

Completing an NDIS AT Assessment Form for AAC Prescription

Tips & Suggestions from the Liberator Team

The current NDIS “General Assistive Technology Assessment Template” is available from this link, <https://www.ndis.gov.au/providers/housing-and-living-supports-and-services/providing-assistive-technology>

Be sure to check you are using the latest version of the form.

Know your audience

- The person reading the report may not be a speech pathologist or allied health professional. The document should be aimed at someone who does not have allied health knowledge.
- Avoid using jargon, acronyms or abbreviations. If they are being used be sure to specify them.
- Where possible, provide specific examples of successes or challenges that demonstrate the participant’s needs. This can help the reader to get a better picture of why the prescribed AT is reasonable and necessary.
- The AT assessment form will be written differently to a regular therapy report or clinical recommendation, which is usually strengths-based. It is important to remember that the NDIS is an insurance model funding scheme so different language and terminology is required.

Be evidence based

- Make sure to have clear goals for AT trials (e.g., goal attainment scaling (GAS goals)). We would recommend using Janice Light’s AAC competencies to structure your goals.
- Refer to specific data collected during the trial. If you used the data logging feature on the trial device, you can upload and analyse the data through Realize Language. Visit our website for more info on the Realize Language tool, <https://liberator.net.au/support/resources/realize>. Reports from Realize Language can be included as appendices to the AT application.
- Ensure to trial the AT across a number of environments. Consider environments in which the participant is limited in their participation. Specify these environments and note progress observed in each.
- Refer to research or articles throughout that support the request for proposed AT.

Use NDIS terms

- Always link the AT to the client’s NDIS goals.
- Describe the participant’s permanent impairment/s and need for AT in relation to activity limitations. Note the consequent impact on the participant’s engagement in daily, community and where appropriate, economic life. You can also note the impacts on the participant’s participation if they are unable to access appropriate AT.
- Read and specifically address the content prompts provided in each section of the AT template.

Be familiar with the Reasonable and Necessary Supports (section 34 of the NDIS Act 2013)

- In order for any request to be approved by the NDIS it must meet ALL of the criteria outlined in the National Disability Insurance Scheme Act 2013, section 34 www.legislation.gov.au/Details/C2019C00332.
- Refer to the Reasonable and Necessary supports throughout the report and use the terms outlined such as; 'represents value for money', 'supports social/economic participation', 'increases independence', 'support is effective and aligned with current good practice'.

Be familiar with the AT complexity levels & the Assistive Technology and Consumables Code Guide, www.ndis.gov.au/providers/housing-and-living-supports-and-services/providing-assistive-technology

- Know what support item is being requested and refer specifically to the support item (e.g. dynamic display dialogue unit, eye gaze system, key guards)
- Know what Level of Complexity the AT being requested fits under. This will assist in determining the advisor characteristics and type of assessment required.

Support Item in AT and Consumables Code Guide	Description	Example
Software and Related Items to Add Advanced Communication Functionality to Computer/Tablet/Smartphone	Software to convert a tablet or computer device to a communication device	Communication apps such as LAMP WFL, Proloquo2go and TouchChat
Communication – Face to Face - Electronic	Electronic communication device with customisable and changing screens which allows a highly customised voice output generation, and may include multiple input methods (Speech Generating Devices)	Accent 800/1000/1400 NOVA Chat 5/8/10/12 Liberator Rugged 8
Specialised Computer Input Device Using Eye or Neural/Neuromuscular Control	Hardware and software that directs or selects inputs by visual gaze or neural/neuromuscular action to activate a computer or face to face communication device.	Accent device with LOOK
Head Pointer	Assistive products to position screen pointer head device required to select items on computer display.	NuPoint
Communication and Information – Computer interfaces	Includes keyboards, trackballs, text to speech and other peripherals and tools (reading/writing/input/output items)	Touchguide or Keyguard

Useful websites

NDIS Act 2013, section 34 regarding Reasonable and Necessary Supports:

http://www6.austlii.edu.au/cgi-bin/viewdoc/au/legis/cth/consol_act/ndisa2013341/s34.html

NDIS Operational Guideline for AT:

<https://ourguidelines.ndis.gov.au/supports-you-can-access-menu/equipment-and-technology/assistive-technology>

NDIS Operational Guideline for Planning including Reasonable and Necessary Supports:

<https://www.ndis.gov.au/about-us/operational-guidelines/planning-operational-guideline/planning-operational-guideline-statement-participant-supports#9.2>

Summer Foundation: 'Getting the language right' – guide to writing reports for the NDIS:

<https://www.summerfoundation.org.au/wp-content/uploads/2018/04/getting-the-language-right-web.pdf>

Valid: '10 Steps to Excellent NDIS Therapy Reports' – guide to writing reports for the NDIS:

<https://www.valid.org.au/sites/default/files/10-steps-to-excellent-National-Disability-Insurance-Scheme-NDIS-therapy-reports-v1.pdf>

Suggestions for information to include in the General Assistive Technology Assessment Template

These suggestions are based on successes and feedback from therapists, and have not been provided by the NDIA.

Please complete **PART 1 – PARTICIPANT AND PLAN MANAGEMENT DETAILS**

PART 2 – ASSESSMENT OF PARTICIPANT NEEDS

2.1 Background – General

This section should provide a clear picture of the participant for the reader. You may wish to refer to the Participation Model/ ICF within this section. Discuss the following:

- diagnosis and any coexisting conditions
- relevant medical history
- disability and limitations to activity participation based on age and skill (specifically communication)
- person centred information including daily activities, recreational activities, interests, etc
- day to day activities and environments including preschool, school, respite, employment, local events, community access
- specific levels of support required to complete tasks (include examples)
- living situation and family/social supports
- upcoming life transitions (transition to/from school, to supported living arrangement)
- behaviour related to disability or communication difficulties
- overview of previous intervention history including supports

2.2 Participant goals

List relevant goals from the participant's NDIS plan and for each goal, specify how AT will help the participant meet the goal. You should also specify your speech pathology goals, remembering to ensure that goals are functional and focus on participation and independence (visit <https://liberator.net.au/support/education/aac/goal-setting>). You may wish to use an assessment such as the Individually Prioritised Problem Assessment (IPPA) to identify the need for AT if this is one of the participant's goals.

2.3 Functional assessment

- specify functional limitations related to the participant's disability, and
- summaries of relevant assessments
 - Physical: consider how the participant will access AT commenting on their fine motor skills (which could impact the size of screen, requirement of a keyguard/touchguide or other alternative access), and gross motor skills (which could impact positioning, ability to carry device).
 - Sensory: consider the participant's vision and hearing and comment on whether these may impact on device features including screen size, volume, positioning, etc.
 - Communication: refer to speech pathology assessment findings which could include observations and formal assessments regarding receptive & expressive language, pragmatics and speech.

- Providing clear and explicit data comparing the participant’s performance to neurotypical peers can help the reader understand the level of communicative impairment. Clear examples to contrast could include; number of words understood, number of words used expressively, pragmatic functions the participant meaningfully uses to communicate, or even age equivalents. Information should include some of the below examples:
 - *X’s expressive communication is characterised by XXX. This negatively impacts on his/her ability to communicate clearly/ get needs met/ build relationships/ ask for help etc.* It can help if you go through the range of functions of communication and how these are currently expressed making note of any that are non-symbolic or cannot be recognised by people easily. If your client is expressing a request for help through behaviour, describe the behaviour (e.g. *when X wants help he throws/hits item, screams, hits self/others etc.*)
 - *X’s receptive communication is characterised by XXX. This impacts on his/her ability to follow instructions to participate in the class routine/ comprehend the routine resulting in behaviours such as XXX.* Include information regarding comprehension of vocabulary, directions, questions, tone of voice, and emotions.
 - *X has poor speech intelligibility characterised by XXX. This impacts X’s ability to successfully communicate resulting in lack of engagement in /frustration demonstrated by...* Provide examples of how unintelligibility impacts the individual’s function and participation across different environments. Make sure to give specific examples detailing how your client’s communication looks without AT.
- Explicitly outline the impact of communication on social functioning and opportunities, detailing missed opportunities that are available for neurotypical peers/that are available for people who are able to self-regulate. Help the reader see the impact of your client’s communication difficulties on their independence and participation in their community.
- Focus on FUNCTION. How does your client communicate day to day? What are the barriers? Are they limited in the pragmatic functions they can express? What communicative functions does the participant currently use?
- Ensure to refer to specific assessment tools used to assess the participant’s skills and choose appropriate AT. For example, SETT assessment, AAC Profile, Likert Rating Scales, Pragmatics Profile, etc. For more information about these assessments visit <https://liberator.net.au/support/education/aac/assessment-evaluation>
- Include examples of communication skills in more than just one environmental setting.
- Cognitive: refer to any diagnoses and resulting categorisation such as mild, moderate, severe or profound. You can also include important information from assessments/reports completed by other professionals. Consider mentioning difficulties/skills in areas including attention, working memory, literacy and categorisation where considered to choose the vocabulary system of proposed AT.
- Behavioural: consider any behaviours of concern from the participant that are related to communication breakdown. Provide the antecedent (trigger), resulting behaviour and perceived or actual consequences to the participant and those around them physically,

emotionally and socially. Consider any potential risks to equipment. Explicitly state the behaviour, also noting if there was a change during the trial.

2.4 Participant's weight & height

Make sure to include these details. They are relevant in terms of the appropriateness of the size & weight of the proposed AT for the participant.

2.5 Current AT use

- the type of AT – information on model, age, history of repair and ongoing suitability
 - If the participant does not have current AT, comment on how this is preventing them in achieving their goals.
 - If the participant is using AT that is not aiding them in achieving their goals, comment on why, what the limitations are, list difficulties with current AT and justify the need to request additional AT. Consider unaided approaches such as Key Word Sign, low technology supports such as PODD books or the Picture Exchange Communication System (PECS), single message switches and high technology options including dynamic devices (dedicated/non dedicated) as examples of current AT.
 - If the participant is requesting a like for like replacement for current AT, include documentation provided from the supplier confirming that it is beyond repair/why it needs replacing, confirm existing use of the device and information to support no significant change in requiring the proposed AT.
- the level of independence or support the participant will need to use the AT
 - Comment on the level of independence and support that the participant requires to use the current AT. Comment on any difference with the level of independence or support required for the proposed AT.
- how the participant's current AT will work together with the AT being assessed
 - Consider and list the use of any AT that is not communication related including mobility aids, seating requirements, self care equipment. Listing these will assist in building a picture of the participant's physical needs.
- any changes needed to the participant's environment, transport, or other AT
 - Comment on considerations if mounting of the proposed AT is required.

PART 3 – RECOMMENDATIONS AND EVIDENCE OF CLINICAL/PRACTICAL REASONING

3.1 Details of the recommendation AT solution

Generate a quote directly from the Liberator website, www.liberator.net.au/products/get-a-quote. Make sure to include the proposed AT in addition to any accessories required (e.g. keyguard, screen protector, carry strap, bag, etc).

3.2 Included mainstream items

Liberator's dedicated communication devices are not designed for the mainstream market. Go to section 3.3.

3.3 AT trial

3.3.1 AT trial outcome

The NDIS expects valid and reliable outcome measures are used for AT trials. Complete the table in this section for the proposed AT. Details regarding other options considered/trialled is to be completed in section 3.4 Evaluation of other options.

If requesting eye gaze technology, discussion must be included to demonstrate that other access methods (direct access assisted by a keyguard, switching, and head pointing) are not appropriate.

Location of the trial	List all different environments in which the trial device was used e.g. home, clinic room, playground, library, bowling, etc. Note where different communication partners were involved in different locations.
Duration of trial	Include dates of the trial.
Trial details and outcomes measured	<p>Explain the evidence for the recommended option as the most suitable/appropriate solution which will facilitate achievement of the participant's goals, compared to other options considered.</p> <p>Trial outcomes</p> <ul style="list-style-type: none"> ● It is recommended that you set goals using Goal Attainment Scaling (GAS) format and attach this as an appendix. More information can be found at https://liberator.net.au/support/education/aac/goal-setting ● Detail goals and outcomes specifically and refer to goals set using Janice Light's Communicative Competencies in AAC (linguistic, operational, social, strategic and emotional). These can be discussed in the context of the AAC Profile. For example: <ul style="list-style-type: none"> ○ Linguistic competence: discuss pragmatic functions used, improvements to expressive and receptive language e.g., <i>"when using the LR8 X was able to make choices, request items, answer yes/no questions and use some descriptive concepts. The device provided a communication strategy that allowed her/him success with both familiar and unfamiliar communication partners. The vocabulary builder option was active when X was using the device. This meant that only targeted vocabulary was shown. This assisted him to learn the sequences for targeted words."</i> ○ Strategic competence: discuss navigation skills, level of support required, ability to make changes to the system/add words, etc. <i>"X was able to navigate LAMP WFL to locate frequently used vocabulary including food items, as well as motivating activities including games. He required direct verbal prompting and gesture to assist him to locate vocabulary used less frequently and to use 2+ word phrases. X was able to pick up on cues from communication</i>

partners when he had chosen an incorrect icon and correct his error. For example, if X identified that a picture was the same and the speech pathologist said "no, it is different", he would independently clear the word 'same' from the speech display bar and complete the sequence for 'different'.

Participant's tolerance

- Report on participant engagement and motivation to use the trialled system.
- Make a note of any changes in behaviour, particularly if part of the participant's profile includes challenging behaviours relating to communication difficulties.
- Note if there was a decrease in support required from communication partners for the participant to engage in particular activities.

Functional outcomes

- Include and reference justification from various forms of data collection e.g., reports from [Realize Language](#) using data extracted from device, trial diary, GAS goal tracker, self-rating form, etc.
- Describe the functional impact on participation and independence. Give examples of activities or interactions that were previously difficult for the participant to engage in and how the AT allowed them to increase their participation or independence in these interactions during the trial.
- Consider using the IPPA (Individually Prioritised Problem Assessment) to indicate how the recommended AT made a positive difference.
- Note how access to the recommended AT has helped the participant meet their NDIS and speech pathology goals during the trial/ how access to their own AT will help meet these goals.

Support required

- Comment on the support required during the trial. For example, the level of prompting required by communication partners.
- Comment on the support required and/or change in support required by the speech pathologist/parent/carer for the participant to engage in tasks & activities.

Risk or barriers identified

- Identify any risks involved in trialling the proposed AT and the risks of not providing the proposed AT.
- Identify any barriers that affected the trial outcomes Eg. client illness, technical difficulties, school disruption.

Other relevant information

	<ul style="list-style-type: none"> • Comment on any other relevant information relating to the trial <p><i>More information about the assessments listed above is available at:</i> https://liberator.net.au/support/education/aac/assessment-evaluation</p>
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3.3.2 AT features

It is recommended that you complete a SETT Scaffold for Tool Selection ([SETT Documents \(joyzabala.com\)](http://joyzabala.com)) detailing the recommended option and other options to attach as an appendix. This scaffold is a way to succinctly feature match the options considered. The specifics of the preferred option should be detailed here. Refer to the following relevant features and how they are important for the participant's use.

- Hardware
 - Battery life
 - Durability
 - Speakers
 - Dedicated or non dedicated
 - Warranty
 - Environmental control options
 - Computer access & social media integration
- Software
 - Language representation (alphabet based, single meaning picture system, semantic compaction)
 - Vocabulary file (LAMP WFL Full, Unity 144, CoreScanner)
 - Navigation (category/page based, sequenced)
 - Number of cells/grid size
- Access
 - Direct or indirect
 - Specify method of access if indirect

3.3.3 AT experience

If you are requesting 'like for like' replacement AT provide details of the current AT including make/model, features, age, participant's use & independence with the current AT, level of support required to use AT and reason for replacement of AT. If you are requesting an upgraded Liberator device, be sure to include a supporting letter from the technicians at Liberator to justify why the current AT is no longer a suitable option.

If the participant has been using another speech generating device, or low technology AT option, provide details of this and justify the need for a new AT solution. Explicitly note how current AT is not allowing the participant to achieve their NDIS goals, develop independence, build meaningful relationships and how the current AT will not allow for growth in skills & reduction in support required from communication partners over time.

3.4 Evaluation of other options

List alternative AT solutions that were considered and/or trialled and justify why they were deemed unsuitable for the participant. If you have considered an option but not trialled it, explain why it was not trialled (especially for alternative access options). Ensure to also include any low technology options considered or trialled, using feature matching to highlight why these are unsuitable options for the participant.

For trialled options, refer back to the table completed for the recommended option and structure similarly to include discussion of trial goals, participant’s tolerance, functional outcomes.

Option 1: Considered/Trialled	If trialled, detail the location of the trial and duration of the trial.
Reasons it is considered not suitable	Use similar structure to recommended AT discussion in order to detail trial outcomes (GAS goals, AAC competencies), participant’s tolerance (engagement, motivation, etc) and functional outcomes. It is recommended that you use the same goals when trialling different options so refer to any other data you have collected. Remember to identify the features required for your participant and whether these are present in the considered/trialled options. For example, <i>‘the UNITY vocabulary file was identified as a recommended AT feature. This vocabulary file is not available on an iPad therefore this hardware was considered and not trialled.’</i> , <i>“durability was identified as a key feature required for the recommended AT solution.</i>
Estimated Cost	Provide cost with additional accessories including protective case, bag, carry strap, software, technical assistance/care, additional amplification, repairs, postage, etc.
Option 2: Considered/Trialled	As above.
Reasons it is considered not suitable	
Estimated Cost	
Option 3: Considered/Trialled	As above.
Reasons it is considered not suitable	
Estimated Cost	

3.5 Evidence

3.5.1 evidence for the recommended option as the most suitable and cost effective support

- Demonstrate that cheaper alternatives are not appropriate or recommended. Feature matching data can be used here to highlight that cheaper options (e.g., iPad) do not meet the features required for the participant. For example, discuss that an iPad can be used for recreational activities. This can result

in challenging behaviours when switching to use as a communication tool and does not provide for communicating whilst enjoying a recreational activity (i.e. the individual is unable to comment on something in a YouTube video without access to a communication system.)

- Refer to your feature matching (SETT Tool Selection appendix) for justification. Note down the features of the dedicated device that are required for the participant and how these are not available for hire, or on mainstream tools.
- Note the repairs & freight for any damage that is included in the comprehensive 3 year Liberator warranty. You may wish to list some of the specifications.
- If the participant has broken several tablets/electronic devices you should highlight this noting the need for a sturdier device. Again, reference Liberator's 3 year parts and labour warranty and compare with options for repairs for other trialled/considered but not recommended AT.

3.5.2 details of how recommended AT may assist participant to perform specific activities

- Discuss the benefits the proposed AT will provide to the participants daily activities and interests.
- Refer to the environments, times of day and activities that the device will be used in. For most participants, this would be continuously throughout the day as it is their method of communication. Continuously, multiple times a day. *Assistive technology for communication will be used across environments throughout the day as it is the individual's voice.* If you used the data logging feature during the trial, draw on the data captured to support use of the AT throughout the day, across environments, with different communication partners.
- Discuss the positive effect of having a communication system and how it will support participation in school/home/day program/community. Link this back to the participant's NDIS goal.
- Provide information about your client's participation in social activities and/or employment with and without the AT.

3.5.3 changes to other supports that may be required (reduction or addition)

- Note how the proposed AT will reduce the level of support required for daily activities. Be clear about these changes in terms of the impacts on the participant's independence, any behavioural changes/increased enjoyment observed during the trial, feedback from communication partner's and support staff.
- Draw a clear picture if the AT is likely to reduce informal support needs.

3.5.4 with regard to best practice, what evidence indicates the proposed AT will be/likely to be effective and beneficial for the participant

- Refer to the literature regarding best practice and possible outcomes for your participant.
- Support for the requested technology should be strong. Consider existing research, your professional experience, the participant's experience with technology.
 - Refer to research for people with severe communication impairment and the requirement for AAC. Consult the Speech Pathology Australia position statement on AAC.
 - Search for disability specific research for your client. If your participant has a specific disability that has research on AAC (e.g., AAC and ASD), then include relevant information on how AAC has been found to support that population.

3.6 Long term benefit

3.6.1 Describe the long term benefits of the AT being assessed including anticipated life span and how it allows for accommodation of likely changes to the participant's circumstances, development or function

- Outline the participant's current life stage and any upcoming changes such as starting school, finishing school, beginning a work placement.
- Note that you have ensured to apply for a system with a robust vocabulary file and room for growth for support across the participant's lifespan as their needs and skills change.
- Consider any foreseeable changes to the participant's functional status such as development or deterioration of motor skills or sensory processes. Comment on these where necessary to discuss the need for AT which will allow alternate access methods now or in the future.

The anticipated lifespan of a device is around 3 years due to the inordinate wear & tear exerted on AAC devices by users. You may wish to comment on some of the factors below where relevant to the participant, making it clear to the assessor that the life span of the device can be prolonged with appropriate care. If the participant is a particularly 'hard user', comment on this.

Some example factors to consider may include:

- Is the device subjected to massive, repetitive impact hits when an individual with cerebral palsy accesses the touchscreen through spasmodic movements?
- Is the user someone with extreme autism & limited expressive language resulting in physical violence (including throwing the device or smashing against a hard surface, or dropping) through communication frustration?
- Is the device well-looked after by the user's family? Is it kept clean with batteries charged regularly as recommended (not allowed to decay over time, a minimal charge is always maintained, a deep charge is routinely applied)?
- Is the device used by different users or across different environments like schools & respite houses as well as the home? (entailing many different supporters handling & charging the device)
- Is Windows shutdown regularly overnight & updates always applied? (if applicable)

3.6.2 Describe how the AT will impact functional status, independence, outcomes over the long term and potentially reduce the cost of funded supports in the long term

- Comment on the possible improvements in function such as communication, independent living skills, cognition, socialising, accessing the community, making friends, wellbeing, decreasing behaviours of concern, reducing carer stress.
- Comment on the future reduction in speech therapy due to the increase in communication skills.
- Comment on the future reduction in behaviour support due to reduced communication frustration.

3.7 risk assessment

3.7.1 potential risks/risk mitigation strategies

3.7.2 lower risk options considered

- Comment on 'lower cost' options considered and the implications of time without a device on the participant.
- Comment on durability of other options and risk of breakage.

- Comment again on 3 year parts & labour warranty of Liberator devices allowing for repairs to be done efficiently within 24-48 hours and compare with impacts of time without a device for the participant if repairing other AT options.

3.7.3 potential risks if this AT not provided

Discuss potential risks and functional impact for the participant if this AT is not provided. For example, *“without access to appropriate AT, X demonstrates behaviours including ... resulting in injuries to himself, etc and/or without access to appropriate AT, X is unable to successfully communicate and express his wants and needs, instead relying on supports to interpret communication and provide for him at all times.”*

3.7.4 compliance with relevant AT standards

Yes. All Liberator AAC devices comply with the requirements of the applicable ACMA Standards made under the Radiocommunications Act 1992 and the Telecommunications Act 1997. Liberator is a Responsible Supplier registered with the Australian Communications & Media Authority (ACMA) to affix the RCM (Regulatory Compliance Mark) to all its relevant products.

3.8 Behaviours of concern

3.8.1 Describe any behaviours of concern that may impact safety in relation to the use of this AT

- Discuss behaviour linked to communication difficulties. You can use research in addition to providing examples of behaviour and frustration that the participant may demonstrate without access to a comprehensive AT solution.
- Discuss the proposed AT assisting to achieve any behavioural based NDIS goals.
- If the participant has a Behaviour Support Plan, make sure to attach this as an appendix.

3.8.2 Could the use of this AT constitute restrictive practice?

- No, the use of a communication device is not a restrictive practice.
- Preventing someone from communicating is a restrictive practice.

3.9 Reasonable expectations of care

- Comment on how the participant’s family, teachers, support workers, communication partners were able to contribute to the trial.
- Note your collaborative goal setting for trial and resources used (e.g., roles & responsibilities) to ensure that all involved were comfortable with the support required to trial & implement the proposed AT.
- You can include specific feedback from communication partners here.

3.10 Other potential funding sources

- Note if any other funding sources could be used to purchase this AT. This will not be the case for the majority of applications.
- Discuss how the AT is directly related to the participant’s disability and will be used across several environments (home/school/work/community) and therefore will not be funded by other services.
- Identify other funding sources if they were investigated (e.g., Department of Education, possible charities).

PART 4 - AT IMPLEMENTATION AND MONITORING

4.1 AT implementation

4.1.1 support services required

	Detail	Quantity (hrs)
AT set-up & adjustment	<ul style="list-style-type: none"> AT assessor to complete the set up and training for use of the AT. Goals will be set with the family and training provided at home (and at school/day program/etc) AT supplier, Liberator provides 90 mins of set up support for <u>free</u> 	
Participant/Carer training	<ul style="list-style-type: none"> Speech pathology intervention for a 12 month period to implement the requested AT with participant at home/school/day program/community locations 	30
	<ul style="list-style-type: none"> Training for family/carers/teachers/support staff including setting goals, evaluation & monitoring 	5
	<ul style="list-style-type: none"> Eligible travel costs 	10
	<ul style="list-style-type: none"> Unlimited <u>free</u> telephone & email support from Liberator state consultant 	0
Ongoing re-assessment & review	The allocated speech pathologist will re-assess the use of the device using the AAC Profile/other outcome measurement tool in 12 months' time	5
Total	Total therapy funding required to implement the proposed AT	50 hours @ \$193.99 = \$9,699.5

4.1.2 Provide information on how you will measure outcomes, when you will measure outcomes and detail how often and who will review achievements

- Comment on how you will measure the client outcomes once the proposed AT is funded (e.g., continuing outcome measures including Goal Attainment Scale goals, Canadian Occupational Performance Measure)
- Discuss regular analysis using Realize Language feature on the device
- Discuss regular re-assessment using formal tools (e.g., AAC profile)
- Discuss any informal measure you use in practice (e.g., staff interview, regular planning meetings, stakeholder meetings, etc)

4.2 Repairs and maintenance

Repairs and Maintenance (estimated annual cost)	Nothing, provided the device is under warranty. When outside warranty, an allowance of \$1,500 per annum should be included in a plan or budget to cover most contingencies.
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	Liberator devices come with a full 3 year parts & labour warranty, including any physical damage even if caused by wilful violence, or liquid ingress, or dust/dirt/sand ingress. The cost of replacement batteries as required during the entire warranty period is also included. Finally, freight to & from Liberator's electronic workshop in Adelaide where all repairs are made, is free via a special Express Australia Post service.
Short term loan/hire device required	Firstly, many faults are fixed during either a phone call or a remote Team Viewer enabled examination of the device. Liberator is sufficiently staffed to allow such calls to be handled immediately in a live, responsive manner. Any devices that need to be shipped free of charge via Express Australia Post to Adelaide for physical repair are turned around within 24-48 hours. Thus, there is scant need for loan devices being supplied in the interim. However, if for whatever reason there is an exceptional need then Liberator will do its utmost to supply a loan device.

4.2.1 Provide details for when maintenance & servicing will be done for AT to remain in good working order and what warranty period apply to this AT

Liberator provides advice as to Windows shutdown & update procedures & battery maintenance best practice. Programming issues, software navigation & basic device operation are dealt with by Liberator State Consultants. Any technical issues, hardware or software, should be directed to Liberator's Technical Workshop in Adelaide by telephoning 08 8211 7766.

See above (4.2.) for warranty details, but on all its voice output AAC devices & accessories, Liberator delivers a comprehensive 3 year warranty, which covers all parts & labour, physical damage, batteries & any freight costs involved.

4.2.2 Who will coordinate set up maintenance/repair arrangements for the AT solution?

Often a participant's family will arrange directly with Liberator for a repair, having verified that there is a physical problem rather than a software issue. Yet sometimes the organiser will be a speech pathologist, respite carer or teacher. Any party merely has to telephone Liberator HQ in Adelaide & the process will commence. If necessary, a Return Authorisation Number will be given & the client asked to fill out a simple repair return form. Details to access a free freight return system using Australian Express Post will at that time be provided.

4.3 AT provision

4.3.1 Anticipated time frame from approval to provision

Liberator has the recommended AT in stock. Once approval of funding is received, the participant/participant's family/carer can contact Liberator directly to provide funding approval details and the device can be dispatched immediately.



Liberator Pty Ltd
 265 Gilbert Street, Adelaide SA 5000
 Tel 08 8211 7766 Fax 08 8211 7733
info@liberator.net.au
www.liberator.net.au

4.3.2 Is the participant at risk while waiting for the AT?

- Comment on the risk that what participant & communication partners have learnt during trial will need to be relearned if waiting too long for NDIS approval.
- If challenging behaviours are present, detail the risk in terms of damage/injury as long as participant is without appropriate AT.

4.3.3 Is a short term option necessary?

- Discuss the lack of loan options and the lack of cheaper alternatives to justify why it is important for the participant to be able to access an appropriate communication solution as soon as possible.

4.4 Participant agreement

4.4.1 Is the participant/nominee in agreement with this AT request?

The participant and/or nominee should be in agreeance with the AT application.

4.4.2 Has a copy of the assessment been given to the participant?

Ensure a copy of your report is provided to the participant/nominee.

Please complete **PART 5 DETAILS OF AT ASSESSOR** and **PART 6 CONSENT TO COLLECT AND SHARE INFORMATION** accordingly.

For more information about the NDIS AT funding process, please visit
<https://liberator.net.au/support/funding/ndis>