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BRIEF

Evaluation and Assessment Models for Assistive Technology: A Fact Sheet for Service Providers

Assistive Technology

Assistive technology (AT) is any product that is used to increase, maintain, or improve the functional capabilities of individuals with disabilities. Assistive technology also includes the services and supports needed to determine those devices to meet the needs of the individual. AT and AT services have proven beneficial for individuals with disabilities in accessing school, home and community activities. It is also increasingly recognized that AT and AT services provide similar benefits for infants and toddlers receiving early intervention services. Devices such as a simple suction cup rattle or a sophisticated computerized communication system are useful for increasing young children's access to developmentally important activities and realizing their functional goals. Despite the benefits of AT and AT services for infants and young children, it remains underutilized and poorly integrated in rehabilitation plans for young children. In fact, only a fraction, or about 7%, of children who receive early intervention services throughout the country also receive AT and AT services (Technical Assistance Project, 2000).

In an effort to make AT and AT services available to young children, the reauthorization of the

Individuals with Disabilities Education Act (IDEA, 1997) requires therapists and other providers of assistive technology to consider each child's need for AT and AT services at the time of the development of the Individual Education Program (IEP) and Individualized Family Service Plan (IFSP). Although these requirements have encouraged service providers to examine procedures specifically used to assess and determine the needs of AT for children, barriers remain in implementing them into practice. Service providers like physical therapists have identified that their limited knowledge about assessment and evaluation of AT needs as one barrier to providing AT and AT services to young children (poster reference—printed abstract, 2003).

Evaluation and Assessment of Assistive Technology

Specifically, providers reported that they wanted more information about assessment and evaluation tools and procedures to best determine and individual's needs for AT/AT services (in press). The Consortium Model (Long, Huang, Woodbridge, Woolverton, & Minkel, 2003) outlines a systematic process for evaluating, selecting and maintaining AT for an individual.

This model of decision-making has evaluation as the second step. It highlights the importance of evaluation of and identification of intended outcomes for children who need AT/AT services. The evaluation and outcome determination step is the time at which a differential diagnosis is made, if possible, and the goals or outcomes of intervention are determined and recorded often on the IFSP of IEP. This is also the time where AT and AT services should be regarded as one of the many strategies available to meet the identified developmental and functional outcomes.

There are several tools designed to assist service providers in evaluating the needs of an individual for AT. These evaluation and assessment tools provide a systematic way of determining the child's needs and which device would best fit that particular need. For example, the SETT (Student, Environment, Task and Tools) provides a structure around which the child's current functional skills, the tasks the child wants/needs to participate in, and the AT tools (AT devices/services) that may be potentially useful can be discussed and documented (Zabala, 1995). Table 1 lists some of the tools available, their purpose, and the authors.

TABLE 1: TOOLS FOR EVALUATION AND ASSESSMENT FOR AT

NAME	PURPOSE	AUTHOR
Educational Tech Points	Questions relate to AT used by professionals at various points in the assessment process to help teams effectively select AT and implement AT services.	Bowser and Reed (1995)
The Student, Environment, Task and Tools (SETT)	A collaborative process assisting teams in building consensus regarding the child's need for AT, the type needed, and the interventions needed to support the AT.	Zabala (1995)
Matching Person & Technology (The MPT Model)	A user-driven, person-centered process used to match individuals with technologies. This is a series of questionnaires that consider the environment, the users preferences, and the functions and features of the AT.	Scherer, et al. Institute for Matching Person and Technology (2002)
Human, Activity, Assistive Technology (HAAT)	This model takes into consideration of the skills of the individual, the task that the person is expected to perform, and the context or constraints on the activity.	Cook and Hussey (2002)
Lifespace Access Profile (Assistive Technology Assessment and Planning for Individuals with Severe or Multiple Disabilities)	This model outlines the steps to support effective AT selection. It uses detailed descriptions of the person's strengths in various areas, the technology resources available to them and the environments in which the technology is used.	Williams, et al. (1995)

Conclusions

AT and AT services are beneficial for infants and young children receiving early intervention services, but are not routinely considered as a strategy to accomplish their developmental and functional outcomes. Barriers such as the ability to evaluate and determine the need for AT/AT services persist. Five specific tools have been developed to assist in determining the AT needs of children. Service providers should routinely integrate these tools into their evaluation and assessment tool selection. These tools provide a comprehensive information gathering procedure to develop appropriate intervention programs for children.

References

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Technical Assistance Project. (2000). Update on the use of assistive technology among infants and toddlers. *Library, TAP Bulletin*. Available at <http://www.resna.org/taproject>. Accessed: April 25, 2002.

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