

Communication SAMPLE 10 yo student w/spastic diplegia and reduced visual field; has 1:1 para 2 ½ hours/day

Assistive Technology Referral Special Services, Christina School District, Newark, DE.

Student _____ Date _____ School _____ NOTE: This should be completed by all team members working together.

Student List the student's <i>strengths</i> and <i>challenges</i> as they relate to the requirements of the activity.	Environment Where is student having difficulty meeting the IEP objectives and/or other task?	Task With what is the student having difficulty? Be specific.	Tools & Strategies Identify means already tried to teach student this task. List all possible tech and non-tech supports that may help student perform the task.	Initial Plan 1. List baseline data needed 2. Create a timeline including date for Implementation Plan NOTE: List persons responsible for each step
<p>Strengths:</p> <ul style="list-style-type: none"> . uses eye blink for yes . frowns for no . pic recog. @ 8 yr level . R's diff. to diff people . muscle tone remains calm when trying to use simple switch . enjoys music . follows peers w/eyes . eats school lunch if cut in small pieces and fed to her . loves books <p>Challenges:</p> <ul style="list-style-type: none"> . also expresses no by crying & inc. muscle tone – loses proper positioning as result . must be pulled fr/Incl. class @ times due to this display . switch accuracy = 25% . cannot grasp/hold objects . reach is <50% acc on 1st or 2nd attempt, given an object of 2-5" size on standard desktop 	<ul style="list-style-type: none"> . across environments . has more trouble w/muscle tone in cafeteria, on bus and in hallways . when sees people, muscle tone increases (perhaps trying to greet them) . muscle tone remains calm during meals <p><u>Full-Inclusion Classes</u> SS</p> <p><u>Full Spec Ed Classes</u> Math, Science, LA</p> <p><u>REACH classes</u> Exploratories</p> <p>REACH teacher or para accompanies student to core classes</p>	<p><input type="checkbox"/> IEP Goal/Benchmark</p> <ol style="list-style-type: none"> 1) Greet adults & peers 2) Indicate preferred task or object, given choice of 3 (PLOP = can eye point between 2, not 3) 3) Increase repertoire of picture recognition to age-level 4) Create 3 word sentence (S-V-O) <p><input type="checkbox"/> Instructional Activity</p> <ul style="list-style-type: none"> . Tap switch to say hello . Tap switch repeatedly to continue conversation . Point to pictures, or use some other means, to indicate recognition <p><input type="checkbox"/> Other Task</p> <p>Indicate "no" calmly so that Inclusion teacher and/or peers can understand</p>	<p>Already Tried</p> <ul style="list-style-type: none"> . Simple switch to activate computer . Big Mack for "no" . Eye-gaze board <p>Struggles w/all of these OT, PT, Speech 2x/week Group, Individual, Consult</p> <p>Possibilities</p> <ul style="list-style-type: none"> . Multistep communicator . Alternative switch – we need help finding what this might be . Scanning? . Modification of computer for Visibility – we need ideas for this 	<ol style="list-style-type: none"> 1a) Data HAS been collected by Teacher, OT, PT, ST re: reach, freq. of eye gaze, pic. recog., activities that affect Muscle tone, positive reinforcers 1b) Need date re: areas of eye gaze board that can be accessed + min/max distance between pictures for accurate gaze – OT will help REACH teacher collect this info 1c) Seek Inclusion Coach consult for strategies to increase time spent in Incl. classes <ol style="list-style-type: none"> 2. Give data to ED by 12-12-12 ED to send referral to Inclusion Coach by 01-12-13 Meet within 30 days to create Implementation Plan If Device or A.T. eval are necessary, ED to send referral to AT Collect further data over 6 weeks time (to be determined at Implementation Planning meeting)

Is evidence (baseline and subsequent data) attached to referral? See reverse side of page.