our adults that might have a seizure people who've had strokes or traumatic brain injury. Visual scenes are very helpful for them

also. Janice Light operates under the assumption that we should transition students from visual scenes into literacy learning as soon as possible and grid based displays aren't always very supportive of literacy goals. So in some of her work she talks about transitioning right out of visual scenes into word reading which is interesting and you should read more about that too.

A couple of downsides that I see to just in time programming is that it can be impermanent. If you wanted to talk about something that happened yesterday or the day before it might be harder to navigate to that specific visual scene or may not make a lot of sense because you're not going to be creating hotspots for those core words. But certainly the pros might be nice especially if you're just starting out or working with someone that's very very young. This is just a freely available Google image. And I just wanted to show you this is an example of a visual scene. So we wanna make sure that the visual scene has something happening in the picture. Usually for the most part, visual scenes are of people. The just in time programming capitalizes on visual scenes about things in that person's environment.

Other visual scenes might be more general. But if this was your visual scene, you would create a hotspot. So maybe you would create a hotspot around this little dog here and then you would circle it, make it a button, record the word dog or puppy or maybe the name of that child's dog right there. Maybe you're at a picnic and this is happening so you just snap a quick picture and maybe this is uncle Bayern and this is your friend Joe and this is Alicia and this girl here is name Christa or something like that.

And so you would program that here. This is a drink, here's a tree. So you can talk about your environment immediately which is really beneficial. You can also use visual scenes to take pictures of play environments. So if you're in an early intervention session and you have some toys available, you might snap a quick picture of the toys

and create quick hotspots for toys the child is then interested in playing with. So it's very responsive, it's very immediate and that sort of immediate gratification that I'm seeing the picture versus what I'm looking at in my environment can be very enforcing especially for young children. So now that we've covered some things about the iPad like specific applications you might use, I wanna talk about using the iPad for AAC in general. Let's see. So most of you are probably familiar with Guided Access. And Guided Access essentially makes the iPad a dedicated device. So you can use a passcode to make sure the child or adult can only access the application for communication.

And I think that's important regardless of what you're doing with the iPad. But, especially if you are using an iPad for dual purpose. So if that child's iPad is both their communication device and a toy or something for leisure, you're definitely gonna wanna use Guided Access. Guided Access can also help kids stay focused in the classroom on using the iPad for communication application. This is also nice even if you have this iPad for communication purposes only because children are so used to using tablets and iPads. They might want to use the communication iPad for other more fun things and so having it locked into the application can be really helpful. If possible, it's nice to have an iPad for communication only to reduce confusion.

And if you're using the iPad for leisure or school work or something else, a lot of those things you also talk while you're doing them or at least you might be able to do input for vocabulary learning while those things are happening. So it'd be nice to have two iPads. I know that's a luxury that not everyone can afford but that's certainly something I recommend if possible. They make various mounts for iPads which is nice especially if your client is someone that uses a wheelchair or might be more stationary or needs something to be more stable. They have a variety of different cases. Some cases are better than others. You have to be a little careful with the case because sometimes the case can include the speaker which makes the volume on the iPad too quiet for noisy

environments like classrooms. So it's important to consider that when you're considering your cases. They also have harnesses for iPads especially for our little ones who might be running around. We wanna make sure that our communication systems are available to our clients as often as possible and so having a harness especially if your an iPad maniac something super light might be super helpful for that child to be able to run and play and jump but also to communicate with their friends, their family members and their care givers.

There is a variety of switches available. The Blue to Bluetooth Switch is highly used by AbleNet Inc., I have a link there if wanna check that out. And then there are also sales for these iPad apps. Frequently in October during AAC awareness month, the manufacturers significantly reduce the price of their applications, Autism Awareness Month in April and then Better Speech and Hearing Month in May. At times the apps can be up to 50% off. So if you are completing an AAC evaluation and you do decide that an iPad application is the best fit for somebody and you can time it right, you can save that family a lot of money. This is also a good time if the family wants to purchase the second copy of the application.

So if there are two iPads in the family or tablets in the family and they want one for their own use for good modeling, some kids and adults are really possessive of their devices and it can be hard to use good modeling strategies with them. This is another good use of this time. So the next few slides are essentially purely instructional, how to get these things set up on your iPad. The first one is Guided Access and that's just a way to lock someone into any app of any kind. So it could be the communication app, it could be anything that you don't want someone getting out of.

So this doesn't have to necessarily have to be used with an iPad communication application. This can be used with any sort of iPad application. So it can be used quite a bit. And you all can read but you just use the General and go into the Accessibility

category on your iPad in the Settings. And this can be used on iPhones and iPads. And then once it's on in the Settings, you can just triple click the home button to get in and out of Guided Access and that's when it will prompt you for that passcode. So you can turn it on and turn it off by triple clicking the home button. Another accessibility feature of the iOS for all i devices is Speak Screen.

So that will help you have the device read out loud. And this is maybe more for people who are using their iPad for other things than just the iPad applications for communication but you can have this screen read aloud for people which is nice. And then you can also adjust the contrast for any iPad application and even the screen in general by going into Display Accommodations. That's nice for people that might have cortical visual impairment or that visual sensory issues that might benefit from a black screen with high contrast text and images. Switch Control. So you can use a Bluetooth switch by making sure your Bluetooth accessibility is on. And then you can also use the screen as a switch which is really interesting too.

So if you access to Bluetooth switch, this is how you would do it and then you can also use the screen as a switch for different purposes as well. That would not be applicable to iPad applications for communication, only the Bluetooth switch. And Assistive Touch is interesting because as you likely know, when you use your iPhone or iPad, you can swipe up, swipe to the right, left, a five finger swipe will close application, things like that. You can use Assistive Touch changes to change the gesture.

So if someone can swipe to the right and that's the only gesture they can make, you can adjust your iPad screen to do that or you can use other methods of controlling the device. So this is really interesting and helpful to know if someone can necessarily get five fingers to close apps and you wanna adjust the gesture to find all gross motor needs of that individual person. Excuse me. There is no AAC system, iPad application or otherwise that is going to be successful without strong communication partners.

And I love this quote because it illustrates how significant communication partner in AAC intervention is when it comes to the success of someone who uses an AAC device. Because I often find that people will tell me that the child or adult doesn't use their AAC device or they don't like it or they prefer to use their ineffective speech or another way of getting their needs met. And my first question is to always ask that person to describe to me the teaching that's gone on.

So Jane Korsten has this quote that the average 18 month old has been exposed to 4380 hours of oral language at a rate of eight hours per day from birth. A child who has a communication system and receives speech/language therapy two times a week for 20 to 30 minutes will reach the same amount of language exposure in 84 years. So as speech language professionals like you all are, you are providing great therapy in the time allotted to you based on your likely very busy schedule but unfortunately that child or adult is gonna spend a lot of time not with you. So it's important that our communication partners are trained well so they can expose that child to the same good language as kids who don't use AAC systems are. The problem is that traditionally our communication partners aren't that great at being communication partners.

So we know that they control the conversation, they ask too many questions. When they're asking those questions, they're often yes, no, they take too many turns. So they're taking over half of the communication turns. They often interrupt people who use AAC devices, they speak in age disrespectful tone, they use too slow or fast of a rate and their pitch might also be age disrespectful. They'll speak about the person who uses AAC in front of them or speak to the care giver instead of the person who uses AAC. And these are all problems because when we enter into interactions with people who use AAC systems with these thoughts about that person that they're not able to communicate or we have low expectations or speaking to someone else instead of to them, these low expectations turn into limited opportunities for

communication or language development which then reinforce the stereotypes or low expectations that communication partners have of them. So it's very circular and essentially allows for little to no progress on behalf of that person with the AAC device or complex communication need. So I wanted to briefly talk about some communication training and tips that I have. I'm gonna talk about the ImPAACT program that was developed by Kent-Walsh and Binger and McNaughton, SMORRES method by Senner and Baud and the importance of modeling the AAC application with the person and essentially using what I like to call the good ratio of comments to questions.

So every question you ask, you should make for different comments and making sure that we're giving that person a lot of wait time. So the ImPAACT method by Kent-Walsh, Binger and McNaughton is an eight-stage teaching structure. So this can be used to teach communication partners any strategy. And when I say strategy, that could mean something as simple as using aided input or modeling the language with the communication user or providing them a full strategy like RAAP, read, ask, answer, prompt or something that you might come up with. It's nice because this is completely flexible for whatever the communication partner needs to work on. So this is particularly useful for peer educators or speech language pathology assistants but also has been successfully used with families to teach them how to better communicate with their children.

So you can see here that the eight steps are pretest and commitment, strategy description, demonstration, verbal practice, controlled practice, advanced practice, a posttest and a verbal commitment to the long-term use and then assessing the generalization of the targeted strategy. And this is nice because it gives you an eight-step method of how to teach someone a strategy. And this can be done in as short as a couple of weeks. These first few steps can be done in an hour. And then if you're teaching them like once a week for a couple weeks making sure they're getting

it, giving them feedback in the moment then circling back to see if they're able to do that on their own and then assessing them in a different environment. This is a really nice way that's evidence based to make sure people are learning and then you're not moving to the next step until they have mastered the step before it. So if someone is unable to verbally describe to me the steps of the strategy here, I'm not going to ask them to practice in role play or with me or with the child with me watching until I know that they know this step or strategy. Similarly, I wouldn't have them move out of role play with me observing in a controlled environment to the classroom or home until they're successful here.

The SMORRES by Senner and Baud developed in 2016 is an example of a strategy that you could use within ImPAACT method to teach good communication partner skills. So the SMORRES is the mnemonic right here. Mnemonics are helpful because they're easy to remember. So like I said before, RAAP, read, ask, answer prompt. So that could be used with AAC users and they share a storybook context and this can be used to talk about aided input and just good general practice for working with people who use AAC. So the first is to speak so that you just say something out loud then you model whatever you said on the AAC device, that's the aided input part then you're waiting to see what happens.

So you're respecting and reflecting on what happens on behalf of the child or adult. Then you might repeat what you said in a different way. You will expand on it and then you'll provide that wait time. So not all these steps will be used in order every single time 'cause it's gonna be based on what happens in the respect and reflect step. But this is just an example of a strategy with a mnemonic that can be used within this ImPAACT teaching framework. So I would teach SMORRES in the strategy description. So describe SMORRES and what I hoped will happen then I'll show them what it looks like to use SMORRES and I'll explain each step. I'll have them practice telling me what each letter in the SMORRES mnemonic stands for and what should happen in each

step. And then we move through the impact steps. And that concludes my presentation. I see some questions there. I'm happy to answer them or go over anything that was unclear throughout my slides. Thank you so much.

- [Amy] Thank you Stephanie. I'm clicking through some of these questions. So I'm gonna do a couple of quickies right at the beginning here and then do a little more detailed ones. Someone was asking if you mentioned the price for Speak for Yourself. She thinks she might have missed it if you mentioned it.

- [Stephanie] Let me look quickly back at my notes here. I believe Speak for Yourself is around \$350 or \$300, yes, it's \$300. So it's on par with some of the other major apps.

- [Amy] Got it. And then Rebecca just made a comment that AAC Evaluation Genie just happens to be on sale right now for 5.99.

- [Stephanie] I love that.

- [Amy] Speaking of sales, there you go.

- [Stephanie] Absolutely, I use that all the time. I highly recommend it.

- [Amy] There is a question from somebody else. It was when you were talking about the visual scene displays and hotspot technology. Did you mention a specific app that works especially well for that or...

- [Stephanie] I did, yes. There are several different apps. The app that I happened to mention is Snap Scene by TobiiDynavox but there are several on the market that are also easily used. I believe the research that Janice Light and colleagues have done

mentioned other apps. Some are very cheap and inexpensive but I mentioned Snap Scene. That works well with that.

- [Amy] Great, thank you. There's sort of comment/question here from someone who said she has heard that there was legislation that at least required Medicaid to unlock devices for a fee, which is interesting because in a way, it makes the insurance companies' argument invalid, I guess, about having a non-dedicated device. Do you know anything about that?

- [Stephanie] I can't speak to specific legislation currently. However, if a device is funded through insurance, so a dedicated device you then can unlock the device for a nominal one time fee, I think it's somewhere between 50 and \$80 depending on the device company. So if you, let's say you bought a TobiiDynavox i-15 or a PRC Accent 1000 with regardless of what language the system you use, it would come locked or dedicated but then you can unlock it and you could use the full capability of the device which does include internet browsing, email and then it becomes more fully functional for someone that might need those capabilities. So I think it's a little ironic also but that's where we are.

- [Amy] Indeed, that's how things work sometimes. So we have a couple of questions about remote programming. Someone is asking where can I get more information about how to remotely program TouchChat devices and also can you remotely program the Unity devices and how can I learn to do that so that I don't have to basically take the device away from somebody, to take it away and program it.

- [Stephanie] That's a good question. So the TouchChat information around remote programming is available on their website. So you could just go to the TouchChat website to find out more information about how to that has very clear instructions. As far as you might be able to remotely program the Unity software through that iShare

PRC that is new to me to back that up on the, 'cause before you could just back it up on any sort of back up system. This is now specific to them. I have not explored if that's available yet for the PRC specific applications.

- [Amy] Great, thank you. Someone else has a question here and it says in order to model language for my young minimally verbal students I would like to program my own iPad with core words and fringe vocabulary specific to the various play activities we're doing such as Kitchen Play or the Magnetic Farm or whatever. Is this doable, is it a good idea? What app might you recommend to do something like that?

- [Stephanie] Sure, absolutely. I do think it's helpful especially for vocabulary learning to be able to model specific vocabulary during play context. So like you're saying farm. So you want all the animal names available to you which would be considered because they are known as fringe vocabulary. Every iPad application that I mentioned would have that capability probably preprogramed. You'd be pretty surprised with how comprehensive most of the apps come 'cause I only talked about comprehensive applications. There are less, maybe hi-tech or comprehensive apps available that would require you to do a lot more programming. So anything I mentioned is going to have all of those words available to you. I would certainly, especially if you are the kids that you are serving have iPad apps already, I would match that with them. So whatever app they're using, I would use that app too. If you're just starting to introduce them to things that just in time Snap Scene would be maybe a good start depending on how young they are. But yes, certainly we wanna be modeling as much vocabulary as possible. It's just that core gives us a little more bank for our buck.

- [Amy] All right, thank you. Somebody else has a comment about twice she has run into the situation where a student's iPad communication device was misutilized at home. For example, the parent or the siblings decided to use it, play around with it for their own personal needs and the student ended up with not as much access to it as

they should have, do you have any recommendations about how to address that type of situation?

- [Stephanie] That is really challenging for a variety of reasons. One, it's frustrating for us because we want our students to have access to their device all the time. The other side of that is family dynamics are often very complicated and it's hard for us to really understand what's going on in the home. So to approach that with as much empathy and compassion and sort of dignity towards the family is possible. I think just frequent communication and involving the family in the process as much as possible. Now, this is not always gonna work. We cannot reach everyone in the way that we hope to, that's sort of an impossible ask on our end even as much heartache as it causes. However, I think frequently touching base reminding them the importance of having this, having access to the device as much as possible and maybe encouraging the parents and siblings to use the device with their child or sibling in different ways. So maybe sending home different games or interesting things for them to do to show the utility and the importance of them as communication partners. But I do certainly sympathize with that struggle, that's very difficult.

- [Amy] I'm gonna try to get through two or three more questions here. However, I wanted to let the participants and the audience know that if you need to go you will certainly get credit for having been here for the full time. So if you need to log out, go ahead, but if you wanna stick around for a couple of more Q&As, please do. Here's a question about what advice would you give if you were in a school setting where the students aides may change a lot. And just expressing some of the frustrations with training in limited amount of time with aides who are then turning over quite a bit in the recommendations there.

- [Stephanie] Yeah, oh my gosh. And that is such a frequent problem. I think that involving and empowering the classroom teacher as much as possible and making

sure that that person knows that they are actually the one responsible for educating the child and also equally responsible for supporting the device will help you because then the teacher can help support the aides even though they change. And Project Core is specifically targeted towards classroom teachers. So they have some professional developed modules that might be specifically helpful for that case. But certainly using something structured like the impact program, teaching them a specific strategy that's relatively quickly to uptake like RAAP, giving them specific times to use the device so you're not constantly having to retrain them from start to finish might be an easier way for you to save your time also. And then train the trainers. So train the teacher how to train the parents or the aides and also the parents. So sort of spreading your wealth of knowledge between as many people as possible will hopefully ease some of that burden.

- [Amy] Here's a comment from Meredith who says I'm currently in an AAC and AT certification program through California because the laws there have begun to change regarding which SLPs can do AAC assessments and evaluations. And she's wondering if you have heard anything about any moves on ASHA's part to make a similar switch like to require special certification or something for SLPs working with AAC.

- [Stephanie] So right now ASHA is working on developing an AAC specialty certification like it similarly has for child language and fluency. That's still in the development stages. I can't speak for sure about what will happen once that's done. So maybe once insurance companies get, and state associations and state governments get wind of this possibility that people might be more especially certified than others, that might change things. However, right now, all SLPs are capable of providing AAC assessment services and certainly can receive the education if they don't feel educated at the moment. But that AAC specialty certification is coming. So keep an eye out for that.

- [Amy] Yeah, I do. I was actually just looking at the ASHA's site and I see it listed here as something. And I know that they're in stage two of approval and there are several stages to actually finalizing and implementing these specialty certification boards but they're pretty far along in the process it looks like. All right, let's try one more question here. Let's see. Do you have any recommendations about doing teletherapy telepractice for AAC treatment when an iPad is being used because of the lack of compatibility there with computers. I know there are some mirroring type programs and I'm wondering if those would be helpful at all.

- [Stephanie] Yeah, absolutely. If you do have access to ELMO equipment where you switch your screen to show you activating the buttons because when I'm thinking about that you might be directly speaking to the person who's using the device but you also might be speaking to the care giver or the family member or other professionals. So showing the navigation pattern would be helpful either way. Also, some of the apps like for example the LAMP Words for Life can be accessed through, especially if you have a PC and not a Mac computer, you can download the new voice software to your computer and then through screen sharing you could show navigation patterns. That might be possible with other applications. I'm just not familiar with that but anything that can show your screen and your navigation pattern would be most appropriate. Maybe videoing yourself do it ahead of time and then playing the videos at specific times. That might also work although that sounds like a lot of work for you.

- [Amy] Well, I think we probably better wrap it up for today. I know there's a couple of questions we don't have time to get to but I have put Stephanie's email address up on the screen. If you have questions that we didn't get to or if you come up with some afterwards, she said that she's fine with you emailing. Thanks to everybody for being here today. Lots of interesting and thoughtful questions. Thanks so much Stephanie, it's always fun. Everybody always likes hearing about iPads, I think, and about AAC and the promise of this usage. I will go ahead and wrap up the classroom here. I hope

everybody has a good afternoon and that we'll see you in another webinar before too long. Bye everybody.

- [Stephanie] Great, thank you so much.