

BrightSign Usability Study

Entry Survey – Parents

Please Answer these questions about your child who will be taking part in this study:

Name: [REDACTED]

Age: [REDACTED]

Gender: [REDACTED]

Age started signing: [REDACTED]

Sign language library: BSL **Makaton** Signalong Other

Level of signing: **Beginner** Intermediate Advanced

Study Group: [REDACTED]

Has your child been part of previous studies for assistive technology?

- Yes
- No

Has your child ever used assistive technology for communication ?

- Yes: an app on tablet
- Yes: other.....
- No

Who covers, or would cover, the cost of assistive technology for your child:

- Health insurance
- Government aid
- The school (Education aid)
- Device loan from accessibility platform (CENMAC, LGFL, etc)
- Yourself

How does your child communicate in public ?

- Family, friend translate
- Sign language
- Smart device
- Other:.....

What is the primary reason you registered your child in this study ?

- Improve signing skills
- Promote communication independence
- Enhance social interaction
- Support assistive technology development
- Other:

Please rate the study evaluation criteria in the order of importance to your child:

- Technology Development
- Social Behaviour
- Education Support
- Early adopter of BrightSign

Which of the following supplementary features of BrightSign can be beneficial to your child? Tick all that applies elaborating on why you would use it

- Customising sign language (Training for personal versions of sign language)
.....
- Customising speech voice (Child, a friend, family member.. .etc)
.....
- Translating speech to other languages (French, Indian ..etc)
.....
- Personalized textile design (favourite character, colour ..etc)
.....

Would you like to keep BrightSign when the study is concluded?

- Yes
- No

Please write in your own words what do you hope your child will gain from this study?

To be able to communicate better and clearer

Thank you for completing BrightSign entry survey 😊