ACtion Point by CANTER

AAC & PROMPTING STRATEGIES



DEFINITION

Individuals learning to use augmentative and alternative communication (AAC) systems may require prompts from a communication partner or clinician. **Prompting** from the partner or clinician is a strategy to assist, suggest or cue someone to use an AAC system. Typically, prompts are verbal, visual or physical/tactile. The goal is for the individual to be ultimately independent.

Developing an educational or therapy plan based on a systematic and principled approach to reduce prompt dependency and build language competence seems an appropriate goal and in accordance to ASHA's Preferred Practice Patterns (2004) and IDEA.

Verbal Prompting: Giving spoken cues to guide the person through the appropriate response. Verbal prompts may be very general, such as asking an open-ended question or suggesting the person to use their AAC system to respond. Verbal prompts can be more specific to explicitly guide the person through the steps of a task.

Visual Prompting: Giving visual cues, such as pointing or gesture, to guide the person through the appropriate response. Visual prompts may be very general, such as gesturing towards the communication system. They can also be very specific, such as pointing to a given location on a display.

Physical Prompting: Manually guiding the person through the appropriate response. In cases where the response is very difficult for the learner to perform it may be the only option. Physical prompting can consist of manually guiding the person through the entire sequence of steps of a task (Leslie and O'Reilly, 1999).

THE PROMPTING HIERACHY FROM ENVIRONMENTAL COMMUNICATION TEACHING (ECT)

This approach uses incidental teaching episodes that are based on frequently occurring daily activities (Karlan, 1989). ECT uses a least-to-more prompt hierarchy (Reed & Walser, 2001).

STEP 1: PAUSING

 \star If the student initiates an interaction by touch, smiling, or vocalization-

 \bigstar If you have just asked a question or made a statement about activity-

★ If you have just arranged the environment so that the student must request an item in order to continue-

 \star If you are about to perform the next step in a familiar routine-

Focus your attention on the student and pause.

STEP 2: OPEN QUESTION

★ If the student does not respond to the pause by making a response:

<u>Ask a what, why, who, when, where or how question</u>. *Example*: "What do you want?" "What should we do next?"

"Where do you want to go? How should that go?"

STEP 3a: PARTIAL PROMPT

★ If the student does not respond to the open question or produces a minimal response:

<u>Provide part of the answer by: Asking a question that</u> <u>contains a choice</u>.

Example: "Do you want a red one or a blue one?""I have tape and a game, which one do you want?"

<u>Provide part of the answer by: Giving a hint or clue</u>. Example: It's the same color as your shirt.

<u>Provide part of the answer by: Modeling the first few</u> words (or sounds) of the answer.

Example: "I want..."

"Give me..."

RESOURCES

Multisensory Prompting: A clinician may provide prompts in more than one sensory modality at a time. For example, pointing to locations on a display while taking the person through the steps of a sequence. We often use speech in conjunction with gesture. Using multiple modalities may be helpful in prompting.

Prompt Dependency: Occurs when the individual over relies on people in the environment to initiate communication or actions and behavior is dependent on the maximum amount of cueing or assistance. Several techniques for reducing prompt dependency can be found that move from a more-to-least strategy including time delay, fading, and shaping (Mirenda & Santogrossi, 1985; Glennen & Calculator, 1985; Fletcher, Huffman, & Bray, 2003).

REFERENCES & RESOURCES

American Speech-Language-Hearing Association. (2004). *Preferred Practice Patterns for the Profession of Speech-Language Pathology*. Rockville, MD: Author.

Glennen, S.L., & Calculator, S.N. (1985). Training functional communication board use: A pragmatic approach. *Augmentative and Alternative Communication*, 1, 134-142.

Karlan, G. (1989). *Environmental Communication Teaching*. Office of Special Education, U.S. Department of Education (#H023C9005)

Mirenda, P., & Santogrossi, J. (1985). A prompt-free strategy to teach pictorial communication system use. *Augmentative and Alternative Communication*, 1, 143-150.

Reed, P., & Walser, P. (2001). Overcoming barriers to excellence in augmentative communication. *2001 Conference Proceedings*. Technology and Persons with Disabilities Conference. Los Angeles, CA.

STEP 3b: REQUEST FOR "VERBALIZATION"

If the student responds to the pause or open question with behavior that is inappropriate to the situationIf the student responds to the pause or open question with behavior that is at a lower level than desired for that student-

Request that the student use a proper form or elaborate the response.

Example: "Tell me what you want." "You need to ask me." "Use a whole sentence. "

Note: Can also use a mand to request a proper use of augmentative response.

Example: Use your pointing finger. "Tell me 'yes' when I get to your answer."

STEP 4: FULL MODEL

 \star If the student has never produced the response you are seeking -

 \star If the student does not respond to the partial prompt or mand or responds incorrectly-

Provide a full model for the response and pause.

DO use the student's augmentative display when providing the model for him to imitate.

DESCRIPTIVE FEEDBACK

★ When the student has made the desired or targeted response:

Use descriptive feedback with praise.

Example: "You said, you feel angry, why are you angry?" "Great, you asked for more and here it is." "Wonderful, you told me that you need help."

Systematic use of prompting strategies helps to support gains in core vocabulary use. Charting your use of prompts can be monitored as you're measuring gains toward independent use of core vocabulary.

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