Short Course: Tele-AAC Practice for the Advanced Practitioner

Nerissa Hall and Ellen R. Cohn

Tele-AAC is the use of telepractice to provide services to individuals for use of Augmentative and Alternative Communication (AAC) systems. Tele-AAC, a relatively new application of telepractice, shows promise for offering cost-effective, expert services at a distance and in a variety of practice sites to underserved populations across the lifespan. The tele-AAC practitioner must be able to demonstrate advanced competencies in both AAC and telepractice. First, they must be expert in providing in-person AAC intervention, consultation and assessments before conducting them in the virtual world. Second, the overlay of telepractice on AAC practice requires a sophisticated grasp of the fundamentals of tele-ethics, policy, technology, privacy and safety, the current environment(s), and imminent trends. Third, the tele-AAC practitioner must seamlessly manage the technical demands of adapting AAC to the synchronous and asynchronous virtual environments, as well as facilitating clinical and educational team-based tele-collaboration. This workshop will guide attendees through the provision of tele-AAC for teams, and services, and demonstrate application of such services through a number of case examples. (167)

Learner Outcomes:

At the conclusion of this Short Course, participants will be able to:

1. Discuss requirements for lawful and ethical tele-AAC practice.

2. Describe technical requirements for the conduct of synchronous tele-AAC.

3. Critically analyze the use of tele-AAC in a case example.

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Susan Jones, CCC-SLP lives in Detroit and plans to add tele-AAC for clients in Pennsylvania (PA) and New York (NY) to her private practice. Which of the following is true about required state licensure?

1. Since Ms. Jones holds SLP license in Michigan, no further licenses are required.
2. A current CCC-SLP, a nationally recognized credentials precludes the need to obtain additional SLP licenses in PA and NY.
3. Additional SLP licenses are required for Michigan licensed Ms. Jones to deliver tele-AAC services in both PA and NY.
4. The national state license compact has eliminated the need for multiple state licenses.
5. A and B

(Answer: b)

Due to budget shortages, XYZ Elementary School does not subscribe to an encrypted internet service. SLP Ms. Jones wishes to invite a representative of a company vendor to virtually observe a tele-AAC session and lend advice on system adaptations. The representative works at the corporate headquarters, but not in a private office. Which of the following is true?

1. This arrangement violates privacy and security best practices.
2. A Business Associate Agreement (BAA) is not required, since no payment is to be exchanged with the free and open internet service.
3. It is acceptable for the school to borrow use of a neighbor’s encrypted internet service.
4. It is acceptable for the vendor representative to work from local coffee shop using the free WiFi for the meeting.
5. C and D

(Answer: a)

Maria received a referral for an AAC evaluation for an individual with cerebral palsy. She is eager to get started with the assessment and went ahead to schedule her assessment via tele-AAC. Which statement is most accurate regarding this scenario?

1. It is appropriate for Maria to schedule this as soon as possible to avoid placing this individual on a waiting list.
2. As tele-AAC is shown to be as effective as in-person services, Maria is free to choose to conduct the assessment in-person or via tele-AAC.
3. Maria needs to determine whether or not tele-AAC is appropriate given this individual’s profile.
4. Maria needs to ask the individual whether or not he or she is willing to complete the assessment via tele-AAC.
5. All of the above

(Answer: c)

Jake is an experienced clinician who is familiar with LAMP Words for Life. He is working with a student using the app and is eager to use tele-AAC to involve the student’s family in the sessions. Which of the following is true?

1. Jake can record his session to share with the family after his session using secure methods.
2. Jake can work with the student and have the family concurrently join/view his session remotely.
3. Jake can use a secure video conferencing tool to connect with the student and their family in their home to review skills being addressed in session, by screen-casting the app for the purposes of demonstration.
4. B and C
5. A, B, and C



**Ellen Cohn PhD, CCC-SLP, ASHA Fellow** is professor at the Department of Communication Science of Disorders, University of Pittsburgh. She teaches courses in cleft palate/craniofacial disorders, professional issues, diversity and healthcare, and communication. Cohn has co-authored books on telerehabilitation, communication disorders casebook, cleft palate; diversity in higher education; and communication, is editor of the International Journal of Telerehabilitation. Cohn is a past investigator for RERC on Telerehabilitation. She was the founding coordinator of the ASHA Special Interest Group on Telepractice (#18) and is a past director of the American Telemedicine Association. (91



**Nerissa Hall, PhD, CCC-SLP, ATP** is co-founder of Commūnicāre, LLC, a company specializing in augmentative and alternative communication, assistive technology, and tele-AAC working primarily with school-aged individuals, providing specialized, evidence-based intervention, assessment and consultation services. Nerissa received her Master and Doctorate degrees from the University of Massachusetts-Amherst, focusing on tele-AAC, and has presented nationally regarding this and other related topics. Nerissa has served as a LEND Fellow, adjunct faculty at Elms, Cambridge College and the University of Massachusetts-Amherst. She is former Associate Editor of ASHA’s journal, *Perspectives on Telepractice*, and serves on the editorial board of this journal and others. (100)