



Using a QuickTalker Freestyle in Schools

We are excited to share with your school team that your student has received a QuickTalker Freestyle Speech Device through their medical insurance. The QuickTalker Freestyle is a dedicated speech-generating device that is used for communication and provides many benefits in the school system. The Department of Education (DoE) has clear guidelines on the use of Assistive Technology (AT) in schools, so we have included a hand out that summarizes AT within the IDEA framework.



Continuous Access

The QuickTalker Freestyle is a speech device that belongs to the student and their family, allowing them to use to their voice anywhere—at home, in their community, or at school—even during weekends and breaks. The DoE states that AT devices should be used in all settings.



Unlimited 5-Year Warranty

Our 5-year warranty includes unlimited repairs and replacements. The speech app can be changed if the user's needs change. This alleviates pressure on school budgets, as the student will not require a school-provided communication device. Additionally, the school district is not responsible for any repairs during our 5-year warranty.



Focused Usage

The QuickTalker Freestyle is a dedicated communication device that only runs the speech app to minimize distractions. No other apps are present on the device so school services will not be impacted.



Comprehensive Support

Our ableCARE team provides incident-based support for anyone working with the QuickTalker Freestyle, including SLPs, teachers, and paraeducators, ensuring everyone feels confident with the device.

Myths and Facts Surrounding Assistive Technology Devices and Services

The 'Myths and Facts Surrounding Assistive Technology Devices and Services' publication by the Department of Education addresses widespread misunderstandings about assistive technology (AT), which includes speech generating devices (SGDs), within the IDEA framework. By debunking myths about AT and SGDs, we aim to shift perceptions and broaden access for those who can benefit from it. We've selected more than 10 myths from their publication to highlight, believing they will be particularly insightful for you. For reference, see the full article linked below.

Myth: Assistive Technology (AT) should only be considered at some individualized education program (IEP) Team meetings.

FACT: AT, including SGDs, can benefit students with a wide range of disabilities, enhancing their educational experience and functional capabilities. IEP teams must consider whether each child needs AT as a support.

Myth: An AT evaluation must be conducted before providing an AT device and service to a child with a disability.

FACT: An AT evaluation can be included as an AT service for a child but is not required under the IDEA.

Myth: Only staff who specialize in AT can deploy AT devices or provide AT services.

FACT: The IEP Team should include qualified educators who can support children with disabilities. The selection and provision of AT, including SGDs, depends on each child's needs, and can be delivered by related service providers or teachers.

Myth: AT does not need to be considered as part of the secondary transition process.

FACT: AT should be included in a child's transition plan for post-secondary life.

Myth: AT devices and services are only needed for the academic classroom and only for use at school.

FACT: An AT device or SGD should be used in all settings to enhance the child's proficiency and guarantee consistent daily support.

Myth: There are limited funding sources for AT devices and services.

FACT: There are multiple funding sources for AT devices and services.

Myth: Using AT devices and services will not improve child outcomes.

FACT: Research shows AT devices and services, like SGDs, enhance outcomes for children with disabilities across environments, aiding in tasks like reading, writing, and communication.

You can find their full resource at:

<https://sites.ed.gov/idea/files/Myths-and-Facts-Surrounding-Assistive-Technology-Devices-01-22-2024.pdf>

Myth: The use of AT devices and SGDs lowers a child's motivation because it does the work for them.

FACT: Research indicates that AT not only helps fulfill FAPE requirements for children with disabilities but also boosts their motivation and engagement.

Myth: Children can learn to use an AT device, which includes SGDs, on their own; educators have no obligation to provide training to a child or to their family.

FACT: The LEA must ensure that children with disabilities, their parents, and educators understand the AT device's operation by providing AT services.

Myth: If a child doesn't want to use AT, a teacher doesn't need to follow up to model and encourage the child to use the AT.

FACT: If a child resists using an AT device or SGD device, the IEP Team must identify and address the cause, whether it's due to stigma, dislike, or misunderstanding. Solutions may include training, demonstrating the device's use, and connecting it to everyday activities.

Myth: Infants, toddlers, and their families do not benefit from AT devices and services.

FACT: AT devices and services often help infants, toddlers with disabilities, and their families meet developmental needs and support the child's growth.

Myth: AT does not need to be considered when a toddler transitions from early intervention services to special education services at the preschool level.

FACT: AT consideration is essential during a toddler's transition from early intervention to preschool, even if they haven't received AT through an IFSP.

Myth: All AT devices must be approved by the technology (IT) department.

FACT: The IEP Team determines necessary AT devices and services.

You can find their full resource at:

<https://sites.ed.gov/idea/files/Myths-and-Facts-Surrounding-Assistive-Technology-Devices-01-22-2024.pdf>



Dedicated Insurance-Funded Device vs. Personal Device

	Insurance-Funded Dedicated Device (QuickTalker Freestyle)	Personal or School- Provided Device (Tablet, iPad, etc.)
Continuous Access	Belongs to the individual—not the school—so it can be used anytime, anywhere, including weekends and breaks.	Personal devices may not be allowed in school settings, and school-provided devices are often not sent home—making consistent access across environments difficult.
Unlimited 5-Year Warranty	Includes free repairs, replacements, and even free speech app changes—at no cost—for 5 years.	Warranties vary widely and may not cover repairs, replacements, or speech app updates. Responsibility often falls on the family or school.
Comprehensive Support	Backed by the ableCARE team with personalized, live support and fast service.	Support is limited to app developers or general tech support—not personalized for AAC use.
Seamless Transition	The device moves with the individual if they change schools, providers, or settings.	Devices may be tied to a specific school or program and often do not follow the individual when transitioning.
Focused Usage	Runs only the speech app to support communication and reduce distractions.	Multipurpose use can lead to distractions from games, videos, and unrelated apps.
Typically No Cost	Covered by insurance. Families are informed up front about any out-of-pocket expenses.	Families or schools are responsible for purchasing the device, accessories, and app licenses.