



AAC MYTHS REVEALED

MYTH:

Equipment for accessing a communication device is not medically necessary.
Only the communication device itself is medically necessary.

TRUE OR FALSE:

False

The provision of a communication device without a means to use it is the equivalent of putting an individual in front of a locked door without a key to open it or providing medication without the means to administer it. The equipment needed for an individual to successfully use a communication device is like the key to the door. For an individual with complex communication needs to use a device to communicate physical, medical, social and emotional needs, equipment for accessing the device can be the “key.”

What are selection methods?

Dowden & Cook (2002) describe an access method, also known as selection technique, as “the way in which the user interacts with a device to control it for communication; the method an individual uses to select items for communication.”

There are two types of access methods for communication devices: **Direct Selection** and **Indirect Selection**

We all use **direct selection** on a daily basis. We use our fingers to touch buttons on a phone or areas on the touch screen of an ATM or tablet computer. Sometimes we use equipment for direct selection. We use a mouse to operate a computer or a pointer to reach an item that is just too far away.



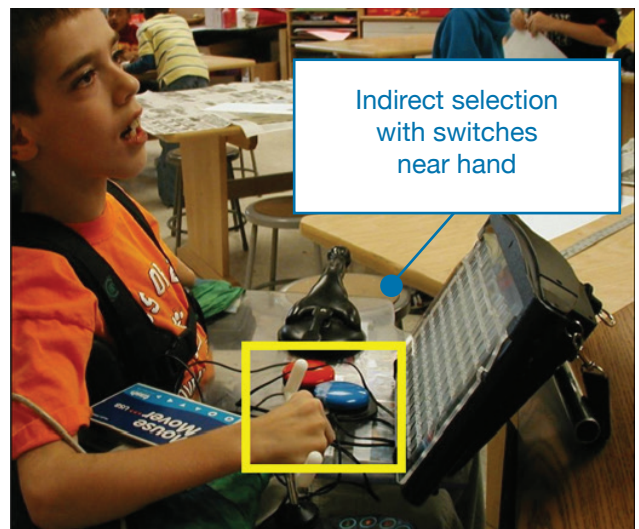
Direct selection with a head pointer

Direct selection is used by a variety of individuals with complex communication needs. Some use their hands and fingers to press the desired option. Others use a stylus held in their hand or a pointer attached to their head to touch the desired option.

Indirect selection means that the individual does not touch the item directly. Instead, there are steps in between which allow him to make the selection (Cook & Hussey, 1995). The closest example in day-to-day life is listening to options on voice mail and pushing the # sign when we hear the choice

we want. Another example is offering clothing choices to a child who is still lying in bed. We say “do you want to wear this one...this one...this one?” and wait for the child to say “yes” to a specific outfit. This is called scanning. It is an indirect selection method. The desired choice is not selected directly by pointing to it but rather by listen for it and then signaling in some way (i.e., pushing the # sign or saying “yes”).

Indirect selection methods are used primarily by those with physical impairments. Choices are most often presented visually by highlighting each option. Choices may also be presented out loud as in our examples. Individuals using indirect selection on a communication device watch and/or listen as their choices are presented and make their selection by activating a switch. Many different switches are available based on the individual’s physical skills.



Indirect selection with switches near hand

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DYNAVOX

When is a selection method recommended?

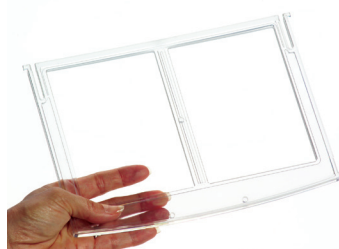
A selection method is identified as part of the augmentative communication evaluation and refined during additional use and therapy. Some individuals have more than one selection method based on their position (e.g., in bed, in a wheelchair), level of fatigue, and other factors. Assessment protocols and academic works on augmentative and alternative communication (AAC) cite the necessity of determining appropriate selection methods. Some of these resources are provided at the end of this document.

Medicare, and funding sources that use Medicare's guidelines, requires the speech-language pathologist (SLP) to consider access during the AAC evaluation. Specifically, the SLP must state whether the individual has the *"physical abilities to effectively use the selected device and any accessories to communicate."* Medicare has also assigned a specific code (E2599) to be used when requesting accessories for communication devices.

Just like a medication is provided in different forms and doses based on the individual's needs and response to treatment, equipment for access is selected based on the individual's physical skills and needs. This results in an appropriate individualized recommendation.

What equipment could be recommended for access?

Equipment can be recommended for both direct selection and indirect selection. Look back to the photographs included in this document. The individual who is using direct selection is using a head pointer. The individual who is using indirect selection is using a switch. Additional examples of equipment include:



keyguard



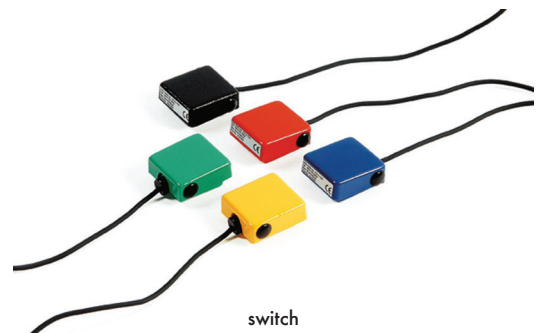
using eye gaze



joystick



switch



switch

How does this equipment qualify as a medical necessity?

The medical necessity of a communication device has been established for individuals with complex communication needs as it provides them with the ability to express physical and emotional pain, indicate needs and wants, report abuse and neglect among many other communicate functions. If these same individuals also have accompanying or increasing physical impairments, equipment for direct or indirect selection is the means by which they can use the communication device. Without such equipment, they will be unable to communicate and the issues and risks for which the communication device is a medical necessity will remain. A medical treatment (the communication device) will have been provided without the means for the individual to make use of it.

References

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