

## Communication Services and Your Child

### Assistive Technology (AT)

AT improves a person's functional capabilities. Each room has an extended AT framework to help students access their education. Hardware ranges across voice-output devices, switch access, sensory equipment, timers, and of course computers. Software includes *Boardmaker*, *Classroom Suite*, *TumbleBooks*, *ClickNKids*, *BrainPop*, *News-2-You*, and *Edmark Reading*.

### AT Specialist (ATS)

If a student needs individual services beyond this framework, then a referral for AT services might be made. The ATS will select and customize devices for a student to help access their education. The ATS will provide training as needed to the student, family, and educators.

AT support is also provided by therapists in low-incidence areas (e.g., OT, PT, VI, HI).

The ATS might provide:

More and/or Different switches,

interfaces, battery interrupters;

Stability frames (armatures, clamps, supports, modifications coordinated with a wheelchair provider);

Sensory frames;

Gaze frames (for SLP content);

Adaptive input (mouse, keyboard, or touch-screen); and

Adaptive toys/games.

### Augmentative and Alternative Communication Specialist (AACCS)

Speech and technology overlap at AAC. When a student achieves a set of early communication goals (such as joint attention, picture matching, clear selection), the SLP might run some trials with communication devices, generally in consultation with the AAC specialist. The SLP might then submit a request for an actual AAC evaluation if the trial results suggest the student might do well with a higher-tech device. The AACCS manages the process from that point on, in close collaboration with the SLP.

### Outside Services and Devices

If you supplement school services with those from other providers, please fill out a Release of Information form so that your child's specialists can coordinate their efforts.

*If you are looking into purchasing a device, we urge you to consult with the specialists who work with your child. This is particularly important if you are thinking about introducing the device into the classroom.*

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# Communication Services and Your Child

Communication is a core priority in our classrooms. It's a complex issue with an equally complex program put in place to handle it all, but it can be explained in a relatively simple way.

## Speech-Language Pathologist (SLP)

Our SLPs provide service in Life Skills classrooms, Lane School, and some of Lane County's rural schools. Our students can rely on help in all of these areas:

*Speech* (production of sounds);

*Cognition* (attention, memory, ordering in space/time, critical thinking);

*Language* (meanings with sounds, signs, writing, and pictures);

*Literacy* (reading, story retell);

*Social Skills* (social rules/relationships, eye contact, facial/body language)

*Fluency* (stuttering, cluttering);

*Voice* (loudness, pitch, tremor, hoarseness, breathiness);

*Feeding/Swallowing* (aversions, bolus formation, aspiration);

*Hearing* (screenings, signed

language support); and

*Augmentative and Alternative Communication* (identification, acquisition, and maintenance of a range of communication technologies).

Naturally, this is coordinated with therapy in other areas.

Close contact with the teachers and staff is crucial because they turn their rooms into language-rich environments. All day, every day, they support communication and social interaction, immersing their students in an abundance of images, art, dance, drama, math, technology, movement, rhythm, print, and music.

## What Therapy Looks Like

*Direct* "face-to-face" contact is easy to see as it goes on, whether it occurs one-on-one, in small group, or with a whole class.

*Indirect* contact can be observation, consultation with staff, or activities run by a staff member trained by the SLP.

Most therapy mixes direct and indirect, and it can be *pull-out* (taking the student out of

class), *push-in* (the SLP works in the classroom or community), or in between. So therapy might take the shape of:

*modeling* basic communication partnership during floor time with a kinder;

*playing* Bingo with a group learning to say "my turn" and "your turn";

*observing* a student with staff and peers to see if therapy is working;

*training* a staff member to reinforce comm. in a Reading Group;

*taking* a student for a spin around the campus while working on vocabulary;

*attending* music class with a student to learn about what they like;

*enticing* students in snack time to use whole phrases to make requests;

*coordinating* activities with other specialists; and, most importantly,

*encouraging* students about their communication whenever and wherever the opportunity arises.

Therapy is better when sessions use materials that appear in other lessons, such as practicing the /s/ sound in speech when it is being covered in Reading Group.