PARTNER ASSISTED SCANNING
PARTNER INTERACTION STYLE

(1) Use intonation, stress, and vocal intensity to insure carrier phrases and cue words stand out.
To employ this strategy effectively, the partner must learn to take on the speaking role for both partners in the interaction. The partner must effectively use intonation, stress, and vocal intensity to insure that the carrier phrases and cue words stand out. Typical partner assisted scanning users are accustomed to being passive listeners, not active participants. Their attention must be focused on the cue words themselves and they must be presented in a clear, precise manner to alert the users and prepare them for a response. When done appropriately, the user comes “alive”. The animation (by both members of the dyad) is an essential ingredient to the success of the interaction.

(2) Interact with the user about what he/she thinks or feels, not just what he/she wants or needs.

(3) Use scripts to insure the user has a variety of forms/functions to use in routinized interactive activities.
Partner assisted scanning system users are “dependent” on their partner for providing them an opportunity to communicate both quantitatively and qualitatively. Because it is so difficult for partners to learn how to use these strategies we often provide a script for the partner to follow in routinized activities. A sample script is presented on the next page. It is in the early stages of training that the script is most effective for the partner and the user. Eventually, the partners will develop the skill and confidence to interact spontaneously in novel situations and provide the user opportunities for conversation. Experienced users will be more responsive and not require the repetition provided in scripted interactions.

(4) Increase the quantity and quality of reciprocal interaction.
   (a) Interaction should be sequential and provide at least 3-4 (uninterrupted) turn exchanges between partner and user.

   (b) Multiple opportunities for partner assisted choices should be provided throughout the day across partners and contexts.

   (c) Select topics which are socially motivating to the user.
Partner-Assisted Scanning

Partner assisted scanning is a strategy to allow an individual with physical and/or visual disabilities to communicate more actively. Being able to adjust presentation to the individual’s needs at that moment is the advantage of having a real person provide the scanning.

Often families will use yes/no questions as the primary means of communicating with their disabled family member. Answering yes/no questions is a very passive way to interact and limits participation in the communication event. Partner assisted scanning provides a much more active and involved participation in communication. The disabled individual listens and looks for the choice he/she wants to make and signals his/her choice by making a discrete motor behavior immediately after the partner says that choice. It might be hitting a speech output switch that says “That’s the one”, a smile, an eyebrow lift, a head nod, or a vocalization. The individual should not respond yes or no to each choice, but only affirm the one choice he wishes to say.

The formula for presentation is:
1. Question or Statement
2. Quick presentation of choices to be offered (so she knows what’s going to be offered
3. Timed, metered presentation of choices (the number of seconds of pause between each choice depends on the individual’s response time)
4. Watch for response during or immediately following a choice
5. Respond appropriately to the individual as though she said the choice

Partner assisted scanning looks (sounds) like this:

Partner: Good morning, Srinidi. How are you?  
(Srinidi cannot answer verbally, so the partner must provide possible answers for her, visually and verbally)

Partner: Fine, OK, Not so good (presented quickly and pointing to various icons so that she knows what her options are)  
(Choices are then presented with a metered pace with pauses in between to allow the individual to respond with a discrete motor behavior.  
Fine? (pause 3 to 4 seconds)  
OK? (pause 3 to 4 seconds)  
Not so good? (pause 4 seconds)

Srinidi: Lifts her eyebrows after she hears “Not so good”

Partner: “Oh no! What’s wrong?”  
You’re sick, you’re in a bad mood, something else is wrong  
Sick? (pause 3 to 4 seconds)  
Bad mood? (pause 3 to 4 seconds)  
Something else? (pause 3 to 4 seconds)
Srinidi:  Nods her head after she hears “Sick?”

Partner:  Nods her head and provides facial expression to indicate to Srinidi that she saw her head nod, and continues to provide all three of the choices before verbally responding to his choice. “I’m so sorry you’re sick.”