

ASSISTIVE TECHNOLOGY SELECTION SURVEY

Student _____ Date _____

Principle

- The selection of the assistive technology will take into consideration the user's cognitive, sensory and motor profile.

Assistive technology is intended to assist this student in which specific areas?

- sensory cognitive social
 motor language

Principle

- Assistive technology will allow the user to perform tasks in the simplest, most familiar, efficient and meaningful way possible.

Has the team considered the following in assessing the student's readiness for assistive technology?

- | | |
|--|---|
| <input type="checkbox"/> attention span | <input type="checkbox"/> ability to operate equipment, student/staff/family |
| <input type="checkbox"/> fatigue/stress tolerance | <input type="checkbox"/> student/family acceptance of equipment |
| <input type="checkbox"/> communication routines | <input type="checkbox"/> access across environments |
| <input type="checkbox"/> vocabulary needs | <input type="checkbox"/> comfort with technology |
| <input type="checkbox"/> maturity and responsibility | <input type="checkbox"/> student's medical status |

Principle

- Assistive technology should be customized to allow the user to be fully integrated into school (including network systems), home and community based upon his or her needs.

In what environments will the assistive technology equipment be used?

Principle

- The physical environment will be considered when technology is introduced, for example: classroom layout, lighting, safety and noise levels.

What characteristics of the specific environments must be addressed when selecting assistive technology?

Have different solutions for different environments been considered?

Principle

- The user will have an opportunity to assist in the selection of assistive technology.

How has the student been involved in the selection process?

What are the student's preferences?

Has a range of assistive technology been considered, from least invasive (light tech) to the most sophisticated (high tech), manual and electronic?

Identify the assistive technology modification/equipment options specified by the assistive technology team.

Modification/equipment #1 _____

Modification/equipment #2 _____

Modification/equipment #3 _____

Evaluate the modification/equipment options listed by answering the following:

	Modification/ Equipment #1	Modification/ Equipment #2	Modification Equipment #3	Comments
Do maintenance issues impact <ul style="list-style-type: none"> ■ Device usage? 				
<ul style="list-style-type: none"> ■ Device durability? 				
Describe maintenance service required. How will service be provided? <ul style="list-style-type: none"> ■ Support persons 				
<ul style="list-style-type: none"> ■ Local vendor 				
<ul style="list-style-type: none"> ■ Service contract 				
What are the properties of the device? <ul style="list-style-type: none"> ■ Weight? 				
<ul style="list-style-type: none"> ■ Portability? 				
<ul style="list-style-type: none"> ■ Alternative inputs? 				
<ul style="list-style-type: none"> ■ Adaptations required? 				
<ul style="list-style-type: none"> ■ Availability? 				
Does the modification/ equipment positively impact cognitive needs?				
Does the modification/ equipment positively impact social/emotional needs? <ul style="list-style-type: none"> ■ Grade/age suitable? 				
<ul style="list-style-type: none"> ■ Social interaction? 				
<ul style="list-style-type: none"> ■ Self-esteem? 				
<ul style="list-style-type: none"> ■ Promotes independence? 				
Is modification/equipment acceptable to student and/or family?				

	Modification/ Equipment #1	Modification/ Equipment #2	Modification Equipment #3	Comments
Is modification/equipment needed for single or multiple rooms or alternate activities use?				

Are the following environmental needs sufficiently met for single/multiple room use?

Lighting effects on equipment?				
Electrical considerations:				
■ Access to outlet?				
■ Adequate power source?				
■ Power compatibility?				
■ Extension cord needed?				
Room temperature considerations?				
Security considerations:				
■ Lock-down needed?				
■ Anchor pads needed?				
Storage considerations:				
■ Space available?				
■ In room or out?				
■ Daily storage needed?				
■ Who needs to store?				
Work space considerations:				
■ Space available in room?				
■ Space near electrical access?				
■ Need extra table/desk?				
■ Is student access compromised?				
■ Is student(s) visibility compromised?				
■ Is lighting adequate?				

	Modification/ Equipment #1	Modification/ Equipment #2	Modification Equipment #3	Comments
How does the equipment impact the educational environment?				
Noise level considerations:				
■ Acceptable?				
■ Needs amplification?				
Staff time needed:				
■ Minimal?				
■ Ongoing?				
■ Moderate?				
■ Excessive?				
Impacts others in environment:				
■ Acceptable?				
■ Ongoing?				
■ Disruptive?				
Does the modification/equipment address the students needs?				

Assistive technology modification/equipment recommended: _____

Date survey completed: _____

Survey completed by:

Name _____

Role _____