

Communication Journey: Aphasia Vocabulary File User's Guide

UK Edition

Acknowledgements

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Introduction

“Communication Journey: Aphasia” is a template with a collection of useful, aphasia-friendly pages. It is intended to be used with people who benefit from a simple grid format with a small number of choices. It is best suited to people with severe aphasia, both fluent and non-fluent, who have limited ability to scan a page, or are slow to learn how to navigate or to recognise symbols and pictures.

The following description of aphasia is taken from the Royal College of Speech and Language Therapists:

There can be a total or partial loss of the ability to use or understand language; (National Institute of Deafness and Other Communication Disorders, 2002). It can affect one or several modes of communication including different modes of comprehension and expression, including speech, sign language, writing, and sometimes drawing and gesture.

Aphasia affects both the individual and those around them. The person with aphasia, their family and friends, and the wider society, all need to adapt to facilitate communication.

Effect on abilities

A person with aphasia often finds that his/her ability to understand, speak, read or write is affected, yet their intellect remains intact. A person with aphasia may have problems having telephone conversations, watching television or listening to the radio. Everyday tasks and activities that involve language can become impossible. This often leads to frustration, social isolation and a breakdown in close relationships (Speakability, 2006).

Effect on roles and position

The practical impact of the disability can be severe in terms of limitations and changes in fulfilling social roles, personal relationships as well as participating in activities (Parr, 2007). For example, with loss of income, families may have to adapt to living on state benefits. What can result are a loss of position within the family and other areas of life, which may result in a loss of self-worth. Relationships with family members can also be strained due to communication breakdown, leading to frustration and tension (Parr, 2007).

Effect on participation in society

People with aphasia face barriers to full participation in society. Returning to previous employment may be difficult depending on the flexibility of the workplace, and studies suggest that there is not a strong relationship between severity of language impairment and return to work (Hinckley, 2002). Parr et al 1997 found that return to the same level of work as pre-onset was rare. Additionally, participation in many other social roles including household management and recreation has been widely found to be negatively affected by aphasia (Hinckley, 2002).

Psychological effects

The psychological effects of aphasia can be compared to the grieving process, as the individual may experience loss of their former self as well as a disconnection from those around them. This can be exacerbated by the effects of brain damage, which can predispose a patient to anxiety, depression, neglect and excessive emotion (Tanner, 2003).

The Life Participant Approach to Aphasia (LPAA) developed by Aura Kagan with (in alphabetical order) Roberta Chapey, Judith F. Duchan, Roberta J. Elman, Linda J. Garcia, Jon Lyon, and Nina Simmons Mackie focuses on re-engagement in life. The core values that inspired this vocabulary file

were derived from the LPAA. With these pages, we hope to assist people with aphasia by providing a vocabulary file template that can be customised to empower them to live their new life to the best of their abilities.

Before the onset of the aphasia, people with this condition have led full and interesting lives. Often, they have retained their abilities to understand what is needed for communication and have no difficulty with the social aspects of language. They may be able to make their basic needs known through gestures, pointing, etc.

Each person has unique life experience and specific needs and therefore requires a customised vocabulary. There is no standardised vocabulary file that will meet even the minimum needs of every person with aphasia. This vocabulary file contains starting-point vocabulary commonly required by adults with aphasia but it **MUST** be customised to reflect their lives, experiences and abilities. No vocabulary file exists that can be used without significant customisation. Customisation is the responsibility of the Speech Language Therapist (SLT) with assistance from the person with aphasia, their family, friends and staff.

Supported Conversation and Communication Ramps

People with aphasia will need extra help when communicating. The additional supports create a supported conversation. The communication partner can help the person with aphasia to express their thoughts by asking questions, providing vocabulary, expanding ideas, and confirming that the person with aphasia has been interpreted correctly. The conversation partner will take on more of the responsibility and this can happen in any modality such as language comprehension, language expression, reading and writing.

People who use wheelchairs need a wheelchair ramp to have successful mobility and people with aphasia need communication ramps to have successful conversations. Communication ramps are tools that a communication partner would use in a supported conversation. The page set “Communication Journey: Aphasia” is one such communication ramp. It includes physical supports such as symbols, pictures, maps, schedules, clocks, written supports and visual scene displays.

The Story

This vocabulary file was created by a group of speech-language pathologists (SLPs) working in a rehabilitation hospital (G.F. Strong Rehabilitation Centre) and the community (CAYA – Communication Assistance for Youth & Adults) in Vancouver. Their clients were people with severe aphasia or traumatic brain injury. Many times daily these SLPs met clients who, long-term, might have the potential to use a mobile device and communication app. The clients needed to learn how to use a simple vocabulary file with limited choices, predictable navigation, and easily customised buttons. The SLPs, who had clients scheduled every hour, did not have the time to create customised vocabulary files for each client. Most devices on the market created for people with aphasia included many ingenious features, but the pages could not easily be simplified enough for clients with very severe aphasia. The SLPs needed a template of aphasia-friendly pages. From these pages they could choose appropriate pages for specific clients to begin practice with the app and tablet.

Together, the SLPs from GF Strong and CAYA brainstormed individual messages, pages, and information that people with aphasia and traumatic brain injury frequently wish to discuss. They took that information, organised it into a simple grid structure and created the vocabulary file in Touch Chat. Then, SLPs customised that template to begin training for each client. For example, one client began work with a grid with four topics and learned to locate pictures under each of those topics. That client needed support navigating but gradually learned how to navigate back to the main page. Another client had eight topics and the ‘clear’ button. After the client had learned the vocabulary from the eight topics, the speech language pathologist (SLP) added pages from the

template to the eight-topic vocabulary file in order to increase the number of communication environments for that client. A third client had the visual scene page set as the home page.

During the pilot project, SLPs used the vocabulary file and provided feedback and suggested revisions to the authors. An informal survey showed that the SLPs found the file easy to customise and introduce to clients. The template therefore summarises the work of many clinicians as they have worked directly with people who have severe aphasia.

Who will use “Communication Journey: Aphasia”?

Using an electronic communication device requires many skills related to language and cognition. Please refer to the AAC Aphasia Categories by Garrett and Lasker (<http://cehs.unl.edu/documents/secd/aac/assessment/aphasiachecklist.pdf>) to identify which communication supports your client will need, in order to incorporate an electronic device into their communication system. Clients who use this vocabulary file will most likely be Contextual Choice Communicators, Transitional Communicators, or Stored Message Communicators. They will use it in a limited number of communication environments. For more detailed information please see the following websites: <http://www.cayabc.org/resources/> and <http://praacticalaac.org/strategy/aac-assessment-for-people-with-aphasia/>

The pages in “Communication Journey: Aphasia” were created to facilitate participation in daily activities and to promote social links. Thus, some pages require the involvement of both the person with aphasia and the communication partner (for example: family, friends, staff) who provides supported communication techniques.

How Will the Pages be Used?

The default template pages each have a display of 12 items. Based on the client’s capabilities, the grid size can be changed to more or fewer buttons. For instructions on how to change the grid size, see “Changing the Grid Size” on page 37. Information on the client’s capabilities will be determined upon assessment according to evidence-based practice. For more information, see “Appendix D: Resources” on page 42.

To use an electronic communication device, people with aphasia will need to learn to identify and locate symbols and pictures, to navigate from page to page, and to use special buttons such as the “Clear” button. Learning to carry out any one of these tasks will require training and support. People with severe aphasia often benefit from beginning with a display that has very few items. See the “Saltillo Client Information Form for Individuals with Aphasia” at <https://saltillo.com/products/options/vocabulary-options#communication-journey-aphasia> and “CAYA – AAC Resource for Individuals with Aphasia” at http://www.cayabc.org/wp-content/uploads/2014/03/AAC_Aphasia_CAYA.pdf.

Foundational principles for programming the vocabulary file:

Customisation for personal use makes all the difference when creating a useful augmentative communication tool and ensures its ongoing and expanded use. In most instances, personal photographs are easier to identify and relate to than symbols.

For clients who are severely impaired, begin training with one or two communication environments (such as “Social” and “Conversational Controls”). When the client can successfully use the stored messages in one setting, add another environment. To add an environment, add a page.

How to use the pages:

Choose the grid number and modify the home page accordingly. Choose the most motivating, pertinent pages from the template.

Link the target pages to the home page. For example, if the client benefits from the Photo Album page, a button that links to this page can be moved to the home page for quicker access. For details, refer to “Copying and Pasting an Entire Button” in the *TouchChat® User’s Guide* or “Copying Buttons” in the *NOVA chat® User’s Guide* or *Chat Fusion™ User’s Guide*.

If the home page is to be a visual scene page, choose the “photos” page. The visual scenes will appear as a grid. Communicators will need to navigate from the home page to each individual visual scene, and then back to the home page for another visual scene option.

The pages in this vocabulary file include pain scales, timelines, scheduling, maps and social scripts in addition to traditional categories of vocabulary such as food and clothing. Clients learn how to use the Chat software as a communication device by training with the most pertinent pages or symbols. As the person becomes more skilled at using their personalised set of pages, then gradually add more pages to increase their vocabulary. This may include increasing the number of buttons on the page or increasing sub-pages to navigate to.

It is unlikely that any client would use the full original template, even with customised pages. Many topics are in layers within the vocabulary file and, depending upon the interests of the person with aphasia, important topics must be moved to the main page. This vocabulary offers many options to the client but it’s the role of the Speech and Language Therapy Team to find the appropriate pages and place them in an easily-accessed location. For example, the client is not expected to move through four layers to access vocabulary.

“Communication Journey: Aphasia” has unlimited space for new vocabulary and pages. It has a number of features that can be used or modified to customise the file for a person with Aphasia. Further explanation and programming steps are included in “Appendix B: Beyond the Basics” and “Appendix C: Specialised Features”. We hope that these pages can grow as the client becomes comfortable with the app or tablet, to eventually encompass all of the client’s communication environments.

Description of the “Communication Journey: Aphasia” Pages

Main Page

This is the main index page. All vocabulary is linked from here. This page should be customised to show only the pages that you are using for training. More pages will be added as the client progresses.



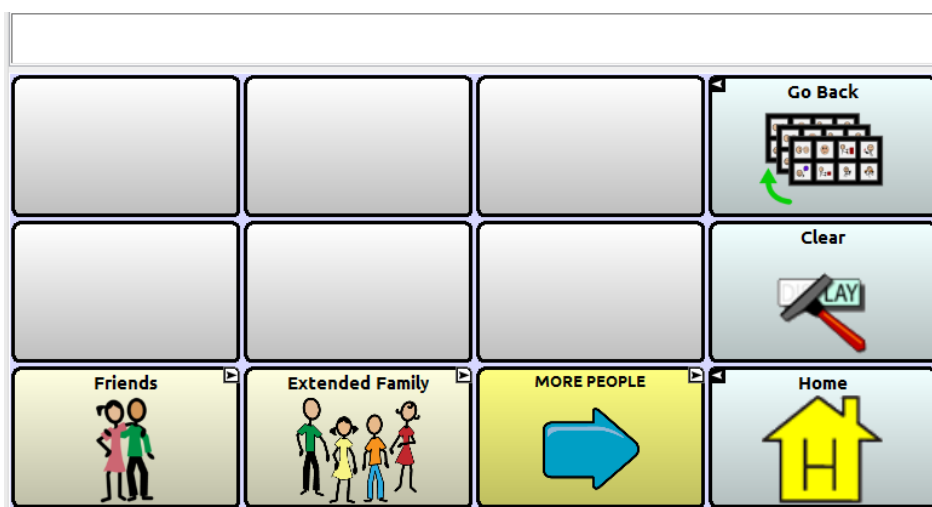
Things Page

This page contains lists of vocabulary items by category such as clothing, food, hygiene, etc. Many clients require the Medical page to be moved to the main page to help support current medical concerns that exist after having a stroke.



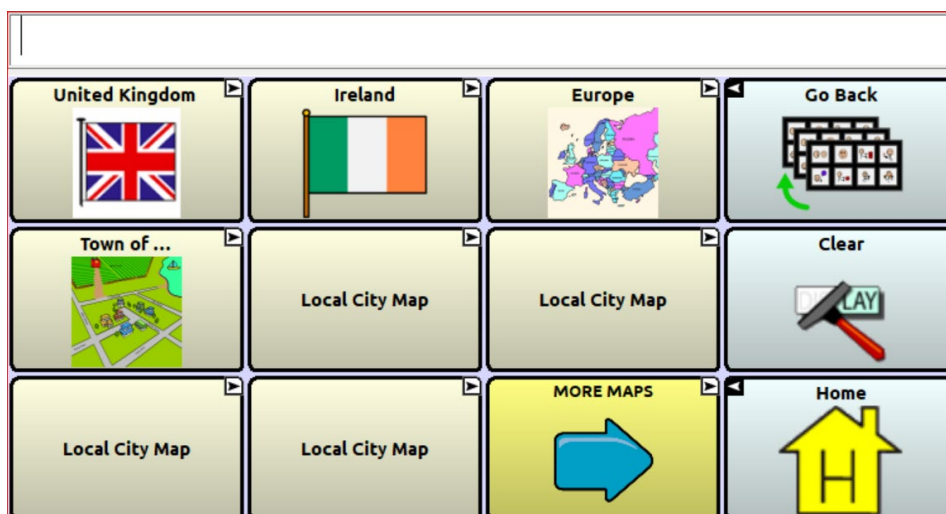
People Page

Names and photographs of important family and friends should be customised on this page. If the page does not have enough room, see “Appendix A: Creating a New Page using a Template” on page 35.

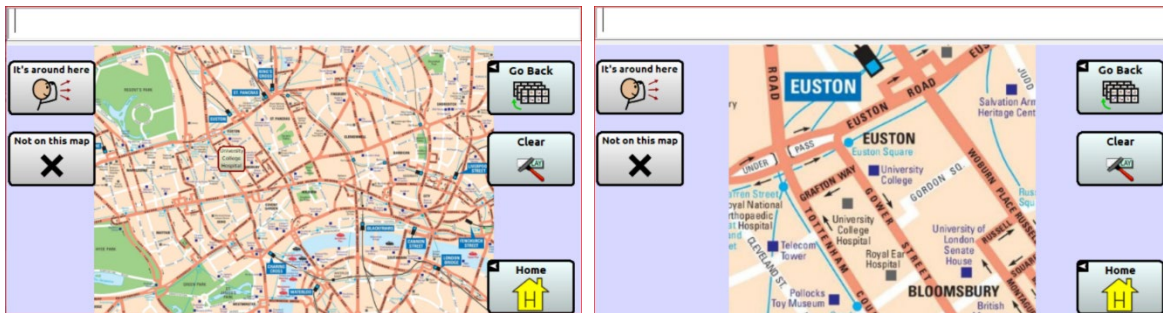


Maps Page

Maps are used in this file as a way to provide context to a story and pertinent information about places in a person’s life. Customising the maps, allows the person with aphasia to respond to questions and provide background information that is relevant to their daily schedule. Customise neighbourhood, city, country and other maps that reflect your client’s life experience.



Here is an example of a customised city map with “hot spots” (Hot spots are transparent buttons that allow the picture to show through and allow speech messages or functions (for example, navigate) to be programmed within the picture--single or multiple buttons programmed to speak a single message when selected). One of the hotspots in this example opens to a neighbourhood map.



Places Page

Places in the community unique to the person using the Chat software should be customised on this page. The button may reflect a category (for example, Shopping may include multiple stores that the person frequents) or single place (for example, Stroke Club) that the person visits and wants to talk about. See the “Saltillo Client Information Form for Individuals with Aphasia” at <https://saltillo.com/products/options/vocabulary-options#communication-journey-aphasia> and “CAYA – AAC Resource for Individuals with Aphasia” at http://www.cayabc.org/wp-content/uploads/2014/03/AAC_Aphasia_CAYA.pdf.



Social Page

This page shows a sample script for a conversation related to general greetings. After a stroke, many clients who need AAC must re-learn how to participate in a conversation. They may know that it is their turn, but they might not know what to say. For individuals who benefit from social scripts, new pages can be created to meet their needs. See “Appendix A: Creating a New Page using a Template” on page 35.



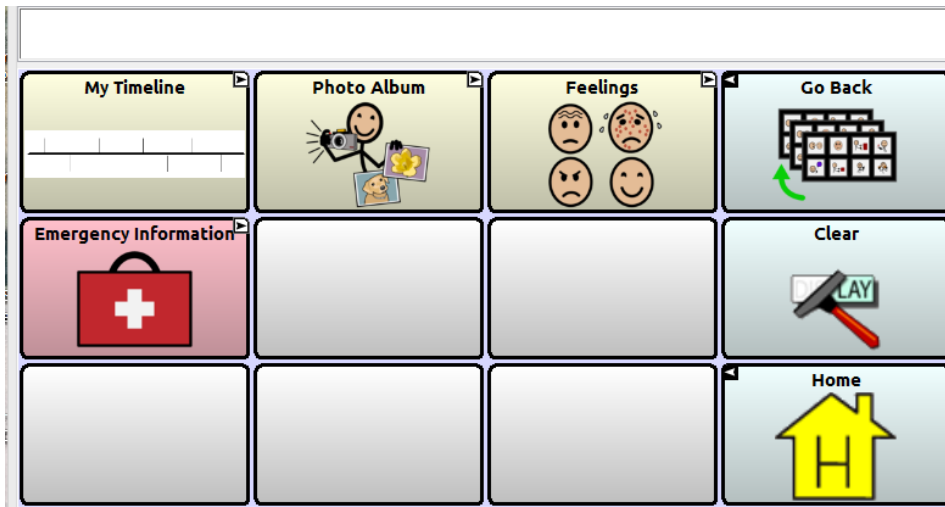
Keyboard & Calendar Page

This page is for people who have aphasia and some literacy skills. The individual needs to have the ability to make appointments and organise their calendars. “Blank page for copying” is a feature programmed into this page that allows clients to create a message in the Speech Display Bar and save it to a specific button. This is useful so that the person can retell a story or new information at a later date to different people. For information on using blank pages, see “Using the Blank Page for Copying” on page 37.

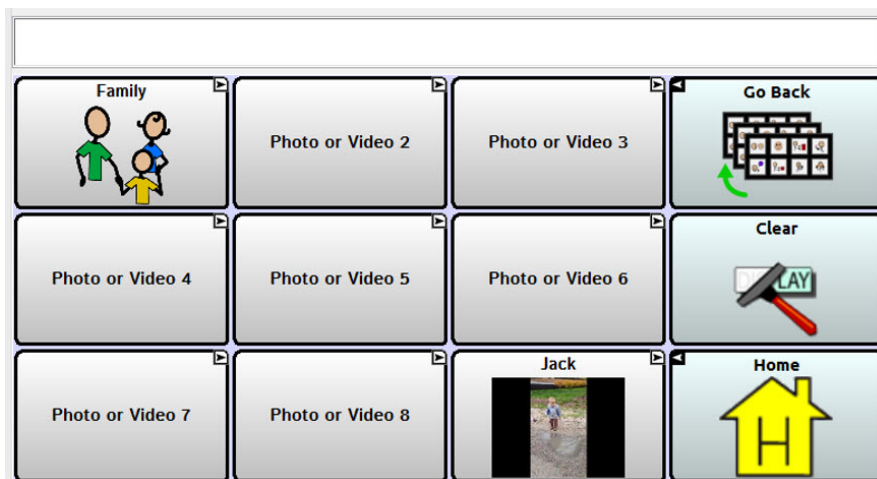


Me Page

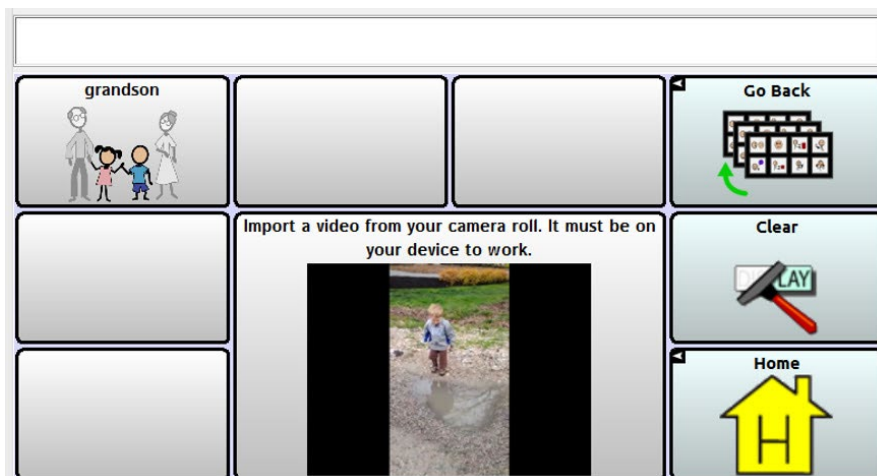
This page contains information for emergencies, personal history, and other conversation supports.



The **Photo Album** button opens pages that allow you to insert photos and videos that can be used to start and support conversations.



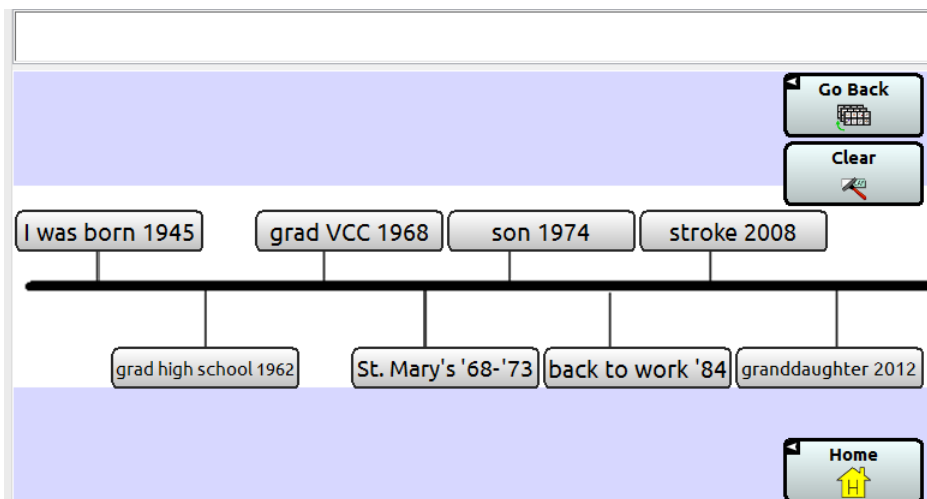
For information on using videos, see "Creating and Inserting Videos" on page 41.



My Timeline Page

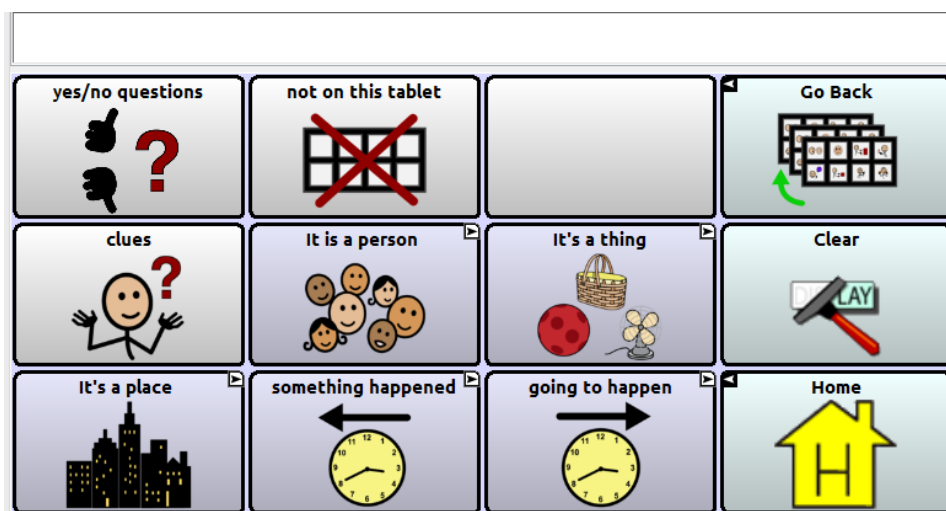
Customise the timeline to provide quick information about the client's life. Help the client identify life milestones and communicate about their rich, full life with a conversation partner.

To modify the timeline with the current eight boxes or to customise the page so that there are more or fewer boxes, see "Customizing the Timeline Image" on page 38.



I'm Stuck Page

This page provides information to support the client in repairing communication breakdowns. It guides the person with aphasia and the partner in using supported communication strategies. For example, often "yes or no" questions are easier for the person with aphasia to respond to. With the top left button the person with aphasia can request the communication partner to, "Ask me a yes or no question" in regard to a specific conversation.



Conversational Control Page

This page includes client strategies for directing their lives in different environments. After talking to people with aphasia, differentiating “I need”, “I forgot”, and “I lost” is very important for this population, as they represent concerns that are not the same.



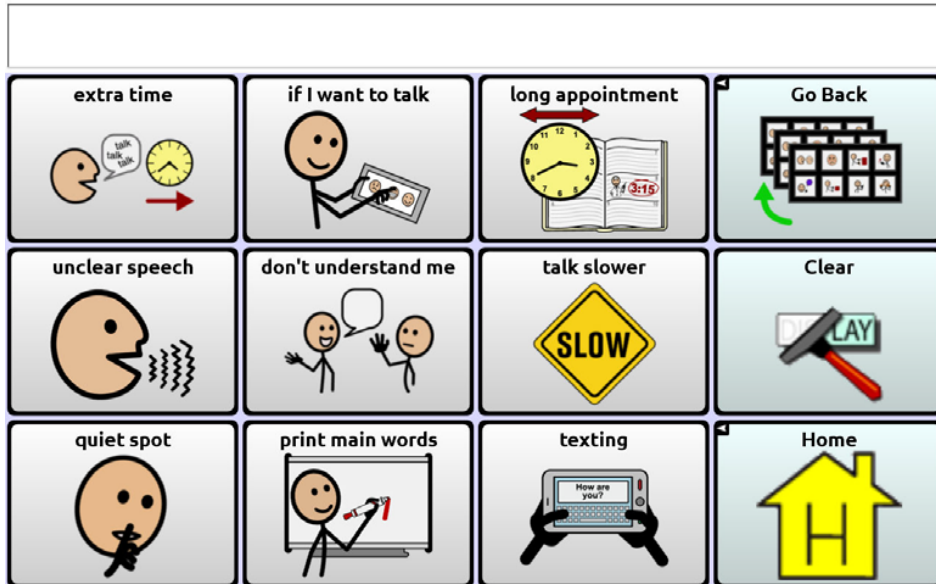
Directing Care Page

This page allows the person with aphasia to instruct caregivers to carry out tasks that they can no longer do independently. The person with aphasia can also provide feedback to the caregiver using this page.



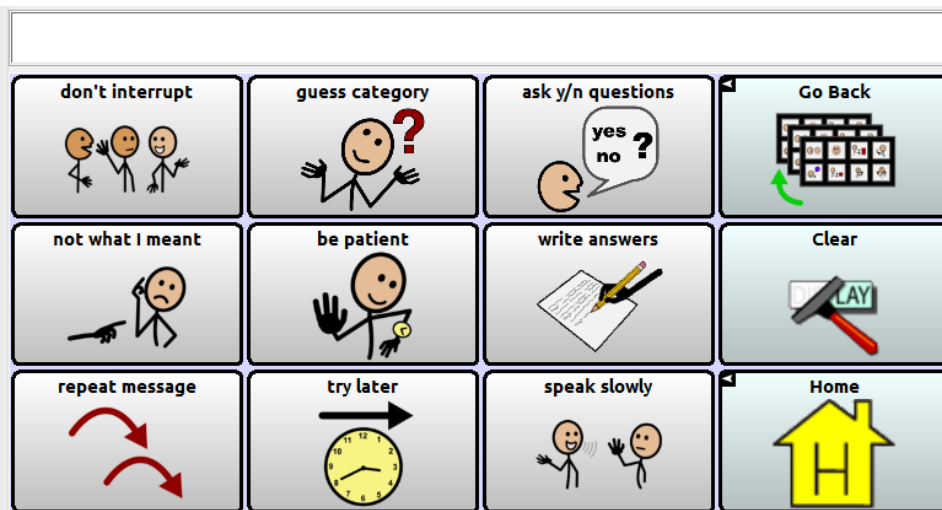
Self-Advocacy Page

Using this page, the person with aphasia can provide general information and advocate for the communication strategies that work best for them. For example, "Please let me know if you don't understand me."



Strategies Page

When there is a communication breakdown, these strategies allow the person with aphasia to give clues as to how to repair the breakdown. For example, "Please write down possible answers I can point to."



My Activities Page

This page includes vocabulary and messages for favourite and routine activities. Some common activities have been selected for this population of individuals but because every person has unique interests this page requires customisation.



Scales Page

This page of scales provides the client with a way to express their opinion using a continuum. These scales would be used in a supported conversation so that the person with aphasia can give their opinion when the answer is not yes or no. Different scales would be used in different environments, depending on the conversation taking place. Not every scale should be used for an individual client. The intent is to find one scale that best meets the need of that person. For information on using scales, see "Using Scales" on page 39.





Never/Always Page


This page is an example of a scale. There are four other scales on the page.

1 2 3 4 5

Never **Sometimes** **Always**

Go Back


Clear


Home


When purchasing Chat software, "Communication Journey: Aphasia" is one of the vocabulary files available. Please remember that no one can use these pages, or any other vocabulary file without personalising and customising the pages. Chat software is programmable so that you can move, delete or add new vocabulary to meet the needs of the client.

Case Studies

Here are two case studies that will help you understand how these pages can easily be customised for a client.

Case Study 1: Paula

Paula, aged 68, had a stroke that left her with very severe aphasia affecting her ability to understand most of the language that is around her. She can say only one word, “great.” Paula cannot read and she cannot spell. Her ability to gesture has also been affected by her stroke. Before her stroke, Paula and her husband Phil owned a jewellers which was very successful because of Paula’s strong interpersonal skills. She has a son called Kevin. Paula has a strong network including people from her past work, neighbours, and close friends.

Paula’s Main Page

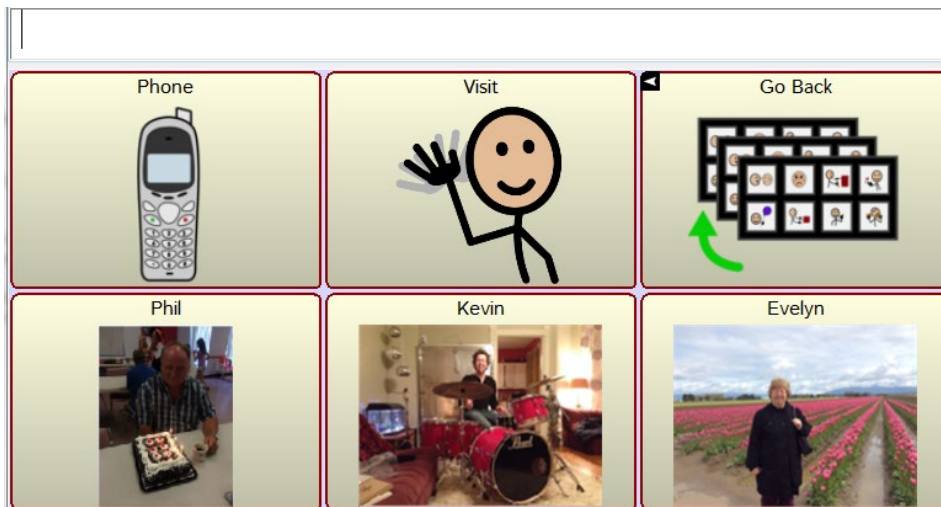
Paula has four categories and one level of navigation, except for the photos page, which has two. There is no “clear” button because the inserted text clears automatically with the selection of the next button.

Very transparent, pertinent and concrete topics were chosen to assist Paula to understand the pictures/symbols and learn their use for communication.



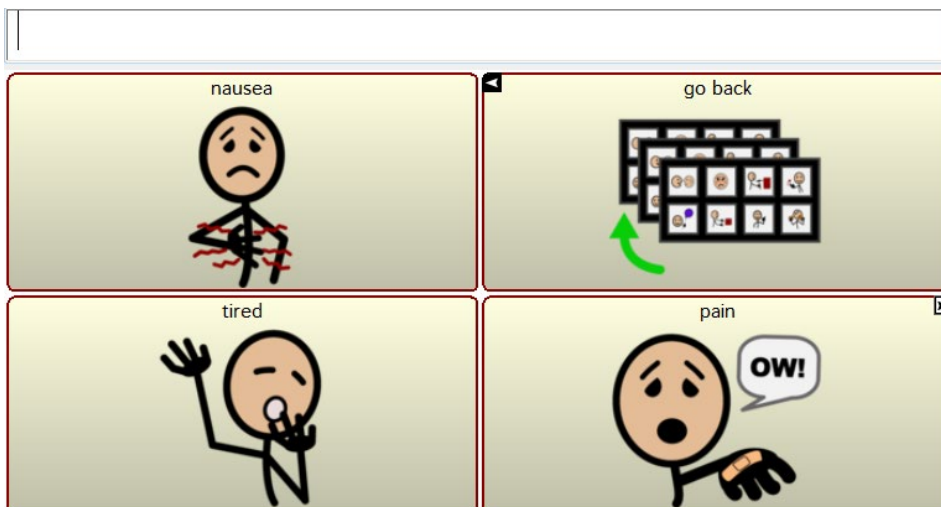
Paula's Family Page

Paula is still in hospital, so she has a choice of asking for a phone call or visit from her closest relatives. Although she has additional friends who visit, she is cognitively not able to manage more than six familiar items on a page.



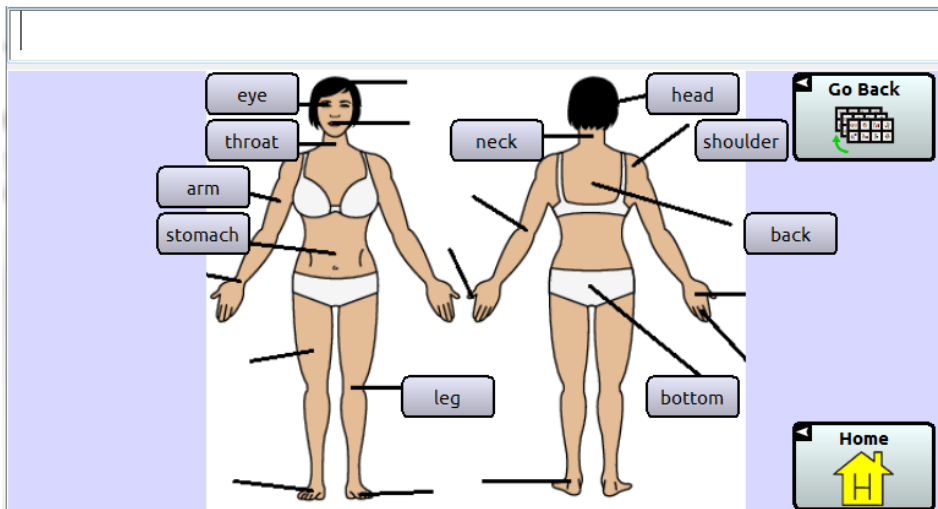
Paula's Health Issues Page

Paula commonly experiences these health issues and needs to be able to communicate about them. These particular concepts are more abstract and therefore it was easier for her to learn the symbols rather than human facial expressions.



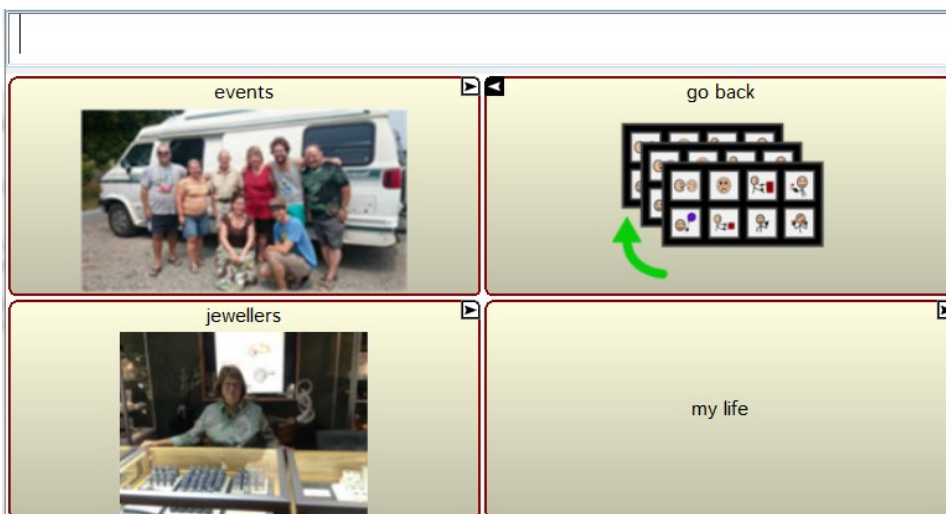
Paula's Pain Page

This is the page that links from the pain symbol. Paula can use this page for aided language input as well as telling her nurse where she feels pain.








Paula's Photo Album Page

Paula is introduced to the concept of visual scene displays for the purpose of supported conversation.








Paula's Events Page

Paula can share and participate in the telling of family stories. She can use these pictures to practice with familiar topics.

<p>Kevin & Caroline</p> 	<p>go back</p> 	
<p>travel</p> 	<p>camping</p> 	<p>Mum & Evelyn</p> 

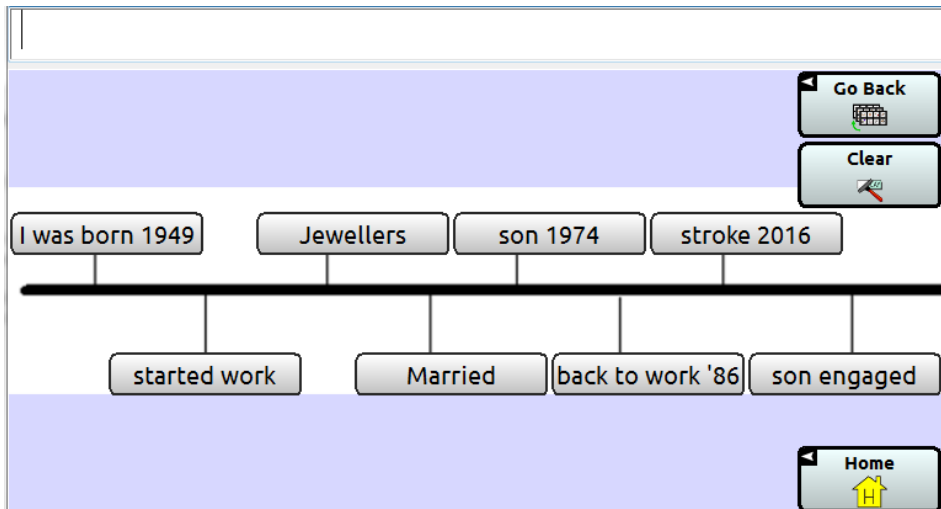
Paula's Jewellers Page

Paula and her husband owned a jewellers and it is a topic of great importance to her.

<p>retired</p> 	<p>go back</p> 	
<p>favourite jewellery?</p> 		<p>husband gives me jewellery</p> 

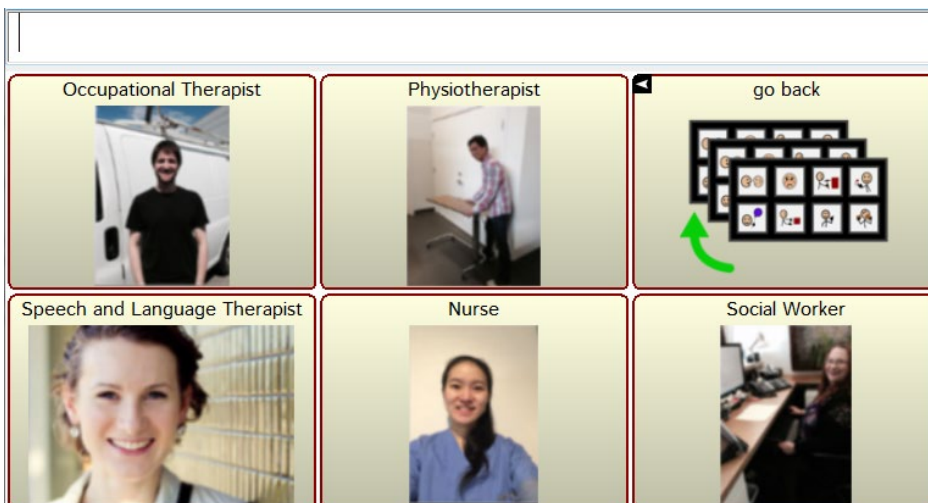
Paula's My Life Page

Through supported communication, other people can learn about Paula's life before her stroke.



Paula's Hospital People Page

While she is in the hospital, Paula interacts with these people on a regular basis. As she moves from therapy session to therapy session, she can identify the therapist that she will visit.



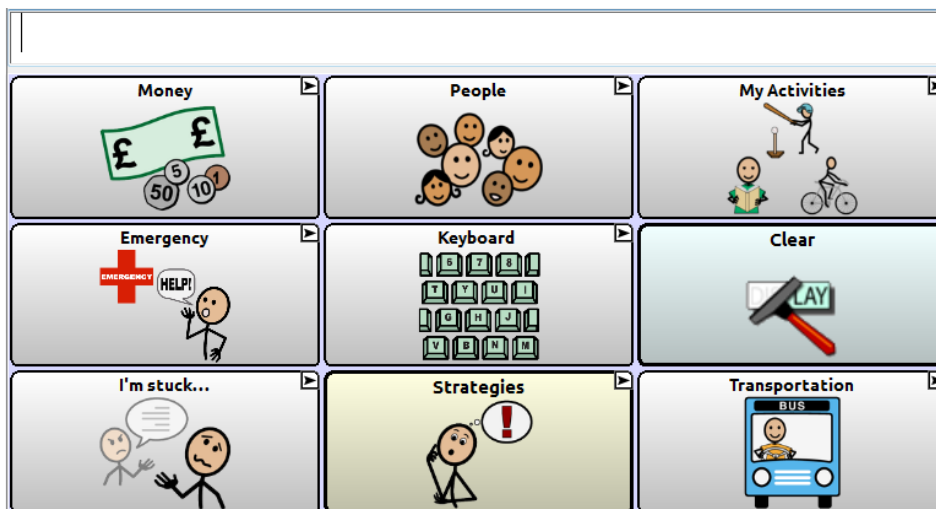
Case Study 2: Dan

Dan is 46 years old and had a stroke five years ago. His comprehension of language is pretty good, but he is unable to use language for everyday communication. He can nod for yes and shake his head for no, and occasionally he will say a word or a phrase that is appropriate. He is able to monitor his own communication so that if the word is not appropriate he shakes his head to say “No”. He can match words to pictures and attempts to spell, but does not have functional spelling.

Dan lives on his own. Prior to his stroke he worked in IT. Following his stroke, he had frequent anger outbursts and lost touch with many of his friends. He is divorced from his wife, Julie, and has no children.

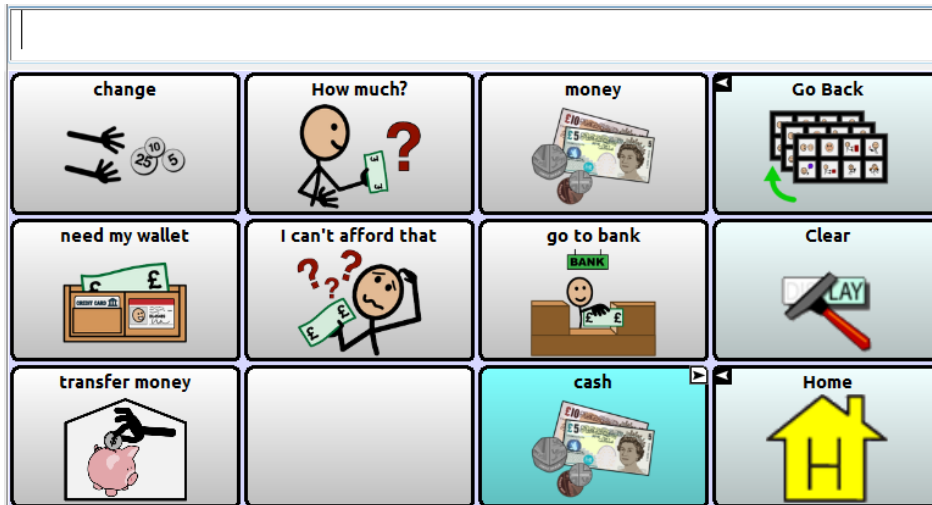
Dan’s Main Page

Dan lives in the community and is learning to use his vocabulary file to interact in each communication environment. The money and transportation topics need to be on his main page because he uses them so frequently. Dan is learning to navigate within his vocabulary file independently and so has access to the Go Back, Clear and Home buttons.



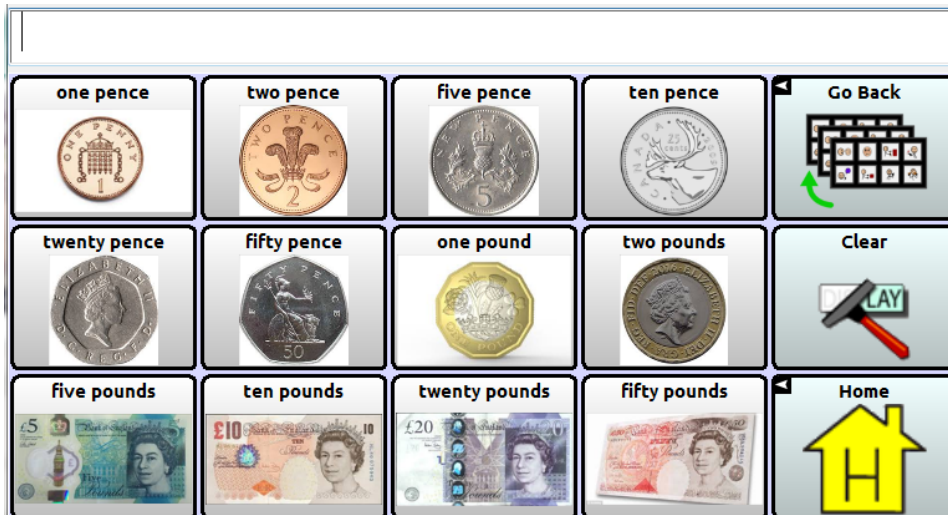
Dan's Money Page

Dan can ask questions about money on this page and manage his financial affairs.



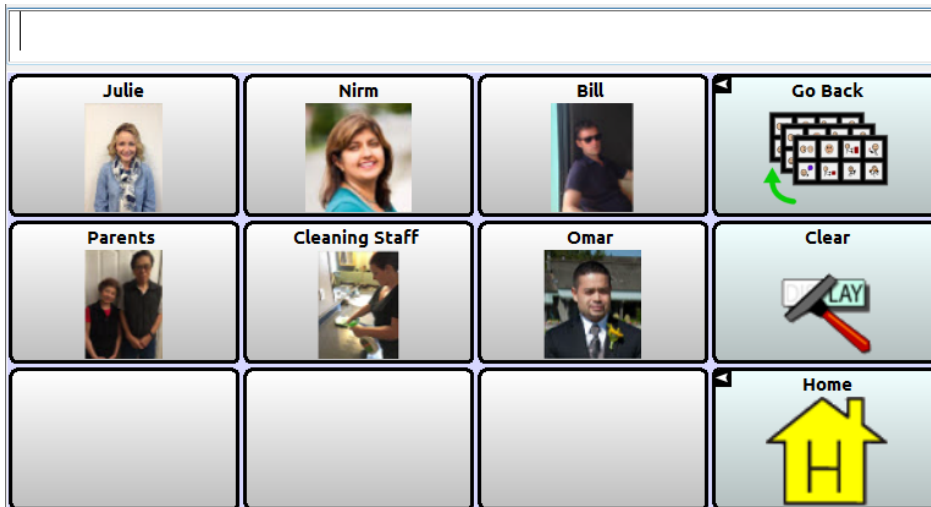
Dan's Cash Page

Dan has trouble counting out money and therefore likes to have symbols of cash in his device. This page is infrequently used, but when he needs it, it is crucial to his ability to correct errors.



Dan's People Page

Dan uses this page to identify the important people in his life.



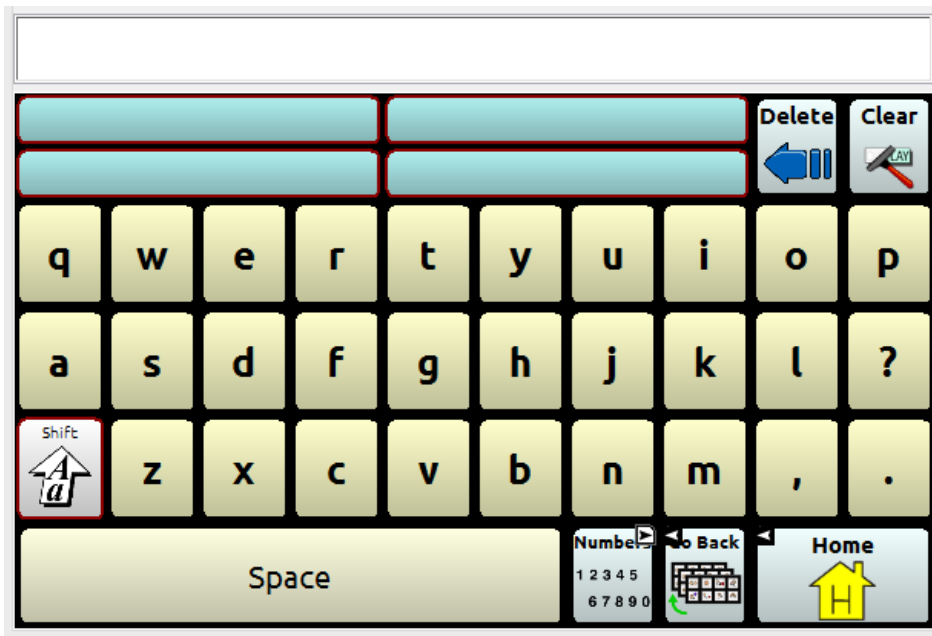
Dan's Emergency Page

Dan is learning how to use this page to keep himself safe.



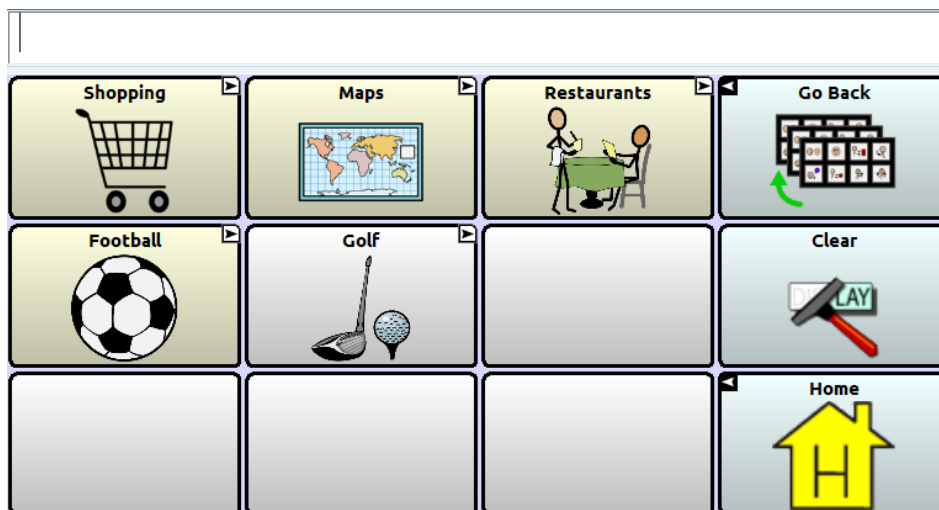
Dan's Keyboard Page

Dan is a typist so uses the QWERTY keyboard, and is learning how to use the word prediction cells. He can usually type first letters of words.



Dan's Activities Page

Dan uses the vocabulary on this page to participate in these activities.



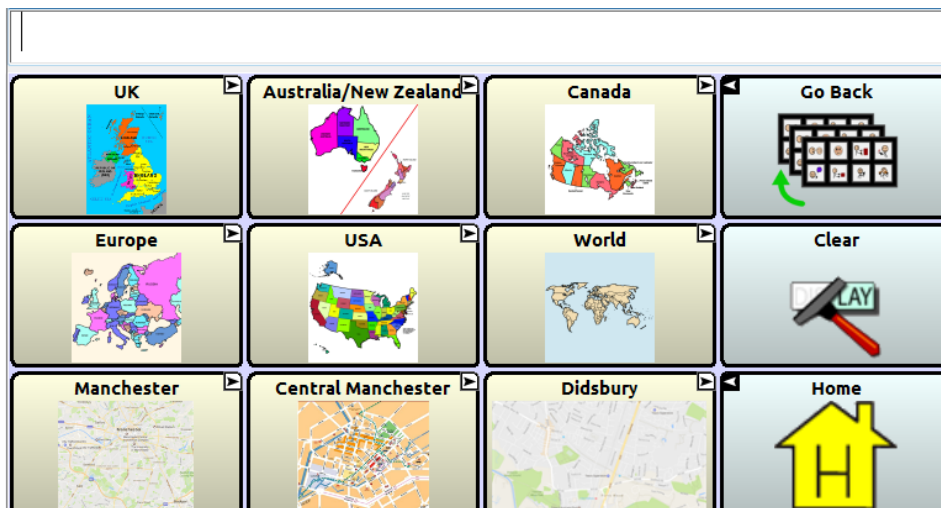
Dan's Shopping Page

Dan uses this page when he is shopping. He is learning to create sentences.



Dan's Maps Page

These are maps of places that are important to Dan. He uses these maps to support conversation about past events as well as current plans and activities.



Dan's Restaurants Page

Dan uses this vocabulary in fast food restaurants.



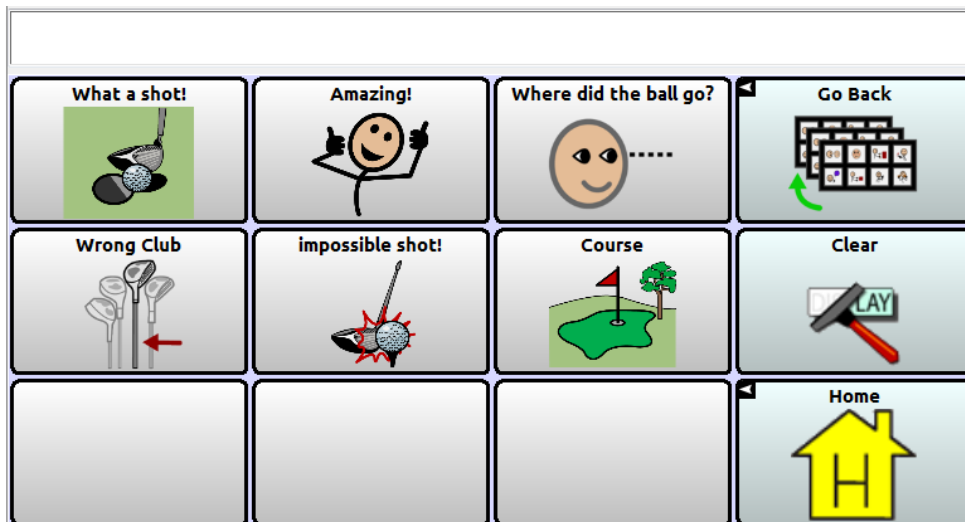
Dan's Football Page

Dan uses this page when watching football matches with his neighbour.



Dan's Golf Page

Although Dan can no longer play golf, he likes to watch it on TV and provide commentary to anyone who is watching with him.



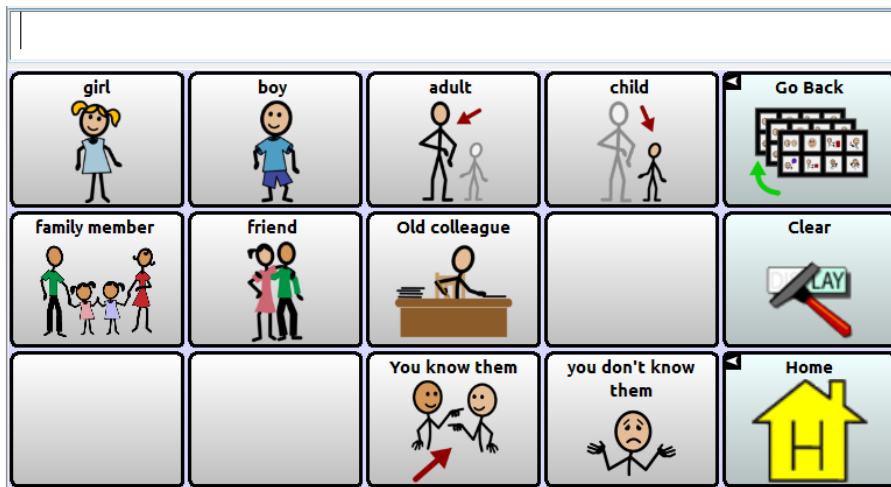
Dan's I'm Stuck Page

Dan is learning to use this page to repair communication breakdowns.



Dan's It's a Person Page

This page assists Dan to provide a general description of the person that he is referring to.



Dan's It's a thing Page

When Dan is trying to describe an object, he can use these categories.



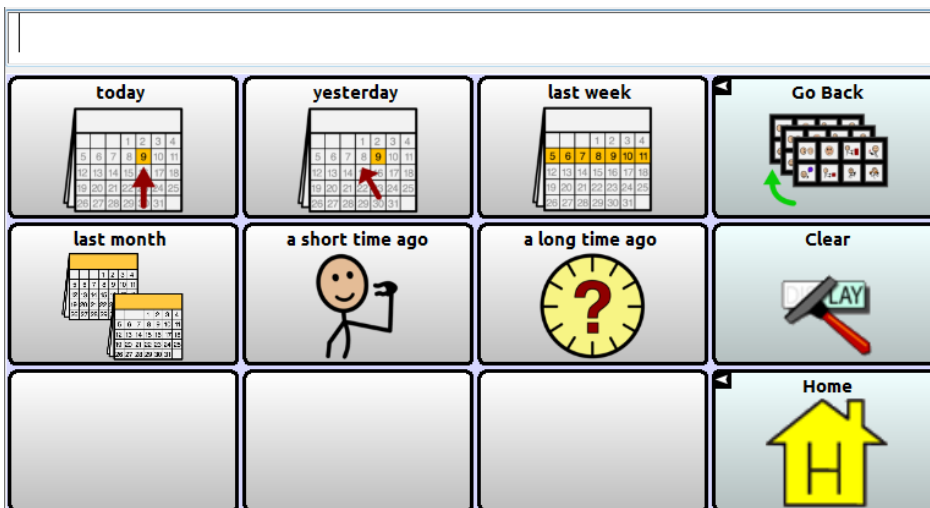
Dan's It's a place Page

This vocabulary allows Dan to identify a location.



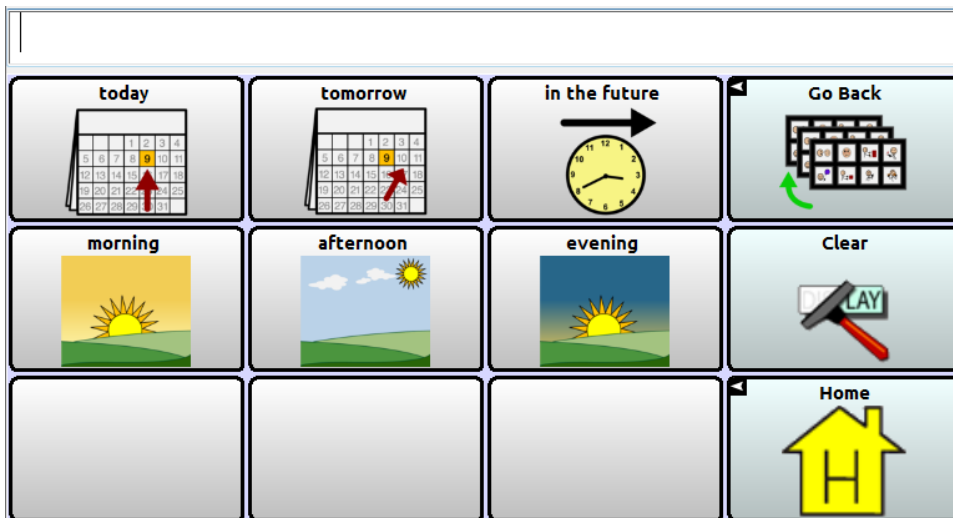
Dan's Something Happened Page

This page allows Dan to state that something happened in the past.



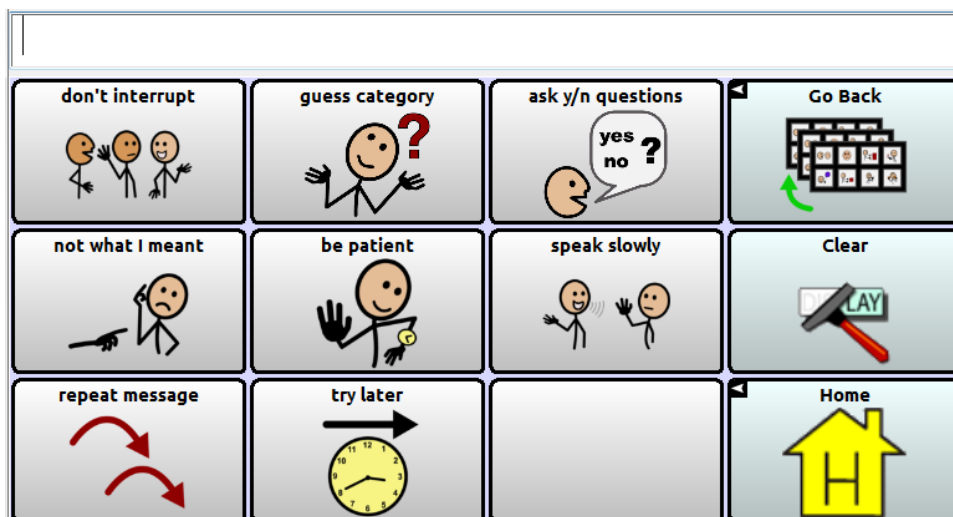
Dan's Going to Happen Page

This page allows Dan to state that something is going to happen in the future.















Dan's Strategies Page

This vocabulary allows Dan to communicate which strategies work best for him.



Dan's Transportation Page

This vocabulary allows Dan to communicate when he is on public transport.

train 	bus 	tram 	Didsbury Village	Go Back 
need a seat 	help with ticket 	next one 	Parrs Wood Road	Clear 
lost ticket 	lost pass 	taxi 		Home 

Appendix A: Creating a New Page using a Template

Note: To create a new page, the “Edit Mode” must be “ON”.

Creating a New Page

1. Choose **Menu > Edit Mode > Pages**. A list of pages opens.
2. Choose the template you want from the list. A menu is displayed.
3. Choose **Duplicate**. A keyboard is displayed.
4. Give the page a descriptive name.
5. Choose **Save**.

Linking a Button to Your Page

1. Choose **Menu > Edit Mode**.
2. Press and hold the button you want to modify. A list of button options opens.
3. Choose **Edit Button**. The Button Properties are displayed.
4. Choose the **Actions** tab.
5. Tap the list arrow to open a list of actions.
6. To remove an existing action that is not appropriate, select the action to open a menu. Then select **Remove**.
7. Choose the linking action you want. For example: **Navigate** or **Visit**. You will be asked to choose the page to link the button to.
8. Select your new page.
9. Choose **Save**.

Appendix B: Beyond the Basics

Using Maps and Visual Scenes:

To create a new map page or visual scene page:

1. Duplicate the “Map Template” page. See “Creating a New Page” and “Linking a Button to Your Page” on page 35.
2. While still in Edit Mode, change the background image by doing the following:
 - Choose **Menu > Pages**.
 - Choose your map or scene page and select **Open**.
 - Choose **Menu > Edit Page**.
 - Choose **Import** to use an image stored on the device or choose **Find** to search for an image stored in the Chat library.
3. Under “Alignment”, select **Center** or select **Fit**. Fit will stretch the image to fill the page. If you stretch the image, the aspect ratio will not change, so it might not totally fill the page.
4. Choose **Save**.

To create transparent buttons for your map or visual scene:

Follow this procedure to add “hotspots” that allow areas in your map or scene to speak when tapped.

1. Choose **Menu > Edit Mode**.
2. Press and hold on the location in the scene where you want to create the transparent button. A list of button options will appear.
3. Choose **Create Button** to display the Button Properties.
4. Type a message in the Message box.
Note: Because you don’t want anything to appear on top of the image, do *not* type a label.
5. Choose the **Style** tab. The button style properties will be displayed.
6. Choose **Transparent**. This will allow the image to show through the button.
7. Press and hold your new transparent button and choose **Change Button Size**. Then adjust the button so that it completely covers the appropriate area in the image.
8. Choose **Save**.
9. Create, resize, and save additional transparent buttons for other areas in your image.

To link a button to the map or visual scene:

1. Go to the page that contains the button you want to link to the new page you just created.
2. Choose **Menu > Edit Mode**.
3. Press and hold the button you want to link.
4. Choose **Edit Button**. The Button Properties will be displayed.
5. Choose the **Actions** tab.
6. Tap or click the list arrow to open a list of actions.
7. Choose the linking action you want.
8. Select your map or visual scene page.
9. Choose **Save**.

Using the Blank Page for Copying

Creating a sentence or paragraph on a communication device can take a lot of time and energy. The feature “Blank Page for Copying” allows the person with aphasia to save the message to retell it at another time and place.

1. Write a message using combinations of pre-programmed phrases and/or typing.
2. Choose **Blank Page for Copying** from the Keyboard & Calendar page.
3. Choose **Copy Text to Button**.
4. Choose a blank button on the page, or a button with a message that you want to write over.

Changing the Grid Size

Grid size is the number of buttons available on a page. If, for example, you want to reduce the number of buttons on a page from 12 to four, first decide which buttons will be used for your client. For example: “photo album”, “self-advocacy”, “people”, and “Pain – scale”. Then move those buttons to the top left corner of the page.

Note: If you reduce the page layout, the buttons that are outside the grid size will be deleted.

Once the page is set up appropriately for your client, modify the page layout.

1. Choose **Menu > Edit Mode > Edit Page**.
2. Tap the **Layout** tab.
3. Choose the appropriate number of rows and columns.
4. Choose **Save** to apply the layout.

Rearranging Buttons

You can use any of these methods to rearrange buttons.

- Drag and drop a button to a different location on a page
- Copy and paste a button to another page
- Make a copy of a button on the same page, and then make minor changes to the copy instead of creating a new button from scratch.

To drag and drop a button:

Touch the button and drag it to the new location. If another button is already in that location, the two buttons will simply exchange places.

To copy and paste a button to another page:

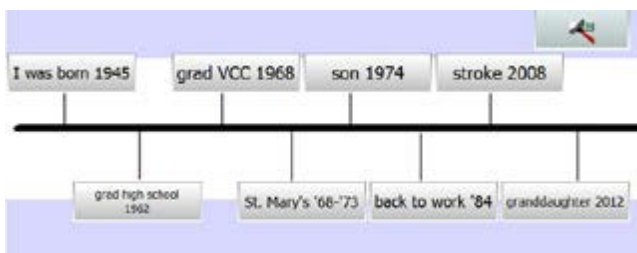
1. Navigate to the button you want (for example, Photo Album), choose **Menu > Edit Mode**, press and hold the button, and choose **Copy Button**.
2. Go to the other page (for example, the home page).

Note: If another button is already in the location you want on the other page, the pasted button will replace that button.

3. Press and hold the location/button you want and choose **Paste Button**.

Modifying the Timeline

1. In the “Communication Journey: Aphasia” vocabulary, choose **Me > My Timeline**.
2. Choose **Menu > Edit Mode**.
3. Press and hold the button to modify.
4. Choose **Edit Button** to display the Button Properties.
5. Tap in the Label or Message box to display the keyboard.
6. Enter text in the box to customize the label and message to meet your client’s needs.
7. Choose **Save** to apply your changes.



Customizing the Timeline Image

You can make existing buttons smaller or larger and add additional messages to the Timeline.

To make an existing button smaller or larger:

1. Choose **Menu > Edit Mode**.
2. Press and hold the button and select **Change Button Size**.
3. Do one of the following:
 - Decrease the horizontal and/or vertical cells.
 - Increase the horizontal and/or vertical cells.

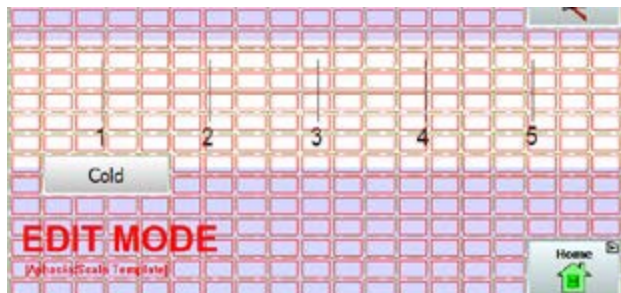
To add more messages to the Timeline:

1. Select the button you want to customize.
2. Choose **Menu > Edit Mode**.
3. Press and hold an empty location and choose **Create Button**.
4. Tap in the Label or Message box to display the keyboard.
5. Enter text in the box.
6. Choose **Save** to apply your changes to the button.

Using Scales

Using a customized scale, the person with aphasia is able to report on a number of questions or concerns. One of the most common scales used indicates levels of pain or feelings. However, if this person is asked specific questions such as "Do you get a lot of visitors?" or "What do you think of this meal?", the scale can provide them with an alternate way to respond.

To set up scales, display the **Scale Template** page. Create new buttons under 1, 3, and 5.



1. Choose **Menu > Edit Mode**.
2. Press and hold the button under 1 and choose **Edit Button**.
3. Change the label and message and choose **Save**.
4. To change the button size, press and hold the button and select **Change Button Size**.
5. Change the number of horizontal and/or vertical cells and choose **Save**.
6. Repeat steps 2 through 5 for the buttons under 3 and 5.

Appendix C: Specialized Features

This appendix explains some features that will enhance the “Communication Journey: Aphasia” vocabulary file for the individual. You might find the following useful to assist your client: rate of speech, pause between words, linking to outside apps, and videos for speech practice.

Changing the Rate of Speech

The ability to change the rate of speech in the Chat software helps to slow down the voice synthesizer so that it is easier to understand for the person using the device as well as for the communication partner.

1. Choose **Menu > Settings > Speech Output > Voice**.
2. Choose **Voice Settings**.
3. Tap on the Rate bar to adjust the rate of speech.

Adding a Pause Between Words

Your device can be used to practice producing words, phrases, and sentences. People with aphasia want to speak! Inserting a pause between words helps to slow the speech synthesizer without distorting the pronunciation. This provides auditory feedback to assist in correcting the statement as the person practices saying each word, *and also provides extra time for motor planning*. It is used by the person with aphasia for **practice**, not for communication, as it tends to sound unnatural during conversation.

1. Choose **Menu > Settings > Speech Output > Voice**.
2. Choose **Pause Between Words**.
3. Adjust the delay time to insert a pause between each word.
4. Choose **OK**.

Linking to an Outside App

This feature is available only in **open-system** NOVA chat and Chat Fusion devices. It is not available in TouchChat.

NOVA chat and Chat Fusion devices have a feature that allows a button to link to an outside Android™ app such as a white board, camera, or photo roll. This allows the app to be opened from within the vocabulary file.

Including specific apps provides individuals with aphasia some added resources to help them communicate. For example, a White Board app may be helpful if the person can write the first word using a finger. Depending on the client, the White Board app may be preferable to the keyboard.

To link a button to an outside app:

1. Choose **Menu > Edit Mode**.
2. Press and hold the button you want to link to the app. A list of button options will open.
3. Choose **Edit Button**. The Button Properties will be displayed.
4. Choose the **Actions** tab. A list of actions previously set up for the button will be displayed below “Add an action”.
5. Tap or click the “Add an action” list arrow to open a list of actions.
6. Choose the action **Open Android Application**. A list of apps will open.
7. Select the app you want. The action will be added to the list of actions for the button.
For example, if you selected **Camera**, the new action would appear as “Open Android Application (Camera)”.
8. Remove any action that was previously set up for the button that is not appropriate.
9. Choose **Save**.

Creating and Inserting Videos

The “Communication Journey: Aphasia” vocabulary file is used to support communication for the individual. However, the person is often working on rehabilitating their verbal skills as well. The clinician can record videos for the person to practice specific sounds, words, or phrases; for example, a mouth speaking a specific target word or phrase. These videos can be inserted into the file for practice at home. It is highly beneficial to have custom videos that come directly from the person’s clinician. This will ensure that the specifics around the person’s communication difficulties are being met.

1. Import the video to the device.
2. Choose **Menu** and **Edit Mode**.
3. Press and hold the button you want to modify.
4. Choose **Edit Button** and choose the **Actions** tab.
5. Tap or click the list arrow to open a list of actions.
6. Choose the action **Play Library Video**.
7. Choose **Save**.

Note: For additional details, refer to “Adding or Modifying a Button Action” in the *NOVA chat User’s Guide* or *Chat Fusion User’s Guide*.

Appendix D: Resources

These resources are suggestions. This is not an exhaustive list.

M-CSTA Assessment by Garrett and Lasker:

<http://cehs.unl.edu/documents/secd/aac/assessment/aphasiachecklist.pdf>

Saltillo Client Information Form for Individuals with Aphasia:

<https://saltillo.com/products/options/vocabulary-options#communication-journey-aphasia>

AAC Resources for Individuals with Aphasia:

www.cayabc.org/resources/

Appendix E: References

Garrett, K. L., & Beukelman, D. R. (1998). Adults with severe aphasia. In D. R. Beukelman & P. Mirenda (Eds.), *Augmentative and alternative communication: Management of severe communication disorders in children and adults* (2nd ed., pp. 465–499). Baltimore, MD: Paul H. Brookes.

Garrett, K. L., & Lasker, J. P. (2007). AAC and severe aphasia: Enhancing communication across the continuum of recovery. *Perspectives on Neurophysiology and Neurogenic Speech and Language Disorders*, 17, 6–15.

Garrett, K., & Huth, C. (2002). The impact of graphic contextual information and instruction on the conversational behaviors of a person with severe aphasia. *Aphasiology*, 16(4/5/6), 523–536.

Light, J. C., Beukelman, D. R., Reichle, J. (2003). *Communicative Competence for Individuals who use AAC*. Baltimore, MD: Paul H. Brookes.

LPAA Project Group (2000). Life participation approach to aphasia: A statement of values for the future. *ASHA Leader*, 5(3). 4-6.

<www.asha.org/public/speech/disorders/LPAA.htm> Reprinted in R. Chapey (2001) (Ed.). *Language intervention strategies in aphasia and related neurogenic communication disorders* (4th ed.). Baltimore: Lippincott, Williams & Wilkins.