Speech-Language Pathologist Assessment for a Speech Device

Date of AAC Evaluation	06/01/2024
Evaluating Speech-Language Pathologist	Samantha L. Pathologist
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Phone Number of Evaluating Speech- Language Pathologist	123-456-7890

Demographic Information

Patient's Name	John Smith
Patient's Date of Birth	09/01/2021

Background Information

words, and follow direct and language evaluati pediatrician due to part communication and set speech and occupation John also receives out week for 30 minutes. H	his ability to engage with people, imitate ctions. John was initially referred for a speech on through early intervention by his rent concerns related to his delayed ensory processing. He has been receiving nal therapy in the home since the age of two. patient speech therapy services once per His family was referred for an evaluation with a rician, where he was diagnosed with autism at
Current living environment Home with family	
Speech & Language ICD 10 Code &F80.2 - Mixed ReceptiveDescription (Select all that apply)Autistic Disorder	ve-Expressive Language Disorder, F84.0 –

Current Communication Impairment and Limitation	John uses some sounds and words intermittently, but primarily communicates by pointing and leading his family to what he wants. John will occasionally use single words to say what he wants to eat or shows he wants to watch, but this is inconsistent and his vocabulary is limited. He will sometimes script from TV shows. He is not yet using verbs or combining words into novel phrases.
Given the severity of the communication impairment as described above, does the patient require the use of a speech generating device (SGD) for functional communication?	Yes
Does the member currently use an ACD/SGD?	No
What is their current prognosis for speech and/or written communication?	John's verbal language skills are not sufficient for meeting his communication needs at this time. He is also two, so writing is not a reasonable expectation for him. These skills are anticipated to grow over time, yet it is likely that John will continue to need a high-tech SGD to fully meet his communication needs long-term.

Comprehensive Assessment

Is the patient hearing impaired?	No
Does the patient have adequate hearing abilities to effectively use a SGD to communicate functionally?	Yes
Is the patient visually impaired?	No
Does the patient possess adequate acuity for use of a SGD?	Yes
Does the patient possess adequate visual tracking skills for use of a SGD?	Yes
Does the patient require modifications to utilize a SGD? (ex: lighting, angle)	No
Functional Ambulation/Mobility	Independent Ambulation
Communication device to be used in the following positions:	Standing, Walking, or Seated

Comprehensive Assessment	
Does the patient have any mobility limitations that could impact their ability to access a SGD?	No
Cognitive Status	
Cognitive Status	John demonstrates the necessary cognitive prerequisites for appropriate use of an SGD (e.g. simple cause and effect, object permanence and procedural memory for the operation of the device).
Does the patient demonstrate the necessary cognitive abilities (i.e. attention, memory and problem- solving) skills to learn to use a SGD to achieve functional communication goals?	Yes
Describe the patient's cognitive abilities (i.e. attention, memory and problem-solving) skills to learn to use a SGD to achieve functional communication goals.	John's cognitive skills are within functional limits for a child of his age. At times, he requires support to attend to tasks and is still learning to solve problems on his own.
Does the patient's linguistic performance indicate the necessary language skills required to functionally communicate using a SGD?	Yes
Expressive Language Skills: Is the use of an SGD necessary for the patient to be able to adequately express ideas, thoughts, feelings or emergent information?	Yes
Receptive Language Skills: Is the patient able to adequately understand and has the potential to respond in conversation with the assistance of a SGD?	Yes
Describe the patient's readiness and motivation to communicate via the use of an ACD/SGD.	Throughout the trial period, John has increased his intention to initiate communication interactions by using the SGD. He is motivated to engage with screen-based technology and understands cause and effect. He understands that the device has the power to help him communicate with his family about his wants, needs. and ideas.

Describe the patient's sensory- perceptual skills, including sensorimotor, visual acuity, hearing acuity, and tactile sensation.	John's visual acuity, hearing acuity, and tactile sensation are within functional limits for operating the communication device. He is working with occupational therapy to address sensory concerns. A keyguard is recommended to support John's ability to directly select icons on the touch screen.
How does the member show intent to communicate?	John will occasionally make eye contact with his family to show engagement and direct their attention to what he wants to show them. He also shows engagement through physical proximity to others. He will guide his family by the hand to make requests for items and actions. John will sometimes script from TV shows to request watching that show and will occasionally use single words to say what he wants.
How does the member protest and what does the member do with communication breakdowns?	John primarily initiates communication by using his body, so he will have a tantrum and sometimes throw when he doesn't want something. John is two, so he will get frustrated when a communication breakdown happens and his family can't understand what he wants. He requires support for regulation and repetition to be shown the words that match what he might be experiencing (e.g. help, all done, stop).
Describe the patient's interactional/behavioral and social abilities both verbal and nonverbal.	John is able to communicate his wants/needs/ideas to his family with support required to interpret his body language. He enjoys engaging in play by himself and is learning how to let others play alongside him. He shows communication intent by leading his parents to what he wants. He is learning to greet others and summon his parents by using the SGD to call their names.

Daily Communication Needs

Must be able to communicate about:	Personal Needs, Personal Information, Medical Needs, Social Interaction
Where will the device be used:	Home, Community
With whom will the device be used to communicate with:	Family, Friends, Therapists, People in the Community

Devices Trialed	
Device 1 Trialed	Device Name
Device 1 Trialed	Trialed and ruled out
Device 1 Trialed: Outcomes/Rationale	Other

Device 1 Trialed: Outcomes/Rationale - Other	This device is significantly heavier than the QuickTalker Freestyle. John needs a device that is lightweight and easy to transport. This is also not an iOS-based device. John and his family are familiar with Apple products and it would be easier for them to navigate an Apple iOS device. He trialed and was not successful in using this app to communicate. The trial with this device was unsuccessful and is being ruled out.
Device 2 Trialed	Device Name
Device 2 Trialed	Trialed and ruled out
Device 2 Trialed: Outcomes/Rationale	Other
Device 2 Trialed: Outcomes/Rationale - Other	During the trial, John was somewhat successful in accessing buttons on the device. However, he was unsuccessful in using the communication apps on this device. When trialing these apps, he required maximal prompting support. This device was ruled out due to lack of offering the language features that best meet John's needs. This manufacturer also offers a limited warranty which would not provide John's family with the maximum device support available.
Describe why the patient's communications needs cannot be met through the use of less costly speech alternatives?	John's verbal language skills are insufficient to meet his communication needs at this time. PECS were briefly introduced during speech therapy sessions at home, but he did not understand the concept of exchanging the pictures to obtain what he wanted without significant assistance. He does not functionally use sign language to communicate, despite consistent modeling. A mid-tech device like a GoTalk would limit his access to a robust vocabulary and is not as easy to edit as his language skills grow.
Describe why the requested device is the only device that can meet their basic needs	The QuickTalker Freestyle is the only device that meets all of John's communication needs. It is lightweight, portable, and easily customized to support John's communication development. This was the only device that John and his family implemented successfully during the trial.

Trial Device 3 - Recommended Device

Trial Start Date	05/01/2024
Trial End Date	05/31/2024

Trial outcomes and explanation as to why the QuickTalker Freestyle is recommended	The QuickTalker Freestyle has been used at home, in the speech clinic, and in the community. At the beginning of the trial, John required maximal prompting to engage with the device. He required hand under hand cueing to attend to the device and select icons on the screen. He required consistent repetition of models within various routines to learn cause and effect. By the end of the trial, John required minimal cueing to navigate the home page of the device. He knows to push the word "open" when he wants his family to open a door. With verbal reminders and a pointing cue, he is able to push "more" when he is requesting additional snack. He requires an adult to navigate to the food page and a verbal cue so that he can make a choice of what he wants to eat. He is able to use his device to greet his therapists by name with a verbal cue and pointing prompt.
Please provide examples as to why this device is needed to meet their basic communication goals.	John's verbal language skills are insufficient to meet his communication needs at this time. He requires the use of a high- tech SGD to express his wants, needs, and ideas with his family. The device provides an alternative method for him to communicate basic needs like hunger, express when he's in pain, and share in social interactions with his family.
What are the specific wants and needs expressed on the device? What messages were initiated with different communication partners?	He is able to communicate requests (e.g. eat, more), direct the actions of adults (e.g. open) and greet his therapists (hi + name) with minimal-moderate support provided. He is able to initiate messages to his family and therapists with assistance provided from adults.
Describe the patient's ability to navigate the device (pages/icons) and the level of assistance required.	John can navigate the core vocabulary on the main page with minimal support to express basic needs using one-word utterances. He requires adult support to navigate to different pages with fringe vocabulary. Once an adult navigates to a page (e.g. food), he is able to make a selection with minimal-moderate cueing.
Describe the page sets and grid size that are being used.	John is using the XYZ Page Set and a 5x5 grid size.
Describe why the QuickTalker Freestyle is the most appropriate and cost-effective way to meet the patient's needs.	The QuickTalker Freestyle is the device that is best suited to meet John's communication needs. It is light, portable, and is easy to edit to add new information as John's communication expands. Low/mid- tech devices were inadequate to meet John's needs and the other high-tech devices were not implemented successfully during trials. The QuickTalker Freestyle is the only device that John was motivated to use and showed positive gains with throughout the trial.
Why is this device being recommended over other devices that offer voice generation?	The QuickTalker Freestyle is the device that sounds the most similar to John's natural voice. The other devices that were tried sounded mechanical and not suited for a child of his age. The low-tech options did not have a voice output feature and the mid-tech devices required an adult to record the voice output. The QuickTalker Freestyle is the device that is the easiest to customize as John grows.

Prognosis Using the Above Outlined Device	The prognosis for John's successful implementation of the SGD is good-excellent. Before implementing the SGD, John's family had to rely on his body cues and his limited vocabulary in order to know what he wanted. He would sometimes get frustrated when he couldn't express himself in a way that his family understood. With an SGD available, he now has an alternative method to express his wants/needs in a more concrete way. He benefits from cues within structured activities to communicate using the device, but he continues to gain independence in using the device every day.
Describe any anticipated changes and modifications that may be needed in the next 2 years.	As John's language skills continue to grow, the device will need to be edited to include more relevant vocabulary.

Goals

Goal 1	Language functions
1 - Language functions	John will use total/multi-modal communication to express a variety of functions (e.g. greeting, requesting, rejecting, asking a question, etc.) within daily interactions in 8 out of 10 opportunities across 3 consecutive data collections, with cues fading to independence.
Goal 2	Language functions
2 - Language functions	John will imitate two-word phrases on the SGD following an initial model in 8 out of 10 trials across 3 consecutive data collections, with cues fading to independence.
Goal 3	Other
3 - Other	John will use the SGD to gain the attention of an adult in 8 out of 10 opportunities across 3 consecutive data collections, with cues fading to independence.

Treatment Plan

Explain the Patient's	John will continue to receive one hour of home-based speech
Treatment/Educational plan, and	therapy every week, focusing on continued implementation of the
Support Schedule upon funding of a	SGD. He will also receive one 30-minute session of outpatient
device:	speech therapy per week, where the device will also be utilized.
	John's therapists and family will work together to maximize the
	functional use of the device across multiple settings.

Explain the Parent/Family/Caregiver
Intervention, training plan and
support upon funding of a device:The SLP will include family training during every in-home speech
therapy session and will provide specific activities with opportunities
for John's family to practice using the SGD. His therapists and family
will collaborate to ensure ongoing support and troubleshooting as
the device is implemented into daily routines.

Speech-Lanugage Pathologist Signature

The recipient will be the sole user of the QuickTalker Freestyle.

The QuickTalker Freestyle (HCPCS code E2510) is a dedicated and custom configured speech-generating device that is only usable for communication purposes. The software used by AbleNet ensures the device is only usable for communication with the prescribed speech application. The user is unable to unlock the device without the assistance of ableCARE, the AbleNet Product Success Team, and approval from the treating speech language pathologist.

A copy of this evaluation and recommendation has been forwarded to the member's treating provider for review and completion of DME order.

I am not an employee of, nor do I have, a financial relationship with AbleNet Inc., the QuickTalker Freestyle speech device supplier.

Date	06/01/2024
Name	Samantha L. Pathologist
Credentials	CCC-SLP
Signature	Sample