

Birth – Age 4

Birth – K

Age 3 – K

Birth – 21

Age 3 – 21

Communicative Competence

PURPOSE

This technical assistance bulletin provides information to assist teams working with students who may not have developed a consistent way to communicate in their instructional setting. Students without an individualized communication system often struggle to convey their thoughts, feelings, and knowledge related to curriculum. Students' non-symbolic communicative intents are often overlooked by individuals due to difficulty discerning the underlying meaning of the attempt (e.g., gestures, vocalizations, pointing, blinking, etc.). It is essential for team members to work collaboratively to shape students' non-symbolic communicative intents into those that are understood by known and unknown communication partners. A student's ability to communicate is essential not only in everyday life, but in determining a student's progress, assessing their abilities, and making important educational decisions. It is essential that we, as educators, help students to develop a multifaceted toolbox of strategies to communicate that will serve the student from birth through transition to adult life.

EARLY BEGINNINGS

Infants begin their lives communicating utilizing pre-linguistic means. The baby cries or smiles, and there is a reaction provided by the caregiver. The concept of cause and effect as it relates to communication is paramount when considering individualized communication systems for students. Children learn cause and effect through behavioral communication. As they get older, behavioral communication continues, but it is shaped and paired with strategies that are more meaningful and useful. As an example, even many adults will continue to point and reach for what they want and pair that with a verbal request, but the expectation is that they will not pair pointing and reaching with crying, grabbing, or aggression if the gesture alone is not understood, although those are also means of communication. If productive communicative strategies are not developed, maladaptive means of communication may become embedded and communication through negative behaviors may become problematic. Communicative competence may be thought of as "the ability to overcome communication challenges using tools that mitigate barriers." It must be the goal of every individual working with the student, at home, in the community, and in the school, to assist the student to overcome those challenges and mitigate those barriers to enable effective communication.

OPTIMAL TIMING

In the best of all scenarios, a plethora of services will be provided that enable the student to develop communication strategies that are functional and useful prior to entering Kindergarten. However, all too often the lack of well-developed communication strategies conducive to learning and socialization are not seen as critical until a student enters school. Early childhood programs and services do an excellent job identifying concerns and providing appropriate services for children who are brought to their attention, however, not all children receive early intervention. Additionally, not all children who do receive early intervention are able to develop a full toolbox of communication strategies prior to transitioning to school-aged services. It is critical to note that no matter how old a child is, whether they are 5 months, 5 years, or 15 years old, if the child has not developed effective communication strategies,

services to assist them to do so must continue for the child to receive a free appropriate public education (FAPE). There is no learning without communication.

Scenario: Jonny is 12 years old. He elopes from class an average of twelve (12) times each day. He is physically aggressive with any staff member who interferes with his elopement attempts. Jonny has no reliable means of communication. Staff have attempted Picture Exchange Communication System (PECS), devices, gestures, signs, and vocalizations, yet nothing has been reliable. Jonny's parents report that he grabs what he wants at home and hits or screams when he does not like something. When he elopes, Jonny attempts to leave the building and has been restrained at least twice weekly after he has bitten, kicked, scratched, pulled hair, and broken a staff member's nose when he is kept from leaving.

One day, staff decided to let Jonny leave the building. Two staff members escorted him out. Jonny walked to a bench in the circle in the front of the building and lifted his face to the sun. He sat there for 10 minutes. When staff escorted him back to the building, he came with them. Jonny's teacher placed a buzzer with a picture of the sun next to the door to the classroom. When Jonny needs a break, he pushes the buzzer.

INTERDISCIPLINARY APPROACH

It is not the sole work of one team member to help a student develop and expand their communication toolbox. It requires collaboration among all stakeholders working with the student to ensure that the student has communication strategies that work for them. That means that it is not only the speech language pathologist or assistive technology specialist working with the student who will be implementing the strategy, it will be all staff members who touch the student in their day regardless of their discipline, area of expertise, or role. If they interact with the student, they will need to communicate with the student using the most effective strategy, whether it is high tech, low tech, verbal, or nonverbal.

If Augmentative and Alternative Communication (AAC) users only see symbols modeled for communication twice weekly for 20 to 30 minutes, it will take 84 Years for them to have the same exposure to aided language as an 18-month-old has to spoken language (Jane Korsten, 2011)

COMMUNICATION ON THE STUDENTS INDIVIDUALIZED EDUCATION PROGRAM

In terms of development of the student's Individualized Education Program (IEP), services can be provided directly and/or in consultation. Training can be provided to the student's family and staff working with the student. It is critical that everyone working with the student bombard the student with opportunities to communicate, understand the strategies that the student uses to communicate, and assist the student in combining those strategies to effectively communicate with those around them. IEP teams must not overlook the opportunity to provide training to others as a regular service on the IEP. Training can be provided to use a device and/or pictures efficiently, to recognize signs of communication, and to shape effective functional communication across individuals, topics, and settings.

The Maryland IEP has several places where communication is specifically addressed. The student's Present Levels of Academic Achievement and Functional Performance (PLAAFP) provides the team with information regarding the student's current level of functioning. Their strengths and needs are

important in setting the roadmap for the development of focused goals and targeted strategies that will enable the student to establish functional communication strategies. The team is next asked to use the information identified in the student's present levels to provide a brief explanation of the student's communication needs. The same section of the IEP asks whether the student has a reliable means of communication, and if not, where and how will it be addressed on the student's IEP. The expectation is that if a student does not have effective communication strategies, they will continue to receive direct and substantive services from appropriate specialists until an effective communication system is developed. It is essential to note that the student may utilize different means of communication for various tasks. A student might utilize a dynamic display speech generating device to respond socially and make requests, while relying on picture symbols during moments of dysregulation or when demonstrating what they know during instruction. Students are constantly developing. The need for prompting or support surrounding their communication system does not mean that they do not have a communication system. If prompting and varying support is required, it should be noted explicitly throughout the IEP document to provide robust year-to-year information surrounding communicative growth.

Like all goals, communication goals must be measurable, individualized, and designed to be achieved within one year. Because communication is a multidisciplinary implementation need, the goals should be drafted as a team, not by one individual. Everyone working with the student will be implementing the communication goals and using any devices the student requires in order to provide the student with instruction. It is critical that communication goals not be implemented in isolation only by the speech language pathologist or assistive technology specialist for the short period of time they are working with the student. Accordingly, when the goals are being developed a multidisciplinary approach is critical to ensure common understanding.

FUNCTIONALITY OF LANGUAGE

People use multiple strategies to communicate. It is important that when ensuring that students have a functional means of communication that they are not limited to using scripts or only one strategy. We should have the same expectations for students with communication needs that we have for those that do not have the same needs. At times, students may use gestures, pictures, vocalizations, devices, eye gaze, facial expressions, or whatever is needed and appropriate for the situation. To limit a student to using only one means of communication, to use their most effective means of communication in a limited setting (such as with the speech pathologist only), or to insist that they use only scripted language in contrived situations, is analogous to taking their voice away. Compliance with the student's IEP may require the use of a device, but different strategies are required for the student to effectively communicate. Although both are important, compliance does not trump communication when ensuring that the student is able, allowed, and encouraged to communicate.

PRESUMING COMPETENCE

Students who are complex communicators are often overlooked and treated with less respect than their verbal peers. We must ensure that all stakeholders presume competence when interacting with students with limited or non-traditional communication skills. Presuming competence means assuming that complex communicators understand and have something to say even if they cannot express themselves. It is critical to recognize that a student's difficulty in conveying understanding should not be interpreted as inability to comprehend, but rather a call to action for us to provide the services and strategies to ensure that they develop a functional means to communicate their understanding. A key piece of presuming competence requires that students with limited or no consistent means of communication continue to be provided with access to the same content and

educational settings in the least restrictive environments as their same age peers. If the assumption is that students without a functional communication system understand what is being taught to them but they are unable to demonstrate their understanding, it is critical that those students are provided with the grade level standards and peer interactions that will assist them in developing communication skills.

Bri is a 2nd grade student with multiple physical disabilities. She is non-speaking and has no reliable means of communication. Bri's family is working with her on holding her head up and wants eventually to use eye gaze technology to assist in communication. Currently, when Bri is able to hold her head up steadily, there is some indication that she may be a good candidate for using eye gaze technology to communicate. Bri's family are convinced that she understands everything. Bri is in a general education classroom. However, the IEP team feels she should participate in the Alternate Framework. The family denied consent.

Over the course of the next year, Bri develops more neck control and is able to learn how to begin to use the eye gaze technology. While she is not totally fluent, when she does respond to the adapted academic assessments using eye gaze, it is clear that she is able to access some grade level concepts.

IDENTIFYING STUDENTS WITHOUT FUNCTIONAL COMMUNICATION FOR THE ALTERNATE FRAMEWORK

In the guidance to the Appendix A form and documentation, the Maryland State Department of Education (MSDE) has advised that if a student does not have a reliable form of communication, IEP teams should proceed with extreme caution when considering their eligibility to participate in the Alternate Framework. When a student is unable to or is limited in their ability to communicate or respond to traditional assessments, whether a student is significantly cognitively impaired cannot be determined. Accordingly, unless there is data that confirms a significant cognitive impairment, the student should not be identified as participating in the Alternate Framework.

GUIDANCE FROM THE UNITED STATES DEPARTMENT OF EDUCATION, OFFICE OF SPECIAL EDUCATION PROGRAMS (OSEP) ON ASSISTIVE TECHNOLOGY

In January 2004, OSEP released a document titled *Myths and Facts Surrounding Assisting Technology Devices and Services*. The document highlights the need to consider the use of assistive technology for all students at every IEP team meeting. OSEP also reminds IEP teams that all assistive technology is not high tech and electronic, but can include visual schedules, PECS, graphic organizers, pencil grips, slant boards, and other non-electronic tools. Assistive technology evaluations are not required by law and should not be used to delay the provision of devices or services. Assistive technology devices should be used in all the student's environments, including the student's home and other community settings. The student's family and others interacting with the student should receive training on how to use the student's device. This training will ensure that student has consistent device access and that learning is optimized across all environments.

QUESTIONS AND ANSWERS

- 1. If a student has received direct speech services from a speech language pathologist for years, but has not developed a reliable form of communication, should the student still receive direct services?**

Decisions regarding the services a student receives are always the purview of an IEP team. However, if a student has not developed a reliable means of communication they should be bombarded with multidisciplinary and direct services until the team, including the speech/language pathologist, the assistive technology specialist, other specialists, the student's teachers, family, and anyone else working with the student throughout their school day to ensure the student can communicate effectively.

2. If the student uses a device to communicate in the school setting, does it have to be provided for home use? Conversely, if the student uses a specific device in the home, does it need to be used in the school setting?

The student should use whatever device or communication strategies that are most functional for them in all settings. To take that away is to take their voice away in any single setting. A student should not be forced to use only one specific mode of communication in the school setting because it is on their IEP if they are functionally communicating using multiple strategies in other settings. The team may decide it would be beneficial to expand the communication strategies a student has at their disposal, but they should not be limited to using only one in school. They should be permitted to use what is working for them outside of the school setting when they enter the building and they should be permitted to use what works in the school setting in other venues.

3. Who is responsible for implementing communication goals?

There is no learning without communication. Everyone is responsible for implementing communication goals, everyone is responsible for communicating with the student, and everyone encountering the student throughout their school day is responsible for listening to the student, speaking to the student, and understanding the student. In trying to assess a student's understanding, the student must have a means to communicate. It is a multidisciplinary process to develop strategies for the student to be able to communicate. It may involve an occupational therapist, the vision teacher, an assistive technology specialist, a speech/language therapist, the general education teacher, the special education teacher, the parent, the school nurse, and others to help the student to develop the strategies. Then everyone, including the cafeteria staff, media staff, custodial staff, instructional assistants, office staff- everyone touching that student's school day- are responsible for implementing the goals to effectively communicate with the student.

4. Is it too late to develop a functional communication system if the student has not had early intervention?

No, it's never too late. The process is the same. School staff should observe how the student communicates, see what strategies the student has already been using, and build on and expand those strategies to make them more consistent and functional. The older the student, the more help they will need.

5. Is it an absolute "rule out" for participation in the Alternate Framework if the student does not have a reliable communication system?

A student participating in the Alternate Framework must be determined to have a significant cognitive disability. If the student has no way of communicating their response to assessment, it may not be possible to make that determination. Without other substantiating data, that may constitute a "rule out."

6. What happens if the student breaks the assistive technology device that the school sends home with them?

It is essential that school staff work collaboratively with the student's family to generalize whatever skill the device is being used for. The family must receive training on the use of the device and will be able to integrate it into the home setting in the same way it has been integrated into the school setting. If a device breaks in school, it is replaced. If it breaks at home, it should be replaced. If it is repeatedly broken either in school or at home, the team should work together to come up with a plan to address the problem.

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