Facility Name:  
Contact Name:   Position:  
Address  
Telephone No:  Fax No:  
Email:   Website:  

Service Centre Level: check which level applies to your facility (refer to p.3)

- **Level 1**: Minimum one Speech Language Pathologist Authorizer, Approved Product List (APL)  
  A400-A402 devices, no recycle
- **Level 2**: Minimum two Speech Language Pathologist Authorizers, one Occupational Therapy Authorizer,  
  APL devices A400, A402, A406 and A410 mounting, peer review process and option to recycle
- **Level 3**: Minimum two Speech Language Pathologist Authorizers, one Occupational Therapy Authorizer,  
  support staff, APL A400, A402, A406 devices and A410, A420 mounting and access, peer review process  
  and commitment to recycle

**Describe your AAC service mandate:**

_________________________________________________________________________________________

_________________________________________________________________________________________

**Describe your service delivery model:**

Include:

- Direct service or consultation model
- Services include: assessment/intervention/educational support; service levels: weekly/monthly/block
- How long has your agency been providing AAC services?
- Who can refer to your agency?
- Who is eligible for your services? (age levels, diagnostic categories, etc.)

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________
Recycle Centre:

Do you intend to be an SGCD Recycle Centre? (Refer to Policy AS-11 for details)

☐ Yes  ☐ No

Equipment Support

<table>
<thead>
<tr>
<th>SGCDs available in your facility for use during client assessments</th>
<th>Communication software and materials available to support client assessment/intervention</th>
</tr>
</thead>
<tbody>
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</table>

Other members of your AAC team, such as Rehabilitation Technician, Program Assistant:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
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Instructions:

- Include with this **Service Centre Application** a completed **SGCD Clinician Credentials** form for each potential Authorizer.
- Subsequent submission of Authorizer updates (changes in staffing) requires only the **SGCD Clinical Credentials** form. Resubmission of the **SGCD Service Centre Application** is not required.
- Mail or Email completed application forms to: Alberta Aids to Daily Living, Telus House, 13th Floor, 10020 100 Street NW, Edmonton, AB T5J 0N3; Email: sgcd.aadl@gov.ab.ca; Fax: 780-422-0968.
# Summary of Service Centre Level Requirements

<table>
<thead>
<tr>
<th></th>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
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<tbody>
<tr>
<td><strong>Mandate</strong></td>
<td>Stated commitment to assessment/ intervention for clients with simple AAC needs; designated clinical allotment for AAC</td>
<td>Stated commitment to assessment/ intervention for clients with AAC needs in specific age and categories/diagnostic categories; able to provide standard AAC systems within product range; able to support straightforward mounting solutions; dedicated clinical allotment for AAC</td>
<td>Stated commitment to assessment/intervention for clients of varying ages and diagnostic categories with complex AAC needs; able to support complex access needs, custom AAC systems and custom mounting solutions; dedicated clinical allotment for AAC</td>
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<tr>
<td><strong>Staffing</strong></td>
<td>SLP – one AADL recognized Authorizer</td>
<td>SLP – two or more AADL recognized Authorizers</td>
<td>SLP – two or more AADL recognized Authorizers</td>
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<td></td>
<td>OT – one or more AADL recognized Authorizer; work within a team environment</td>
<td>OT - one or more AADL recognized Authorizer, Program Assistant, Rehab Technician; work within a team environment</td>
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<tr>
<td><strong>Resources</strong></td>
<td>Range of A400 and A402 devices from approved product list (APL) available for trials</td>
<td>Range of A400, A402 and A406 devices and Category A410 mounting devices from approved product list (APL) available for assessment purposes</td>
<td>Range of A400, A402 and A406 devices and Category A410 and A420 mounting and access options from approved product list (APL) available for assessment purposes</td>
</tr>
<tr>
<td><strong>Support to Staff</strong></td>
<td>Support for ongoing educational opportunities to maintain Authorizer status</td>
<td>Support for ongoing educational opportunities to maintain Authorizer status</td>
<td>Support for ongoing educational opportunities to maintain Authorizer status</td>
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<tr>
<td><strong>Commitment to CAAP</strong></td>
<td>N/A</td>
<td>Designated time allocated to participate in Assessment Review Process and flexibility to attend review with other agencies if applicable</td>
<td>Designated time allocated to participate in Assessment Review Process and flexibility to attend review with other agencies if applicable</td>
</tr>
<tr>
<td><strong>Recycle</strong></td>
<td>No expectation to recycle devices</td>
<td>Option to recycle if resources available</td>
<td>Capacity to process, store and recycle devices</td>
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