

Speech Generating Communication Devices Derta Government Service Centre Application

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Alberta Aids to Daily Living (AADL)

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Facility Name:	
Contact Name:	Position:
Address	
Telephone No:	Fax No:
Email:	Website:
Service Centre Level: che	ck which level applies to your facility (refer to p.3)
A400-A402 devices Level 2: Minimum APL devices A400, Level 3: Minimum	n two Speech Language Pathologist Authorizers, one Occupational Therapy Authorizer A402, A406 and A410 mounting, peer review process and option to recycle n two Speech Language Pathologist Authorizers, one Occupational Therapy Authorizer A400, A402, A406 devices and A410, A420 mounting and access, peer review process
Describe your AAC service	e mandate:
Describe your service del	
How long has your ag	essment/intervention/educational support; service levels: weekly/monthly/block gency been providing AAC services?
Who can refer to youWho is eligible for you	r agency? ur 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 SGCDs available in your facility for use during client	Communication software and materials available				
assessments	to support client assessment/intervention				
Other members of your AAC team, such as Rehabilitation Technician, Program Assistant:					
Name Title					

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: aadl.sgcd@gov.ab.ca; Fax: 780-422-0968.

Summary of Service Centre Level Requirements

	Level 1	Level 2	Level 3
Mandate	Stated commitment to assessment/ intervention for clients with simple AAC needs; designated clinical allotment for AAC	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	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
Staffing	SLP – one AADL recognized Authorizer	SLP – two or more AADL recognized Authorizers OT – one or more AADL recognized Authorizer; work within a team environment	SLP – two or more AADL recognized Authorizers OT - one or more AADL recognized Authorizer, Program Assistant, Rehab Technician; work within a team environment
Resources	Range of A400 and A402 devices from approved product list (APL) available for trials	Range of A400, A402 and A406 devices and Category A410 mounting devices from approved product list (APL) available for assessment purposes	Range of A400, A402 and A406 devices and CategoryA410 and A420 mounting and access options from approved product list (APL) available for assessment purposes
Support to Staff	Support for ongoing educational opportunities to maintain Authorizer status	Support for ongoing educational opportunities to maintain Authorizer status	Support for ongoing educational opportunities to maintain Authorizer status
Commitment to CAAP Peer Review Process	N/A	Designated time allocated to participate in Assessment Review Process and flexibility to attend review with other agencies if applicable	Designated time allocated to participate in Assessment Review Process and flexibility to attend review with other agencies if applicable
Recycle	No expectation to recycle devices	Option to recycle if resources available	Capacity to process, store and recycle devices