

Supplemental Material S3. Survey responses on the impact of telepractice.

SLPs comments on the impact of telepractice on their clients.
Comments
Many clients I serve have stated that they would not have been able to get to the clinic or had the energy for services once they got to the clinic. Since they require specialized services, many have told me they would have been left without a way to communicate if not for telehealth.
One client in particular faced severe behaviors upon entering the clinic and would not tolerate more than 2-3 minutes of intervention p/t meltdowns. Upon commencing telehealth within his home, this client now actively participates regularly in sessions up to 45 minutes x2 sessions/wk.
For those who can use successfully it has improved the quality of their lives by allowing better caregiver participation in therapy, caregivers take a more active part in AAC implementation and are able to ask questions, troubleshoot in the moment with AAC tools when they are in their home. Telehealth allows them to reduce fatigue and physical pain as they don't have to travel, be repositioned, etc.
Servicing clients in the home environment, improved independence of caregivers who become better than most SLPs at implementation. Client more comfortable in familiar surroundings. Sessions feel less rushed and more productive as transition time is not needed.

Telehealth has allowed our clinic to be more flexible and sensitive to the medical complexities of our adult patients, the barriers they face to transportation, and making sure that they are able to communicate comfortably in the environment where they spend the majority of their time (i.e., at home). I often coordinate with the AAC vendors to have a vendor representative go into the home while I join via telehealth, which enables real-time collaboration and 100% success with getting the patient set up to communicate in their least restrictive environment. The majority of patients I work with have complex medical, seating, and positioning needs in addition to communication disorders, which can turn a simple trip to clinic into a massive ordeal in which they need to bring along suction, oxygen, tube feeds, specialized seating systems, adapted vans, and skilled caregivers -- just to get their communication system set up or fixed. Aside from distance, the other major reason I switch to telehealth for a patient is because they cannot tolerate spending very much time in their wheelchair, which means they are fatigued, ill, and in pain by the time they arrive at clinic. Patients who are bed-bound, more than any other population, require telehealth services to ensure that they have adequate support for their communication systems. As an SLP who works predominantly with palliative and terminal populations (e.g., ALS, brain cancer), I strongly feel that telehealth services are necessary to provide adequate access to the communication systems people need in order to direct their care, participate in medical decision-making, and make their wishes known at the end of their life.

AAC use across settings has increased because caregivers are actively involved

For some students, attendance has been greatly improved by telehealth. Telehealth has also greatly improved our ability to collaborate with caregivers in the home.
This has allowed my adult clients the ability to learn their device in their main environment and continue to receive services as distance would otherwise be a barrier to consistent treatment and device proficiency.
I can be just as effective as in person demonstrated by empowering caregivers, modeling their language via screen sharing, and gains observed in their speech and language.
It has made a positive impact with 80% of my families.
It has provided easier access for parents to access training by decreasing commute times, time away from work, etc.
More communication partners are supported through tele AAC, which is essential for effective use of AAC. More ready access to triage programming problems, broken devices, etc. Better generalization across partners and environments. Being better able to support families for school-aged children.
Improved patient attendance; programming; increase usage of devices
Providing AAC via telehealth has increased the number of patients and the amount of treatment our clinic is able to treat
It has enabled those who are medically fragile to receive services and for us to provide training for caregivers. There are also fewer cancellations due to therapist or client sickness as we can provide services without endangering the health of the client or therapist.

Clients have responded favorably as the telehealth model forces AAC participation to interact. Patients cannot rely on gestural or contextual communication.
Allowed than to access services more regularly and allowed multiple family members to join that otherwise would have not. Allowed children who did not feel well to join. Allowed immune-compromised children access to services.
One of the biggest positive impacts is that it has allowed for caregiver training to take place for an 18-month-old who lives in remote VT and has to travel 1.5 hours to get to our clinic. The ability to connect via telehealth has been so impactful and provided support to a family who is in great need.
It's allowed consistent attendance and increased the skills of the caregivers.
It has given people living in rural areas options that they otherwise might not have.
We have been able to see clients in their home environment or in school environments, we have been able to complete treatment sessions from home during inclement weather or illness when sessions would have otherwise been canceled. We have been able to see clients on a last-minute basis when transportation has been an issue. We have been able to have an option for therapists to work from home and continue to provide treatment in the event that they are ill or unable to come into the office.
For some, it's a matter of getting proper language/AAC intervention or not getting it at all. It also has been a matter of getting an AAC device funded or not obtaining a funded AAC device. It has been a quality-of-life thing in terms of improving access to language/AAC intervention as well as permitting the individual the ability to participate

in other meaningful activities in their community. It is an affordability matter for some families. It also is a safer option for some families.
It provides more flexibility, options, and access to more families.
These clients would not have received AAC devices or services. The majority are referred by a treating therapist specifically because AT is so specialized.
I work with a population with a specific rare diagnosis. Many cannot find providers qualified in AAC and adding the diagnosis into it makes it even more difficult. Some are in remote locations as well
Fewer seizures, less fatigue, less anxiety, greater generalization, more family participation, use SGD in the natural environment - most families prefer telehealth to therapy in a little clinic room.
Regularly attended sessions; client is very immunosuppressed, could not come if required in person; improved communication; improved access to services,
I have some clients out of state, who live in an area where there are no AAC providers at a reasonable distance - they would otherwise be without services. Others have significant transportation problems (medical transport services, inaccessible personal vehicle, medical conditions e.g. seizures, vomiting). Others have large teams that cannot reasonably all attend together, and telehealth makes this possible. I spend a significant amount of time driving to people's homes as well, which reduces the time I have to support more clients - we alternate use of telehealth when weather or other circumstances would otherwise cause us to cancel.
Telehealth services offer an effective and efficient way to serve clients.

It has provided not only an accessible modality to provide client centered care and family training, but additionally the opportunity to provide these services in their natural environment. This provides valuable insight into their communication needs and unmet needs as well as how they will use their AAC.

Telehealth has allowed individuals to continue with care that they likely would have stopped if they need to try and come into the clinic. This has allowed individuals with Parkinson's to maintain progress.

Some clients are able to participate in sessions more reliably over telehealth because they are not fatigued after a long drive. Seeing clients' home environment allows me to provide more specific recommendations re: positioning and setting up AAC devices in the clients' home. Caregivers have also expressed that telehealth services are beneficial in that the caregivers learn to program AAC devices more quickly over telehealth (when I can use screen-sharing to model to the caregiver).

SLPs Comments on the impact of telepractice on their clinical practice
Comments
All of my patients who need AAC now can receive the services required to enable them to communicate. In the past it was only those lucky enough to have the stamina and resources to make the trip. Most were unable to make the multiple trips required for speech generating device evaluation, customization, and training.
It is beneficial for those clients who live in rural areas
It has dramatically changed my client's outlook on therapy, as he will now complete all targeted tasks and is demonstrating skills previously unseen in the clinic. Furthermore, it decreases one family's drive time by 45 minutes each way x2 sessions/so with dog and additional support personnel to assist within the TX session. Said supports are no longer needed, as his mom is able to be with him during his sessions and support him in his everyday environment.
Being able to provide AAC telehealth services has allowed me to serve adults (and pediatric) patients in rural areas across the state who otherwise wouldn't have been able to receive services either because of the extensive distance from our clinic/myself and the cost and time taken to get here. I've been able to address real issues because I'm providing service within the home and caregivers/patients can more accurately identify issues that are happening. Something they often forget when in clinic. I also can more easily assess communication partner behaviors and assist communication partners in improving how to use tools.
More clients were able to be served by a qualified professional due to being a further distance away.

Telehealth has allowed our clinic to be more flexible and sensitive to the medical complexities of our adult patients, the barriers they face to transportation, and making sure that they are able to communicate comfortably in the environment where they spend the majority of their time (i.e., at home). I often coordinate with the AAC vendors to have a vendor representative go into the home while I join via telehealth, which enables real-time collaboration and 100% success with getting the patient set up to communicate in their least restrictive environment. The majority of patients I work with have complex medical, seating, and positioning needs in addition to communication disorders, which can turn a simple trip to clinic into a massive ordeal in which they need to bring along suction, oxygen, tube feeds, specialized seating systems, adapted vans, and skilled caregivers -- just to get their communication system set up or fixed. Aside from distance, the other major reason I switch to telehealth for a patient is because they cannot tolerate spending very much time in their wheelchair, which means they are fatigued, ill, and in pain by the time they arrive at clinic. Patients who are bed-bound, more than any other population, require telehealth services to ensure that they have adequate support for their communication systems. As an SLP who works predominantly with palliative and terminal populations (e.g., ALS, brain cancer), I strongly feel that telehealth services are necessary to provide adequate access to the communication systems people need in order to direct their care, participate in medical decision-making, and make their wishes known at the end of their life.

It has enabled access to AAC services for clients who would otherwise not have access to highly trained SLPs

It had allowed us to continue to treat clients and know that they are utilizing their device consistently.
I am a specialist in AAC. Using Telehealth I am able to help children and adults who otherwise would not be able to receive services. Instead of communicating on their devices now they would still be receiving services from speech therapist who are not able to achieve the same level of communication competency. I see very low incidence individuals and Georgia is very spread out and rural. Many times, there just isn't anyone locally who is competent in helping these individuals
Being able to provide AAC in tele practice has provided great results in generalization of skills as families are able to access more training and implement strategies in the home.
We have been able to extend our reach, work with more communication partners, help a range of communication partners feel comfortable supporting AAC programming and AAC implementation.
Increased ability to train; communicate with AAC consultants
While we generally conduct all evaluations in person and prefer in-person treatment, telehealth has become a valuable option for treatment for patients who cannot easily travel to our clinic.
We are able to help people who cannot travel or for whom traveling would be very burdensome or time-consuming
Providing the AAC via telehealth has allowed our clinic another avenue in which to support clients- so this is a positive outcome.
Allowed access to more families and decreased cancellation rates.

<p>It has allowed for flexibility. Especially when it comes to the unpredictable weather of Vermont, allowing to serve clients and families remotely has lessened the burden of travel and allowed more clients to be served who are already vulnerable given the often many medical complexities and opportunity barriers they already face at baseline. It also provides autonomy for the clients and families to choose how they want to receive support and therapy.</p>
<p>Allowed us to provide appropriate consistent service and see good progress</p>
<p>We have been able to more consistently provide service to families who would otherwise need to cancel for illness/weather/etc.</p>
<p>We are able to treat more families and have less cancellations, as well as provide counseling and education to families and other staff who we normally would not be able to talk to.</p>
<p>This has allowed us to reach more patients and their families in functional and meaningful ways. It is a big contributor to strong patient/family satisfaction. Patients make much stronger gains on their goals when they consistently attend therapy, including telehealth.</p>
<p>It provided an opportunity to see more clients and maintain continuity of care.</p>
<p>I was skeptical at first, but it has actually amazed me how well it works. For one thing, I have a captive audience with caregivers. They must participate. The other issue is seeing the competencies I would not have expected. I will never forget passing mouse control in Zoom to an elderly aphasic, and he was 100% competent using the mouse.</p>

Able to serve more patients and provide training to more teams to best serve patients
We're able to provide services in rural/remote areas of the state that were underserved. Clinicians have better quality of life, cancel less often due to weather or illness.
It's a wonderful option! Helps us reach more people who would not be able to be served otherwise.
My practice is small, but the impact is large. I may not always recommend telehealth but having the option to provide caregiver/team support or be able to alternate sessions (e.g. to relieve transportation/medical difficulties) allows attending therapy consistently. This is very important for a population who experiences many barriers to accessing services. Also, it has had a huge impact on clients who do not live in an area with available AAC services and would have to travel extreme distances/only attend infrequently.
It has provided a way to serve our community and state in an impactful way. Also, it has provided a way to train graduate students on not just AAC services, but also telehealth AAC service delivery and patient centered care.
The ability to train individuals and their families via Telehealth has assisted with better carryover of skills and maintenance of the AAC systems in the home.
Telehealth allows us to serve a wider range of clients, including clients who live further away from our clinic and clients who are more medically complex. Telehealth also has enabled greater collaboration with outside stakeholders, such as school SLPs, as we can more easily invite the other stakeholders to join

telehealth sessions. It also enables us to work more efficiently, as it reduces the time needed to transition between patients.

Client Comments on the impact of telepractice on them
Comments
We live about 55 miles from speech clinics, so telehealth reduced our stress significantly.
Assistance & opportunities that are not available to us locally. Travel is difficult because of health issues & anxiety issues.
Gives us options for adult therapy not available elsewhere
It has not affected the family
Makes life easier
This has been very helpful setting up the device and making sure that she is using it fully.
My speech is failing very slowly, but almost unbearable. Only a few close friends can understand my speech. I have an incurable, progressive neurological disorder. I depend upon a wheelchair for mobility. Someone has to assist me in eating and driving the chair. Traveling to a clinic would be virtually impossible. Telehealth seems to be the only way to learn more & exciting ways to communicate. A thing that most people take for granted. Thank you very much, Peter Anthony (Tony) Carmack
Because of its convenience, my speech improved a great deal. I am able to self-advocate with my device.
This service is imperative to stay up to date regarding using the device.
Difficulty in getting transportation to and from. Plus, it is too exhausting for my husband.
Lingraphica helped us secure the Samsung speech generating device and helped set it up for use. It has been very helpful with my 25-year-old autistic son with very limited speech. Basically, only a few words when he would see pictures. His psychiatrist has told us that she could not really diagnose my son because he is not capable of interactive dialogue. The Samsung speech device has allowed us to program all kinds of pictures with short phrases that my son has been able to improve his speech through repetitive short phrases and speech. We have set-up cards about his daily living, hygiene, meals, and activities which have been very helpful. We believe that the speech generating device is more helpful at this stage of his life than the speech therapy did from age 4 to 18. We use the device every week.
A very big part of our lives
Our sons' ability to communicate has increased dramatically.
My mom who passed in November of 2023, had to be at home on full time oxygen. She had suffered a stroke which led to her aphasia, but in addition, she had damage to her diaphragmatic nerves and as such was breathing off of top 1/4 of lungs. This kept us in quite an isolated state, so attending therapy outside the house was impossible, telemedicine was our only option.
This is a very important method for a family member regarding communicating with her needs and wants. As well as communicating with family members and friends.

The convenience of not having to go to an office if no transportation or having to deal with traffic
One on one therapy via online was very helpful to my son it made him want to work harder with his therapy
It has helped me not to feel inferior and gave me confidence to strive to keep on trying to communicate with others
Improvement and continuing therapy with one therapist has proven valuable and effective
ALS diagnosis makes travel difficult, especially when services offered are across state. The eye-gaze device is critical to those who lose mobility and speech!
Our daughter is a quadriplegic with Locked in Syndrome, and we are senior citizens so traveling to SF is hard on us and our daughter. Our van is old, and we try to avoid long trips. Thanks
It helped me receive the device/equipment that I need. It opened the door to alternative service that I may need.
Teletherapy makes care accessible. Removing this option will be so costly for my family and many others. People won't be able to get the care they need.
I feel that telehealth has actually made me a better model and communicator of the device with my daughter. The therapist could tell me in my ear what to do without my daughter knowing and communication through the device became more natural.
Option for AAC telehealth services is critical to our plan for consistency and repetition needed for required training & learning needs, in addition to accessing skilled AAC specialists who may be well outside easy or acceptable travel distances for in-person services.
Enabled our disabled daughter to maintain services due to her complex medical conditions. She actually made significant progress with services via Telehealth. Greater progress than what was made in an in-person clinical setting.
continued therapy despite travel, illness, and other challenges
We were able to receive telehealth services for someone that specializes in AAC because there are few SLPs who have a large amount of experience and who specialize in AAC near us, even in a large city. Living over 3 hours away, telehealth allowed us to benefit from her knowledge and insights from afar. The process was very similar via telehealth compared to in person. Our disabled daughter also has a 1-year-old sister, so we choose in home or telehealth therapy to help make things less distracting in a clinic setting trying to entertain her sister there. We feel more comfortable with illnesses being at home too.
When someone is sick and that person is the only one who can get us to the appointment, having telehealth as an option helps us keep going with our goals.
My son's literacy and communication has improved greatly due to Telehealth AAC therapy. We cannot drive or get to the office, so this has been crucial in his development of language and communication.

My son never received quality AAC speech therapy when he was in school. His many school therapists had little knowledge of AAC. We found a therapist is very far from our home and he has remote therapy. I sit with him, and we both have made so much progress. Please continue to allow teletherapy.