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TEMPLATE 1: THE AAC APPROACH (TAACA) TO REFLECTION

Think about [situation] and reflect on what you know and what you have found out. What are the main takeaways for you?
My thoughts:

Assess these reflections regarding your current ways of working: How different is this from what you do now?
My thoughts:

Adapt your approach: What is going well? What might you improve, change, or do differently?
My thoughts:

Construct your plan: What measurable goals can be realistically achieved and in what time frame?
My thoughts:

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Act on your plan: Enjoy making your plan come to life, celebrate your successes.
My thoughts:

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TEMPLATE 2: ABOUT MY COMMUNICATION

Who do I communicate with now? Who am I going to use this resource with?

When am I going to use my resources?

Where do I communicate now? Where am I going to use it?

What am I going to use it for?

What difference will it make for me?

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Why do I need AAC resources?

What difference will it make for me?

How will I access AAC resources?

Any other thoughts?

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TEMPLATE 3: MEDICAL SUMMARY SHEET FOR AAC ASSESSMENT

Name: _____

Address: _____

_____

Date of birth: _____

NHS number: _____

Details of your birth/change of circumstances: _____

_____

_____

Diagnosis: _____

Operations: _____

_____

_____

Medications: _____

_____

_____

Developmental milestones achieved (if relevant for a child): _____

_____

_____

_____

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How you request things now and the effectiveness of that method (e.g. pointing, sign, consistent utterance):

Use of any assistive technology in the home (e.g. iPad, smart phone, laptop, child's computer):

Anything else you perceive important to share, including shared reading experiences, knowing colours, numbers:

Names and contact details of other professionals involved in your day-to-day support:

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TEMPLATE 4: EVIDENCE FOR EXAM ADJUSTMENTS

How does the student access the curriculum, by subject, on a daily basis?

How do they work individually and contribute to small groups and larger settings?

What extra time is allocated for different tasks to allow for completion?

How often do they need fatigue breaks, and for how long, when concentrating for longer periods (to include snacks, drinks, care, movement, and fresh air)?

What arrangements are made for practical tasks?

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How has progress been measured across each year?

What extra considerations are used for internal exams, such as their own room (so others cannot hear their answers or be disturbed), specialist equipment, AAC vocabulary pages, word prediction?

What adjustments are made for access (e.g. scribe, reader, prompter, modified tasks and papers)?

What training and support are needed for one-to-one teaching assistants, class or subject teachers, individual invigilators, and so on?

Exam boards differ but for nationally moderated exams requests need to be submitted well in advance for approval.

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TEMPLATE 5: PERSONALISED TOP TIPS FOR COMMUNICATION PARTNERS

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

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TEMPLATE 6: WHO AM I?

What five facts/things best describe me?

1. _____
2. _____
3. _____
4. _____
5. _____

What three things do I think I am good at?

1. _____
2. _____
3. _____

What three words might others use to describe me?

1. _____
2. _____
3. _____

How do I describe myself in just three words?

1. _____
2. _____
3. _____

Any other thoughts about myself

_____

_____

_____

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TEMPLATE 7: MY LIKES AND DISLIKES

This template can be changed to have different headers (e.g. pros, unsure, cons).

Title of activity:

	I like/enjoy	**Not sure**	**I don't like/enjoy**
People	*Example: Being with family*		*Example: Loud people*
Places			
Activities			
Food and drink			
Other things			

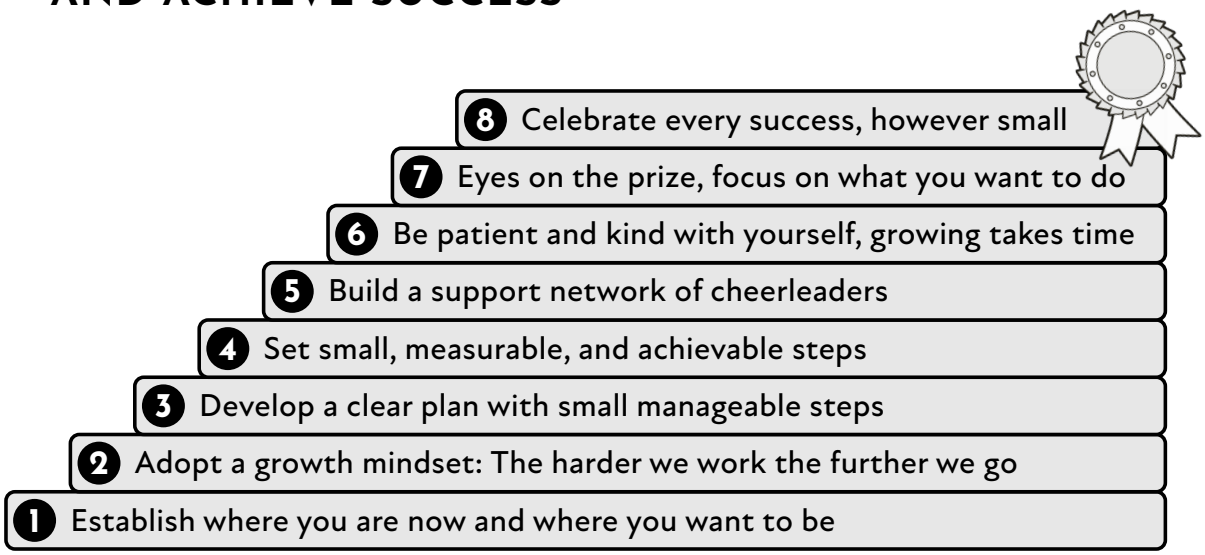
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TEMPLATE 8: PERSONAL SWOT ANALYSIS

Strengths	**Weaknesses or challenges**
What are the things you think you are personally good at, areas of life where you show competence and control?	This might be the areas that you have little or no experience of but want to develop. Or things you are learning but want to improve.
Opportunities	**Threats**
These are favourable chances or situations to develop new skills or experiences. Or to enhance the skills and opportunities you already have. The list need only be limited by your imagination.	These come in all sorts of shapes and sizes, but with a solution-focused approach can be turned into opportunities.

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TEMPLATE 9: EIGHT STEPS TO MEASURE PROGRESS AND ACHIEVE SUCCESS



STEP 1

Establish where you are now and where you want to be.

STEP 2

Adopt a growth mindset: The harder we work the further we go. Think about your commitment to make this happen, why are you doing this?

STEP 3

Develop a clear plan with smaller manageable steps. Be SMART:

- Specific
- Measurable
- Achievable
- Realistic
- Timed

STEP 4

Break the smaller goals in step 3 into small, measurable, and achievable steps by topic. Again, be SMART with each.

- Specific
- Measurable
- Achievable
- Realistic
- Timed

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STEP 5

Get on board a network of cheerleaders and mentors to support this journey. How often will you update them?

STEP 6

Be patient and realistic; even when you work hard sometimes things take longer, so readjust your goals as needed.

STEP 7

Remain focused, meet with cheerleaders and mentors regularly to discuss progress.

STEP 8

Celebrate success at every stage, however big or small. What does this look like for you?

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TEMPLATE 10A: REVERSE ENGINEERING

Task/Activity	Time/Date/ Year	Considerations
End point/goal:		
Starting point:		

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TEMPLATE 10B: REVERSE ENGINEERING

Task/Activity	Time needed (mins)	Actual time
Time required		

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TEMPLATE 11: KEY INFORMATION FILE, FOCUSED ON USE OF AAC FOR COMMUNICATION

Name: _____

Other key information: _____

Greetings: The most effective way to greet you (e.g. a simple greeting, tactile cues, symbols, or specific objects of reference) and how you usually respond.

Sensory preferences: Include tactile defensiveness or sensitivity to sound. Details of other sensory impairments impacting communication, for example:

- Hearing impairment and impact: aided/non-aided, types of hearing aids, lip-reader. Details of audiology service.
- Vision impairment and impact: glasses/no glasses, use of magnifier etc. Details of ophthalmology service.

Tools employed for communication with accompanying photos: Include:

- Paper-based resources with symbol languages with description of access methods and how they are used.
- Powered systems, including symbol languages and text languages, named hardware, and named software/apps, with description of access methods and mounting, and how these are used.
- Partner-assisted communication methods (e.g. translation of spoken word or revoicing (indistinct speech), scanning). Or taking up a narrative under direction: the time to use AAC might be prohibitive in some circumstances, so it may be that you give permission for a communication partner to relay a story or a previously discussed scenario.
- Personal communication methods (e.g. signing, body language, gesture, facial expression, eye movements, words and sounds) and how they are used.
- Existing non-verbal yes/no for quick communication.
- Backups for in-the-moment equipment or resource failure/loss (e.g. letter card in bag, air spelling, charger for power) and explanation of when they might be used.

Video(s) of young person using the communication system: To assist new educational provider and adult services in understanding personalised communication

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methods. Appropriate permissions will need to be established for these to be shared.

Communication passport: Include details of when used in school or college.

Copy of existing education, health, and care plan (EHCP/ISP/IEP): Include details of when due for review, list of attendees.

Information of ownership/supplier of AAC resources used in education with key contacts:

- NHS specialised services (date last assessed/due)
- Local AAC team (date last assessed/due)
- Local authority (date resources purchased/review needed)
- School (date resources provided/review needed)
- Family/charity (date resources provided/review needed)
- Copies of letters, purchase orders, or prescriptions for AAC resources
- Information about any mounting and access systems with photographic documentation, including number of parts and how they are assembled
- Backup copies of paper-based communication systems (e.g. alphabet cards, communication boards)

Warranties, insurances, and maintenance:

- Information on hardware warranties, insurances, serial numbers, and supplier details for troubleshooting, plus daily management details on how to charge, maintain, and backup powered devices.
- Information on software/app licences, passwords, and supplier details for troubleshooting.
- Who currently takes responsibility for troubleshooting issues with AAC resources, day to day, overnight, at weekends and holidays? Turnaround times and what backup systems are in place/used.

Training needed for communication partners at an essential personal level and for more generalised interactions, including:

- Who currently programs, or updates, vocabulary on both paper-based and powered AAC resources and how/when this happens.
- Who currently trains communication partners and where these responsibilities will lie for new settings.

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- Who is involved in training and implementation of AAC from outside support agencies (e.g. social worker, clinical rehab services).

Communication strategies and techniques previously tried: It is important not to reinvent wheels, so, if possible, have a list of strategies and techniques previously reviewed and reasons for not adopting.

Self-advocacy and advocacy needs: Including:

- Details of any planning required for all meetings (e.g. providing agenda and areas for discussion in advance to allow for the individual to process questions and plan appropriate responses).
- Who is normally invited to a meeting to support the individual's communication (when needed).

Any other relevant information: _____

_____

_____

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TEMPLATE 12: THE ROLEY MOLEY

HOW TO MAKE A ROLEY MOLEY

What you will need:

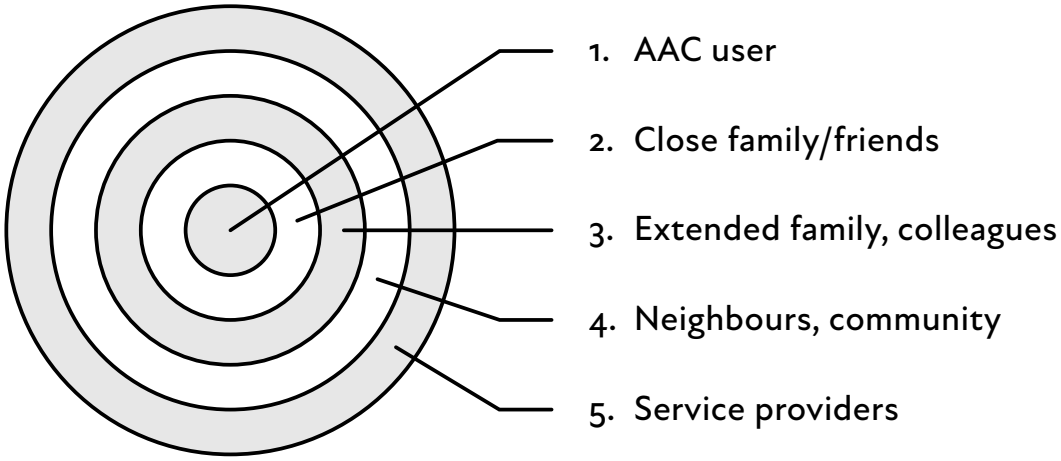
- Your AAC device
- 1 fat quarter of fabric (will make several)
- Ruler
- Scissors
- Needle and thread, to machine or hand sew
- Pencil or another blunt item to push through fabric
- Rice (uncooked, cheapest available)
- Funnel

How to make the roley moley:

1. Experiment beforehand with your AAC device to check the angle of slope you need for comfortable working.
2. Measure the length of the back of the device where the roley moley will go. Add 3 cms to this.
3. Cut a piece of fabric this length and with sufficient depth to make your roll. Remember to add on a seam allowance (e.g. finished roll 3 cms in diameter means a depth of 10 cms).
4. Fold in half lengthways with the right side of the material inside, it will resemble a long tube. Sew along one short edge and the long edge on a machine, or by hand with small even stitches. Make sure these are finished well to stop any rice escaping once complete.
5. Trim off the excess fabric around the corners so it will lay flat when turned out.
6. Use the pencil to turn the roll so the right side of the fabric is now on the outside. Use the pencil nib to push out the corners.
7. Take the funnel and fill it with rice, giving it a good shake so it has a solid fill.
8. Turn in the open end and hand stitch neatly to create a closure. You are ready to go.

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TEMPLATE 13: CIRCLE OF SUPPORT



A circle of support can be adapted as a circle of influence or leadership. Change the headings 1 to 5 to suit your personal situation.

1. You, the AAC user
2. Close family, close friends, some personal assistants
3. Extended family, colleagues, wider friendship circle
4. Neighbours, community contacts, and others
5. Service providers: either professionals or those in the community you meet regularly

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TEMPLATE 14: CREATING A VISION AND MISSION STATEMENT

STEP 1

The AAC user shares their wishes for the future and what they want their life to be like, their ethos, and values. Discuss the concept of a vision, goal, mission, or journey to achieve this.

STEP 2

Question: What is the overall goal of the AAC user with their team (e.g. everyone feels happy and valued in your home)?

Action: Each person to write down individually on separate sticky notes up to three words that describe what they think the AAC user wants from life (one word or phrase per note).

STEP 3

Theme the contributions by similar attributes or actions to agree a team statement (e.g. This is not a one-woman band, this is how I wanted to be treated myself!)

STEP 4

Question: What do we need to do to make this vision a reality?

Action: Each person to write down individually on separate sticky notes as many words and phrases as they can think of that describe the actions needed to make the vision a reality.

STEP 5

Theme the contributions by similar attributes and actions, remove all duplicates. Use these as the basis of key affirmations that everyone can agree to. The AAC user must have the final say on what is included and excluded.

STEP 6

Once agreed with the team, display the finished vision and mission statement prominently within your home. Refer to it regularly, use it in training, discuss it at team meetings. Lead by example!

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TEMPLATE 15: MAKING YOUR DREAMS COME TRUE

(ADAPTED IN PART FROM NELSON-BRYEN, 2012)

STEP 1

Identify your dream: Consider the two questions below (Karlsson, 2018) and remember that all dreams are wishes until you take action to make them a reality:

- If you had the time, money and resources available to do anything you wanted, what would you do?
- If you knew you could not fail, what would you do?
- Remember, you will need passion to make your dreams come true.

STEP 2

Make your dream a SMART goal: Identify what, where, when aspects of your dream, with outcomes, by ensuring it is specific, measurable, achievable, relevant, and timed.

STEP 3

Research your topic: Identify the resources, people, and places you will need to achieve your dream.

STEP 4

Find a dreams coach or mentor (family, friend, professional): Cheerleaders and motivators provide a sounding board and support your dream's journey.

STEP 5

Use your research to begin to break each part of your dream into steps: What is needed to achieve each part of the goal?

STEP 6

Use your research to delve deeper: Identify smaller SMART goals that will help you achieve the bigger picture.

STEP 7

Reflect regularly on progress: Use your SMART targets and adjust them as necessary, action, repeat as necessary, or move on.

STEP 8

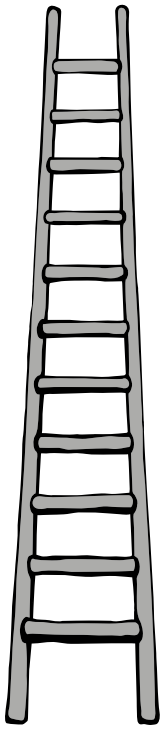
Celebrate every success, big or small, with your dreams coach.

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TEMPLATE 16: DEVELOPING A TRUST LADDER

We all need people who support us through life, those who listen, act, and champion our needs. Depending on circumstances, I can talk to the different people below:

Top step: Professional listener or counsellor who is impartial.



Close confidants: Family or best friend, may not be impartial but will always support you.

Trusted people: Key worker, senior personal assistant, trusted friend, who listen and then act with you.

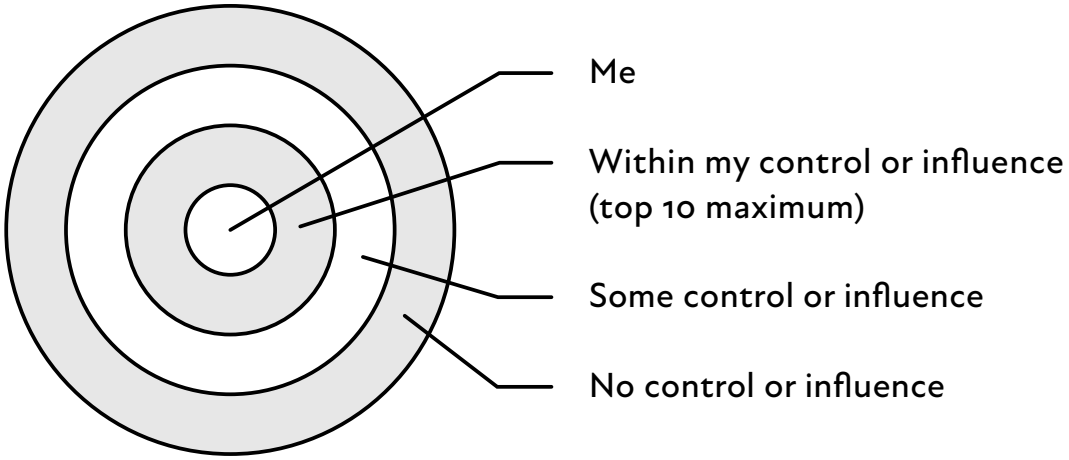
Those who you choose to share with: Good listeners who provide moral support and suggest action.

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TEMPLATE 17: CONTROL MAPPING

Think about your specific situation and write down on sticky notes everything that is giving you cause for concern or making you feel out of control. Once you have these out of your head you can then arrange them on a table or take a large sheet of paper and draw the circles shown below. Put yourself in the middle and then place each sticky note in the imaginary circles around you, with the things you can control closest; the middle ring includes things you may have some control over and finally the circle furthest from you has the things you have no control over.

Go back and look at inner circle of things you can control and now prioritise these, with 1 being the thing you have most control over and 10 being the one you have least control over. Now think about each of these and spend some time considering what steps you need to take to gain control over the things you can influence.



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TEMPLATE 18: BRAIN DUMPING

STEP 1

Take a sheet of paper and simply write down everything on your mind, however big or small. This can be a random process and consist of phrases or single words. You can do this alone or with someone you trust who can help talk through the process.

STEP 2

Once you can think of nothing else to add, consider all the things on the paper. Try and sort similar thoughts together (e.g. health, school).

STEP 3

On a fresh sheet of paper create a mind map (see below) grouping together similar thoughts (e.g. for communication, it might be mount broken, need new vocabulary).

STEP 4

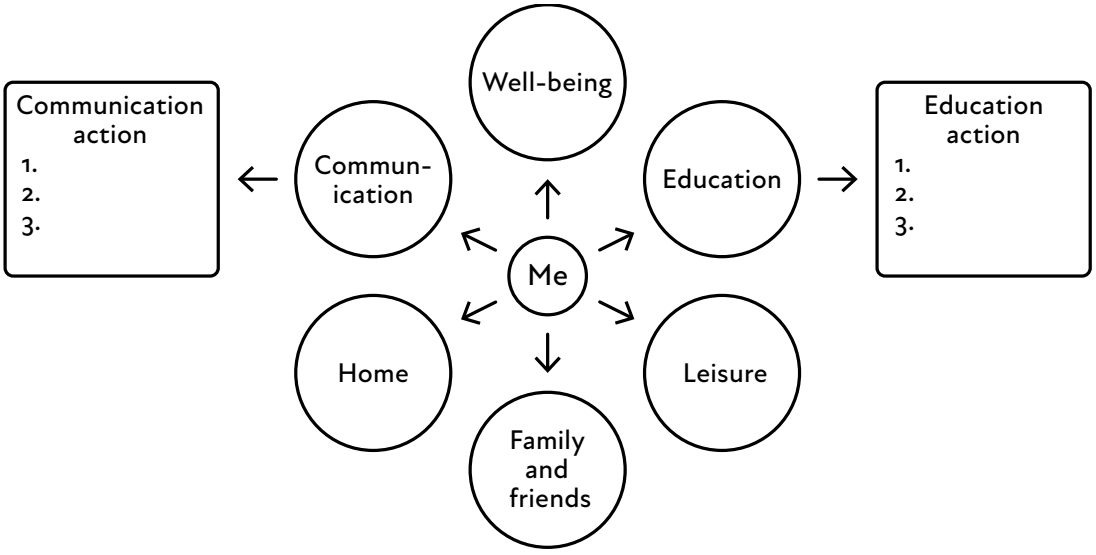
Take each area and create an action list for each of the things that have been concerning you (e.g. make an appointment with the mount provider, train a new team member in helping programme AAC).

STEP 5

Review all your actions and prioritise them.

STEP 6

Take action and then review regularly – and don't forget to celebrate when things are sorted.



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