Working with Augmentative and Alternative Communication Services

In 2015 Augmentative and Alternative Communication (AAC) services began to be directly commissioned as a specialised service by NHS England. Assessment and provision in England is provided through one of 16 regional AAC hubs with local support being provided by speech and language services.

For an individual to be eligible for the service, there will be a clear discrepancy between their level of understanding and their ability to speak associated with a range of physical, cognitive, learning or sensory deficits. They must also be able to understand the purpose of a communication aid and have developed beyond cause and effect understanding.

As part of the provision, and as a result of the assessment, the specialised service will typically provide a communication device and specialised access solutions (a switch or joystick for example) to enable the user to use the device in the most efficient and appropriate way. A key objective will be to facilitate communication when and where the client needs it. This will typically involve mounting the device for use in a range of environments.

Of course, many clients will use either manual or powered mobility. It is important for AAC service providers to communicate effectively with wheelchair services so that all of those involved with providing kit know who is doing what, and to ensure that those mounting assistive technology to wheelchairs are competent and fully understand the implications of their activities.

Several people have recently developed the assessment and risk management documentation used by AAC services when mounting assistive technology. The MAT-DOC (Mounting Assistive Technology Documentation) is a useful and open tool to document decisions taken when providing mounting solutions. It’s available online at <http://mat-doc.org>.

For clients who have particularly complex needs, there is a great opportunity for services to work together to integrate technology, particularly if they use powered mobility. While there are challenges, it can lead to simpler more effective solutions for the client. It can also help to reduce overall cost by avoiding duplication.

I hope this gives brief overview of how AAC services are currently working. More information on the regional services can be found on the Communication Matters website (<http://www.communicationmatters.org.uk/page/contacts-assessment-services-hubs>).

Practicalities of Integrating Assistive Technology

In a previous article, I mentioned how there is a great opportunity for services to work together to integrate technology for clients now there is specific commissioning for specialised Augmentative and Alternative Communication (AAC) services.

Specialised access solutions to facilitate access to a client’s communication aid are provided after assessment by one of the sixteen AAC hubs in England. Examples of specialised access could include a switch or joystick.

It’s important for AAC services to communicate effectively with wheelchair services where the client uses manual or powered mobility. This will ensure discussions can take place to look at options (often simpler and more cost-effective options overall) for clients where the services overlap.

Integrating technology particularly applies to powered mobility users who either use (or might use):

* a joystick to access their communication aid
* one or more switches to control their powerchair or communication aid.

With many older powerchairs, and those with standard control options, a separate device or joystick will be needed to access the communication aid as integration will probably not be possible. Mounting a second joystick to chair will always mean that only one of the two joysticks will be in the optimum position This not an ideal solution, and also leads to a higher overall system cost (due to the extra joystick and its fitting, support and maintenance).

If a client uses one or more switches to control their powerchair, an assessment will have already taken place to establish the optimum switch site, and look at the most appropriate kit available. A switch site for mobility may not be the optimum switch site for communication, but it’s likely to be. While in theory it’s possible to one or more of those switches to access communication, it is unlikely the user will be able to independently switch between modes (switch between communication and mobility). This not an ideal solution, and also leads to a higher overall system cost (due to the extra switches and their fitting, support and maintenance).

There is currently no solution to easily drive and talk at the same time. Users need to make a choice.

At ACE Centre, we have worked with three clients over the last few months and have been able to work with their local wheelchair service to integrate the two systems. We are extremely grateful to the wheelchair services concerned that enabled us to collaborate and ultimately provide a simpler, integrated system for the client.

The specialised AAC service will provide specialist access devices, and that could include powerchair control options that would not normally be provided by the wheelchair service. Many communication aids are now Bluetooth-enabled (and if they’re not, they can be), so where a joystick is the most appropriate access option for the user, a Bluetooth mouse control module fitted to the powerchair can allow the two systems to be integrated. Where switches are used to control the powerchair, there may be occasions where it’s useful to consider if they could be used to access the communication device too, or whether using one of them could be used for mode change.

In our three cases, we have prescribed kit for a Quickie Salsa that would not normally have been funded by the wheelchair service as it was not required for postural or mobility needs. This was added to the Salsa prescription form and ordered with the chair so the kit could be factory-fitted as part of the chair build. The wheelchair service will then charge the for the additional parts. ACE Centre will support and maintain the additional kit and provide the same level of service that the client receives for the powerchair itself.

It is not always easy, but this type of integration does lead to simpler solutions for the client. It prevents duplication of kit and helps to keep overall costs of the system down.

Effective communication between services has been the key to enabling this type of integration of kit where it is funded by different services.