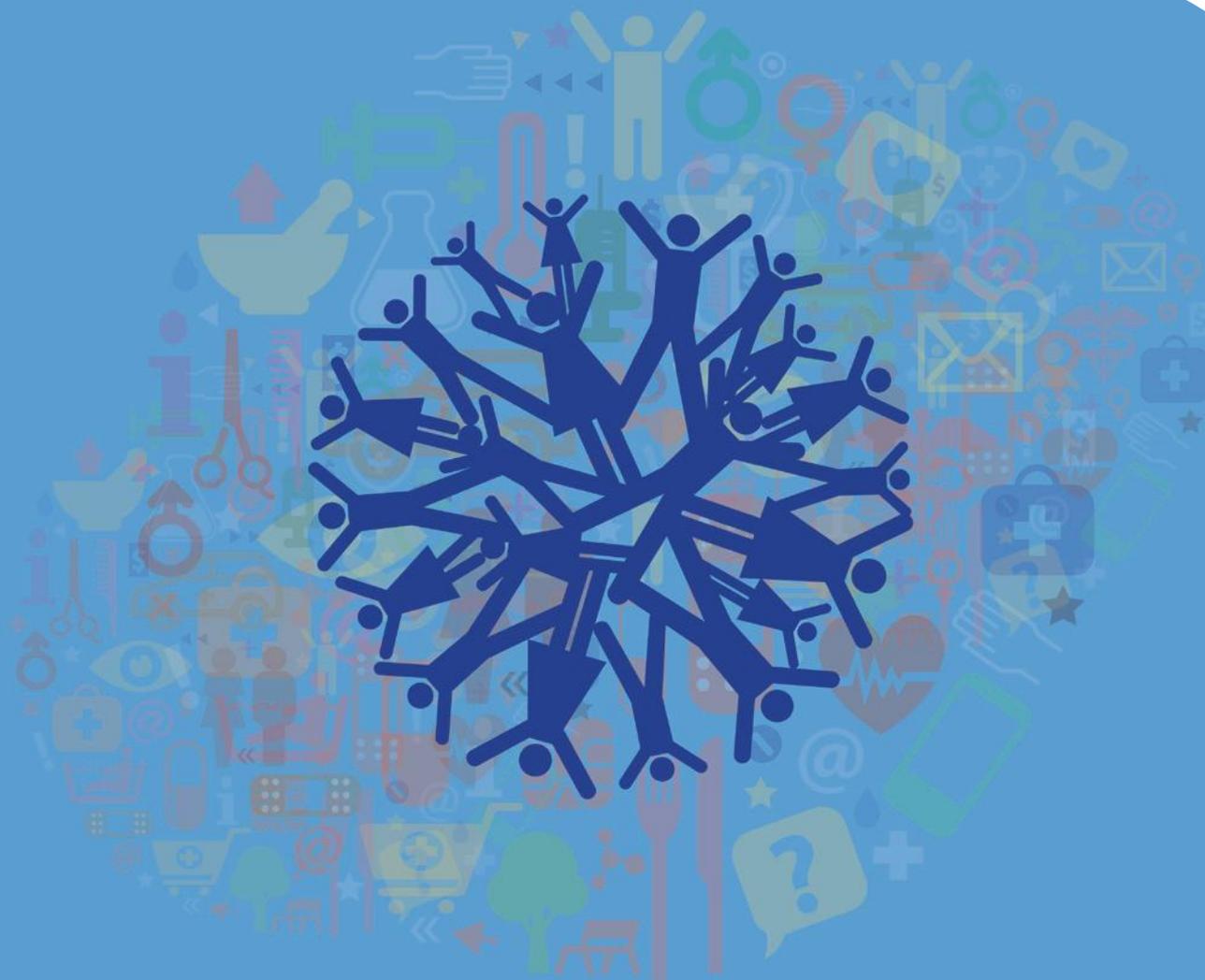


CHCDIS004

Communicate using augmentative and alternative communication strategies

Release 1



Learner guide

CHCDIS004

Communicate using augmentative and alternative communication strategies

Release 1

Learner guide

Aspire Version 1.2



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Version control and modification history

Version	Release date	Modification
Release 1, version 1.1	April 2017	First release
Release 1, version 1.2	February 2019	Minor corrections as part of our continuous improvement program. Updated broken URL links.

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Before you begin

This learner guide is based on the unit of competency *CHCDIS004 Communicate using augmentative and alternative communication strategies*, Release 1. Your trainer or training organisation must give you information about this unit of competency as part of your training program. You can access the unit of competency and assessment requirements at: www.training.gov.au.

How to work through this learner guide

This learner guide contains a number of features that will assist you in your learning. Your trainer will advise which parts of the learner guide you need to read, and which practice tasks and learning checkpoints you need to complete. The features of this learner guide are detailed in the following table.

Feature of the learner guide	How you can use each feature
Learning content	<ul style="list-style-type: none"> ▶ Read each topic in this learner guide. If you come across content that is confusing, make a note and discuss it with your trainer. Your trainer is in the best position to offer assistance. It is very important that you take on some of the responsibility for the learning you will undertake.
Examples and case studies	<ul style="list-style-type: none"> ▶ Examples of completed documents that may be used in a workplace are included in this learner guide. You can use these examples as models to help you complete practice tasks and learning checkpoints. ▶ Case studies highlight learning points and provide realistic examples of workplace situations.
Practice tasks	<ul style="list-style-type: none"> ▶ Practice tasks give you the opportunity to put your skills and knowledge into action. Your trainer will tell you which practice tasks to complete.
Video clips	<ul style="list-style-type: none"> ▶ Where QR codes appear, learners can use smartphones and other devices to access video clips relating to the content. For information about how to download a QR reader app or accessing video on your device, please visit our website: www.aspirelr.com.au/help 
Summary	<ul style="list-style-type: none"> ▶ Key learning points are provided at the end of each topic.
Learning checkpoints	<ul style="list-style-type: none"> ▶ There is a learning checkpoint at the end of each topic. Your trainer will tell you which learning checkpoints to complete. These checkpoints give you an opportunity to check your progress and apply the skills and knowledge you have learnt.

Foundation skills

As you complete learning using this guide, you will be developing the foundation skills relevant for this unit. Foundation skills are the language, literacy and numeracy (LLN) skills and the employability skills required for participation in modern workplaces and contemporary life.

The following table outlines specific foundation skills noted for your learning in this learner guide.

Foundation skill area	Foundation skill description
Learning	<ul style="list-style-type: none"> ▶ Understanding your job role, organisational procedures and legal responsibilities ▶ Managing your work and seeing how well you are going and making goals for yourself at work ▶ Seeking professional development opportunities for continuous improvement
Reading	<ul style="list-style-type: none"> ▶ Understanding how documents are presented and being able to navigate through documents ▶ Understanding industry- and job-specific terminology ▶ Interpreting key information in relevant documents ▶ Understanding routine workplace checklists and documentation
Writing	<ul style="list-style-type: none"> ▶ Planning, drafting and writing reports and documents ▶ Communicating through written letters, email and online ▶ Recording progress; reporting incidents
Oral communication	<ul style="list-style-type: none"> ▶ Clarifying instructions ▶ Providing information ▶ Supporting others through encouragement, negotiation and conflict resolution ▶ Using body language to model desired behaviour and responding to others' body language
Numeracy	<ul style="list-style-type: none"> ▶ Calculating costs, weights, measurements of height and distance ▶ Interpreting measurements
Teamwork	<ul style="list-style-type: none"> ▶ Working well with other people by cooperating, collaborating, encouraging and building rapport
Planning and organising	<ul style="list-style-type: none"> ▶ Planning your workload and commitments ▶ Implementing tasks ▶ Completing work on time ▶ Knowing how to deal with hazards and risks
Making decisions	<ul style="list-style-type: none"> ▶ Understanding and applying decision-making processes ▶ Reviewing the impact of your decisions
Problem-solving	<ul style="list-style-type: none"> ▶ Identifying problems ▶ Working out how to fix a problem using problem-solving processes and reviewing the outcome
Innovation and creation	<ul style="list-style-type: none"> ▶ Recognising opportunities to develop and apply new ideas ▶ Generating ideas by thinking of new ways to do something ▶ Making suggestions to improve work

Foundation skill area	Foundation skill description
Technology and digital literacy	<ul style="list-style-type: none"> ▶ Efficiently using digitally based technologies and systems correctly and safely ▶ Accessing, organising and presenting information ▶ Using equipment correctly and safely

What do you already know?

Use the following table to identify what you may already know. This may assist you to work out what to focus on in your learning.

Topic	Key outcomes	Rate your confidence in each section
Topic 1: Identify the current communication capacity and needs of the person	1A Work in collaboration with the person and others to identify communication needs	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1B Use appropriate supports to aid the person's current communication capacity	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1C Document the outcomes of this process in line with organisation procedures	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1D Consult with additional people including family, carers and/or relevant others as required	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	1E Make appropriate referrals to professionals and other service providers as required in consultation with supervisor	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
Topic 2 Develop effective AAC strategies	2A Provide information about the person with disability in relation to their likes/dislikes, daily activities and current communication needs	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2B With appropriate consultation, develop communication strategies to meet individual needs and level of communication	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2C Adjust available tools and programs to address individual needs and preferences	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	2D Seek advice from other staff and relevant others as required and work within scope of practice	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident

Topic	Key outcomes	Rate your confidence in each section
Topic 3: Implement an AAC strategy	3A Use different strategies and devices in AAC	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3B Document communication support strategies in the person's individualised plan	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3C Organise the environment to optimise communication opportunities	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3D Reinforce communication by timely and appropriate response	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3E Identify and respond to difficulties experienced by the person when communicating, within own work role and responsibilities	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3F Refer difficulties outside own role and responsibilities to appropriate person	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	3G Provide practice opportunities and information to the person	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
Topic 4: Monitor, report and review communication strategies	4A Set up and maintain reporting and recording system to assist with monitoring and review	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4B Review reporting and recordings to monitor success of communication strategies and make required changes with appropriate consultation	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4C Identify barriers to the effective use of AAC strategies and devices	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4D Work with other relevant people to overcome the barriers	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4E Implement any modifications to communication strategies and devices	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4F Identify opportunities to increase communication vocabulary	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident
	4G Maintain accurate written records according to established directions and within organisation protocols	<input type="checkbox"/> Confident <input type="checkbox"/> Basic understanding <input type="checkbox"/> Not confident



Topic 1

In this topic you will learn how to:

- 1A Work in collaboration with the person and others to identify communication needs**
- 1B Use appropriate supports to aid the person's current communication capacity**
- 1C Document the outcomes of this process in line with organisation procedures**
- 1D Consult with additional people including family, carers and/or relevant others as required**
- 1E Make appropriate referrals to professionals and other service providers as required in consultation with supervisor**

Identify the current communication capacity and needs of the person

Effective communication aims to achieve a shared understanding of thoughts and ideas through the exchange of information. How this information is exchanged and interpreted will vary greatly based on the skills, knowledge and communication needs of the participants.

Many individuals have complex communication needs and require supports to aid their communication. As a community services worker it is important that you understand your role in identifying the current communication capacity of the people you care for, and are able to work collaboratively with others to identify and address communication needs.

1A Work in collaboration with the person and others to identify communication needs

Working as a community services worker will require you to have a high level of understanding of the way in which people communicate and how to assist those living with disabilities that cause communication impairment.

Many conditions act as physical barriers to speech and your role will involve having a broad understanding of augmentative and alternative communication strategies and how to tailor these strategies to the individual. To select the most appropriate strategy you will need to work collaboratively with the person and others to determine the individual's communication capacity and needs, and the best approach for meeting those needs.



Meaning of communication

Effective communication involves the sharing of information, thoughts and ideas from one participant to another in order to achieve a shared understanding. We use communication for many reasons, such as to give or obtain information, make a request, entertain, give opinions and empathise with someone.

Communication involves a range of strategies and techniques, all of which are aimed at understanding the message.

Communication includes:

- ▶ listening to what others are saying
- ▶ reading what someone has written
- ▶ asking questions to clarify something you don't understand
- ▶ rephrasing sentences to make information easier to understand
- ▶ using facial expressions, gestures or eye contact to emphasise a point or express your understanding
- ▶ using variations in speech, such as tone, volume, pause and emphasis.

Communication mechanisms

Communication mechanisms are ways that information is gathered and shared. Appropriate communication mechanisms are essential to ensure the support for a person is coordinated. As part of a community services team, you may use a combination of formal and informal communication mechanisms to identify the communication needs of the person accessing services.

Formal communication mechanisms

Formal communication takes place through mechanisms such as team meetings, communication logs, checklists and documentation. When identifying the communication needs of a person, you may record information from the person themselves and the person's family members in a table or a summary report. This documentation can be easily shared between all people that are involved in the support process to inform them of the communication method that is effective and preferred by the person. Other types of formal communication mechanisms that can help you identify communication needs include reports, documentation and recommendations written by other health professionals and community services workers.

Informal communication mechanisms

Informal communication may take place through observations, face-to-face conversations or by jotting down notes. In order to correctly identify the communication needs of a person, you may use observation to see how the person copes with the current communication method, take note of the person's level of comfort whilst using the communication method and if the method needs to be replaced or adjusted to suit their needs. You may also speak with family members or relevant others face-to-face or on the telephone to obtain observations and views that will help you identify communication needs. Informal conversation between workers can also provide information, such as 'I noticed John was frustrated when I was trying to talk with him today. Have you noticed anything different?'



Ways people with disabilities can communicate

People who have one or more disabilities impacting on their communication are referred to as people with complex communication needs (CCN), complex speech impairment (CSI) or communication speech difficulty (CSD).

The complexity of the communication needs of the person will determine the way that the person is able to communicate. Some people may be able to communicate effectively using sign language as they have the ability to control muscles and coordinate a sequence of movements.

People with CCN will often use communication symbols. Communication symbols are a system of representing meaning. Where a person is unable to speak, meaning has to be represented by a set of symbols.

Here are examples of communication symbols.

Spoken words

Spoken words are traditional orthography (language conventions) that stand for objects, directions, instructions, etc. – everything we need to communicate. This may be difficult for people with acquired brain injuries (ABIs) or other cognitive impairments and speech difficulties. They may be unable to form words or unable to speak so they can be understood.

Photographs

Photographs are a kind of symbol used to represent meaning. Photographs of items a person wants, likes or that have personal meaning can be used in chat books, activity boards and other aids to help communication. Photographs of friends and relatives may also be included in the communication aids.

Pictures

Pictures are used to represent objects or items a person wishes to communicate about. A widely used system is the Picture Exchange Communication System (PECS). It is based on the exchanging of pictures to express a person's communication needs. PECS is divided into structured phases that progress from teaching the requesting of specific items to building sentences. It can be used in a variety of settings.

Icons

Minspeak is a visual language designed for use in augmentative communication and uses icons as symbols instead of relying on the written word. The person using Minspeak can independently communicate a large vocabulary with a small number of icons. This means the person doesn't have to spell, or to learn or navigate through a large set of pictures. For more information about Minspeak, visit their website: <http://aspirelr.link/minspeak>

Pictographs

There are a number of commercial pictorial aids available, and this type of assistive technology does not rely on reading the written word, hearing a word or speaking a word. Because of this, pictographs do not rely on any level of literacy. They include a set of clear and easily understood drawings which allows a person to convey the information needed. The most commonly used sets of pictorial symbols include Boardmaker, COMPIC and Blissymbolics.

Facilitate communication

Effective communication requires a combination of cognitive and physical skills. Depending on the person there is a range of ways to collaborate in order to facilitate communication.

You may facilitate communication by:

- ▶ structuring the physical environment to support communication
- ▶ allowing adequate time for the person to communicate
- ▶ creating opportunities for the person to practise their communication
- ▶ reinforcing the person's communication strategies
- ▶ modelling communication devices
- ▶ ensuring training and support is provided for the person's family or communication partners.

Augmentative and alternative communication

Augmentative and alternative communication (AAC) is a set of formal and informal systems used to increase an individual's understanding of spoken language and complement and enhance their spoken communication. AAC systems are comprised of communication aids, symbol strategies and techniques or methods that include aided and unaided strategies. It is important you are familiar with, and understand, a range of systems and techniques so you can select an appropriate symbol system and communication method, and to effectively implement the system.

The main aims of AAC are to provide:

- ▶ a person with a means of independent communication
- ▶ a communication strategy that supports and increases the person's ability to participate in all environments
- ▶ a communication strategy that supports and increases the person's ability to participate in communication with autonomy, choice and self-determination
- ▶ opportunities for community participation and increased quality of life.

Principles and practices

Speech Pathology Australia's principles of practice outline recommendations on how to facilitate quality service provision for people with communication needs. When facilitating augmentative and alternative communication there are a number of principles and practices that need to be considered. These are outlined below.

The service model

Depending on the complexity of the person's needs, there may be a range of service delivery approaches used. Approaches may include individual work with the person, a collaborative approach involving family members (including training if required) or a collaborative consultation with other health professionals.

Support team

The complexity of the person's needs will indicate what team members are required to provide support. Team members may come from a range of disciplines and professions. Team members may include speech pathologists, allied health assistants, occupational therapists or physiotherapists.

Assessment cycle

The assessment, intervention and monitoring cycle is based on principles for identifying how different AAC systems can address people's needs by focussing on facilitating their participation. Dynamic assessment focuses on the person's potential for learning, rather than the assessment of current skills.

Environment

This relates to assessing the person in their natural environment and in multiple contexts if required. By conducting assessments in the person's natural environment, the assessment will inform what type of methods or aids are most appropriate.

Duration and intensity

The duration and intensity of the support required will depend on the needs of the person. Ongoing supports may be needed to ensure functional communication.

Training and mentoring

Training and mentoring may be required for the person's significant other. Training may also be required to prepare the person when transitioning from school and moving into employment.

Ethical practice

A code of ethical practice impacts on the implementation of AAC systems. Interventions must be selected on the basis of evidence that demonstrate the system will be of benefit to the person.

Basic AAC strategies

Basic AAC strategies aim to enhance and support an individual's communication capacity and participation opportunities through communication strategies. There are two types of basic AAC strategies that may be used.

Unaided

- ▶ Unaided AAC systems are those that do not use equipment. Everyone communicates using gestures, facial expressions, eye contact or vocalisation. This includes body language such as pointing, shrugging, folding arms, smiling, frowning and laughing. The use of this strategy depends on the level of the person's abilities.

Aided

- ▶ Using an aided AAC system means a person communicates by using an object. Aided AAC is made up of low technology aids and high technology aids:
 - Low technology aids may include photographs, communication boards, labels, signs or memory books.
 - High technology aids may include a computer or speech generating devices.

Correct use of AAC strategies

The correct use of AAC strategies requires a team approach to person-centred care. This is because there are often no standardised or normative tools to determine an individual's needs and appropriate strategies. Instead each case must be dealt with individually and involve a series of assessments and assessment tools to establish the person's functional goals and the best strategies to achieve those goals.

It is also important to be aware that an individual's communication abilities and needs can change over time and that AAC strategies need to be monitored and adjusted to meet the changing needs, abilities and goals of each individual.



Causes and conditions of communication impairment

It is important to understand the reasons behind communication difficulties, as this can help you to develop appropriate and effective strategies. Always look at the person first and not the disability, although understanding how a disability may impact on a person will assist you in developing appropriate strategies. You should ensure you have a good understanding of the person's disability both regarding the general impact of the disability and in the specific impact to the individual. Here are some examples.

Physical impairment

Cerebral palsy is an example of a physical impairment. A person with cerebral palsy may have difficulty controlling muscles to speak intelligibly, although they may have excellent understanding and know exactly what they want to say. Sometimes the person has the fine motor skills to type and use a computer or they may need an electronic switching system to scan the keyboard.

Intellectual impairment

Intellectual impairment means the person may have limitations in comprehension, range of vocabulary, understanding of language and grammatical structure, planning and organisation, and clarity of speech. Strategies should include using visual and audio cues appropriate to cognitive level, clear and consistent steps and real-life situations where possible, as well as positive feedback.

Autism

Autism is a neurobiological disorder, part of a group of disorders known as Autism Spectrum Disorders (ASD). Autism can impair social interaction and communication. Visual displays are sometimes more effective, and consistency across all environments is very important. To learn more about ASD, visit the Autism Spectrum Australia website: <http://aspirelr.link/autism-spectrum>

Learning disabilities

Learning disabilities are neurological disorders. Learning disabilities, such as dyslexia and dyspraxia, mean that the person may have trouble with the acquisition, retention and conceptualisation of information. Specific skill instructions and a supportive environment are important.

Progressive illness

Examples of progressive illnesses include motor neurone disease or multiple sclerosis. Motor neurone disease is a progressive condition where the muscles become weaker and eventually paralysed. A communication strategy may initially focus on using a finger to depress keys and then change to requiring a communication partner to do auditory scanning or recognise eye gaze.

Tumours and aphasia

Tumours and aphasia may cause people to have difficulty talking, understanding what others say, reading, writing and using numbers. Visual cues such as pictures or word cards may be needed to reinforce auditory reception. A throat tumour may impact on vocal cords, making signing an appropriate option.

Stroke

A stroke is a cerebrovascular accident (CVA) that is the result of either insufficient blood flow to the brain, called ischemia, or the bleeding into the tissues of the brain from a ruptured blood vessel. Individuals who have had a stroke may require communication aids due to the following communication difficulties:

- ▶ Trouble physically forming words
- ▶ Trouble understanding words
- ▶ Trouble remembering what words and symbols represent
- ▶ Trouble with confusing one word for another

Acquired brain injury

An acquired brain injury (ABI) means that depending on the nature and location of the injury, the person could experience impairments in their vision, muscle control and coordination, and speech. A person's cognitive function may be impaired leading to memory loss, and inability to focus and maintain attention and perception.

Cross cultural communication protocols

Culture impacts on our communication with others, our values, the way we solve problems, and family/work roles and responsibilities. Remember that everyone is an individual. In all communication, respect and tolerance must be demonstrated. When identifying the communication needs of a person from another culture there are aspects that need to be considered.

Cultural considerations include the following:

- ▶ Do you need to arrange an interpreter? If so, make sure you know the specific language/dialect.
- ▶ Will the AAC strategy need to incorporate more than one language?
- ▶ What are the family's attitudes towards professional intervention?
- ▶ Have there been negative experiences with professional intervention?
- ▶ How can you show respect for customs and values without making assumptions?
- ▶ How can you provide plenty of opportunities for clarification? Be aware of the language and jargon you use.

Identify a person's communication needs

Your own observations and those of others are an essential part of the process to identify needs. Seeing how a person communicates, who with and in what setting is very important. Always record your observations. Be objective and only write down what you see. You may need a professional to interpret your data.



Example

Work in collaboration to identify communication needs

Gwen is a speech pathologist who works with John, a nine-year-old boy with CCN who uses an electronic device to communicate. John’s teacher writes in a report that John is using his device in class, but mostly at lunchtime with fellow students. This observation helps Gwen to gain a better picture of how John communicates at school.

Gwen goes to the school and observes John at lunchtime. She notices that his body is relaxed, his face is bright and alert and he is typing faster on his device than he does in class. Gwen observes what John and his friends are communicating about and who the primary communication partners are.

In class Gwen observes that only the teacher uses the device with John as the other students are busy doing their own work. John seems less motivated to use his device in class.

Gwen identifies that John’s communication needs might be better met in class. She speaks to John and his teacher about her observations so they can collaborate on strategies, and also completes the following checklist.

Questions	No	Yes	Sometimes	Comments
Does he ever begin a conversation with you?			✓	Only if he needs something.
Does he respond to everyday questions such as, ‘Would you like a drink?’			✓	Will nod head ‘yes’ or shake head ‘no’.
Does he describe feelings to you?			✓	Will sometimes use happy/sad symbols when prompted.
Does he maintain eye contact when talking to you?	✓			Only makes minimal eye contact with others.

Practice task 1

- List two examples of informal communication mechanisms.

.....

.....

- What are two aims of AAC strategies?

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.....

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.....

3. What are three examples of unaided AAC strategies?

.....

.....

.....

4. What are three conditions that may impair communication?

.....

.....

.....

5. Provide two ways that you can collaborate with a person to facilitate communication.

.....

.....

6. Provide one way that can ensure the communication strategy is being used correctly.

.....

.....

7. Provide two aspects you need to consider to ensure you meet the cultural communication needs of a person.

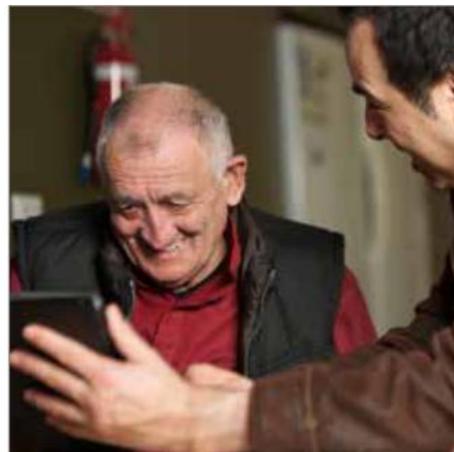
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Click to complete Practice task 1

1B Use appropriate supports to aid the person's current communication capacity

Technological advances in the last decade have led to a large supply of advanced computerised communication support aids. As technology advances these devices become smaller, more accessible and easier to use. For many aging Australians and those with complex communication needs, high technological equipment can be poorly matched with their capabilities. It is important that you have a good general knowledge of the communication tools that are available and that you are able to appropriately prescribe and support their use. Depending on the needs of the person, a multimodal approach may be required, which incorporates as many different ways to communicate as possible. Support aids may include electronic aids, communication boards, activity sequence boards, scanning or community request cards.



Electronic aids

There are a range of software programs that can encourage and support people of all abilities to communicate. High-technology aids vary in cost and size. In many cases these can be mounted on a wheelchair if necessary.

Here are examples of electronic aids and some tips on how to use them correctly.

Electronic aids	Tips for use
▶ Speech Generating Devices (SGD) which provide a voice	▶ Provide training for the person and/or their significant other
▶ Voice amplifiers which increase speech volume	▶ Use mounting systems to hold the device in position
▶ External speakers for communication devices	▶ Fit special switches to enable a person to use the device

Electronic aid pros and cons

For some older Australians, there may be anxiety about using a computer or other technological devices. Young people with low level literacy can be very adept at using a computer and can be very motivated to use them to communicate.



Communication boards

A communication board allows an individual to communicate their needs or feelings in a nonverbal way. A communication board includes frequently used letters, words or pictures the person can point or gesture to. The pictures or symbols are ordered in a systematic way. A communication board may be grouped according to activities, food or the alphabet.

Here is more information about communication boards and some tips on how to use them correctly.

Communication boards	Tips for use
<ul style="list-style-type: none"> ▶ May use words or pictures, or a combination of both 	<ul style="list-style-type: none"> ▶ Provide training for the person and/or their significant other
<ul style="list-style-type: none"> ▶ May be specialised for different situations such as bathroom routines, grooming or post-operative care 	<ul style="list-style-type: none"> ▶ Ensure boards are appropriate for the needs and skill level of the person

Activity sequence boards

Activity sequence boards can be made with picture or word cards and Velcro. Residential units may have a board with days of the week and pictures of staff. For example, if a person is working on Friday their picture is placed under the 'Friday' heading. Alternatively, a person's mother might have a sequence board to show how to do a household task.

Here is more information about activity sequence boards and some tips on how to use them correctly.

Sequence boards	Tips for use
<ul style="list-style-type: none"> ▶ Use pictures and/or words of activities and tasks in the order in which they occur 	<ul style="list-style-type: none"> ▶ Provide training for the person and/or their significant other.
<ul style="list-style-type: none"> ▶ Use pictures and/or words to show step-by-step methods of completing a task 	<ul style="list-style-type: none"> ▶ Regularly update and adjust activity sequence boards according to variations in tasks or schedules

Scanning

Scanning involves a range of pictures, drawings or objects that can be used to select an activity, express feelings or initiate a conversation. Scanning can be complicated or simple depending on the level of the person's cognition. If the person's cognitive functions are good and they are used to this method, there can be a wide range of selections from which to make a choice.

Here are two types of scanning and some tips for use.

Direct selection

The person independently points to an item using any part of their body. Upper body is used when possible. If not, a foot may be used. Simple appliances such as a hand or mouth stick may also be used.

Indirect selection

The person is offered choices of symbols, pictures and words. The person indicates choice by nodding, blinking, gesturing or by vocalisation.

Tips for use

To use direct selection scanning correctly, the person must have accuracy and a reasonable amount of movement.

To use indirect selection scanning correctly, the person must be allowed sufficient time to make choices.

Community request cards

Community request cards help people communicate in the community. The cards use a combination of images and/or words to enable communication between community members. For example, a person with CCN may need to communicate to a bus driver.

Community request cards enable the person to access their community independently. Depending on where they are going and what they are doing a small card can be made up with appropriate words or pictures. The person is then able to show the card. This puts the ownership of the communication on the individual rather than relying on community services workers.



Assess communication skills

An assessment tool that is widely used in Australia is the Triple C Checklist of Communication Competencies, developed by Australian speech pathologists to assess the communication skills of people with severe or multiple disabilities with little or no speech. It comprises a series of observational checklists to identify the stage at which a person is communicating.

The checklists and accompanying manual do not require any specialist training. They are designed to be completed by those most familiar with the person: family, carers and community services workers. Motivation to participate in the assessment needs to be taken into account, particularly in adults.

To learn more about the Triple C Checklist of Communication Competencies, visit Scope:

- ▶ <http://aspirelr.link/triple-c-checklist>

Stages of an AAC assessment

When conducting an AAC assessment, there are three stages that the assessment may transition through. These are outlined below.

Stage One	Initial assessment This stage looks at the current communication needs and required abilities.
Stage Two	Identification of future needs This stage identifies communication systems that will be needed to support the person in the future.
Stage Three	Review This stage looks at how to meet the changing needs and capabilities of the person.

Assessment steps

There are five assessment steps that may occur when conducting an assessment. These steps are outlined below.

Identification of communication patterns

- ▶ This step is used to identify the communication patterns of the person and the level of communication ability that is required.

Identification of peer communication

- ▶ This step considers the types of communication that are used by peers of the person. This helps to identify the communication aids that are required for the person.

Evaluation of effectiveness

- ▶ This step evaluates communication abilities by observing people without communication needs in the same situation as a person requiring aid. This helps to identify differences and aspects that need to be addressed.

Identification of barriers

- ▶ This step looks at barriers that cannot be eliminated by providing an AAC system. It also looks at barriers to the capabilities, attitudes and limitations of the person.

Development of communication strategies

- ▶ This stage identifies areas where intervention needs to occur.

Example

Use appropriate supports to aid communication capacity

Aiden is 17-years-old and has cerebral palsy. He successfully uses an electronic device that prints what he wants to say. This works very well at school as his teachers ensure the battery is charged and much of the work focuses on the written word. His classmates are accustomed to texting on their phones and so encourage Aiden to use his device.



Aiden’s father has never used any sort of computer and is uncomfortable with the device. He says he and Aiden understand each other well enough. By observing Aiden in his home environment his community services worker is able to identify the need for a less technological communication aid. By implementing a picture based communication tool and using direct selection scanning, Aiden and his father are able to communicate more efficiently on a day-to-day basis.

Practice task 2

- 1. Provide one example of how a person can use direct selection scanning.

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- 2. Describe the three stages of an AAC assessment.

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Click to complete Practice task 2

1C Document the outcomes of this process in line with organisation procedures

Your organisation will have policies and procedures which outline the documentation requirements and standards that apply to your workplace. The completed documentation provides a formal record of a person's current behaviour, abilities and needs, and should be gathered and placed in the person's file. You need to understand the requirements and responsibilities of your work role regarding documentation obligations.



Documentation guidelines

When documenting the communication capacity and needs of the person, it is critical that the information is reliable and valid. Documentation may be used and shared among the support team so it is important that the information is correct and accurate.

Here are some guidelines to follow.

When documenting:

- ▶ make sure the information you are recording is accurate, i.e. names are spelt correctly and contact details are current
- ▶ record the date the documentation was received or created and the name and position of the person who created it
- ▶ ensure language is clear and concise
- ▶ don't use jargon or technical language unless it is appropriate to do so and you have used the correct words
- ▶ don't abbreviate terms unless you know it is appropriate to do so
- ▶ use concrete descriptions not emotional language if describing behaviours
- ▶ check you have the intended meaning if paraphrasing or summarising
- ▶ practise principles of confidentiality in terms of what information is collected, how it is stored and who it is released to
- ▶ record what tasks people are assigned to and dates for follow up.

Documentation process

Documentation is an essential part of any process. Without accurate documentation valuable observations may be lost. Documentation should be comprehensive as well as compliant with the auditing requirements of your organisation.

Process guidelines to follow:

- ▶ Record the outcomes of the processes used for identifying needs
- ▶ Record the current level of the individual's ability to communicate
- ▶ Record the form or method you are to follow within your organisation
- ▶ Ask your supervisor if you are in doubt about a procedure

- ▶ Always follow organisational privacy and confidentiality policies and procedures
- ▶ Do not share information with anyone other than those who need the data
- ▶ Correctly file forms and other documentation in lockable cabinets that can only be accessed by the appropriate people

Work role boundaries

As a community services worker your role is to support the person and their family through the process of identifying their communication needs. You should always work within the scope of your professional boundaries.

Here are some strategies that will help clearly define your professional boundaries.

Maintain professional boundaries

- ▶ Maintaining professional boundaries in your work role means keeping to the specifications of your job role and organisational policies and procedures. It also means making sure that you maintain adequate personal boundaries in your professional relations with people you support.

Know what not to do

Community services workers should not attempt to carry out work that:

- ▶ is not specified in their job description
- ▶ cannot be performed safely due to lack of training or practical experience
- ▶ is unethical, illegal or outside the policies and procedures of the organisation.

Do not blur the distinction

- ▶ Workers must make sure they do not blur the distinction between being a professional and a friend when dealing with people and their families. This is often difficult for new workers, who may at times feel overwhelmed by the problems faced by the people they support and feel that they need to take on the role of rescuer. This is definitely not your role.

Act as a facilitator

- ▶ The goal of all effective community services workers should be to act as a facilitator rather than rescuer. In this way, the worker helps people to learn skills to help themselves. New workers may find it a difficult balancing act to provide the right amount of support while fostering the person's sense of empowerment and independence.

Support, not friendship

- ▶ When workers allow people to think of them as a friend, they confuse the people that they provide support to and risk losing their respect. People with support needs who consider themselves a personal friend of a worker may develop unrealistic expectations about what the worker can do for them and may become disappointed and disillusioned with the service when this does not happen.

Example

Document the outcomes of this process

Documenting processes and their outcomes according to organisational procedures is an integral part of community services work. The following provides an example of minutes taken at a case conference.

Case conference meeting minutes

Present: Joe Smith; Pam Smith (mother); Jack Smith (brother); Peter Kent, case manager; Jan Brown, speech pathologist.

Purpose: To identify Joe’s communication needs and his current level of communication.

Pam said that Joe does not initiate any communication but responds verbally with ‘yes’ and ‘no’ when asked specific questions about needs and daily activities. He understands instructions such as ‘Clean your teeth’, but appears to lose focus if more than one instruction is given. Joe occasionally points to pictures and vocalises but it is impossible to be sure what his meaning is.

Peter told day program staff that Joe likes cooking and drawing activities but does not interact with anyone. Peter also noted Joe understands instructions such as, ‘It’s time to get your lunch’.

During the meeting Joe sat at the table and drew abstract pictures. He did not make eye contact with anyone. His body language indicated he was listening to Pam and Jack. Joe did not respond to Peter or Jan in any discernible fashion. At stages Joe would get up and go to the door. When Pam said they would go home soon he sat down but repeatedly pulled at her arm. Pam said Joe did this when he was in a strange environment and wanted to leave. When Jan offered some picture cards Joe did not respond. Later he picked the cards up and sorted through them, vocalising to himself.

Conclusion: Joe currently appears to have little expressive communication. He has receptive communication in familiar settings and for single sequence instructions. Joe is using nonverbal communication intentionally.

Action:

- ▶ Jan to visit Joe at home to complete a formal assessment.
- ▶ Peter to develop a list of activities that Joe can do at day programs where he might be encouraged to increase his level of decision-making and participation.
- ▶ Jan to work with Peter on developing some choice cards to trial.

Practice task 3

1. Provide one reason why it is important that documentation is reliable and valid.
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2. Provide one example that can help you decide if a task is beyond the boundary of your work role.
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Click to complete Practice task 3

1D Consult with additional people including family, carers and/or relevant others as required

People with complex communication needs may not be able to utilise speech due to a physical, sensory or intellectual disability. Alternatively they may experience cognitive impairment due to a disease or condition. Some people may have a combination of these disabilities, and may communicate without speech at all. Others may need to enhance their speech with AAC strategies. For example, they may need to use pictures that represent words or sentences, a machine that works with symbols, or an electronic device that speaks for them. You need to identify the person's specific communication needs and determine the best system to suit their needs. To do this you need to gain input from a number of people representing different aspects of the person's life. You may also need to consult with a range of professionals.



Consult with others

The starting point for identifying communication needs and abilities is always with the person themselves. The person is the one who best knows how they feel, what is working and what is difficult. You should secondly consult with people who spend a lot of time with the person and who are most involved in supporting communication strategies.

At different stages you may include other people in the consultation process. These may be specialists, other family and friends or people who are able to help identify what the person's specific needs are. You should prepare a profile of the person that you can build on as you find out more information through consultation with others.

People you may consult with are described below.

The person

Whatever the level of communication the person has, they need to be involved in determining their needs and meeting their own needs. Some people may have little expressive communication (the ability to get their message across) but have a high level of receptive communication (the ability to understand what someone else has said). You may have to learn how to interpret their body language.

Family and friends

This group of people are often referred to as 'significant others'. They generally have years of experience and knowledge about the person and their communication. They also know the things that interest the person and what might create a supportive environment. Their involvement is essential as they are part of the team known as the person's 'key communication partners' – people who communicate with the person using AAC strategies.

Staff

Staff who work with the person can offer valuable insights. They can provide information on the person's preferences, their strengths, challenges and the sort of environment that supports them best. These people include staff from day programs or employment settings, schools, personal care workers and recreational or community services organisations. Those in this group are also potential communication partners.

Health professionals

You are most likely to consult with health professionals such as speech pathologists, occupational therapists, physiotherapists and psychologists who are able to explain the person's cognitive level or muscle strength, and the type of system best suited for them.

Consult with family and friends

It is the people who live with the person (family members/carers) and those who know them well personally that can give valuable insight into interpreting the person's nonverbal communication and help identify their communication needs. You need to ensure family members and friends are involved in communication strategies and follow up with further discussions if required. It is important to confirm and clarify information with them to ensure the most effective means of assistive communication is identified.

Example

Consult with additional people as required

May is a community services worker who has recently starting supporting Peter, a 35-years-old man with Down syndrome. Peter does not verbalise many words. May notices that he is good friends with Ethan who has cerebral palsy and uses picture cards. May sees their interaction as a good opportunity to observe Peter's needs and how he communicates. She makes a game of it. She watches as Peter starts using Ethan's cards to make choices of his own.



At this stage May knows that an assessment by a speech pathologist would be valuable. She talks with Peter's key worker at his residential unit. Together they talk to Robert, Peter's brother and guardian. After obtaining permission from Robert, May arranges an appointment with a speech pathologist.

By consulting with others and involving a specialist May is giving Peter the best opportunity to improve his communication.

Practice task 4

1. Provide one reason why family and friends should be consulted when identifying a person's communication needs.

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2. Provide two health professionals that may be included in the consultation process.

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Click to complete Practice task 4

1E Make appropriate referrals to professionals and other service providers as required in consultation with supervisor

As a community services worker, you need to understand what other services are available to support the person and how to refer them to the appropriate organisation or professional. Referrals must be completed in consultation with a supervisor.

The range of available services and supports can vary from state to state. To ensure the person can access a particular service you will need to know the eligibility criteria, referral pathways and processes to follow.



Specialist involvement

To build a picture of the person's communication needs you will need to consult with others, such as health care specialists, for advice or additional input. Some specialist areas may overlap. It is important when working in a multidisciplinary team that all care is documented to ensure each team member fulfils the responsibilities of their role and that there are no gaps in the service provided.

Family members and specialists may meet regularly and discuss everyone's input, or people may be consulted independently of each other. Your primary role is to gather relevant information from everyone that is involved in the support of the person.

Types of specialists

There are many different types of specialists who can provide perspective and expertise in the development and implementation of AAC strategies. Remember that many professional roles overlap. For example, speech pathologists, occupational therapists and psychologists all have an understanding of cognitive functioning and may all have input. Specialist staffs also have a good understanding of other areas that impact on their own field. For example, an occupational therapist may be able to give advice on accessing funding for a communication device.

Here are some different types of specialists you may consult with.

Speech pathologists

A speech pathologist works with people of all ages who have communication or swallowing difficulties, such as:

- ▶ speech clarity and tone
- ▶ using and understanding language
- ▶ reading and writing
- ▶ eating and drinking.

Occupational therapists

Occupational therapists assist people to be more independent in their daily lives. In regard to AAC they can assess and advise on:

- ▶ the positioning of the body in order to assist with using AAC strategies
- ▶ access to computers and adaptive aids
- ▶ cognitive and memory assessment and retraining
- ▶ home assessment and modification
- ▶ physical rehabilitation to improve coordination, strength and movement.

Physiotherapists

Physiotherapists work on motor skills development and training and can provide advice about improving muscle strength and range. Physical therapy can improve quality of life through the promotion of:

- ▶ mobility
- ▶ functional ability
- ▶ movement.

Psychologists

Psychologists work with the way our minds interpret the world and can assist with:

- ▶ interpreting behaviour
- ▶ counselling and mental health support
- ▶ identifying and implementing motivational strategies.

Education specialists

Education specialists identify cognitive ability and learning style preference. For example, in order to use a communication board a person needs to understand the concept of scanning. It may be necessary to practise this in incremental stages. Education specialists are able to identify strategies that develop cognitive abilities.

Teachers and care staff

Teachers, support staff, day program workers, work supervisors and residential staff all have knowledge of how a person communicates and what sort of environment encourages them to communicate. Since they are in regular contact with the person they can contribute in many ways.

Technical specialists

Technical specialists can provide provision, service and advice on electronic and mechanical aids to improve communication. This can include:

- ▶ computer technology development or modification of software programs
- ▶ engineering adaptation or development of electronic and mechanical devices.

Make referrals

You may need to arrange a referral to another health professional or specialist in regards to the person's communication needs. A referral is a formal request to a particular specialist or service. Most organisations have a standard referral form they use. You should consult with your supervisor before making referrals to specialty services.

Whenever arranging a referral you should ensure that you comply with all privacy, confidentiality and informed consent processes.

Information you may be asked to provide when referring:

- ▶ Personal details of the person wishing to access the service (name, address, contact details)
- ▶ Information relevant to the type of service required (disability type, current situation)
- ▶ Any specific needs the person may have (access, interpreter)
- ▶ Details of the person making the referral

Referrals checklist

Prior to starting a referral the following points should be considered.

Questions to consider:

- ▶ Are there eligibility criteria? For example, age or geographical location
- ▶ Is there a cost involved?
- ▶ Is a doctor's referral required if the service is covered under Medicare?
- ▶ Will there be excessive travel required?
- ▶ How much and what sort of information will the service require?
- ▶ Will other assessments need to be completed prior to the appointment with the specialist?

Complete the referral

In some situations, family members may prefer to complete a referral themselves. Alternatively they may request you do it or it may be a requirement that the referral comes through a disability service provider.

Prior to completing the referral, make sure you have read and understood the form. Like all documentation, the information on the referral needs to be clear and correct. This means checking the spelling of names and the currency of contact information. You may need to attach additional information to the referral that will help the specialist, such as a communication profile. There may be terminology that is unfamiliar to you. If you are unsure about any terminology or acronyms on the form, consult your supervisor.



Example

Make appropriate referrals in consultation with a supervisor

Angela is a community services worker. Mick is 60 and has severe cerebral palsy. He cannot consistently control the movement of his head, arms or legs. Mick lives with Beth, his sister and guardian, who believes that his receptive communication is good. However, the staff at Mick’s day program and the carers who work with him at home believe that he does not understand what they are saying. Mick frequently smiles or grimaces, but due to his uncontrolled body movements it is difficult to be sure when this is intentional. A decision is made to evaluate Mick’s level of communication and whether there is a reliable strategy he could use.



Angela works with Beth to make a list of all the people Mick is involved with on a daily basis and arranges to consult with each of them. This builds a picture of the opportunities Mick has for communication and the occasions when he may be communicating.

After putting this information together Angela consults with her supervisor about making a referral to a speech pathologist. She then obtains Beth’s permission to make the referral.

The speech pathologist uses a number of assessment tools to establish Mick’s level of cognitive function and communication level. Mick has regular contact with an occupational therapist and Angela informs her of the speech pathologist’s assessment. The occupational therapist makes some suggestions about using switches, which Mick may be able to control to communicate more effectively.

Practice task 5

1. List one piece of information that might be required in a referral to a specialist.

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2. List one aspect of the role of a speech pathologist.

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Click to complete Practice task 5

Summary

1. Your role will involve having a broad understanding of augmentative and alternative communication (AAC) strategies and how to tailor these strategies to the person.
2. To select the most appropriate strategy you will need to work collaboratively with others to determine the person's communication capacity and needs, and the best approach to meet those needs.
3. AAC are formal and informal systems used to increase a person's understanding of spoken language and complement and enhance their spoken communication.
4. You are required to have a good general knowledge of the communication tools that are available, and appropriately prescribe and support their use.
5. Community services organisations will have policies and procedures which outline the documentation requirements and standards that need to be followed.
6. You need to understand what other services and professionals are available, and support the person to access them where appropriate.
7. You may need to arrange a referral in consultation with a supervisor to involve another health professional or specialist in a person's care.

Learning checkpoint 1

Identify the current communication capacity and needs of the person

This learning checkpoint allows you to review your skills and knowledge in identifying the current communication capacity and needs of the person.

Part A

1. Provide two definitions of communication.

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2. List two formal mechanisms that are used to communicate.

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3. List two informal mechanisms that are used to communicate.

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4. List two types of communication symbols.

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5. What role can a community services worker play in supporting the communication needs of someone with a disability?

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6. Describe the ethical practice that applies when facilitating AAC.

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7. Describe one basic AAC strategy.

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8. Describe one way you can ensure the ACC strategy is correct for a person.

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9. Briefly describe an example of a progressive illness and the communication strategy that may be used.

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10. Provide two guidelines you should follow in the documentation process.

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11. Provide a brief explanation of maintaining work role boundaries.

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12. Provide three examples of electronic communication aids.

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13. Briefly describe how to use direct selection and indirect selection scanning correctly.

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Part B

Read the case study, then answer the questions that follow.

Case study

Nina is one of a team of workers who provide personal care and some home care to Molly. Molly is an Italian lady and communicates primary in Italian. Nina only does one shift every second weekend and occasionally fills in if other staff are on leave. She and Molly get on well. Molly is in her late 70s and has been diagnosed with Alzheimer’s disease.

When Nina arrives to help Molly with her personal care one Saturday morning, she notices that Molly has difficulty using words and is not participating in conversation or activities as she usually does. Nina discusses the change in Molly with her supervisor. They decide that an augmentative and alternative communication strategy may be needed.

1. List three cross cultural factors that Nina should take into consideration when supporting Molly.

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2. Provide two ways Nina can identify Molly’s communication needs.

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- 3. Provide one reason why it is important for Nina to consult with Molly’s significant others when addressing communication needs.

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- 4. Provide two examples of people Nina should consult regarding Molly’s communication needs and support strategies.

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- 5. Provide three examples of specialists that Nina might make a referral to in regards to identifying and addressing Molly’s communication needs.

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- 6. How might a speech pathologist help Molly?

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Topic 2

In this topic you will learn how to:

- 2A Provide information about the person with disability in relation to their likes/dislikes, daily activities and current communication needs**

- 2B With appropriate consultation, develop communication strategies to meet individual needs and level of communication**

- 2C Adjust available tools and programs to address individual needs and preferences**

- 2D Seek advice from other staff and relevant others as required and work within scope of practice**

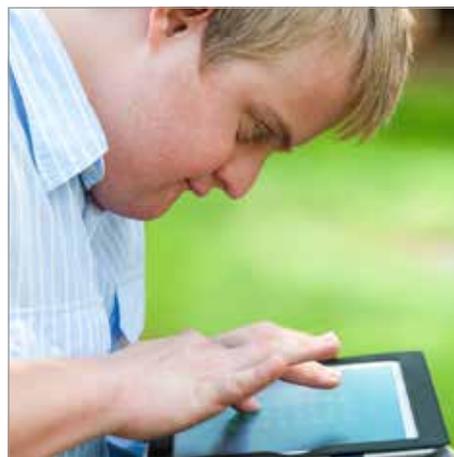
Develop effective AAC strategies

Once current communication abilities and needs have been identified, AAC strategies need to be developed to support the person with CCN in a range of settings. The specific role of a community services worker may vary. In some situations workers may take on a mainly administrative role, as the person, their family and specialists may take on a primary role. In other situations workers may take on a more active role with the assistance of relevant health professionals. Roles and duties will vary depending on what AAC strategy is most effective for the person.

2A Provide information about the person with disability in relation to their likes/dislikes, daily activities and current communication needs

You need to be aware of the range of strategies available to assist the person you support, as you will need to provide information to relevant professionals regarding the person's individual needs (likes and dislikes, daily activities and current communication needs).

Communication strategies can be developed once you have provided information to the relevant people. Communication strategies must always reflect the personality of the person. The communication system is their 'voice', so it must incorporate words or phrases that match the person's age, gender and culture.



Likes and dislikes

When developing an AAC strategy for a person, it is important to take their likes and dislikes into account. Determining and supporting preferences can make the difference between a strategy succeeding or failing. Preferences may change as the person's needs and abilities change. For example, over time the person's motor abilities, physical limitations or level of fatigue may change. If changes do occur, it is critical that all people involved in providing support are made aware of the changes. Information may be provided and shared through notations in the care plan, progress reports or through formal recommendations.

Daily activities

A person's communication preferences are unique to them. For example, one person may prefer to use community request cards when shopping, whereas another person may like to use a communication board. It is important that all people involved in providing support are made aware of the person's communication preferences. Information may be provided and shared through notations in the care plan and activity schedule.

Here is an example of how a person may prefer various communication methods when participating in daily activities.

Daily routine	Communication method
▶ Mall shopping	▶ Electronic device
▶ Walking	▶ Electronic device
▶ Meals	▶ Placemat with symbols
▶ Corner store shopping	▶ Request card
▶ Toileting	▶ Activity overlay on wall

Current communication needs

To address current communication needs, the AAC strategy may need to be updated and revised to reflect the person’s age and abilities. As a person ages, interests and vocabulary will change, resulting in on-going revisions and adaptations. People may be motivated to communicate about different topics, and use different phrases and different terminology. For example, if a person’s environment changes, they may need more participatory phrases included on a message device, such as ‘Have you fed the cat yet?’ and ‘How was your weekend?’ If a person uses visual scene displays for communication, the scenes may need to be adjusted to reflect current environments, objects, individuals or events. It is important that information is provided and shared to all people involved with support in a timely and collaborative manner to ensure strategies remain appropriate.

Example

Provide information in relation to the person’s likes/dislikes, daily activities and current communication needs

Here is an example of how AAC strategies may be scheduled into a weekly routine that tailors to the person’s needs and preferences. This information can be shared with relevant professionals in order to review and monitor strategies.

Day	Activity	Communication method
Monday	Library	Binder
Tuesday	Movie	Device
Wednesday	Shopping	Device
Thursday	Movie	Device
Friday	Swimming	Laminated page on board
Saturday	Dishes	Device
Sunday	Movie	Device

Practice task 6

1. Provide one reason why it is important to take a person’s likes and dislikes into account when developing a communication strategy.

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2. Provide one reason why communication strategies need to reflect current communication needs.

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Click to complete Practice task 6

2B With appropriate consultation, develop communication strategies to meet individual needs and level of communication

The full involvement of the person's support team is required when making decisions regarding communication strategies. Team members need to be able to contribute information, share knowledge and combine expertise to develop the most appropriate strategy for the person.

It is important to take the person's history and preferences into account so that strategies can be adjusted to suit their needs.



Appropriate consultation

People involved in the development of communication strategies will each have their own perspective, observations and experience. To ensure the most complete picture of the person's communication needs, consultation may include input from:

- ▶ the person themselves
- ▶ the person's family
- ▶ the person's significant other
- ▶ speech pathologists
- ▶ occupational therapists
- ▶ cognitive therapists
- ▶ support staff
- ▶ senior staff

Develop communication strategies

A collaborative environment needs to be created so that all aspects of the person's communication needs can be considered and addressed. This may require appointing a team leader that takes responsibility for setting the direction and development of the AAC strategy.

Aspects to consider when developing a strategy:

- ▶ What is the outcome of the communication needs assessment? For example, can the person grasp an object, gesture or recognise symbols?
- ▶ Does the strategy need to include more than one communication device?
- ▶ What vocabulary should be used? For example, general or situational.
- ▶ How flexible is the strategy?
- ▶ Can the strategy be used in a variety of situations?

- ▶ Who is responsible for updating the communication strategy?
- ▶ What are the barriers to this strategy?
- ▶ How will information regarding the effectiveness of the strategy be shared?

Example

Develop communication strategies to meet individual needs and level of communication

Sharon is a community services worker who provides care to Max. Max is a 70 year old man with moderate dementia. Recently Max’s ability to communicate has significantly decreased. Sharon feels that it is necessary to develop an AAC strategy to help Max to communicate more clearly and participate more in his activities of daily living.



Sharon refers Max to a speech pathologist and also discusses his likes, dislikes, routines and preferences with his family and significant others. Together they are able to contribute to a communication board that includes all of Max’s regular vocabulary and some topics of interest that Max may like to talk to people about. This communication strategy successfully increases Max’s ability to communicate and participate in his activities of daily living.

Practice task 7

1. Provide two aspects that should be taken into account when developing a communication strategy.

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2. List two people that may be included in the consultation process.

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Click to complete Practice task 7

2C Adjust available tools and programs to address individual needs and preferences

After developing an AAC strategy, it may be necessary to adjust tools and programs to meet the person's individual needs and preferences. Adjustments may be required to reflect cognitive and motor skills or changes to the person's communication needs, abilities and/or environment.



Adjust tools

In some cases, adjustment may be as simple as adding additional vocabulary to an electronic device. Alternatively, a person may need an entirely new tool to meet a change in physical or cognitive capacity. Some strategies will need to be adjusted to allow for transitioning from one environment to another.

One way of identifying what adjustments are required is to complete a task analysis by breaking down a task into individual steps and identifying what is required in each step. This is something you can do in all aspects of your work, whether you are developing a strategy or supporting someone to learn. The best way to complete a task analysis is to either physically or mentally walk through the task. The person and aid need to be positioned correctly for optimal success, and you will need to consider the way the person can access their aid.

Here is some information on task analysis and correct positioning.

Task analysis

Break down the communication strategy into steps so you can see the specific skills and knowledge required. It may be that one step is preventing the whole strategy from working. If you can identify the problem step, it may be possible to implement a strategy to address the step or even to remove that step entirely. For example, a person may successfully use word cards at home but, because they also have a mild vision impairment, their cards need to have larger print when they are at a restaurant.

Positioning

The person with CCN knows what feels comfortable regarding positioning, but in addition an occupational therapist can offer specialist advice as well as information about mechanical supports. Ideally, a communication partner should be in a position where they can maintain eye contact with the person. This may not always be possible if they need to be standing next to the person to provide support. Personal preferences may include favouring left or right side, sitting or standing and the position where visual material should be in relation to eye level.

Adjust programs

Adjustments to communication programs happen all the time. For example, the person could develop new interests and participate in new activities, which means new photos or pictures may need to be added to boards or books. Another adjustment may be that the person has a new communication partner. This may result in adjustments to the person's communication needs and preferences, and the person may also have to adjust to the ways the new partner does things.

The following information outlines situations in which available programs are commonly adjusted.

Change in participation levels

- ▶ Adjustments may need to be identified and introduced if the person is participating less, if they need additional stimulus or if they are frustrated with the level of communication provided by the existing device or method.

Impact of health issues

- ▶ If a person's physical condition worsens, the way they communicate may be affected. For example, muscle control of people with motor neurone or Parkinson's disease will deteriorate, going from using fingers to type or pointing to using eye gaze. Also, an illness can impact on a person's ability, energy and desire to communicate.

Different venues

- ▶ A person may use one method in one situation and another more appropriate method in another situation. For example, if a person is going into hospital for an operation they may need to take a communication wallet rather than use signing, as hospital staff may not understand signing.

Example

Adjust available tools and programs

The following examples show when and how tools and programs can be adjusted.

- ▶ Ralph uses an electronic communication device that he cannot take when he goes swimming, which he does three times a week. His brother makes some plastic-covered communication cards which he can take in the pool.
- ▶ Ben loves his communication board but it does not take into account his most recent interest in model aeroplanes. His worker adds vocabulary and pictures to address this and removes redundant ones.



Practice task 8

Read the case study, then answer the questions that follow.

Case study

Min is a 40 year old man with an acquired brain injury. Min is also a diabetic and has suffered a diabetic retinopathy that has impacted his eyesight. Min previously communicated effectively using a communication board. However Min’s family recently reported that Min does not want to participate in communication and gets frustrated and angry when people can’t understand him.

Min’s community services worker Jodie discusses the matter with the optometrist and diabetes educator. Together they establish that Min can no longer see the pictures on his board. To address the matter Jodie arranges a board with bigger pictures. As Min will eventually go blind the team start to develop alternative gestures and strategies that don’t require eye sight.

- 1. List one reason why adjustments should be made to Min’s communication tools and programs.

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- 2. Provide an indicator that Min needs the communication tool or strategy adjusted.

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Click to complete Practice task 8

2D Seek advice from other staff and relevant others as required and work within scope of practice

You are not expected to be an expert in all aspects of communication when supporting people with CCN, but you need to know where to find the expertise to provide the best support. When developing communication strategies, you should involve staff who work with the person, the person themselves and their family. All these people bring a different perspective to the situation. For example, a health professional contributes information about the person's medical condition and abilities, family members provide information about personal preferences and the person's past history, and staff can describe the person's social interactions and abilities in different settings.



Scope of practice

Scope of practice describes the responsibilities and boundaries of a job role. Scope of practice also applies to the types of procedures and activities that may be required. Depending on your role within community services, you may be required to seek advice and recommendations from other staff members and health professionals regarding developing AAC strategies. If you are unsure of the scope of your role and your responsibilities, consult with your supervisor.

Seek advice from others

You may need to seek advice from a range of people regarding communication support aids and strategies. This advice may range from input from fellow workers on how the proposed method fits the person's preferences to expert advice from health professionals about the person's cognitive and physical abilities, and how they may impact upon the proposed strategy. You may also seek advice on how to best implement a change or adjust a strategy based on the person's behaviour and capabilities.

You may seek advice from:

- ▶ immediate or extended family
- ▶ physiotherapists
- ▶ occupational therapists
- ▶ physicians
- ▶ vision specialists
- ▶ social workers
- ▶ team members who work closely with the person.

Example

Seek advice from others and work within scope of practice

Janice Buckland is a speech pathologist with Scope Victoria, and has made the following comments about how community services workers can work with her:

As much information needs to be collected as possible about the need for referral. Some of this is collected on the referral form and some in the initial interview. It is important to know as much about the person requiring assistance as possible, such as:

- ▶ What is their current method of communication?
- ▶ Do they initiate communication?
- ▶ How do they use their communication? (For example, to be social, to request, to reject, and to express feelings.)
- ▶ What are the person's likes and dislikes?
- ▶ Who are the people that the person usually communicates with?
- ▶ What are the types of things the person likes to communicate about and who do they like to communicate with?

If the person has little or no speech and is not using another method of communication, a Triple C Checklist of Communication Competencies might be required.

Once the assessment is completed relevant strategies for communication can be determined. A useful resource is the InterAAAction DVD. It outlines the types of strategies that are useful for different levels of communicative ability and has information about how to develop the strategies and how to best introduce them into the person's environment. It can be accessed at: <http://aspirelr.link/interaaction-manual-dvd>

A speech pathologist will discuss possible strategies and can assist to fill in a non-electronic communication assistance scheme (NECAS) referral so a communication system can be developed.

Practice task 9

1. Provide one reason why you may need to seek advice from others regarding developing communication strategies.

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2. Name two people that you may seek advice from.

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Click to complete Practice task 9

Summary

1. When selecting communication strategies you must make sure the system you choose reflects the personality of the person.
2. You must consider the person's likes and dislikes, daily activities and current communication needs and adapt the strategy to suit them.
3. In order to provide optimal support to a person it is important to be aware of their history and preferences, and adjust tools and programs when needed.
4. When developing communication strategies it is important to draw on the knowledge and experience of a range of people, including professionals such as the speech pathologists and physiotherapists involved in the person's care.
5. A strategy needs to reflect the person's cognitive and motor skills, and the various environments in which they will be communicating.
6. You may involve and seek advice from a range of people including health professionals, staff who work with the person, the family of the person and the person themselves.

Learning checkpoint 2

Develop effective AAC strategies

This learning checkpoint allows you to review your skills and knowledge in developing effective AAC strategies.

Part A

1. Provide one reason why it is important to provide information to relevant professionals regarding a person’s likes and dislikes.
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2. Provide two aspects that need to be considered when developing a person’s communication strategy.
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.....
3. Provide two indicators that may suggest that a program needs to be adjusted.
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.....

Part B

Read the case study, then answer the questions that follow.

Case study

Sonia works as part of a team that assists people with disabilities with daily living and personal care tasks. As part of her role Sonia needs to communicate service information to the people she provides care to and their significant others. Every week Sonia assists an 80-year-old man named Jack who has an intellectual disability.

Jack’s communication needs have changed and his family is concerned that he is unable to communicate with them effectively. Sonia agrees that Jack needs further assessment and an AAC communication strategy.

Who are three people that Sonia may consult with in regards to developing Jack’s communication strategy?

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Topic 3

In this topic you will learn how to:

- 3A Use different strategies and devices in AAC**
- 3B Document communication support strategies in the person's individualised plan**
- 3C Organise the environment to optimise communication opportunities**
- 3D Reinforce communication by timely and appropriate response**
- 3E Identify and respond to difficulties experienced by the person when communicating, within own work role and responsibilities**
- 3F Refer difficulties outside own role and responsibilities to appropriate person**
- 3G Provide practice opportunities and information to the person**

Implement an AAC strategy

In today's society people are accustomed to using some form of electronic communication. There is a great range of AAC aids and devices now available, and a shift in the attitude and expectations of how people with communication needs can participate in and contribute to the community.

As a community services worker you may need to demonstrate devices and optimise communication opportunities for people requiring communication aids. You will also need to identify and respond to difficulties, and refer difficulties to the appropriate person when they arise.

3A Use different strategies and devices in AAC

It is important to remember that each person will have their own communication style, needs and abilities. It may be necessary to adjust the communication strategy or change the strategy to provide the person with the most effective communication opportunities. This may mean changing the communication device or using a combination of devices to support the strategy. It is important to remember that the communication device is the person's voice.

AAC strategies

The communication strategy that is used will depend on the person. Considerations that will influence the strategy may include the person's motor abilities, cognitive abilities, physical capabilities, vision and hearing, and fatigue levels. Strategies will also be based around the person's access method. An access method describes the way a person selects the message they wish to communicate.

Access methods include:

- ▶ touch
- ▶ scanning
- ▶ alternative mouse
- ▶ head tracking
- ▶ eye pointing.

Touch

Touch is a form of direct selection. This is when a person points to or directly touches the message or symbol representing the message. Direct selection is a preferred access method because it is simple and quick. This method may be used to support the communication strategy of a person with body strength and adequate vision.



Scanning

Indirect scanning is an access method that requires the person to wait while the device steps through choices that are displayed. The person then activates a switch to indicate the message choice. This method may be used to support a person with physical abilities who has the capacity to use consistent and repeated movements.

Auditory scanning requires the person to listen to auditory cues and follow visual cues such as lights or highlights. This method may be used to support a person with cognitive abilities to follow auditory cues, and physical capabilities to activate a switch when messages are read out.



Alternative mouse

Mouse alternatives are a form of direct selection, and include trackballs, joysticks, track pads or switch interfaces. This method may be used to support the communication strategy of a person with limited hand control, fine or gross motor skill difficulties, involuntary muscle spasms or movement disorders.



Head tracking

Head tracking is a form of direct selection. Head tracking uses computer vision techniques that have the function of a mouse and replace it by means of face feature tracking and face gesture recognition. This method may be used to support the communication strategy of a person with limitations in their upper body limbs but with gross or fine motor head control.



Eye pointing

Eye pointing is a form of direct selection. This form of access is also referred to as eye gazing. This technology uses an infrared light which follows the person's pupil to determine where the person is looking on the computer screen. The screen has cells which contain symbols, words or sentences which is then converted to an auditory message. This method may be used to support the communication strategy of a person with compromised motor skills or physical limitations.



AAC devices

Communication strategies work best when used in combination with the most appropriate AAC device. For this reason you will need to make sure you know how to use communication aids and operate communication devices. You may need to train support workers or help the person adjust to a device or aid when they first use it.

Below are some AAC devices and strategies to use with them.

Chat books

Chat books comprise of captioned photos, mementos etc. that assist the person with sharing personal information.

Show the person the chat book that has been prepared for them by their family, friends and staff. Let them know that it will be updated as circumstances change and as they engage in new activities.

Be sure favourite photos or activities are included. Where possible, the person should select the content. It may take some time before the person sees the relevance of using the chat book. Be patient and encourage everyone to be consistent in using it.

Symbols

Symbols can be used in a variety of ways. You might use cards showing a range of feelings depicted as symbols; for example, a happy face, tears and a frown. Show the person the range of feeling cards. Mime the feeling and point to the card, then get the person to demonstrate.

Watch to see how well the person uses these cards to communicate. For example, when Peter comes home his worker asks him if he had a good day. Peter may not be able to express his feelings but he may go to the feelings cards, take his photo and put it under the happy picture.

Images, objects and icons

If a person prefers photos or drawings to symbols, make sure you have a wide range so they can make appropriate choices. Show them where they are stored for easy access or place them on a felt board where they can be easily seen.

If the person has poor cognitive abilities, you will need to make use of real-life objects. For example, if you want them to put on their coat you will need to take the coat to them.

If using icons, ensure the person is competent at scanning and selecting real-life objects. Start with a couple of icons and make sure the person understands them before expanding the selection.

Community request cards

These are used by people to request community-based services or items (such as catching the bus or buying a newspaper).

Show the person a range of community request cards; for example, for shopping, for catching transport or for requesting directions. Practise using them with the person in role play situations. Pretend, for example, that you are at the shops.

You may need to go with the person when they use these for the first time in public to build their confidence.

Personal communication dictionary

When a person uses specific vocalisations or behaviours, it is essential to document their specific sound, behaviour and meaning in a personal communication dictionary. For example, if John says the word 'dinner' at 4.30 pm when he comes home, it means he wants to know what is for dinner that night. If he says it at 6.00 pm, it means he is hungry.

Be aware of what specific body language, such as eye blinking, facial expression and gestures, mean to the person. Also, remember that different cultures use different gestures, so what might be a friendly gesture in one culture could be offensive in another.

Activity sequence boards

Activity sequence boards are a great way to encourage people to participate in conversation in their school, home or work environment. Pictures of the person's daily activities or of them in the environment are put into sequence on a white, cork or felt board.

Initially, you might order the activity pictures and show the person that they are placed in the order the activity is done. Over time, the person may select their own sequence of activities.

PECS

Using the Picture Exchange Communication System (PECS) you at first match a picture card with the real object, say the word of the object and put the card into the person's hand. You then continue to make the link between the real object and the card but rely more and more on the card to communicate until cards are needed only. This makes the person able to use the cards in a range of settings and thus increase their decision-making and independence.

Create opportunities for the person to use PECS. Be consistent and supportive.

Speech Generating Device

Speech Generating Devices (SGD) supplement or replace speech and/or writing. If speech and occupational therapists have identified the most effective way for the person to use a speech generating device it is important that all communication partners encourage, support and make sure the device is always available and ready for use.

If the person is unfamiliar with computers you need to start with using individual keys. More confident people may go straight to full sentences and use shortcuts. Initially this may be tiring for people, but as they gain competence the range of communication can be vastly increased.

Finger spelling/signing

Many people learn key signs such as Makaton, which is a combination of spoken words and sign language, rather than a complete sign language such as Auslan. Key word signing focuses on the key word and so does not require complex language skills. To say 'I want to go home' a person would use the signs for 'Me', 'Go' and 'Home'. The words are also communicated at the same time.

If a person has to learn this way of communicating late in life, you may need to have an expert provide training. Find out how you can access training. It is useful to learn the signed alphabet yourself so you can communicate basic information with a hearing impaired person using finger spelling.

Example

Use different strategies and devices

Josh attends a school where the policy states he must complete all academic subjects in the integration room. He has a voice output computer but the integration teachers have a practice of not letting him take it with him in the playground in case it gets damaged. The teachers' attitude is that Josh's computer is a functional tool, not a social tool, so he does not need it in the playground.

As Josh is not able to use his computer in the playground, a series of communication cards are designed to assist him in participating. His teachers work with him and fellow students (his communication partners) to promote this. It is agreed by the school that Josh's cognitive and receptive skills enable him to attend maths classes with the rest of his age group. The integration teachers show the maths teacher how to operate the computer and involve Josh, and assign an integration aide to go with Josh to class for a period of time.



Practice task 10

1. Provide two access methods a person may use to communicate using AAC devices and strategies.

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2. Briefly describe one type of scanning.

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Click to complete Practice task 10

3B Document communication support strategies in the person's individualised plan

You will be required to complete many different kinds of documentation on a day-to-day basis. This documentation is frequently used for data auditing and for checking compliance with legislation and workplace procedures.

It is important that you are aware of, and follow, the documentation procedures in your workplace to ensure that you are meeting the legal requirements of your role.

Most professions and workplaces will have a documentation format that workers must adhere to. These formats are usually set up in such a way that they will prompt the writer about what information to include, so that they do not accidentally miss out any required information.

Your documentation requirements will include documenting the communication support strategies of a person in their care plan.



Document strategies

Once communication strategies have been developed you should ensure they are appropriately documented in the person's individualised care plan. Make sure you document communication strategies so all stakeholders are aware of what needs to be implemented and when you will review progress.

Reasons for documenting strategies:

- ▶ Initial identification should be documented so when the strategy is reviewed it can be seen if a change has occurred
- ▶ You need to clearly detail the strategy and the process of implementation
- ▶ It's important to inform potential partners so the strategy is used consistently in all settings
- ▶ Actions must be followed through
- ▶ You need to document the goals you have set and the dates for review
- ▶ Auditing and funding requirements must be met

Types of documentation

Types of documentation specific to the strategy can include communication plans or person-centred plans, chat books, communication dictionaries, meeting minutes and file notes.

Strategy documentation should include:

- ▶ what the strategy is
- ▶ who is involved in implementing it
- ▶ how it works
- ▶ when it is used
- ▶ why the strategy is being used.

Example

Document communication support strategies

Alisha has a communication book which consists of symbols organised by topic that she keeps in her bag. During the day she uses this to communicate her needs. Her workers will often take the book out of her bag and ask her to make a choice from the relevant page (such as 'Meals', 'Activities' or 'Feelings'). Alisha will point to the picture of her choice and the workers will thank her.

This strategy is documented in Alisha's care plan. The documentation notes that Alisha is to use a communication book with workers and that throughout the day the workers are to use this book to help Alisha make decisions and indicate how she is feeling. It is also documented that workers are required to provide Alisha with enough time to use direct scanning to indicate her needs.



Practice task 11

1. Provide three reasons why it is important to document communication support strategies in a person's individualised care plan.

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2. Provide two types of information regarding a communication support strategy that should be documented in a person's plan.

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Click to complete Practice task 11

3C Organise the environment to optimise communication opportunities

For people with CCN, communicating can be an exhausting or frustrating process. You should always try to create the most supportive environment for each person.

Here are things to consider in order to create the right physical, emotional and intellectual environment.

Physical environment

Consider the following:

- ▶ Is the person physically comfortable? Is there a better position they could be in? Make sure they can easily hold their communication aid or have it near them.
- ▶ Is there too much visual or auditory distraction? This is often a problem. Keep the level of noise down and make sure there are as few disruptions as possible.
- ▶ Are they tired? This is a problem for people with severe physical limitations. Make sure they use electronic communication aid shortcuts such as prediction or word completion, and encode groups of words so it is easy to retrieve commonly used phrases.

Emotional environment

You and the rest of the support team need to encourage the person's self-esteem and confidence. They need to be able to trust you and their communication partners. Questions to ask include:

- ▶ Is the person scared, worried or afraid?
- ▶ Do they need to get used to the environment before concentrating?
- ▶ Do they feel valued and respected?
- ▶ Are they motivated and interested in participating?
- ▶ Are their communication partners supportive?

Intellectual environment

Make sure the communication aids and strategies are appropriate. You need to take into account the person's age, their communication level and the type of activity or content you are using. Ask yourself these questions:

- ▶ Is the strategy at the cognitive level of the person; that is, not too high, not too low?
- ▶ Is there a time span the person can concentrate for?
- ▶ Will the content stimulate their interest and build on current knowledge?
- ▶ Has the person been given the opportunity to understand and practise the strategy?

Practical support methods

You need to be a role-model in order to provide a supportive environment. Where appropriate, show or model the desired action, and if there are any difficulties in the process, provide feedback to the appropriate person.

Here are some practical ways to support a person using communication aids.

Trained staff and carers

Make sure staff, carers and other communication partners understand the person's communication needs, ability, likes and dislikes and impairment. Make sure they can operate the aid and know how to resolve difficulties, such as replacing batteries.

Consistency

Ensure there is consistency across different settings. People with CCN need to have a consistent approach to their needs, so ensure they use the same strategy and/or device in whatever environment they are in (if appropriate).

Time for communication

One of the most important ways you can support a person is to give them the time to listen, construct their response and engage in a conversation. Always take the time to allow them to finish a conversation or request. Expect you will get a reply, even if you don't.

Ready access

Make sure there is ready access to communication aids. Once a strategy is in place, always have it available. The person needs to feel confident that having developed a method to communicate, they are able to use it. Make sure equipment is maintained.

Fostering conversation

If possible, encourage the person to engage in a conversation, rather than gaining responses to questions, requests and instructions. This gives the person a sense of control, builds their self-esteem and gives them the dignity everyone has a right to.

Motivators to learn

Make sure you use topics that interest the person. Also, give rewards to encourage learning such as, 'That's terrific' or 'Well done' when they complete a task or achieve a new goal.

Principles for teaching a skill

Use the technique of prompting then fading support by initially providing prompts and aids to help the person, then gradually withdrawing one of the aids that is not necessary.

Example

Optimise communication opportunities

Nandi provides care to Harry. Harry is 69 and has had a stroke and lost much of his ability to speak. He needs to learn how to communicate using aids and Nandi chooses to teach him in his own home, which is a quiet and safe environment for him.

Each time Nandi prepares lunch, she puts the usual selection of food on the table as well as a laminated picture card next to the item.

She allows Harry to make his selection as usual. When he reaches out for the cheese, she puts both the cheese and the card in his hand and remembers to say the word 'cheese'. The next time, she tries putting the picture cards closer to Harry and the real-life objects further away so it is easier to select the cards.

Sometimes Nandi needs to prompt Harry by physically moving his hand to touch the card. Gradually, she withdraws her physical support and then her verbal support. As Harry gains competence at selecting the cards, she removes the real-life objects completely.

If Harry can learn this skill it will give him the opportunity to use picture exchange cards in a range of settings and thus increase his decision-making and independence.

Practice task 12

Read the case study, then answer with questions that follow.

Case study

Sarah is a community services worker who provides care to Vianne. Vianne has an acquired brain injury (ABI) and has complex communication needs. Vianne was previously a very social and outgoing person, but since the ABI she has felt isolated by her inability to participate in conversations.

Sarah wishes to teach Vianne an AAC communication strategy that will help her participate more. However Sarah also knows the importance of using Vianne's environment to optimise communication opportunities.

1. What are two questions that Sarah should consider regarding Vianne's physical environment?
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2. What are two questions that Sarah should consider regarding Vianne's emotional environment?
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.....
3. What are two questions that Sarah should consider regarding Vianne's intellectual environment?
.....
.....

Click to complete Practice task 12

3D Reinforce communication by timely and appropriate response

Once a communication strategy has been implemented it is important to provide appropriate reinforcement. Remember what it is like to learn a new task; it may seem confusing at first but gradually it all falls into place. For people with CCN it may take a while before they are confident.

Here are some things to consider when reinforcing a communication strategy.

Considerations include:

- ▶ making sure the strategy is understood, giving the person time to practise it and giving feedback when they are successful
- ▶ providing multiple opportunities for the person to practise
- ▶ gradually increasing the range of settings to promote the opportunity for incidental learning (if appropriate)
- ▶ using some strategies that have built-in reinforcement (e.g. if using picture cards to ask for a biscuit the result will be receiving a biscuit)
- ▶ being consistent with the strategy by following the same procedure each time
- ▶ not taking short cuts or doing some of the activity yourself, as this can be unhelpful and counterproductive.

Reinforce communication

Communication partners are essential and will bring varying attitudes and skills to the process. You should work closely with them to explain the strategy and the type of reinforcement needed to encourage participation and successful communication.

How to provide reinforcement:

- ▶ Make sure the person is congratulated on the progress made. Don't just give them corrections; tell them how well they are doing.
- ▶ Build on the skills people already have.
- ▶ Use verbal prompts or physical touches. For example, touch a person's right elbow every time they are asked to point to a choice. Over time fade this out.
- ▶ Identify how much support is required and when to start fading your support away.
- ▶ If you withdraw before the strategy is understood, the person may give up. If you provide too much support they may get irritated or lose confidence.
- ▶ As well as praise, most people like some kind of reward for doing something. You may need to find actions or objects that they want.

Example

Reinforce communication strategies appropriately

May provides care to Sean, a person who has memory-retention issues. The following outlines the process May took to reinforce Sean's communication strategies appropriately and in a timely manner:

- ▶ May started with a situation where Sean was motivated to make a choice.
- ▶ She used real-life objects and word/picture cards, as this was the most appropriate strategy to meet Sean's needs.
- ▶ She started with two choices – a banana and a biscuit.
- ▶ She placed both objects in front of Sean and named them.
- ▶ She then changed the number and order of the objects so Sean was required to actively scan each time.
- ▶ She continued to name each object before asking Sean to make a choice.
- ▶ Once Sean was accustomed to scanning and making a selection for different activities, she encouraged him to do it every time that activity occurred.
- ▶ She encouraged Sean to be involved in making decisions in as many areas of his daily life as possible.
- ▶ She did not include options that may not be available or appropriate to make the process as efficient as positive as possible.



Practice task 13

1. Provide one aspect you should consider when reinforcing a communication strategy.

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2. Provide one way that you can give reinforcement to encourage a person's participation.

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Click to complete Practice task 13

3E Identify and respond to difficulties experienced by the person when communicating, within own work role and responsibilities

Identifying any difficulties a person is having with their communication strategy and resolving the problem is an important part of your responsibilities. This must be done as soon as possible, or the person may stop using the strategy.

You can identify when a person is having difficulty by using the following methods.

Observation

- ▶ Direct observation lets you know immediately if the person is having trouble. For example, you might notice they are reluctant to use their cards. Watch them for a while because they may begin to use the aid successfully after they are more comfortable with you.

Questioning

- ▶ Ask the person questions. Remember though that a quick 'How's it going?' may not identify a difficulty. You may need to ask questions such as, 'How can we improve this?' Some people don't like to admit they cannot do something or may not be able to communicate their feelings. Instead, you could ask their communication partners.

Checking

- ▶ Read care plans, file notes or checklists. These provide information from carers, support workers and health professionals about the range and frequency of use, and should include information relating to any difficulties the person is experiencing.

Identify difficulties experienced by the person

There are a range of difficulties that could arise. Be familiar with them and have strategies in place for resolving them. Make sure you understand your level of authority and the limits of your work role and responsibilities. In some circumstances you may not be able to resolve the problem yourself and have to refer the difficulty to an appropriately qualified person.

Common problems and suggested solutions are outlined below.

Technical issues

For example: a battery not being charged. A solution would be to update the worker duty statement to include charging the battery regularly.

Capacity

For example: a person with Parkinson's disease hitting the wrong keys on a computer due to tremors. A solution would be to use a key guard on the keyboard.

Attitudes

For example: the person's family don't want the person to be seen using a head pointer as it makes the person look different. A solution would be to talk to the family about these issues and put them in touch with other families/support groups who have experienced this.

Resources

For example: a communication book is not used by a person who doesn't speak English. A solution would be to use a translator to add words in the person's language next to English and encourage the person to use English words as well.

Changes in environments

For example: a chat book is used in a day program but not at the person's residential unit. A solution would be to meet with staff to identify barriers and develop strategies for consistent use.

Respond to personal difficulties

It is important that you know how to respond when a person encounters personal difficulties. Often these difficulties will present as behaviours of concern, where a person behaves in an aggressive or disruptive manner. How you approach the behaviour will have important implications for resolving and deescalating the situation.

Respond to personal difficulties by:

- ▶ calming and reassuring the person
- ▶ working out why the person is encountering trouble
- ▶ recommending solutions that include input from the person
- ▶ documenting the difficulty in the care plan and case notes
- ▶ implementing an alternative strategy
- ▶ developing a behaviour support plan with the whole team.

Manage contingencies

One way of dealing with behaviours of concern is by using contingency planning. A contingency plan takes all possible future events into account and implements strategies to decrease the possibility of unwanted actions and consequences.

A contingency plan outlines the circumstances, the desired behaviour and the possible consequences. It has two branches that diverge from the initial circumstances and either leads to desired behaviour and positive consequences or undesirable behaviour and negative consequences.

You may sometimes make a simplified plan as a way of establishing social rules for the person's expected behaviour.

Manage contingencies by:

- ▶ teaching the strategy to the person so that they know what is expected of them and what the consequences of their choices will be
- ▶ using repetition and practising choice pathways
- ▶ being consistent and using a focused response
- ▶ giving meaningful explanations for the need for the desired behaviours
- ▶ reviewing the strategies as a team and adjusting as required.

Example

Identify difficulties and respond

Amelia is a community services worker who provides support to Nathan, a nine-year-old boy with cerebral palsy. Nathan needs assistance to communicate and uses an electronic device that allows him to hit a switch on the correct message and the device then verbalises his need.

Last week Amelia received a request from the family to help come up with a support plan for Nathan’s behaviour at school. Amelia was surprised as Nathan usually enjoyed going to school and was always well behaved there.

When Amelia approached the teacher about the situation she discovered that as the school was in the middle of a swimming program. Because Nathan’s device was expensive the teacher kept it safe in the class room while Nathan attended the pool. However, when Nathan was at the pool and unable to speak he would become frustrated and scream at people. By identifying this environmental barrier, Amelia was able to come up with a non-electronic communication method for Nathan to use during pool time.



Practice task 14

1. Provide three types of difficulties a person using an AAC device or strategy may encounter.

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2. Provide one way you should respond if a person has personal difficulties.

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3. Provide two ways that you can manage contingencies at work.

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Click to complete Practice task 14

3F Refer difficulties outside own role and responsibilities to appropriate person

It is not usually your responsibility to provide or coordinate services to meet all of the person's needs or requirements. Your role is to ensure that any difficulties outside of your work role are referred on to the required health professionals. The initiatives or actions undertaken by these health professionals can then be integrated into the person's care plan.



Refer difficulties to the appropriate person

Resolving some difficulties will be beyond your role and responsibilities and will need to be referred to others. In all cases you need to make sure you follow your organisation's policies and procedures. For example, you may need to complete a formal referral form to request specialist assistance or a verbal referral may be required. If you are making any type of referral or request for assistance, have all the information at hand so you can explain to the specialist, carer or support worker exactly what the situation is and what may be needed. This includes the person's name, condition and specific difficulties.

Here are some types of difficulties you may encounter and who you may need to refer them to.

Difficulty	Referral
▶ Finding out the range of possible devices	▶ Refer to a speech pathologist
▶ The person's position in a chair limits their range of movements	▶ Refer to an occupational therapist
▶ The person's cognitive abilities are undetermined	▶ Refer to a cognitive therapist
▶ Needing to individualise the overlays in a computer program	▶ Refer to a technical specialist
▶ Your organisation does not provide the services the person requires	▶ Refer to another organisation or service provider
▶ A member of staff says she hasn't got time to 'muck about' with computers	▶ Refer to your supervisor

Example

Refer difficulties to the appropriate person

Here are two examples of when a referral has been required.

Jai

Jai's parents are concerned that if she uses communication cards her speech will decline. Her worker Rhonda discusses this with her parents, but they are still concerned. She asks them if she could organise for them to talk to a speech pathologist and they agree. Rhonda organises for Jai and her family to visit the speech pathologist.

Keith

Keith and his friends regularly go out for pizza. They have had difficulty lately with staff not following the requests on their community request cards and just handing them any pizza. His worker Steve discusses this with Keith and finds out about a local disability rights group. He gives this information to Keith and he asks them to support him and his friends.

Practice task 15

Read the case study, then answer the questions that follow.

Case study

Juan is a community services worker who supports Yazmin. Yazmin is 26 years old and has an intellectual disability. Recently Yazmin has seem disengaged, non-responsive and rarely uses her communication chart or chat book. Juan has tried talking to her about the matter but Yazmin just hugs her knees and rocks backwards and forwards. Juan does not know if something traumatic has happened or if Yazmin's capabilities have changed. He arranges a referral to Yazmin's doctor and a speech pathologist.

1. Describe one way Juan can support Yazmin within his work role and responsibilities.

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2. Provide two reasons why Juan needs to refer to others.

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Click to complete Practice task 15

3G Provide practice opportunities and information to the person

You should ensure that all information and training leads to the communication strategy being used consistently by everyone involved in the person's care. Consistency is important because it makes it easier for the person to learn the process. Usually a person with CCN works well with consistent patterns of communication.



Provide opportunities to practise

It is important that a person with CCN is given opportunities to practise their communication.

Sometimes this is as simple as ensuring that other workers and carers are using the current communication strategies to their maximum potential. Other times it involves taking a step back and asking the person a question, even when you know the answer. For example, if a person always chooses honey over Vegemite at breakfast, asking the person what they would like provides an opportunity for practising communication and making choices.

Here is a sample checklist that you could use when communicating with a person with CCN.

When I communicate with the person, do I:

- ▶ read the chat book on arrival?
- ▶ write in the chat book at the end of the day?
- ▶ maintain eye contact when talking?
- ▶ wait for a response?
- ▶ create opportunities for choices?
- ▶ prompt him/her to say each word after a selection is made?
- ▶ create opportunities for communicating with the rest of the group?

Provide information to the person

Although the method for communicating is often different for people with CCN, the need for communication is the same as it is for anyone else. This includes the need for interesting and meaningful conversation and connection with others. Part of your role is to build rapport with each person and learn their likes and dislikes. By focusing on their interests you can provide them with information regarding topics they relate to and create opportunities for meaningful conversations.



You may also be required to provide information to the person regarding service and support changes and day-to-day activities. It is important that you are confident and capable of accurately relaying that information to the person using their communication support strategy.

Encourage contact with others

It is important to maintain contact with other people that the person encounters. In addition to health professionals, this may include people at the person's workplace, school, home, day program, shopping centre, and community services and/or recreation facility. People in these settings vary in their ability and motivation to learn and maintain the person's strategy, so it is crucial you provide them with information and support. In this way they can be confident they are helping the person in the most appropriate way and making sure the person uses their communication strategy correctly.

Strategies to support others include the following:

- ▶ If possible, have the person show others how to use their communication aid.
- ▶ Encourage the person and others to provide feedback to each other and to you.
- ▶ Encourage people not to make assumptions about the person's communication difficulties and their cognitive or emotional state.

Example

Provide practice opportunities and information to the person and encourage contact with others

Eddie and his worker Mike go to the pictures. Eddie has his money ready. The attendant looks at the Mike and says, 'What does he want to see?' There are two ways to handle this.

Scenario 1: Mike says, 'Why don't you ask him?' The attendant may feel uncomfortable with this, especially as she doesn't know Eddie or how best to communicate with him.

Scenario 2: Mike turns to Eddie and says, 'What would you like to see?' Eddie points to the promotional picture of the movie and hands over his money. The attendant gives Eddie the ticket, makes eye contact with him and says, 'Enjoy the movie'.

Scenario 2 allows the community member to observe and reflect without feeling they have done the wrong thing.



Practice task 16

1. Provide two ways you can encourage a person with CCN to have contact with others.

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2. Provide one reason it why it is important to maintain consistency of the communication strategy when working with people who have CCN.

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Click to complete Practice task 16

Summary

1. It is important that you are familiar with the available range of AAC devices and the different strategies to implement them.
2. Types of documentation specific to the strategy can include communication plans or person-centred plans, chat books, communication dictionaries, meeting minutes and file notes.
3. Once a communication strategy has been implemented it is important to provide appropriate reinforcement.
4. Identifying any difficulties a person is having with their communication strategy and resolving the problem is an important part of your responsibilities.
5. It is important that you know how to respond when a person encounters personal difficulties.
6. Resolving some difficulties are beyond your role and involve reporting to others by using appropriate referral procedures.
7. It is important that a person with CCN is given opportunities to practise their communication in a consistent way with workers and others in the community.

Learning checkpoint 3

Implement an AAC strategy

This learning checkpoint allows you to review your skills and knowledge in implementing AAC strategies.

Part A

1. Provide three access methods that can influence the approach of a communication strategy.

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2. List two types of alternative mouse devices and briefly describe what type of person they would support.

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3. Provide two reasons why support strategies should be documented.

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Part B

Read the case study below, then answer the questions that follow.

Case study

Sam is a community services worker and provides care to William, a 28-year-old man with autism. Sam and the rest of the team who support William are trying to optimise his communication and participation opportunities. One of the strategies that Sam uses to engage William in conversation includes asking him what his preferred option is regarding food and clothing choices for the day.

1. What are two aspects that Sam should consider regarding William's physical environment and the way it impacts on his ability to communicate?

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2. List three ways that Sam can reinforce William's communication strategy.

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3. Provide two ways Sam could respond if he notes that William is having personal difficulties with his communication strategy.

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4. Provide two reasons why Sam might refer William to another professional, and who that professional would be.

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5. What are two ways that Sam can encourage William to have contact with others?

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Topic 4

In this topic you will learn how to:

- 4A Set up and maintain reporting and recording system to assist with monitoring and review**

- 4B Review reporting and recordings to monitor success of communication strategies and make required changes with appropriate consultation**

- 4C Identify barriers to the effective use of AAC strategies and devices**

- 4D Work with other relevant people to overcome the barriers**

- 4E Implement any modifications to communication strategies and devices**

- 4F Identify opportunities to increase communication vocabulary**

- 4G Maintain accurate written records according to established directions and within organisation protocols**

Monitor, report and review communication strategies

A person may require a range of support strategies to meet their individual communication needs. The effectiveness of these strategies will vary dependent upon the person and their surrounding environment and circumstances. For this reason these strategies need to be regularly monitored to ensure they are effective in providing opportunities for the person to participate with some form of independence.

One of the most important aspects of managing a person's communication strategy is recording information and completing accurate documentation. This documentation sets out the plans, expectations and strategies to be followed when managing the person's communication strategy and represents an agreement between the involved parties. For this reason community services organisations need consistent systems for monitoring, reporting and reviewing communication strategies.

4A Set up and maintain reporting and recording system to assist with monitoring and review

Regular monitoring and reviewing is essential if a person's communication strategy is to remain effective. While a lot of checking and collecting feedback is done on an informal basis, it is important there is a formal recording system that gives you and everyone involved in the person's health care the opportunity to formally monitor, review and document the person's progress.

A formal review gives people the opportunity to:

- ▶ reflect and compare
- ▶ look at the original goal and see if it is being met
- ▶ establish if there are new goals that need to be set
- ▶ identify what has been trialled and what has been learned from the trial
- ▶ identify new technologies or resources that could be incorporated.

Set up reporting and recording system

It will be part of your responsibilities to ensure a system is in place that allows everyone involved to check and review a person's progress in a systematic, controlled way. If such a system is not in place, you need to set one up and ensure those involved know what is expected of them.

A system may involve the following activities.

Care plan updates

All informal observations are recorded in the person's daily file notes, so everyone connected with the person can read them and see whether the strategies are effective.

Other avenues for recording comments about a person's abilities are utilised, including assessment forms, progress notes and feedback forms specifically prepared for review purposes. Dates for regular case conferences/meetings are identified and recorded in the person's care plan.

Case conferences

Case conferences are held to determine the person's progress, see if changes have to be made, identify any difficulties and select options for resolving problems or increasing the person's communication abilities.

Clearly written and comprehensive minutes are prepared and distributed to all parties as soon as possible after the meeting. Action plans should be included in the minutes to clarify what needs to be done to ensure effective communication strategies are in place that meet the person's needs. They must be clear, realistic and achievable.

Maintain reporting and recording system

Information that is not current can have negative effects on service provision for people, and information that is not maintained in a timely and consistent manner can also have implications for your organisational reporting. Part of your job role is to ensure all information in the reporting and recording systems is up-to-date in accordance with required time lines. The quality of your reporting system, and in turn your service, is dependent on the quality of information you have to draw on. It is therefore essential that records are kept current.



When the reporting and recording system is not maintained to a professional standard, errors in service provision, judgment and reporting can result.

Example

Set up and maintain reporting and recording system

The following is an example of a form that might be used in a reporting and recording system.

<p>What has been tried:</p> <p>Uses SGD. Has a chat book.</p>	<p>What has been learned:</p> <p>Chris has lots of opinions and is good at expressing them.</p>
<p>Pleased about:</p> <p>Chris said that it was great to be heard himself and not just having to listen to others' opinions. People listening to me and my opinions.</p>	<p>Worried about:</p> <p>Teacher doesn't always give me the questions the week before. Frustrating not being quick enough to respond to comments.</p>
<p>What to do next:</p> <p>Get discussion questions for English class to Chris in advance so can use SGD to pre-record some responses.</p>	

Practice task 17

1. Provide two benefits of a formal review process with regards to communication strategies.

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2. Provide two reasons why case conferences are held.

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Click to complete Practice task 17

4B Review reporting and recordings to monitor success of communication strategies and make required changes with appropriate consultation

It is important to review the success of communication strategies. This enables you to identify if the strategies are effective and whether or not they need to be adjusted or improved. There may have been changes in the person's environment or capabilities. For this reason it is essential to always review and monitor strategies. To do this, reports and records must be reviewed regularly.



Review reports and records

A process for reviewing and monitoring should be established to make it easy for all stakeholders to record their comments on the person's progress. You need to check all the recordings and observations from the key people implementing the communication strategy so you can see whether changes need to be made or further observations are required. Some monitoring is done informally; for example, observing how a person is using their communication book to choose what activities they do, or asking family members how they think the strategies are working. These informal observations should be recorded in the person's daily file notes so everyone connected with the person's care can read them and see how well the strategies are being implemented.

Make changes to communication strategies

To make changes to a communication strategy you need to follow a similar process to the one used to develop the original strategy. Responsibility for this modification process may rest with you, the case manager or, in some cases, a health professional. Consultations may involve:

- ▶ the person themselves
- ▶ the person's family
- ▶ the person's significant other
- ▶ a speech pathologist
- ▶ an occupational therapist
- ▶ a cognitive therapist
- ▶ the support staff.

Check your organisation's guidelines to see who is responsible for reviewing and modifying communication strategies.

Review process

The review process will help you identify whether it is necessary to make improvements or modifications to the current strategy.

A review process involves:

- ▶ reassessing the person’s level of communication and participation
- ▶ reassessing the strategies in place
- ▶ reassessing the team of people involved
- ▶ modifying the person’s environment
- ▶ modifying the time lines
- ▶ reassessing your expectations of progress
- ▶ requesting the involvement of others to address identified difficulties.

Example

Review reporting and recordings to monitor success and make required changes with appropriate consultation

The following is an example of the sort of form you or other support staff may complete to review if a person has an appropriate communication strategy.

Question	Response
Does the person have more than one method of communication?	Vocalisations as in communication dictionary. Communication book accessed by pointing.
Can the person access their communication strategy independently?	No, requires book to be placed on table.
Does the person have a method of attracting attention or initiating conversation?	Yes, vocalisation.
Does the person have access to a variety of communication partners?	Yes: family, house staff, program staff, leisure buddy.
Do all communication partners understand and use the person’s communication strategy?	Yes.
Does the person have access to communication timetables, checklists and routines?	Yes: daily rosters and activity timetables in kitchen.

Practice task 18

1. List two people who you may need to consult with when making changes to a communication strategy.

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2. Provide two aspects of the review process.

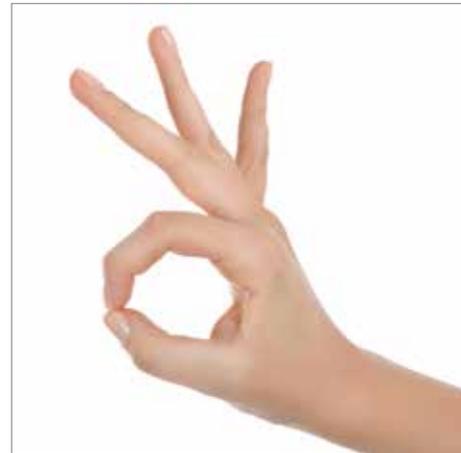
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[Click to complete Practice task 18](#)

4C Identify barriers to the effective use of AAC strategies and devices

You need to be aware of potential barriers that can impact on a person's ability to communicate using their chosen AAC strategies. There may also be barriers to the person being able to use their devices effectively. Barriers need to be identified so they can be reduced or eliminated. In order to identifying barriers, you may need to gather information from the person, their family and carers, and other workers.



Identify barriers to AAC strategies

Strategies are developed based on the person's communication access method. Over time, there may be changes to the person's motor abilities, cognitive abilities, physical capabilities, vision and hearing, and fatigue level. If these changes are overlooked or not addressed, they will become barriers to the AAC strategy that is in place.

Here are some examples of other barriers.

Lack of knowledge

There may be lack of knowledge by community members on how to work with people with CCN.

Many people make assumptions, i.e. that a person who does not speak verbally does not understand what is being said, or that if a person is not making eye contact they are not listening.

Negative attitude

There may be a negative attitude held by family members and others about encouraging a person with CCN.

There may be differing opinions as to the ability of a person to make competent decisions. For example, a carer may be happy to use communication cards to ask what the person wants for dinner, but not for important decisions.

Policies

There may be policies that don't fully address the needs of a person with CCN.

The Medicare Benefits Scheme (MBS) only covers certain health services and items.

Identify barriers to AAC devices

It is vital to understand the capabilities of the person using communication devices. If their level of capability is not matched with the communication device it will create a barrier to the person's ability to communicate.

Here are some examples of barriers that can cause communication difficulties for a person with CCN.

Linguistic skills

Barriers:

- ▶ Aids might not match the level of vocabulary that the person has.
- ▶ Aids might not match the person's cultural background.

Cognitive skills

Barriers:

- ▶ A person may not understand the concept of scanning and making choices.
- ▶ A person may have the ability to understand real-life objects but not symbols.

Motor and sensory skills

Barriers:

- ▶ A person may have the motivation to communicate, and the knowledge of what they want to say, but lack the physical ability to speak verbally or use a computer.
- ▶ A person may have vision impairment and may require larger type.

Personal

Barriers:

- ▶ The person may be nervous of trying a new process or afraid of other people's reactions. It may initially be difficult for them, and unless they can see a positive reason they may not be motivated to try.
- ▶ Family members or others may not know how to operate a communication device.
- ▶ A family member may not know how to connect up a person's voice output when they visit.

Example

Identify barriers

Alex is a forty-year-old man with Down syndrome. He gets frustrated when people do not understand what he wants or when they ignore him. When this happens he becomes abusive, often to complete strangers. His worker Julie has been working on identifying barriers to Alex’s ability to communicate so that she can put strategies place to address these barriers.



Julie identifies that Alex has a cognitive barrier to understanding more complex questions and requests. She also identifies that sometimes people in the community will talk to Alex’s carer instead of directing questions at him.

Julie makes sure these barriers are noted in Alex’s care plan and that staff use short sentences and single step instructions when providing Alex with participation opportunities.

Julie also makes Alex a communication request card that he gives to service staff, such as shopping assistants, in the local community. The card reads ‘Hi, my name is Alex. I can understand simple requests and instructions. Could you please speak to me instead of my carer. Thank You.’ By handing this card to people in the community they are able to address Alex in a way that allows him to participate without becoming frustrated.

Practice task 19

1. Describe one communication barrier that may exist for a person with diminished cognitive skills.

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2. Provide one barrier that may inhibit the effectiveness of a communication strategy.

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Click to complete Practice task 19

4D Work with other relevant people to overcome the barriers

Once you have identified a barrier to the effective use of communication strategies and devices you need to work with the appropriate people and community services to overcome the barrier. The more you work in this area the more familiar you will become with the various people you need to approach for their expertise and the types of solutions that exist.



Overcome barriers

There are a number of people that you can refer to when seeking to overcome communication barriers. You may need to obtain input from more than one person to address the area of concern.

The following outlines the people who can provide help, as well as the solutions they provide.

Speech pathologist

A speech pathologist:

- ▶ identifies reasons for speech limitation
- ▶ identifies the most appropriate AAC strategy and helps with implementing it.

Psychologist

A psychologist:

- ▶ provides support in developing strategies to motivate the person
- ▶ provides insight into possible access barriers.

Carer/family

Carers and family:

- ▶ provide information about interests and preferences
- ▶ informally identify barriers and provide feedback
- ▶ support decision-making by the person
- ▶ provide opportunities to communicate.

Education staff

Education staff:

- ▶ explain how to use devices
- ▶ let you know which libraries have communication devices
- ▶ run staff awareness sessions in AAC
- ▶ train staff in using communication strategies and devices.

Support staff

Support staff:

- ▶ identify interests and preferences
- ▶ provide opportunities to communicate
- ▶ provide feedback about strengths and weaknesses of the strategy either through informal observations or structured feedback.

Occupational therapist

An occupational therapist:

- ▶ offers advice to identify equipment to use
- ▶ arranges for equipment loans
- ▶ supports in identifying positioning for using devices.

Community services worker

Community services workers:

- ▶ provide opportunities to use devices
- ▶ provide support and encouragement
- ▶ advocate on behalf of community members/family members.

Service manager

A service manager:

- ▶ increases your budget to enable the purchase of additional resources
- ▶ role-models skills and attitude.

Technician

A technician:

- ▶ advises on the use and maintenance of devices
- ▶ advises on the most recent developments
- ▶ supports to load new programs or attach electronic devices.

Example

Work with people to overcome barriers

Margaret is a community services worker who provides care to Hikmas, a lady living with a head injury. Margaret decides that Hikmas needs a speech assessment to identify why Hikmas' current communication strategies are not working. Margaret checks her organisational procedures manual and finds that there are guidelines on how to make a referral to the speech pathologists in her area. She also finds a template for the referral and details of who to contact and completes the referral process. Hikmas attends the speech assessment and is given a new communication strategy. As part of the recommendations of the speech pathologist, Margaret also involves a technician to help tailor Hikmas' new communication device to her needs.

Practice task 20

1. List two people/professions who might be involved in resolving barriers to the effective use of AAC strategies and devices.

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2. What is the role of a technician in overcoming barriers to the effective use of AAC devices?

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Click to complete Practice task 20

4E Implement any modifications to communication strategies and devices

Your role may sometimes include implementing recommended modifications to communication strategies and devices. It is important to remember that any time change is required that a person will need a period of time to adjust to the new strategies and device alterations. For this reason you will need to closely monitor and document the modification to ensure that the change has been successful.



Modifications to communication strategies

Make sure to involve the person in the modification process and remember that changes to communication strategies can be frustrating and exhausting. They may need to be done in a staged soft transition where the new strategy is slowly introduced while the old one is phased out. For others, the simultaneous use of old and new systems may be confusing and they would therefore benefit more from a hard transition where old strategies are ceased altogether and new strategies and repeatedly used to allow for more rapid and consistent skill acquisition.

Implementing any modifications may mean you have to purchase or borrow equipment, provide additional aids, change the sequence of daily events or arrange training. In all instances you should explain the changes to the person, family members, carers and support workers so everyone understands why the person's routine is changing and why they have to learn how to use a new device.

Modifications to communication devices

You may need to think about the sequence of events that the communication fits into. Sometimes a communication strategy may not work because the timing is wrong or the person is not ready to use it.

The following is a list of modifications that can be implemented to encourage participation and improve a person's self-esteem, independence, confidence and communication abilities.

You might need to:

- ▶ provide a key guard on a computer to prevent accidental selection of keys
- ▶ provide an electronic device
- ▶ provide training in using an electronic device
- ▶ adjust the voice output device in order to have a range of volume levels for different environments or load new programs
- ▶ check the timing is right and change if needed.

Example

Implement modifications to strategies and devices

The following examples illustrate ways to implement a technical modification and a change in sequence to improve strategies.

Technical modification

Nancy uses an electronic communication board, but she has trouble hitting the key she wants and often depresses two or three keys at the same time. Her worker rings the independent living centre and they tell her about keyboard covers. She arranges to purchase one.

Change in sequence

When Jared comes home from school he is tired and hungry. His mother has the time to use his communication cards to talk about what happened at school, but Jared is sick of sitting still and wants to play. She decides to wait until after dinner.

Practice task 21

1. When implementing changes to a communication device, describe who you need to inform and why they should be informed.

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2. Describe one way that changes can be implemented.

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Click to complete Practice task 21

4F Identify opportunities to increase communication vocabulary

The range of vocabulary a person has access to will determine the degree to which they can communicate. To encourage a person's participation, foster their independence and develop their confidence, you need to be able to increase the number of words they can use. You can do this informally through incidental learning, or use a structured approach to actively increase the person's vocabulary over a period of time.



Strategies to promote vocabulary

A person's vocabulary generally increases just by being with and interacting with other people in the community.

Consider the following strategies to promote vocabulary.

Introducing new words during everyday tasks

- ▶ Everyday tasks such as grooming, showering, dressing, shopping and cooking are all ideal opportunities for introducing new words in an informal, relaxed environment. In this way, new words are meaningful and arise when the person needs them, increasing the likelihood of the person retaining the word.

Introducing new activities and excursions

- ▶ Help the person's carer, family members and support workers to encourage the person to participate in activities and excursions into the community whenever possible. Check the person's plan to see what activities are included. You may need to facilitate access by arranging enrolment at a community day centre and organising a community bus for transport.

Encouraging the use of social media

- ▶ Being exposed to a range of ideas and a variety of people can help a person pick up new phrases and try them out. However, there may be some people for whom using a public forum like the internet is not appropriate, especially if their disability means they are at risk of being exploited.

Extending vocabulary

- ▶ It is beneficial to extend the person's vocabulary. Adding new cards, introducing new key word signs and increasing the amount of words used in a chat book or communication board can widen the person's vocabulary. Remember to repeat the new words as they are used and relate them to the photo, sign or object to reinforce the learning.

Example

Identify opportunities to increase vocabulary

Jai likes to help the staff in his house with preparing meals. This has led to some incidental learning of food items that have been added to his communication board. After discussions with the house staff, Jai's worker at his day program takes five minutes each morning to systematically review the new words Jai has learned. She also uses this opportunity to add in a new word. Jai enjoys this morning routine, as he is demonstrating words he has learned in an activity he has enjoyed. In this situation, Jai incidentally learns new vocabulary, and then learning is reinforced in a structured way.



Practice task 22

1. Provide two reasons why it is important to increase the available vocabulary of a person.

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2. Provide two opportunities to increase the vocabulary of a person.

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3. List three daily activities that are ideal for increasing the vocabulary of a person.

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Click to complete Practice task 22

4G Maintain accurate written records according to established directions and within organisation protocols

Maintaining records of communication strategies is critical for quality service provision. Organisational protocols can include processes that the organisation feels is the safest way to follow laws and guidelines for recording information.

Support teams are made up of many different people, all of whom need to know current information regarding the person's support. Accurate and up-to-date record keeping underpins an organisation's service standards and ensures all supports meet the needs of the person.



Maintain accurate written records

It is essential that you complete all documentation in accordance with your organisation's policies, procedures and protocols. Documentation should be completed promptly and accurately so that information is not forgotten or overlooked. The information may be used to generate reports or be presented to a board of management. It may also include case notes or file notes, which can either be hand written and stored or electronically recorded and filed.

When writing documents, there are certain guidelines you should follow.

Each entry in a person's file should be dated and it should be specified whether the information is taken from an interview or telephone conversation, and all relevant interactions should be recorded. Make a note each time you speak to the person or other relevant person, such as an external service provider, as well as whenever you send or receive correspondences.

You should never record incriminating information or disrespectful and judgmental comments about the person. Other people will have access to files, including the person and their family and carers, and records may be used as evidence in court.

Other guidelines to follow are outlined below.

Be precise

- ▶ Only report the facts – be objective and don't include opinions or assumptions. All workers struggle with a busy workload and so don't have a lot of time for note writing. You will save time if you can be concise and only report relevant information that is essential to service delivery.

Be clear

- ▶ Other people will be reading your notes perhaps months or years after you have written them; keep in mind the information needs of these readers and use plain English that is easily understood.

Be timely

- ▶ Write your notes as soon as possible; with a busy workload it is easy to forget the details of service delivery with one person as you move on to another. If you leave note-writing to the next day or later, you may forget to include relevant information.

Ensure notes are complete

- ▶ Notes should be concise but should include all the relevant information. By omitting relevant information you may be diminishing the quality of care provided to people because decisions could not be made effectively.

Handwriting

- ▶ Try to write as neatly as possible, keeping in mind other people will need to understand what you have written.

No personal abbreviations

- ▶ You will be informed by your supervisor what are approved abbreviations or acronyms to use in note-writing; don't use your own versions as other people won't be able to understand them.

Spelling

- ▶ Your note-writing is a reflection of your work practice and so should be professional. Use a dictionary if necessary.

Example**Maintain accurate written records according to directions and protocols**

Sarah is a community services worker providing communication support to a number of people who have acquired brain injuries. She understands that personal information must be kept up-to-date so that workers can respond swiftly to any communication issues.

Each day, Sarah files all information that comes across her desk on the date she receives it. She places a reminder on her To Do list regarding any documentation she still needs to complete and makes sure she updates any changes in information before she leaves each day. This is consistent with organisational guidelines as set out in her policy and procedures manual.



Practice task 23

1. Describe why it is important to be timely when writing a record.

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2. Explain how you can ensure your records are objective.

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Click to complete Practice task 23

Summary

1. Regular monitoring and reviewing is essential if a person’s communication strategy is to remain effective.
2. The quality of your reporting system, and in turn your service, is dependent on the quality of information you have to draw on. It is therefore essential that records are kept current.
3. When the reporting and recording system is not maintained to a professional standard, errors in service provision, judgment and reporting can result.
4. Part of your role may include implementing recommended modifications to communication strategies and devices.
5. You will need to closely monitor and document any modifications to a strategy or device to ensure that the change has been successful.
6. Make sure to involve the person in the modification process and remember that changes to communication strategies can be frustrating and exhausting.
7. Support workers can help increase a person’s vocabulary either informally through incidental learning, or by using a structured approach to actively increase the vocabulary over a period of time.
8. It is essential that you complete all documentation in accordance with your organisation’s policies, procedures and protocols. This ensures that you meet your reporting requirements and that your documentation is in a consistent and professional format for other team members to access.

Learning checkpoint 4

Monitor, report and review communication strategies

This learning checkpoint allows you to review your skills and knowledge in monitoring, reporting and reviewing communication strategies.

Part A

1. Provide one reason why it is important to maintain a reporting and recording system.

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2. Provide two aspects of the review process.

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3. Describe how lack of knowledge can impact on the effective use of AAC strategies.

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4. Provide two ways that the carer/family can assist in overcoming communication barriers for a person.

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5. Provide two examples of modifications you might need to make to a communication device.

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Part B

Read the case study, then answer the questions that follow.

Case study

Jenny works as a community services worker in a residential house, and provides support for Alice. Alice has an ABI that impacts on her short term memory. As a result, Alice has difficulty remembering new words. Part of Alice’s communication strategy is to extend her vocabulary and retention of new words. Jenny uses cards and a communication board with words and images. Over time, the more Alice and Jenny work together, the more words that Alice remembers and is able to use. Jenny keeps track of Alice’s progress and notes down the new words that Alice can remember in her case file.

1. Why is it important for Jenny to help Alice to increase her available vocabulary?

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2. Provide one reason why it is important for Jenny to update Alice’s file.

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