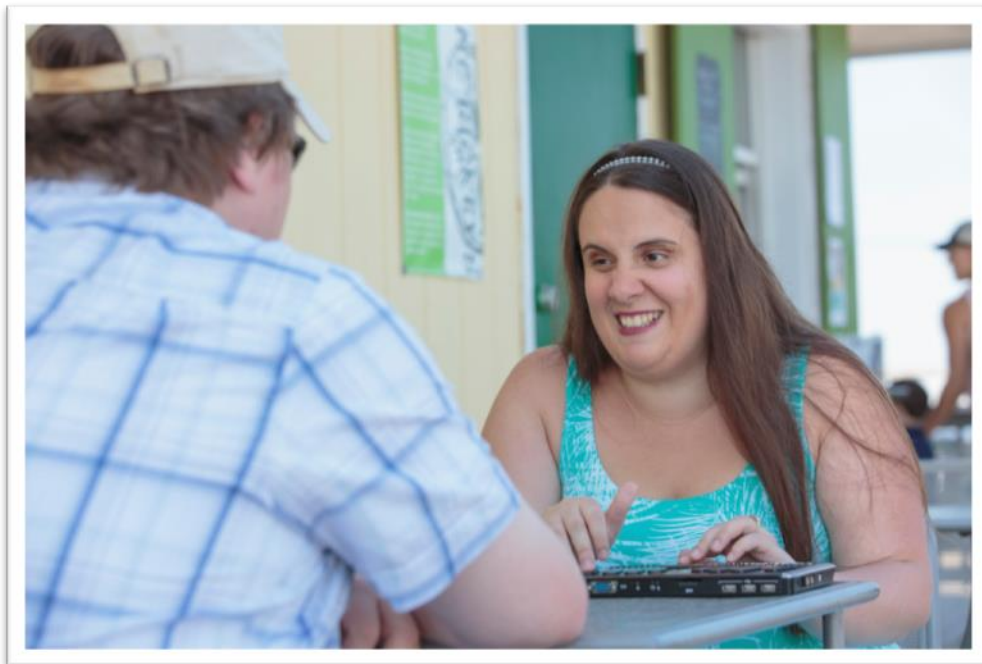


New Mexico Department of Health
Developmental Disabilities Supports Division

Participatory Communication and Choice-Making



***HANDOUT PACKET
OCTOBER 2019***

Agenda

- Welcome / Introductions
- Communication basics
- Recognizing and promoting opportunities to communicate
- Right to participate in life
- The Participatory Approach
- Supports and devices to involve people in their lives
- Assistive Technology
- Environmental support to increase participation
- Competency achievement / Evaluation

Course Outcomes

PARTICIPANTS WILL HAVE AN AWARENESS OF...

- The reality that all people communicate (assume competence, not lack of capacity).
- What communication routines are and how they are used.
- What high, light/mid and low tech systems are and how they are used.

PARTICIPANTS WILL HAVE KNOWLEDGE OF...

- The role of the Speech & Language Pathologist (SLP), Physical Therapist (PT), Occupational Therapist (OT), Behavioral Support Consultant (BSC), and THEMSELVES.
- How to integrate communication strategies into the ISP.
- Ways to increase opportunities to communicate.
- Ways to increase opportunities to participate more fully.



What is Communication?

Communication:

- Is an exchange of information between individuals (a minimum of two people using a common system of behavior, symbols, or signs to express thoughts, ideas, and feelings)
- Is a system that is understood by both parties
- May be **intentional** or **non-intentional**
- May be **abstract** or **concrete**
- Is **woven** throughout a person's day.

ALL PEOPLE COMMUNICATE

7% Words

38% Vocal Elements (tone, volume, speed or rate)

55% Body Language, (facial expressions, gestures, posture, etc)

Dr. Albert Mehrabian, author of Silent Messages

Examples of Communication

Communication can include: <i>(note: the meaning needs to be determined for a given individual)</i>	List 2 messages each of these actions may be trying to communicate: <i>(Think of someone you support to get some ideas.)</i>
<ul style="list-style-type: none"> • tensing up muscles 	
<ul style="list-style-type: none"> • yelling 	
<ul style="list-style-type: none"> • moaning or eyes narrowed 	
<ul style="list-style-type: none"> • raising eyebrows 	

Find out what people are trying to communicate



REMEMBER: There is **NO** pre-requisite for communication.
In other words, people do not have to have or do anything before they can communicate.

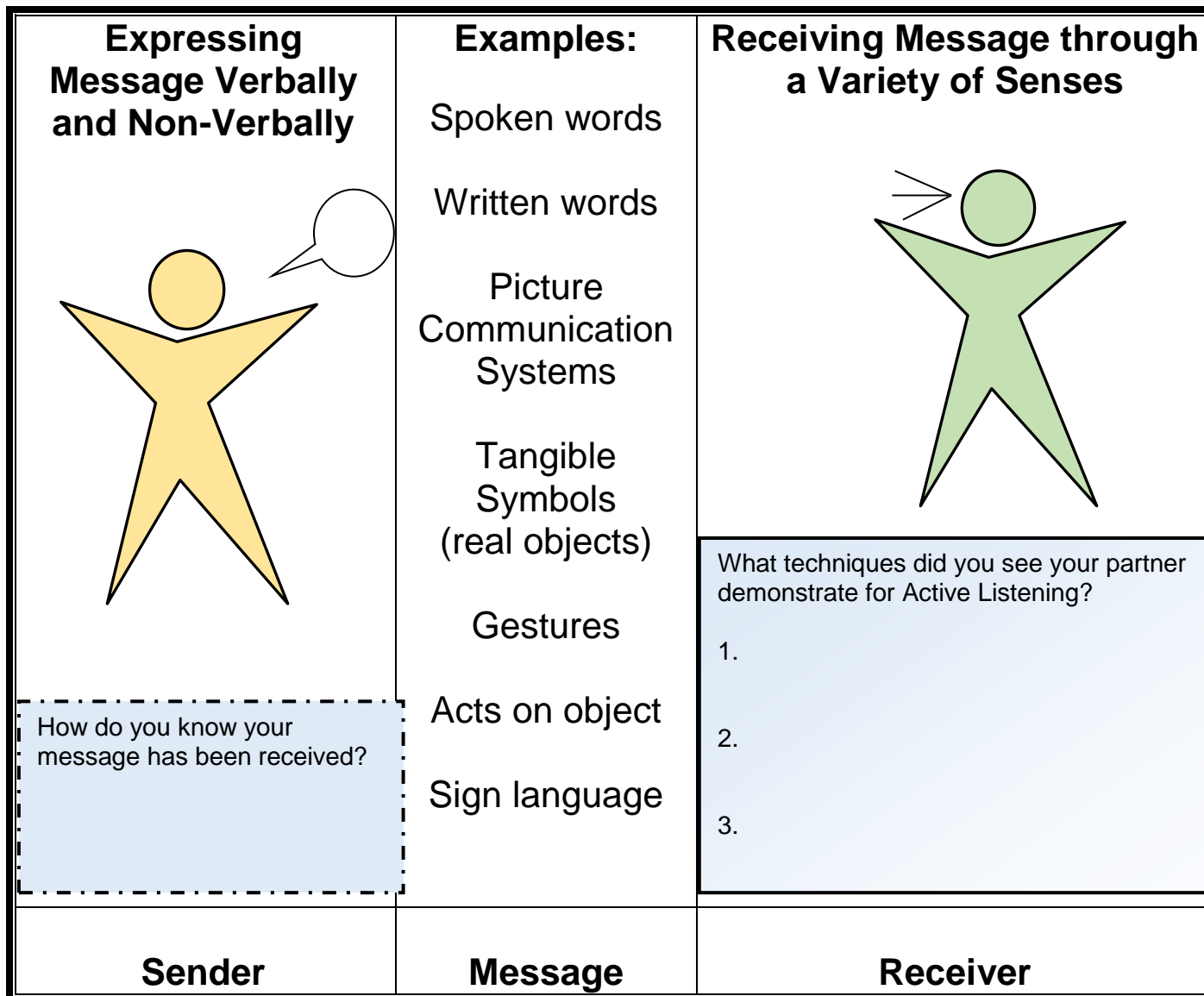
All an individual needs is an **OPPORTUNITY** and **THE NEEDED SUPPORT**.
 It doesn't depend on IQ or verbal ability.

PURPOSES OF COMMUNICATION

Purpose	Examples
<p><u>Express needs and wants</u></p> <ul style="list-style-type: none"> • Make sure the physical and emotional expectations or requirements are met. <p><i>(Pointing or grabbing at someone's drink may be an expression of a need or want.)</i></p>	<p>Ex.: Hungry</p>
<p><u>Information exchange</u></p> <ul style="list-style-type: none"> • What is happening or going on? <p><i>(Can be written or verbal or pictorial)</i></p>	<p>Ex.: My birthday is tomorrow</p>
<p><u>Social closeness</u></p> <ul style="list-style-type: none"> • We are all social beings who connect with others. <p><i>(This can be overlooked in people's lives and may not be covered adequately in the ISP)</i></p>	<p>Ex.: A Hug</p>
<p><u>Social amenities/comments</u></p> <ul style="list-style-type: none"> • Not your whole life story! <p><i>(Small talk, social courtesies, inline at the grocery store)</i></p>	<p>Ex.: How about that wind we had last night?</p>

Three Parts of Communication

<u>Active Listening</u>
1.
2.
3.
4.
5.



Ways to Promote Opportunities for Communication and Choice-Making

1. Form a constructive relationship with the person.
2. Take the time to involve the person in all aspects of his/her day.
3. Focus on the person's interests and how he/she participates in activities.
4. Know how to present choices and questions to promote successful participation.
5. Allow the person time to process choices and questions before expecting a response.
6. Keep the information simple and clear.
7. Tailor how you communicate to the person's communication style.
8. Know how many options the person can process at one time (too many options can frustrate and overwhelm some people, while others may be fine with open ended questions).
9. Provide information necessary for people to make informed choices.
10. Help the person explore all the aspects and options involved with difficult choices.
11. Never offer choices that cannot be honored.
12. Ensure the IDT has developed appropriate strategies to support choices that involve risk.
13. Avoid "leading" the person to choose the option that you prefer (e.g.: "You want to do this one, right," while nodding "yes.>").
14. The IDT should be creative.
15. Support people to make choices throughout their whole day, when they are shopping, dressing and at restaurants.
16. Be attentive to the person's verbal and non-verbal communication.
17. Help the person explore the practical, emotional, social, and spiritual aspects of choice-making.
18. Use recommended communication techniques to facilitate success.

**Ensure that individualized communication supports are available and used.
Don't give up, even if you don't see progress.**

OUR ROLE IN SUPPORTING A PERSON'S RIGHT TO COMMUNICATE

- ◆ Observe and try to give meaning to a person's communication in all environments. Don't forget about work and at the doctor's office.
- ◆ Help to clarify an individual's communication by using a system that they understand.
- ◆ Promote natural opportunities for the person to communicate. For example, ordering at a restaurant, dressing or shopping.
- ◆ Share your ideas with the interdisciplinary team.
- ◆ Be sure to always advocate for the development of Communication Supports.
- ◆ Understand and support the individual's communication style:
 - ◆ How a person receives messages
 - ◆ How a person processes messages
 - ◆ How a person responds to messages



Describe how you would promote choice making during a “naturally occurring” opportunity for one of the people you support:

Website for Autism Program <http://cdd.unm.edu/autism/education.html>

OUR ROLE IN RELATION TO THERAPIES AND BEHAVIOR SUPPORT



- ◆ Recognize and advocate for the need of formal assessments and planning.
- ◆ Review formal assessments
 - ◆ Speech Therapy evaluations,
 - ◆ Behavior Support evaluations
 - ◆ Physical Therapy, Occupational Therapy evaluations
- ◆ Obtain input from Therapists and Behavioral Support Consultant (BSCs) to help ensure that natural opportunities to participate occur in all settings.
- ◆ Communicate to the therapists the need to develop supports and interactive communication routines/ Written Direct Support Instructions (WDSI's) related to new and current roles and opportunities.
- ◆ Make sure that the assistive devices a person uses are in working order. Some AT devices, including communication devices, are specific to certain settings and are not intended to be used in all settings.

“The Participatory Approach” to Communication



- The “**Participatory Approach**” which presumes that all persons, regardless of the degree of disability, can participate in daily activities and achieve individual goals.
- The “**Participatory Approach**” is person-centered and asserts that no one is too severely disabled to benefit from assistive technology and other therapy supports that promote participation in life activities. The Participatory Approach rejects the premise that an individual shall be “ready” or demonstrate certain skills before assistive technology can be provided to support function. All therapists are required to consider the Participatory Approach during assessment, treatment planning, and treatment implementation.
- All therapists are required to consider the “**Participatory Approach**” during assessment, treatment planning, and treatment implementation to promote the individual’s immediate participation.



What is Assistive Technology?

A general term for any technology designed to improve the quality of life of a person with disabilities, help them function in the best possible way and maintain their independence. AT helps provide a way for people with disabilities to fully engage in life’s activities. These tools help overcome challenges and enable people to lead more Independent lives.

Communication Systems & Supports

COMMUNICATION DICTIONARY

Putting meaning to people's actions.

- A list of communicative behaviors unique to the individual.
- Communication may take different forms:

✓ a written log



✓ photographs



✓ Audio and video recordings



- The team must document existence of (need to create or update) an individualized communication dictionary in the ISP narrative section, as well as in Individual Specific Training.



The COMMUNICATION DICTIONARY is a tool for YOU to put meaning to the individual's actions and behaviors. It is not a tool to be used by the individual.

SAMPLE

COMMUNICATION DICTIONARY

Support Program

NAME: "Tom"

ISP Date: 06/01/20XX

The following dictionary of communicative behavior has been developed to introduce new friends, acquaintances and/or newly assigned support providers to Tom's way of communicating.

Please share it with any new person who will be interacting with Tom.

Several people who are very familiar with Tom's daily communication style developed the list of different meaningful actions. Review of this communication dictionary may assist others to better understand and interact with him.

A communication dictionary is never completed. New ways of communicating may develop throughout a person's lifetime. **Anyone may help to keep this dictionary up-to-date by adding to it or by modifying what is already included.**

Thank you for sharing Tom's communication dictionary.

Action	Meaning
Extends left arm & hand towards an object	I WANT THAT.(as a spontaneous request)
Reaches out towards an object or a symbol held in front of him	I WANT THAT ONE. (as a choice)
Reaches out and grabs someone's' clothing, screams/yells and looks at someone	I WANT YOU TO PAY ATTENTION TO ME. CAN WE DO SOMETHING TOGETHER NOW?
Hits himself on the forehead or hits hands together over his head	I'M NOT SATISFIED WITH SOMETHING. LET'S GET OUTTA HERE. I'M UNCOMFORTABLE. I'M NOT HAPPY. I WANT TO STOP NOW. I NEED SOME PRIVACY.
Remaining quiet for an extended length of time; not responding to others	I DON'T FEEL WELL.

Author: Nancy Pacheco - Jones, SLP

XY Agency

(575) 758-5934

If you have suggestions for other meaningful communication action/behaviors to add to these, please write them in the space above or on the back of this page. If you have any questions about this support plan, please contact the program author.

Communication Systems & Supports

24-HOUR COMMUNICATION SYSTEM

What are Your Top 5 Messages?

1.	4.
2.	5.
3.	

The 24-hour system is a combination of communication aids that enable an individual to express basic needs, social comments, and common preferences in daily life activities.

- A Core 24-Hour system ensures that individuals will be able to communicate a few crucial things to them at any time.** A basic 24-hour system has at least 4 messages, but more may be added, if needed.
- If someone already has a way of expressing their needs, you need to learn their system.

The messages can be in a variety of categories:

- **Basic Needs** – (I am hungry, I am hurt, I don't feel well, etc)
 - **Health & Comfort** – (I am hot, I am itchy, I have stomach cramps, I feel stiff)
 - **Social needs** – (Talk to me, give me a hug, pay attention to me)
 - **Issues specific to the individual, preferences** – (I need my coffee, I want to listen to my jazz CD)
 - **Non-negotiable** – (I need to be alone, I don't want to be around smokers)
 - **Desired activities** – (I want to watch a movie)
 - **Anything that is important to the person** – (I miss my brother)
- Supplementary messages – additional message may be added to the basic 24-hour system for choice-making and participation.
 - Consider environments such as home, work/school/community inclusion program and community settings.
 - The system should be low tech, durable, portable and easy to use, and generally inexpensive to develop.

Communication Systems & Supports

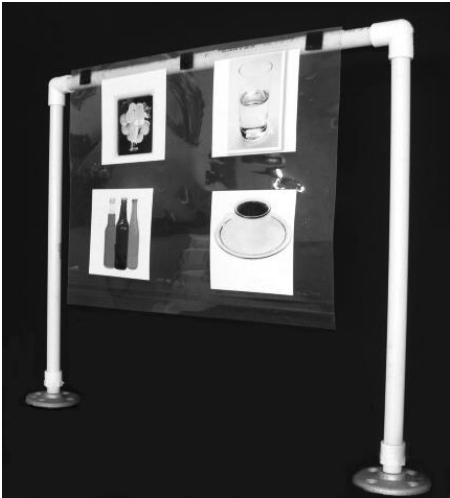
LOW TECH COMMUNICATION DISPLAY FORMATS

Eye Gaze

This type of device is best suited for an individual who:

- a) Has good visual acuity and good visual tracking abilities
- b) Has no reliable control over the movement of another body part

<u>Pros</u> of using the Eye Gaze	<u>Cons</u> of using the Eye Gaze



Communication Systems & Supports

LOW TECH COMMUNICATION DISPLAY FORMATS

Tangible Symbol Strip / Ring

This type of device is best suited for an individual:

- Who will benefit from tactile and/or visual input
- Could have some visual impairments
- Who has the manual control to reach out and touch a symbol

May be a preferred option when:

- Simultaneous presentation of more than one or two symbols is distracting to an individual
- Individual prefers to pass or present a communication symbol to his partner to convey a message
- Individuals who tolerate co-active touching of the symbol or benefit from “partner-assisted scanning”

❖ An arbitrary symbol may be crafted and used consistently in association with a message for an abstract concept. *(What do you think about when you see double yellow arches?)*

<u>Pros</u> of using the Tangible Symbol Communication Strip / Ring	<u>Cons</u> of using the Tangible Symbol Communication Strip / Ring



Communication Systems & Supports

LOW TECH COMMUNICATION DISPLAY FORMATS

Picture Communication Device

This type of device is best suited for an individual:

- Whose picture communication symbols may be used in place of tangible symbols in any of the low-tech systems
- Whose goal of using these systems is functional communication in as natural a manner as possible
- When it is not important to change from tangible symbols to 2-dimensional symbols

<u>Pros</u> to the Picture Communication Symbol Device	<u>Cons</u> to the Picture Communication Symbol Device



Development of 24-hour Communication Systems

Low Tech Supplemental System / Supports

- Low-tech communication aids are defined as those that do not need batteries, electricity or electronics. These are often very simple communication boards or books, from which the user selects letters, words, phrases, pictures, and/or symbols to communicate a message.
- Users may indicate the appropriate message with a body part, light pointer, eye-gaze direction, or a head/mouth stick. Alternatively, they may indicate yes or no while a listener scans through possible options.
- We need to determine what messages are the most critical or important to the person. Then we need to determine the types of symbols that work best.
- It is important to determine if the person can see, point or use his/her hands, etc. These types of questions help to determine the type of system including the display and symbol type that will work best for the person.
- If the individual has another effective way to communicate a message, it should be listed in the communication dictionary.

These devices are used for individuals to communicate choice wants and needs. They are NOT for staff or other team members to communicate to individuals what they want them to do.



Symbol Type Examples:

- Tangible/Textured
- Black & White Line Drawings
 - Colored Clipart
 - Photographs
- Olfactory (aromas/odors)

Communication Systems & Supports

MID/LIGHT TECH COMMUNICATION DEVICES

This type of device is best suited for an individual:

- Who cannot easily be understood by an unfamiliar listener.
 These devices are:
 1. Programmed by a person to provide speech output.
 2. Match the person's voice to approximate gender, language, and age.

I. Systems

- a) Some devices have overlays that can be programmed for different activities and locations.
- b) Displays are made up of symbols which can be any combination of photographs, line drawings, text, objects or other symbols.

II. Selection

- a) May be accessed by pressing or touching with a finger or other body part, head pointer or other tool.

<u>Pros</u> to the MID/LIGHT Tech Communication Devices	<u>Cons</u> to the MID/LIGHT Tech Communication Devices

Go Talk



Hip Talker



Listen to me



Tech / Talk



Communication Systems & Supports

HIGH TECH SUPPLEMENTAL SYSTEMS/COMMUNICATION DEVICES

This type of device is best suited for an individual:

- a) Who cannot easily be understood by an unfamiliar listener.
 - b) Who needs a way to communicate many things.
- These devices are:
- ✓ Provide either digitized speech output (recorded human speech) or synthesized speech output (electronic conversion of text into speech)
 - ✓ Allow for more flexibility and expression of more complex concepts

I. How is this device used?

- a) May be accessed by pressing or touching, pointing with a finger, head pointer or other tool or by using an alternative input device (switch, joystick, trackball or infrared pointer)
- b) May utilize scanning (choices or messages are presented individually) or row-column scanning (rows are presented, then each choice or message in that row is presented)

<u>Pros</u> to the HIGH Tech Communication Devices	<u>Cons</u> to the HIGH Tech Communication Devices

IPAD

Smart Speak

DynaVox T10



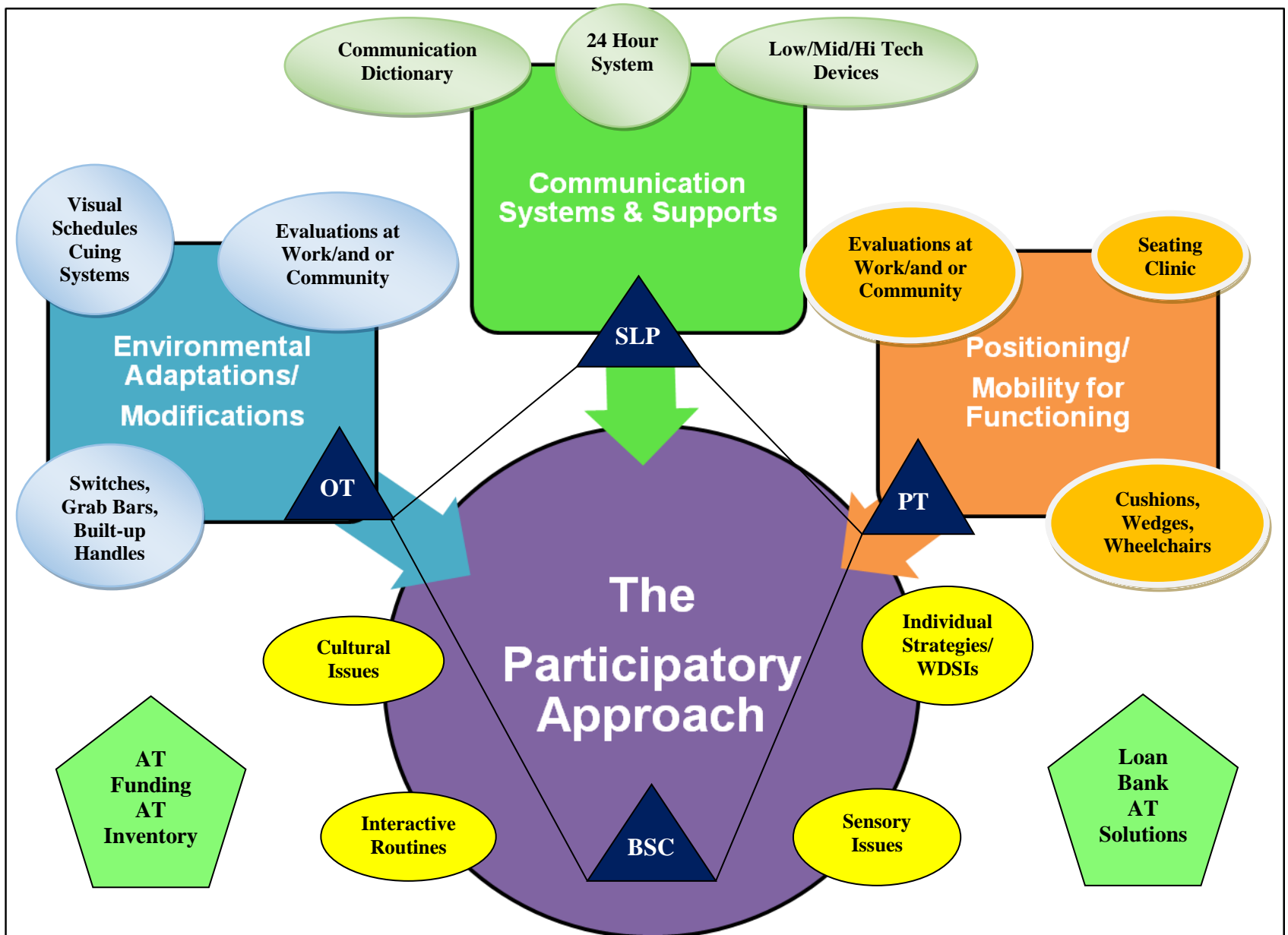


Figure 1: THE PARTICIPATORY APPROACH TO COMMUNICATION- Supports and devices to actively involve people in the direction and control of their lives.

Interactive Communication Routines (ICR)

Purpose: To help someone interact with others in a conversational way, make comments, be part of social interactions, make choices, ask questions, exchange information, and direct the action around him/her during meaningful and preferred activities.

Process: A favorite activity or activities are chosen. The script will be written out: a low-tech and possibly a light tech system may be developed to use with the script.

The script should not be used to control the choices that the individual can make. If the individual decides to make an alternative choice, this means that they have recognized this as a choice making opportunity and a script may no longer be needed in this area. The author of the ICR will demonstrate how the script should be used and teach the direct support staff or family members how to use it.

Elements of a communication routine:

Errorless choice-making is a technique that allows the person to choose between more than one correct symbol option. For example, if the person chooses to do the activity *indoors* or *outdoors*, both choices are correct - so choice making is errorless and encouraged. This may not apply when you are teaching a skill.

Continuous support is given to the person at whatever level is needed to participate in the routine. If he/she requires hand over hand assistance to make a choice, that level of assistance should be provided as long as the person needs it. The individual may never progress beyond hand-over-hand assistance. It is not considered a failure if the person continues to require a high level of support. The support is given to allow maximum participation for that individual for as long as he/she needs it. Some individuals will progress to need less support. It is not required that the person change the level of support needed. All participation is accepted and encouraged.

SENSORY ISSUES IMPACTING COMMUNICATION AND CHOICE MAKING SYSTEMS

Sensory Processing Issues

- ✓ We receive and perceive sensory input through *sights, sounds, touch, tastes, smells, movement and balance, body position, and muscle control.*
- ✓ Difficulty taking in or interpreting this input can lead to tremendous difficulties with daily functioning, interacting with others, and regulating emotions.

Tactile Defensiveness – uncomfortable touching materials or being touched.

People who have tactile defensiveness are sensitive to touch sensations and can easily be overwhelmed by, and fearful of, ordinary daily experiences and activities. They might avoid combing or shampooing their hair, wearing or touching certain textured materials including clothing, or brushing teeth.

Oral Defensiveness or Sensitivity – not able to tolerate things touching the area around the mouth region. Some individuals will not tolerate or will completely avoid an eating utensil, toothbrush, certain food textures, or types/ or temperatures of food. May gag easily when eating, and may only get food down by taking a drink with it.

Gravitational Insecurity – overwhelmed by changes in head position, feeling as if they are about to fall. Some individuals have a fear of change in position (airplanes) - climbing steps can appear to an individual as a mountain - and cannot tolerate amusement rides. This can result in intolerance to movement (for example, elevators) or unstable surfaces (for example, walking up and down curbs) with fearfulness, avoidance, or motion sickness.

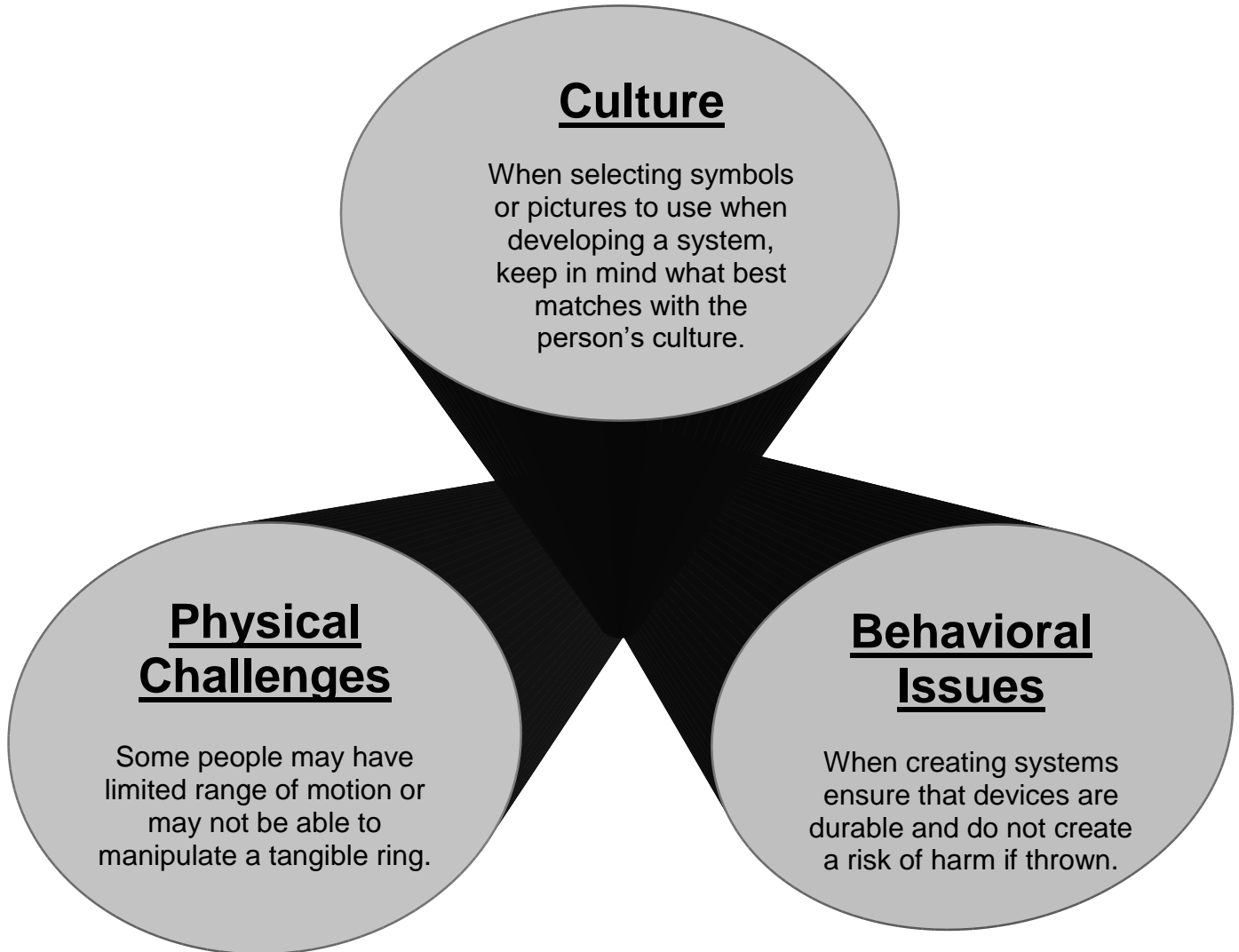
Visual Defensiveness – difficulty tolerating bright lights, flashing lights, moving lights or changes in lighting (dark to bright and vice versa). Can occur with hypersensitivity to light or avoidance of gaze and may result in aversion to movie theaters or computer screens. This individual may need additional supports (e.g. special glasses) when using computer screens as part of their communication system.

Auditory Defensiveness - difficulty tolerating and/or easily startled by loud noises. Some individuals show an extreme sensitivity to common sound (e.g., the toilet flushing, a lawn mower or vacuum cleaner).

Olfactory Defensiveness - intolerance to odors. Individuals may gag or be distressed with certain smells, which other persons don't notice or don't mind.

Remember that sensory issues are about the way our bodies interpret different stimuli.

WHAT OTHER THINGS MIGHT AFFECT THE DEVELOPMENT OF A COMMUNICATION SYSTEM AND INTERACTIVE ROUTINE?



Always consider personal preferences and include the individuals in the development process!

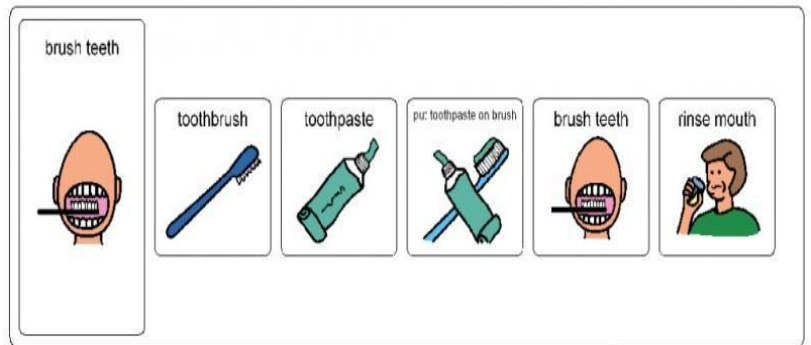
Visual Scheduling System

This type of system is best suited for an individual:

- Who needs to follow a specific sequenced order of a routine.
- Who is diagnosed with dual sensory impairments (hearing and sight impaired) or blindness.
- A person with challenging behaviors may benefit from the security of knowing “what will happen next” as well as giving the individual a sense of power over their schedule and/or activities.

I. How to develop a visual schedule system?

- a) Any member of the team could put this together
- b) Symbols depend on the preference of the individual – may be word based, picture based, object based, etc.
- c) Vertical presentation may be easier to understand than one which is horizontal
- d) Important to include a FINISHED indicator for each step of the sequence
- e) Finished indicator may be a specific picture, word, object or place within the system
- f) Clarity of the order, and the beginning and end of a scheduling system is very important
- g) Symbols can be dynamic or static depending on the person’s preference



Adaptations for Increasing a Person's Ability to Participate/Communicate

- Switches to turn electrical appliances on and off
- Visual Scheduling System to identify sequence of events
- Voice Output Device for communicating
- Positioning equipment including wedges for functional positioning
- Equipment such as wheelchairs and walkers for mobility
- Adaptations for people to eat safely (built up plate or spoons)
- Activities for daily living like (handrails, showerhead or appliances)



WAYS TO DESIGN OR MODIFY A PERSON'S ENVIRONMENT OR USE ADAPTATIONS TO SUPPORT COMMUNICATION AND CHOICE-MAKING

Exercise: *in each of the following areas identify at least 5 environmental adaptations that could help someone be more involved and active in that area (remember to consider sensory, behavioral and physical issues).*

Grooming and dressing:

- 1.
- 2.
- 3.
- 4.
- 5.

Cooking and food preparation:

- 1.
- 2.
- 3.
- 4.
- 5.

Art activities:

- 1.
- 2.
- 3.
- 4.
- 5.

Sports or exercise:

- 1.
- 2.
- 3.
- 4.
- 5.

Work:

- 1.
- 2.
- 3.
- 4.
- 5.

Relationships or social activities:

- 1.
- 2.
- 3.
- 4.
- 5.



INTEGRATING ASSISTIVE TECHNOLOGY SUPPORTS INTO THE INDIVIDUAL'S EVERYDAY LIFE

What does integration of AT supports look like?

Poor Integration	Excellent Integration
Therapies are provided only to persons who demonstrate skills needed to participate.	Therapies are provided to all individuals who require supports in order to participate more fully in their lives.
Therapies apply to activities performed in therapy sessions only.	Therapies support participation in life and daily activities and facilitate participation in special interests.
Therapies are used only in deliberately created or newly introduced activities.	Therapies provide practical strategies, techniques and ongoing training which assists support providers with current and ongoing activities.
Therapists work only with the individual and do not share information with staff or support providers.	Therapists interact regularly with support providers and staff.
Materials and devices are kept by the therapist and used in therapy sessions only.	Materials and devices which support the individual are made available in home and day environments and are maintained.
<p style="text-align: center;"><u>Outcome:</u></p> <p>The individual's daily activities are not meaningful to them. Materials, equipment and strategies are used only by therapists.</p>	<p style="text-align: center;"><u>Outcome:</u></p> <p>The individual is involved in daily activities which are age and culturally appropriate and meaningful to them utilizing materials, equipment and strategies recommended by therapists.</p> <p style="text-align: center;">This is the Participatory Approach!</p>

INTEGRATION OF THE ISP



Where in the ISP document should you be able to find information about Assistive Technology and Communication Supports?

- ❖ The **Narrative Section** and the **Action Plans** may have references to the use of Assistive Technology and Environmental Adaptations.
- ❖ **Work, Education and/or Volunteer History** may describe the type of system and other supports the individual uses under Learning Style and Communication Mode Considerations.
- ❖ The **Health and Safety Section** should indicate whether there is an Assistive Technology Inventory.
- ❖ **Action Steps** should be developed when an individual needs an adaptation or an assessment for communication supports and/or technology, or other therapy intervention.
- ❖ The **Teaching and Support Strategies** and the **Written Direct Support Instructions (WDSIs)** and **Behavior Support Plans** should give detailed information about communication strategies, communication routines, and therapy recommendations.
- ❖ **Individual Specific Training (IST)** may have specific information addressing how communication supports or AT apply and are used by the person.
- ❖ **Health Care Plans** can provide additional instructions on some assistive technology.

TEACHING AND SUPPORT STRATEGIES

FOR INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES LIVING IN THE COMMUNITY

Individual's Full Name Janet Smith		DOB: 10/21/80		
ISP meeting date: 9/2/XX		Effective Dates of ISP From: 11/1/XX To: 10/31/XX		
<input checked="" type="checkbox"/> ORIGINAL		<input type="checkbox"/> MODIFIED	<input type="checkbox"/> DISCONTINUED	<input type="checkbox"/> MET
DATE: 9/2/XX				
DATE TO BEGIN IMPLEMENTING THESE STRATEGIES: 11/1/XX		DATE TO STOP IMPLEMENTING THESE STRATEGIES: 10/31/XX		
PERTINENT INFORMATION FROM THE INDIVIDUAL SERVICE PLAN				
Life Area: FUN/RELATIONSHIPS				
Vision: I want to meet people and make friends in my neighborhood. I want to be a regular at some locations in my neighborhood to be able to meet people.				
Desired Outcome: I will order independently at the restaurant or coffee house.				
ACTION STEP	FREQUENCY	RESPONSIBLE IDT MEMBER(S)	TARGET DATE(S)	DOCUMENTATION AND REPORTING REQUIREMENTS
Janet will order using her VOCA.	At least 1x per week	Janet, residential staff	10/31/XX	Neighborhood outing rating sheet, quarterly report
TOPIC	INSTRUCTIONS			
DESCRIPTION OF WHEN TO IMPLEMENT THESE STRATEGIES <i>(specific days/times to implement the strategies, circumstances and/or other indicators that signify when it is time to implement the strategies)</i>	Every Tuesday night Janet eats dinner at <i>El Gallo Loco</i> , a Mexican restaurant in her neighborhood. Every Sunday morning Janet gets coffee at <i>The Mug</i> . If Janet's preferences changes for her "regular" locations, these places/times should reflect that change. **To implement these strategies you must complete Janet's individual-specific training with both her SLP and her BSC**			
THINGS TO DO BEFORE YOU BEGIN: <i>(Information about gathering needed supplies, materials, adaptive equipment, etc.)</i>	Bring Janet's VOCA to the restaurant or coffee house.			
HOW IS ASSISTIVE TECHNOLOGY USED IN THIS TEACHING STRATEGY? <i>(N/A if no assistive technology is needed)</i>	Janet uses her VOCA to order at the restaurant or coffee house.			
HOW ARE THERAPIES INTEGRATED INTO THIS TEACHING STRATEGY?	The SLP's WDSI plan supports the use of the VOCA in the community. The PBSP plan explains how to prompt Janet so she doesn't get embarrassed or feel talked down to.			
ANALYSIS OF TASK/ ACTIVITY <i>(Detailed information about how to support the individual with each step: teaching strategies to match the person's learning style, prompts, relevant therapy recommendations, assistive technology devices, for each step, etc.)</i>	<ul style="list-style-type: none"> • Program the VOCA w/ the special of the day and at least two other menu items that Janet typically likes (such as enchiladas, tacos or carne adovada – or hot chocolate, coffee). • Show Janet the new programming before it is time to order. • When the waiter comes to take Janet's order, give Janet some time to order. If she does not initiate using her VOCA follow this order for prompting, giving Janet time after each prompt to respond: <ol style="list-style-type: none"> 1. verbal prompt – Ask Janet, are you ready to order using your VOCA? 2. gestural prompt – Janet, Which thing did you chose? (point to the VOCA) 3. physical assistance – Janet, can I help you order? (if she nods yes, take Janet's hand and with hand-over-hand guidance help Janet choose a menu option on her VOCA – if she shakes her head no, ask the waiter to come back in a minute because Janet needs more time to decide what she wants). • Give Janet positive feedback (every time, even if she needs the highest level of assistance). Say – "Nice job ordering with your VOCA! The enchiladas do look good." (you can change this statement to reflect her menu option or another comment) • If Janet refuses to use VOCA, tell the waiter you need more time. Say – "Ok, you can use the VOCA next time to order. How would you like to order today?" Don't forget to document your thoughts of why she refused. 			
DOCUMENTING IMPLEMENTATION: HOW WILL YOU DOCUMENT WHAT HAS BEEN TAUGHT? <i>(Information about data collection and other reporting requirements; may reference individualized data collection sheet.)</i>	Upon returning home sit down w/ Janet to help her complete the Neighborhood Outing Rating Sheet (NORS) – make sure to answer the questions about ordering w/ the VOCA. When the NORS is completed, put it in Janet's blue binder in the kitchen.			
OTHER				

Concept Review



What can you do to integrate communication supports into daily activities?

What is an observable behavior and its possible meaning?

Do people need to learn any special skills before they can communicate?

What are naturally occurring opportunities to make choices?

What are examples of low-tech and high-tech communication devices?

What is your role in supporting an individual's right to communicate?

What are things you can do to support people to make choices?

How can you support someone to use augmentative communication?