

Developmental Services Clinical Services Task Force
DRAFT Meeting Minutes
November 9, 2015
Department of Vermont Health Access Large Conference Room
Williston, Vermont

Members Present: Tom Simpatico, Linda Berger, Camille George, Harvey Lavoy, Mary Alice Favro, Patrick Frawley, Marie Zura, Jennifer Stratton, Susan Yuan, Marlys Waller, Kris Medina, Sarah Lunderville Amy Roth, Roy Gerstenberger, June Bascom, Tracy Thresher

Visitors: Lisa Maynes, Nancy Breiden, Max Barrow, Colin Provencher, Melanie Bangoura, Makayla Pennoyer, Franklin Shiner, Barb Prine, Ed Paquin, Anne Bakeman, Sharon Medina, Pascal Cheng, Erin Rose, Rachel Johnson, April McCandless

I. Facilitated Communication

An overview of Facilitated Communication was provided by interested parties who practice and endorse Facilitated Communication.

A core value of the DS System is that all people can communicate and receive the technology and training they need to actively participate in their lives. DAIL does not promote one communication mode over another. The key is preserving the right to communicate.

June Bascom (DAIL/DDSD) gave a brief summary of the history of communication support in Vermont. Handouts were provided and are posted on the DS Clinical Services Task Force web site: <http://ddas.vt.gov/ddas-projects/ds-clinical-services-task-force/ds-clinical-services-task-force>. June discussed the evolution of the communication network to the communication task force and spoke of the training that has taken place and continues to be available.

Harvey Lavoy added that Vermont was one of two states (the other was PA) that developed standards that are still in use today.

Pascal Cheng reviewed a power point presentation (posted on website) describing Facilitated Communication (FC) and its ultimate goal of independence. Pascal reviewed the history of FC.

The Institute on Communication and Community Inclusion at Syracuse University is still operating today and many of the handouts provided come from the Institute.

Tracy Thresher shared his story of using FC and how that has changed his life using a PowerPoint and a video clip from Tracy's earlier years. At that time, Tracy was receiving more support than he needs today. Harvey described what high tone is - muscle tone where the person may need support to keep the arms down in order to type. Susan Yuan gave the opposite

example of supporting a person with low tone and the gradual progress she has seen with the person she supports.

The work that's going on with tablet technology is similar to how FC helps with both high and low muscle tone control. Facilitation helps to create movement patterns so that the person is eventually able to correct the pattern him or herself.

FC is not tied in with a specific technology; a person may be using electronic or non-electronic devices. The work with a person's muscle tone and technology is not necessarily tied together. There is a language function, a motoric function which helps to bring the communication about. It is an access method, a way to get to the content. The content issue is a separate issue. It is not just an access mode; however, we need to hold high expectations and the belief that people are able to do more than they are able to show us now.

The presenters have heard anecdotally of people who have received some form of communication support with people who have some sort of accident or injury, but the presenters today did not have any direct experience with this.

The need to understand a person's medical diagnoses is not needed to assess a person's candidacy for the technology. It is part of the information that is considered, yet the focus is on the individual and their functional abilities. The diagnoses alone do not alone dictate what communication strategies will be best for the individual.

There are many forms of communication; over 90% of communication is nonverbal. For that reason, we want to use a total communication approach that provides access to a variety of communication methods.

There are also several different purposes for communication, all are important.

When working with someone on communication, we want to know if they are meeting their outcomes in order to know if the support is successful.

There are many different levels of support, it is important to address all types of support in order to be most successful in teaching FC.

There are a number of specialized forms of Augmentive Alternative Communication (AAC). People have moved more from sign language to using touching, pointing, etc. Technology is an important part of ACC (electronic and non-electronic). Part of the process is determining the best physical access strategy to use with the individual. There is a partner aspect to all communication strategies.

With FC, a communication partner or facilitator provides the physical support to the individual to help them overcome neuro-motor problems which prevent them from pointing independently

or reliability. The physical support is used to help the person develop effective pointing skills for communication.

FC does not necessarily have to do with keyboards; it can be with pictures, symbols, letters and words.

When assessing someone for FC, the communication specialist is looking at the person's physical movement skills. The assessment also looks at the person's language skills. Knowing that the person is looking is very important as well, and is a skill that needs to be developed. In all cases, there is a presumption of competence, which is key.

The basic elements of support include: emotional, physical and communicative.

As the meeting was wrapping up, Kris Medina shared his own message about FC and its value in his life.

Future Discussions:

How does FC get enacted and what is the differential process for determining FC and its value in a person's life? Look at the research – pros and cons – and what is known about best practices in communication supports

Future meeting dates and times:

The Task Force agreed to meet the second Monday of every other month from 1:00 p.m. – 3:00 p.m. Future dates include: January 11, March 14, May 9 and July 11.

Preparing for Meetings:

Agendas, minutes and other materials will be posted on the DAIL website. Agendas and materials will be posted in advance of each meeting.