



Communication Device Trial (Paediatric)

Name:

DOB:

Dates of trial:

Support Team:

Current Communication Profile:

**Communication Device Trial:
(Name of Device and App)**

To goal of the trial is to demonstrate that _____ communication is benefitted using the device/app by _____ and those communicating with him/her in all environments. Please see the trial goal sheet attached for details of each goal.

Information to note (examples of some additional information for trial)

- Create opportunities for communication during the day by giving choices. Remember to focus on the use of the core vocabulary
- Play games with routines e.g. using the device, use core words such as stop, go, play, again! Make this playful!
- **Model, Model, Model!** Adults, friends and family supporting XXXX should use the device to model what they are saying and to support _____ learning about the layout of the app
- Continue to use all existing communication supports such as visuals and Lámh in a total communication approach during the trial

How to use the form

Please note any use of the device/app and record the symbols used during each activity. This form is designed to help capture the symbols chosen and the words/phrases used. Please add any additional observations in the 'Comments' section e.g. noted a reduction in self-injurious behaviours today, spontaneously searched for the device in his bag, didn't want to engage with the device today. All information is useful and welcome.



How to use the form

Please note any use of the device/app and record the symbols used during each activity. This form is designed to help capture the symbols chosen and the words/phrases used. Please add any additional observations in the 'Comments' section e.g. noted a reduction in self-injurious behaviours today, spontaneously searched for the device in his bag, didn't want to engage with the device today. All information is useful and welcome.

_____ Communication Trial Goals

Goal type	Individual Goal & Plan	Week 1 School	Week 1 Home	Week 2 School	Week 2 Home
<p>Goal 1:</p> <p><i>Develop a SMART goal that can be targeted at home and school e.g. requesting preferred items using the device. Keep it realistic and achievable for a 2 week trial – you can expand on this and make it more specific when the device is in place</i></p>	<p><i>Detail the specifics and actions for home/school here . Give examples of activities or times in routine that could be used for this goal e.g. during mealtimes/at news time</i></p>				
<p>Comments:</p>					

Goal 2		Week 1 School	Week 1 Home	Week 2 School	Week 2 Home	
Comment						

Goal 3		Week 1 School	Week 1 Home	Week 2 School	Week 2 Home
Comment					



Additional Information

Please note any other activities or notes regarding yours or _____ use of the app outside of the above goals. You are encouraged to use the app as much as possible during this time and you may find more opportunities than outlined above.