

I CAN Centre for Assistive Technology Child Communication Skills

■ Please return with completed “Request for Services” form and supporting documents.

MAIL

I CAN Centre for Assistive Technology
Glenrose Rehabilitation Hospital
Room 38, 10230 – 111 Ave.
Edmonton, AB, T5G 0B7

FAX 780-735-6072

EMAIL icancentre@albertahealthservices.ca

Name	Date of Birth (<i>yyyy-Mon-dd</i>)	
<p>Please include the following, as applicable</p> <input type="checkbox"/> Recent cognitive/academic testing results <input type="checkbox"/> Recent speech therapy reports <input type="checkbox"/> Recent hearing and vision testing results <input type="checkbox"/> Recent program plan or IPP <input type="checkbox"/> A video showing how your child is currently communicating <input type="checkbox"/> Copies of sample displays if your child is currently using a communication board or device		
Language(s) spoken at home	<input type="checkbox"/> English	<input type="checkbox"/> Other _____
<p>■ Current level of Receptive Language (<i>that is, what your child understands</i>) Age approximation _____ If formal tests used, names and scores _____</p>		
My Child's Understanding of a Shared Language (<i>spoken or signed</i>)	Not Yet	Can Do
Anticipates the start of a routine because of specific sights and/or sounds.		
Follows a few simple instructions when spoken to slowly, with gestures, or with pictures.		
Can follow and understand most social interactions amongst peers and adults.		
Understands and learns academics like other same-aged children.		
<p>■ Current level of Expressive Language (<i>that is, what your child can speak/communicate</i>) Age approximation _____ If formal tests used, name and scores _____</p>		
How My Child Expresses Himself/Herself	Not Yet	Can Do
Uses his/her body and behavior to communicate immediate needs.		
Intentionally makes a choice when presented with 2-4 options at a time.		
Intentionally builds a new message by combining several pictures, letters, words or signs.		
Has a system or strategy to communicate extensively with others.		
How does your child show that (s)he likes something, or tells you “Yes” _____		
How does your child show that (s)he <i>doesn't</i> like something, or tells you “No” _____		
<p>■ Children communicate in many different ways, such as speaking, gesturing, using boards/devices, looking, and signing. With this in mind, please complete the following:</p>		
People Who Understand My Child's Communication	Not Yet	Can Do
At least one adult “knows” or can figure out what my child needs		

**I CAN Centre for Assistive Technology
Child Communication Skills**

At least three adults understand and respond to my child's intentional communication.		
Several adults, friends, and classmates understand most of my child's communication.		
New people understand most of my child's unique communication after a few minutes.		
Tell us how your child communicates with you and other family members _____		
Outside of family, whom else does your child interact with regularly? _____		
How Others Understand What My Child Communicates	Not Yet	Can Do
I mostly "know" my child's needs by looking at him/her. I have to tell others what my child wants.		
Others can understand some of my child's communication, if it relates to "here and now."		
My child can get others to understand about events that happen at another time or place.		
My child can teach others how best to communicate with him/her.		
■ Gestures and Use of the Face, Hands, or Body: Write down strengths and concerns here: _____ _____		
How My Child's Uses Gestures (with face, hands, or body)	Not Yet	Can Do
Reaches for or moves toward people or things (s)he is interested in.		
Uses a few gestures to get other people to do things for him/her.		
Puts together several gestures and actions to communicate messages.		
Communicates about almost anything using a complex system of signs or gestures.		
■ Visual Abilities: Write down strengths and concerns here _____ _____		
What My Child Can See and Comprehend	Not Yet	Can Do
Sees and makes a choice from out of 2-4 real objects.		
Sees and recognizes a few photos and pictures no smaller than 2" square..		
Sees and recognizes at least 12 symbols (or letters) no smaller than 1" square.		
Sees and locates very small symbols or words on a page with 80+ symbols..		
How My Child Uses What is Seen	Not Yet	Can Do
Follows objects that move across, up or down his/her view.		
Intentionally looks at a preferred item, while ignoring something else.		
Purposefully finds and picks picture (or letters) out of a page of 6 – 12 symbols		
Remembers the location of picture (or letters), even if they are on a different page/screen.		
■ Hearing status: Write down strengths and concerns here _____ _____		
What My Child Hears and Comprehends	Not Yet	Can Do
Recognizes difference in sounds and their meanings, e.g., dog barking, bus arriving.		
Can listen to simple sentences and understand the general idea.		

**I CAN Centre for Assistive Technology
Child Communication Skills**

Can focus on the person's spoken message even with noise in the background.		
Remembers or refers to conversations that (s)he has heard at another time or place.		
<p>■ Tools and strategies for communication Augmentative and Alternative Communication (AAC) is a way of helping people who do not speak or are difficult to understand. AAC can help people communicate more effectively. Examples of AAC are sign language, pictures, written language, and specialized devices, or tablets that "speak" messages out loud.</p>		
<p>Does your child currently use an AAC system? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If Yes, then please answer the following:</p> <ul style="list-style-type: none"> ■ What is the name of the device or equipment _____ ■ What app and/or vocabulary is being used (if known) _____ ■ How many message targets (e.g., cells) are on a typical page or screen _____ ■ How does your child select messages and to make them speak (e.g., touching the screen, hitting a switch)? _____ 		
<p>If No, has any form of AAC been attempted previously? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <ul style="list-style-type: none"> ■ If so, please describe attempts and successes / failures _____ 		
<p>■ Other</p> <p>What activities/classes does your child enjoy doing? _____</p> <p>_____</p> <p>What activities/classes does your child NOT enjoy? _____</p> <p>_____</p> <p>Does your child lose interest or get distracted easily? If so, how does this look? How quickly does it happen? _____</p> <p>_____</p> <p>Does your child fatigue or get tired easily? If so, how does this look? How quickly does it happen? _____</p> <p>_____</p> <p>Does your child get frustrated with communication? If so, how? _____</p> <p>_____</p> <p>Does your child act in ways that are quite distressing to you or to others? Please list them, including why your child does them. (If you don't know why, then write "don't know.") _____</p> <p>_____</p> <p>Are there any other issues around your child's communication skills that we should be aware of? _____</p> <p>_____</p>		
<p>■ Summary. Please summarize the concerns of your team related to communication and reason for referral to the I CAN Centre for Assistive Technology</p> <p>_____</p> <p>_____</p>		
Name of person(s) completing this form (Print Name)		Date (yyyy-Mon-dd)
Relationship to child	How long have you known this child?	