

# What's New in CDP

What's the newest, latest and greatest in the world of CDP



# Communication Devices Program

"IF ALL MY POSSESSIONS WERE  
TAKEN FROM ME, WITH ONE  
EXCEPTION, I WOULD CHOOSE  
TO KEEP THE POWER OF  
COMMUNICATION — FOR WITH IT,  
I WOULD REGAIN ALL THE REST."

— DANIEL WEBSTER



# Services Offered

## Referrals



Over 440,000 people in Canada have speech and language disabilities, not caused by hearing loss, that affect how they speak and / or understand what others are saying.

<http://www.communication-access.org/>

# Clinician Satisfaction Survey 2017

92.9%

Overall, are satisfied with the services provided by the CDP

# NEW-ish Device Hardware

indi

I-110

EyeMobile Plus



# NEW-ish Software

## Windows OS

The Grid 3

Communicator 5

Snap + Core First

## Apple iOS

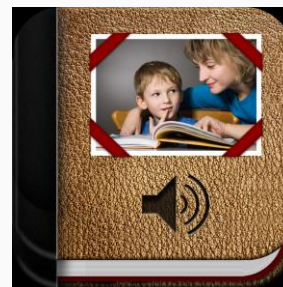
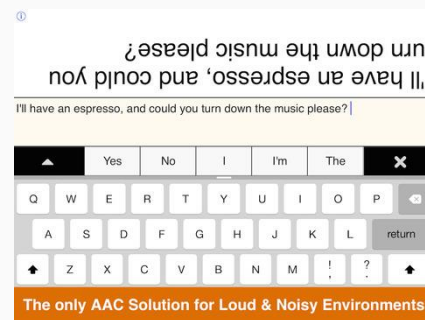
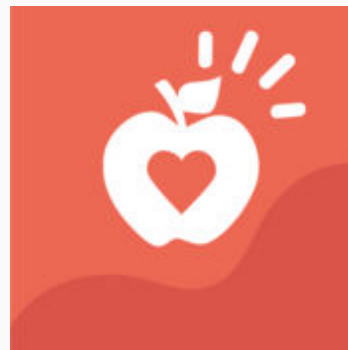
Snap + Core First

Flip Writer

Proloquo 4 Text

Pictello

GoTalk Now



# NEW-ish Alternate Access

SALT tip Stylus

Eye Tracking

Keeble/Keydogo





# iOS Specifics

iOS 12 User Guide: [Ablenet](#)

OT TOP Products:

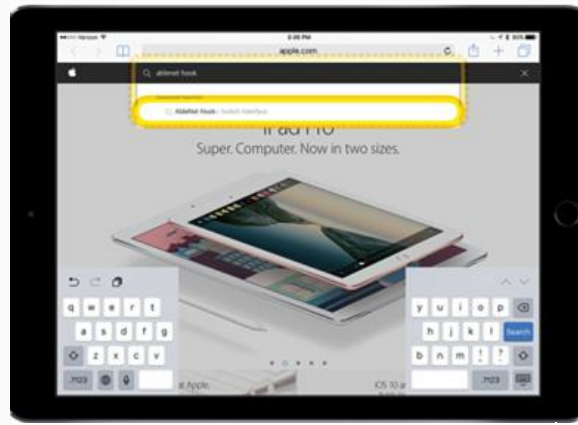
EVA 2 Carry Case

Suction Mounts

Tecla/Blue2

ShapeDad/Faraday

Stylus





# Cases & Mounting Options

Ideas

Daessy

Suction Mounts

Big Grips Slim &  
Bags

Hipster

EVA 2



# CDP gets Social #i♥️CDP



Search for us on facebook at "[Communication Devices Program](#)"



Search for us on twitter at "[CDPStacey](#)"

# Stay Informed!

CDP Quarterly  
Newsletter

## CDP Update

\* SPECIAL EDITION 2018

### In This Issue

Practice and Mandate  
Clinician Responsibilities  
Paperwork and Process  
Website is LIVE!  
CDP TEAM

### Re-aligning our Practice with our Mandate

As some of you may already be aware, the Communication Devices Program receives our funding through Employment and Income Assistance (EIA), not Manitoba Health. This means that we report directly to EIA on a regular basis about the services that we provide. The Communication Devices Program has been in existence for 9 years now, and that has given us time to develop and grow as a program. Through this time, we had expanded our services to suit the needs of our clients and the clinicians working with them. Ultimately, we provided services that could be considered outside the scope of our mandate. Previously, we had that luxury and at the time, we had hoped it would become a sustainable practice.

As with everyone else in the Province, belts have been tightened and we have all been forced to take a long look at the services we offer. We need to ensure that we align with our mandate.

We will continue to provide service to clients and clinicians in a way that ensures a high quality of care, sustainability, fiscal responsibility and will meet the mandate we have been provided.

So, what does that really look like for clients and clinicians accessing the CDP?

1. Where clients have access to a clinician (SLP/OT), that clinician will be expected to remain the primary contact for the client. CDP clinicians (SLP/OT) will provide consultation to the primary clinician as appropriate. See page 2, "Primary Clinician Responsibilities" for further information.
2. Feature matching will **continue** to be an essential part of every assessment and consultative process. Meaning that equipment will be provided based on the communication **needs** of a client rather than based on wants and/or specific hardware/features requests that may be **desired**.
3. Some equipment we typically have 'in stock', **may** now be purchased on an 'as needed' basis. This **may** mean that you/your client **may** have to wait a short period of time before the start of a trial or rental of a device.
4. Once rental begins, devices will be maintained with a client for as long as those devices continue to meet that client's face-to-face communication needs (i.e. for the purpose of Speech Generation).
5. We have revised/created new forms, in an effort to better serve you, and make the intake process more efficient. See page 3 for further detail about Paperwork and Process.
6. We have created easy to access online resources via Facebook, Twitter, Pinterest and/or our newly updated website. Please like, follow, comment, and visit!


# Thanks!

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**NOT BEING ABLE TO  
SPEAK IS NOT THE SAME  
AS NOT HAVING  
ANYTHING TO SAY.**



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