#### Identify child as potential AAC user

(seek support/advice as required from SEN therapists/AAC lead)

●Condition associated with not developing speech (cerebral palsy, autism, syndrome) ●Trying to convey single messages without speech (leading, pointing) ● Severely dysarthric/disordered speech (listener can't "tune in" – needs interpreter) ● No speech emerging following clinic/school/famil- based adult-child interaction coaching.

Discuss with parent. Explain AAC in relation to the child. Gain consent to trial. Graphic/video about how AAC works in Wigan (*Parent Road Map*) (In production)

Assessment by treating therapist/supporter. Request specialist visit if required.

Family attend appointment with Cboard on their own device.

Model activity board, AAC modelling links, send home with 3 x boards to practise.

Review response to activity board after 2 months (via opt in letter if in community)

#### "Expressive AAC"

- Need AAC expressively
- Mismatch between comp-exp
- Dedicated AAC system

E.g. cerebral palsy

Use <u>Expressive phase</u> of AAC pathway

#### "Alternative" AAC

 Require symbols long term for comprehension and expression

E.g. non-speaking autism, severe learning disability

Use Opportunities or Expressive phase of AAC pathway depending on response to activity boards demo session

#### "Supportive" AAC (temporary)

## <u>Situational</u>

Some speech but unintelligible to some listeners or in some contexts (inc SSD children)

Use Expressive phase of AAC pathway

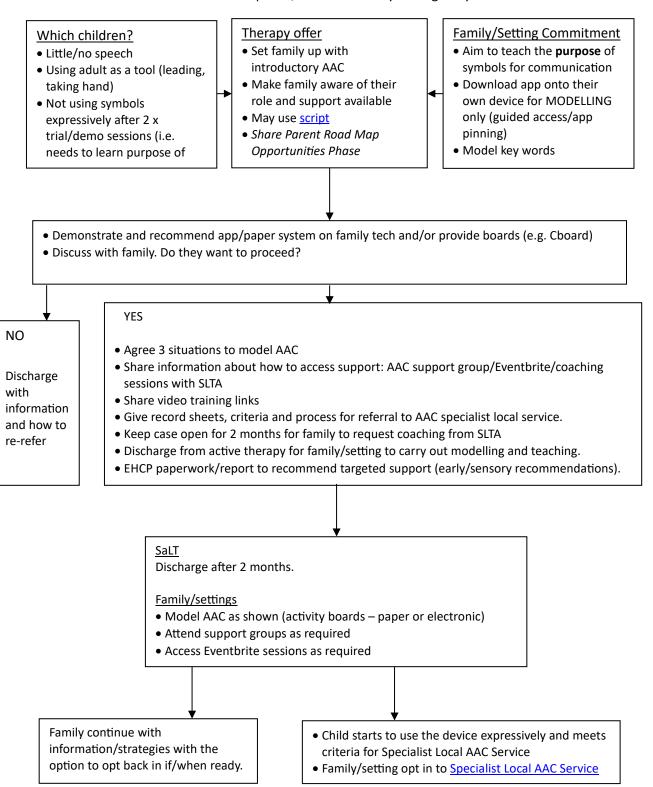
#### <u>Developmental</u>

Requires AAC to support language development but speech is expected/hoped for

Early language pathway with activity boards/family iPad.

### **OPPORTUNITY and LEARNING PHASE**

At this phase, the child is not aware of what AAC is for, so the adult role is to teach this. It may take a period of time, and the child does not need to be open to SaLT for active therapy, the adult can opt in to support as they need it. This phase ends when the child starts to use the device in different settings, at which point they move to the EXPRESSIVE phase, which is actively managed by SaLT.



# SPECIALIST LOCAL AAC SERVICE (EXPRESSIVE PHASE)

At this phase, the child recognises that AAC can be used to communicate in different situations, to meet their wants and needs. They need their own dedicated AAC system so they can keep it with them and build vocabulary and the range of people they can communicate with.

#### Which children? Therapy offer Family/Setting Commitment • Little/no speech • Delivered by specialist • Continue modelling and • Spontaneously using 15 therapist/special interest updating vocabulary pictures/symbols in at least 3 Assess communication different activities • Recommend and source • Use symbols daily appropriate equipment • Understand that symbols • Provide support outlined represent words and messages below • AND/OR responding to activity boards in first session AND/OR has physical disability Family/setting make referral to SLAAC, using AAC Local Service Referral Form or child transfers in from other part of service. Assessment • Assess communication. Do they want to continue with current system (updated) or need more linguistic options? • Recommend and source appropriate equipment SPECIALIST PLUS **SPECIALIST** Child needs bespoke/specialist Child needs standard, dedicated AAC system system/access • Request equipment (see "Requesting AAC") Specialist therapist arranges set up of • Set up equipment (see "Setting up Specialist system with family (with SLTA support) and AAC" for guidance) an appropriate provision of target setting, • Set targets and review with appropriate input management, review and update. (SaLT and/or SLTA) as per SEN Pathway (specialist branch) for clinical options. Manage on SEN Pathway (specialist plus

branch)

England.

Funding via JPAAC (ringfenced) or NHS

## **Script**

We need to treat AAC like a new language. The adult needs to "speak" AAC to children all the time, so they can learn the pictures and words. Non-disabled children can take 2 years to start using speech again and we should expect that your child may need 2 years or even more to learn to use this device.

Some children pick up AAC straight away, but some children take a longer time to start using it for themselves. We don't know why your child hasn't started to speak yet, and we can't say whether they will get any or enough speech to tell us what they want or are thinking.

If we start using symbols, we are not at all giving up on speech. Symbols can be another way to try and encourage speech. We are also giving your child 2 ways they may be able to express themselves in future: through speech and/or through symbols. If we give them both, they have 2 possible ways to express themselves. If their condition means they can't develop speech, despite all the work you have done, then we are giving them another way for them to tell us their wants and needs. We can teach both at the same time.

Some people worry that AAC might stop a child from talking. This has never happened, and some children start to use more speech when they have pictures to help them. We can't say whether your child will be one of the children who do develop speech, but we can say that AAC will help them develop their communication to their potential.

Your child needs you and their nursery/school at this point of their therapy. They don't need to work with someone who doesn't know them very well and who doesn't interact with them daily! We will show you what to do, and then you can carry this out all the time. We can offer one or two sessions of coaching, and ongoing access to our parent support groups and online 1:1 sessions.

When your child starts to respond, you will be ready to refer in to the specialist AAC part of our service, where we can see whether your child needs their own AAC system. If they do, we can help source and set that up with you.