

UNIQUE ASSISTIVE TECHNOLOGY SOLUTIONS

Unique AT Solutions Submission Form

NAME OF THE AT SOLUTION YOU DEVELOPED:

Examples: Adapted Device for Tagging Clothing

Medication or Task Cue

CATEGORY:

You may choose more than one category if applicable

<input type="checkbox"/>	SEATING AND POSITIONING	<input checked="" type="checkbox"/>	COMMUNICATION	<input type="checkbox"/>	MOUNTING DEVICES
<input checked="" type="checkbox"/>	AIDS TO DAILY LIVING	<input type="checkbox"/>	MOBILITY	<input type="checkbox"/>	LEISURE
<input checked="" type="checkbox"/>	ELECTRONIC AIDS TO DAILY LIVING	<input checked="" type="checkbox"/>	EMPLOYMENT		
<input type="checkbox"/>	ENVIRONMENTAL MODIFICATION	<input type="checkbox"/>	SENSORY (HEARING, VISION, TACTILE, ETC.)		
<input type="checkbox"/>	OTHER				

BRIEF DESCRIPTION OF AT CHALLENGE:

What does the individual want to do that they can't do?

Individual needed verbal cues to take his medicine at work. Also needed assistance to know when it was his break time.

DESCRIBE AT SOLUTION(S):

What does it do? How was it made? How well did it work?

After looking at several alternatives, decided to try the Voice Cue. This device enabled us to record verbal messages (up to 5) and set the device to play the verbal messages at pre-set times (can set to play the same message 2 times daily).

This device is commercially available. Not fabricated. May be a solution that some are unaware of.

Worked very well for this individual. Decreased his need for support staff at work.

You do need to be aware that it runs on batteries and so these must be monitored and replaced as needed. Takes good fine-motor skills to hit the button that will replay the message if you need to.

LIST MATERIALS NEEDED, APPROX. COST, SOURCES IF KNOWN:

QNTY	ITEM	SOURCE	COST
	Voice Cue	www.enablemart.com	\$39 + p/h

E-mail this submission to Julie Mehrl, MOTR/L at Julie.Mehrl@state.nm.us
For further information call Julie at (505) 841-5341

"Unique Assistive Technology Solutions" Web Resources is a project of the New Mexico Developmental Disabilities Supports Division, Clinical Services Bureau. The purpose is to encourage individuals, teams and professionals to share AT Solutions used by individuals with Developmental Disabilities in order to provide ideas and resources for others. Do not publish or disseminate in public forum without permission. By submitting this form you give DDS permission to publish this information on the internet or to use portions of "Unique AT Solutions" submissions for training purposes.

PHOTO OR DIAGRAM:

We would really like a photo of your solution, please attach photo or drawing if available to the e-mail when submitting this form using JPEG, GIF or BMP formats. Respect the rights of individuals; do not submit recognizable faces in pictures, names, or specific personal information in descriptions.



DATE:

OPTIONAL INFORMATION:

SUBMITTED BY: Anonymous

CONTACT INFO:

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