

## ***InterACT Team***

*Interdisciplinary Augmentative Communication and Technology Team*

Montgomery County Public Schools

Lynnbrook Annex  
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### **Preview Request for Assistive Technology Services by InterACT**

The InterACT Team provides assistive technology services as a related service on the IEP (Individualized Education Program). InterACT staff provide services to support students who are non-speaking or have limited speech production and are in need of augmentative communication systems, and the current resources at the school level are not sufficient. InterACT staff also provide services to support students who have physical disabilities and cannot access a standard computer keyboard.

The reason for this Preview Request is:

- Student is non-speaking, has limited speech production, or is severely unintelligible. *(complete pages 1 through 4)*
- Student is unable to produce written output due to severe physical disabilities. *(complete pages 1,2,5)*

Staff completing form: \_\_\_\_\_ Date: \_\_\_\_\_

Preview Request initiated by:  School team  Family  CIEP  Other: \_\_\_\_\_

#### **General Student Information**

<b>Student Name:</b>	<b>Student ID:</b>	<b>Date of Birth:</b>
<b>School / Program:</b> <input type="checkbox"/> AM only <input type="checkbox"/> PM only	<b>School Phone Number:</b>	<b>Grade:</b>
<b>Medical Diagnosis:</b>	<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>Primary Language Spoken at Home:</b>	<b>Medical Assistance:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>Status of Hearing &amp; Vision:</b>		

#### **School Team Information**

<b>Teacher:</b>	<b>Paraeducators:</b>
<b>Speech Pathologist:</b>	<b>Health Services:</b>
<b>OT:</b>	<b>PT:</b>
<b>Vision:</b>	<b>Other:</b>

#### **What other consultations have been requested for this student?**

- Autism  BEST consult  ED consult  Other: \_\_\_\_\_

**What do you expect InterACT to provide?**

**How do motor skills impact communication?**

- No significant motor concerns
- Student requires wheelchair or adaptive seating
- Difficulty with arm and hand control
- Unable to point with finger
- Difficulty with head control for visual attention
- Other: \_\_\_\_\_

**What is the student's current level of communicating?**

***Level 1--Emerging Communicators*** These are students who are at the early stages of communication and who primarily use behaviors to interact.

- pre-symbolic communicator who may display reflexive/reactive behavior (laughing, crying) which is interpreted **by the observer** as communicative
- communicator who exhibits intentional goal-directed behavior (not necessarily directed towards another person)
- communicator who exhibits intentional communicative behavior (goal directed behavior directed towards another individual) using gesture or natural non-symbolic means

***Level 2--Beginning Symbolic Communicators*** might be using some symbols: manual sign or sign approximations, vocalizations, stylized gestures (including pointing), and verbalizations or verbal approximations (one through approximately 50). They use the symbols one at a time and have not started combining them together much, if at all. They might use (or have tried) picture or object-based communications strategies, or a single or double-message speech generating device to indicate a simple greeting, the desire for reinstatement of a preferred activity or a choice between two activities.

***Level 3--Intermediate Symbolic Communicators*** may be using a number of (25 or more) symbols: manual signs or sign approximations, vocalizations, verbalizations (or verbal approximations) one at a time—they may be combining the symbols (which would imply having close to 50 symbols in his/her repertoire) in a rudimentary syntax or word order, e.g., I want... I like... I don't like... I go... etc.

-adapted from Boulder Valley State District, Boulder, CO

Student Name: \_\_\_\_\_

**Communication Functions:**

FP = Full Physical Prompt      PP = Partial Physical Prompt      M = Modeled      G = Gestural Prompt  
 V = Verbal Prompt              I = Independent

	Absent	Body movement /gestures	Pointing to photos	Pointing to Picture symbols	Pointing to text	Writing	Verbal*	Other means (list)
Gaining attention								
Requesting object								
Requesting action								
Requesting help								
Expressing recurrence								
Terminating an activity (requesting a break)								
Protesting								
Greeting								
Commenting								
Expressing his physical condition								
Expressing farewell								
Requesting information								
Providing information								
respond with YES								
respond with NO								

\* Verbal: (intelligibility rating) \_\_\_\_\_

**Additional Information about how the student is currently communicating**

- Eye gaze (describe) \_\_\_\_\_
- Objects (list) \_\_\_\_\_
- Sign language (List) \_\_\_\_\_
- Vocalizations/Words (examples) \_\_\_\_\_
- Communication Book or Display (describe) \_\_\_\_\_
- Written Language (include a writing sample)
- Speech generating devices (please specify):

Student Name: \_\_\_\_\_

**Those Who Understand Student's Communication Attempts/Speech**

	Most of the time	Part of the time	Rarely	Not Applicable
Unfamiliar Adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Therapists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent/Guardian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**What does the student do when not understood?**

**What strategies have been used by the staff to support functional communication:**

(Please check all that apply)

- Prompt Hierarchy:       Least to Most                       Most to Least
- Sign language / Gestures
- PECS (Picture Exchange Communication System)
- 20 Questions
- PartnerAssisted Scanning
- Aided Language Input (Modeling)
- Verbal Modeling
- Wait Time (how long) \_\_\_\_\_
- Other: (Please describe)

**Please describe any behavioral concerns:**

***PLEASE ATTACH ANY REPORTS THAT ARE SPECIFIC TO THE ISSUES TO BE REVIEWED  
BY INTERACT STAFF***

**Written Output**

**Student Name:** \_\_\_\_\_

**How is the student accomplishing writing at this time?**

	<b>Tool</b>	<b>Adaptations</b>	<b>Words per Minute</b>
<input type="checkbox"/>	pencil/paper		
<input type="checkbox"/>	keyboarding		
<input type="checkbox"/>	scribe		

**For computer access, the student has experience with:**

- Computer word processor
- Portable word processor (please specify): \_\_\_\_\_
- IntelliKeys using: \_\_\_\_standard overlays \_\_\_\_ customized overlays \_\_\_\_switch access
- Other adapted keyboard (please specify): \_\_\_\_\_
- Touch screen
- Switch access (please specify): \_\_\_\_\_

**What software applications are currently used to support writing: (please list)**

\_\_\_\_\_

**Describe the student’s use with the keyboard:**

- uses \_\_\_\_\_ fingers
- uses one hand
- uses both hands
- unable to use hands
- knows the locations of letters on the QWERTY layout (standard keyboard layout)
- knows the locations of letters on an ABC layout

**Can the student use the standard computer mouse?**     YES     NO

If no, please list other options that have been tried (e.g., trackball, trackpad, joystick, etc.)

\_\_\_\_\_

**Please describe any motor or positioning concerns:**

\_\_\_\_\_

**Please describe the student’s current reading level:**

\_\_\_\_\_

**Does the student have a written language processing problem?**     YES     NO

**If yes, please describe:**

\_\_\_\_\_