North Dakota
Department of Public Instruction
Kirsten Baesler, State Superintendent
600 E. Boulevard Avenue, Dept. 201
Bismarck, ND 58505-0440

Speech-Language Pathology
Public School Guidelines:

Section II:
Eligibility Criteria for
Speech-Language Impairment

March 2010
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NORTH DAKOTA DEPARTMENT OF PUBLIC INSTRUCTION

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Eligibility Criteria For
Speech or Language Impairment

Introduction

The following sections will describe each of the sub-categories of speech-language impairment and provide eligibility criteria therein. Appendices will include information for the SLP to use when making eligibility decisions.

In each sub-category, there is a rating scale which allows the SLP to assign points. These points are added to provide a total score to assist in the determination of a disability.

Since most SLPs’ services are funded with special education funds, it is important to ensure the special education requirements for eligibility of services are followed. There may be times parents, doctors, or dentists believe a child needs speech therapy services, but the child is not eligible for special education speech-language services. The school is obligated to consider all outside evaluations and reports but is not obligated to provide or pay for services other than for those services that meet the eligibility requirement of special education.

Pre-referral

Prior to consideration for eligibility, building level teams should review all available data related to the student performance and abilities. This could be through the Response to Intervention process (RTI) or a building level team process such as the Building Level Support Team (BLST).

Eligibility

A child with a speech or language impairment has been evaluated in accordance with the Department’s policies and procedures, determined to have a speech-language impairment, and as a result of this speech-language impairment, needs special education or related services. Children who have a speech or language impairment and no other disability may receive special education (specially designed instruction). “Specially designed instruction” means adapting, as appropriate, the content, methodology, or delivery of instruction to address the unique needs of the child that result from the disability, and ensure access of the child to the general curriculum so that the child can meet the educational standards within the jurisdiction of the district that apply to all children. [Individuals with Disabilities Education Improvement Act 2004, CFR 34 §300.39(b)(3)] Children who have a speech-language impairment that is secondary to another disability may receive related services (services to benefit from special education).

Federal Definition of Speech or Language Impairment

A speech or language impairment is a communication disorder, such as stuttering, impaired articulation, a language impairment, or voice impairment that adversely impacts educational performance.
LANGUAGE
Language Criteria

A Language Disorder is defined as a breakdown in communication that is characterized by difficulties in expressing needs, ideas, or information that may be accompanied by problems in understanding. Language patterns attributed to dialectical, cultural or ethnic differences or the influence of a foreign language must not be identified as a disorder.

How to complete the Language Rating Scale: Circle the appropriate scores for each of the three categories:

Rows A and B (Formal/standardized assessment)
- Determination of the rating for formal assessment should be based on derived scores of relative standing, such as standard scores or percentiles.
- **Total test score or composite scores must be used—not individual subtests**

Row C (Informal/non-standardized assessment)
- Determination of the rating for informal assessment requires professional judgment and reference to normative data. Consider the results of criterion referenced tools, language samples, teacher-made tests, observation, etc.

Row D (Adverse affect on educational performance)
- Use the Teacher Input Form regarding language to assess the adverse affect on educational performance.

1. Circle the score for each row and add them to obtain the Total Score.

   - Total Score: 0-8 No Language Impairment (ineligible)
   - Total Score: 9-12 Mild (ineligible)
   - Total Score: 13-16 Moderate
   - Total Score: 17-20 Severe

2. The comment section may include statements regarding discrepancies among individual tests, subtests, classroom performance and other factors that are relevant to the determination of severity.

Considerations
- Given current medical, neurological, physical, emotional, and/or developmental factors, if the student’s speech-language performance is within his/her expected performance range and compensatory skills have been achieved; then the student may not be found eligible.
  - The purpose of assessment is for determining eligibility and/or programming needs. Certain assessment tools are more appropriate for programming than for eligibility determination (ex., Single words vocabulary tests).
  - Students with Auditory Processing Disorders who are not eligible as language impaired, may be considered for a 504 plan.
- For written language: Document assessment under the “Informal Assessment” block:
  - Classroom writing samples should be included (ex., 6 Traits rubrics)
- Curriculum-based assessment
Additional Considerations

- Individuals with Autism may be eligible for speech-language services due to the pervasive nature of the social communication impairment. Formal assessment tools may not accurately detect problems in the social use of language and communication, so eligibility may need to be based on clinical judgment and more informal, observational measures.

Features to consider

1. Has limited joint attention and limited use of facial expressions directed toward others.
2. Does not show or bring things to others to indicate an interest in the activity.
3. Demonstrates difficulties in relating to people, objects, and events.
4. Has a gross impairment in ability to make and keep friends.
5. Shows significant vulnerability and safety issues due to social naiveté.
6. Prefers isolated or solitary activities.
7. Misinterprets others’ behaviors and social cues.
8. Demonstrates gross impairments of solitary, imaginative, cooperative, and reciprocal play.
9. Demonstrates overreaction or under reaction to sensory stimuli resulting in communication breakdowns (which may include sight, smell, hearing, taste, touch, balance, body awareness, and pain).
10. Uses rigid or rule-bound thinking such as an intense, focused preoccupation with a limited range of play, interests, or conversation topics.

- For students referred for social-communication concerns that significantly impact their functional interactions with peers and adults, ADD the following points to the total rubric score:
  - 2 features: 1 point
  - 3 features: 2 points
  - 4 features: 3 points
  - 5 or more features: 4 points
## Language Severity Rating Scale

<table>
<thead>
<tr>
<th>Points Assigned</th>
<th>No Disability</th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A</strong> Formal Comprehensive Language Assessment in Oral &amp;/or Written Language (Lowest Composite score may be used) (e.g., TOLD, CASL, CELF, OWLS)</td>
<td>Score = 0 SS 86-100 50% ile SD 0. - .99 below the mean</td>
<td>Score = 2 SS 78-85 16% ile SD 1.0 – 1.49 below the mean</td>
<td>Score = 3 SS 70-77 7% ile SD 1.5 – 1.99 below the mean</td>
<td>Score = 4 SS &lt; 70 2% ile SD 2.0 &gt; below the mean</td>
</tr>
<tr>
<td><strong>B</strong> Second Formal Measure (e.g. LPT, WORD, Bracken, ELT, TLC-E)</td>
<td>Score = 0 SS 86-100 50% ile SD 0. - .99 below the mean</td>
<td>Score = 2 SS 78-85 16% ile SD 1.0 – 1.49 below the mean</td>
<td>Score = 3 SS 70-77 7% ile SD 1.5 – 1.99 below the mean</td>
<td>Score = 4 SS &lt; 70 2% ile SD 2.0 &gt; below the mean</td>
</tr>
<tr>
<td><strong>C</strong> Informal /Non-Standardized Assessment (e.g., language sample, classroom work samples, classroom observation checklist)</td>
<td>Score = 0 Language skills are developmentally appropriate and do not interfere with communication</td>
<td>Score = 2 Language skills consist of some errors, and do not interfere with communication</td>
<td>Score = 3 Language skills are below the average range; errors are noticeable and interfere with communication</td>
<td>Score = 4 Language skills are significantly below average; errors are prevalent and greatly interfere with communication</td>
</tr>
<tr>
<td><strong>D</strong> Educational Impact (Social/emotional) (e.g., Teacher checklist, file review, state and district assessments, curriculum-based assessments)</td>
<td>Score = 0 Language skills are adequate for the student’s participation in educational settings</td>
<td>Score = 4 Language skills are developing and can be addressed in the general educational setting</td>
<td>Score = 6 Language skills have an effect on the student’s ability to participate in educational settings</td>
<td>Score = 8 Language skills have a significant impact on the student’s ability to participate in educational settings</td>
</tr>
</tbody>
</table>

### TOTAL POINTS

1. Circle the score for each row and add to obtain the Total Score.
   - Total Score: 0-8 No Language Disability (ineligible)
   - Total Score: 9-12 Mild (ineligible)
   - Total Score: 13-16 Moderate
   - Total Score: 17-20 Severe

2. For students referred for social-communication concerns that significantly impact their functional interactions with peers and adults, ADD the following additional points to the total points, then re-total. (See features listed on page 8):
   - 2 features: 1 point
   - 3 features: 2 points
   - 4 features: 3 points
   - 5 or more features: 4 points

*If a student is unable to complete standardized assessment due to NON-COMPLIANCE or ABILITY, the assessment team will need to document an alternate means of determining eligibility.*

Comments:
### Language Severity Rating Scale
#### Overall Functional Level

<table>
<thead>
<tr>
<th>Level</th>
<th>Condition</th>
<th>Educational Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 0 (0 – 8 points) <strong>Ineligible</strong></td>
<td>The student’s independent language skills are consistently age-appropriate. The student is able to use compensatory strategies when needed.</td>
<td>Language skills are adequate for the student’s participation in educational/developmentally appropriate settings.</td>
</tr>
<tr>
<td>Level 1 (9 – 12 points) <strong>Mild (ineligible)</strong></td>
<td>The student’s independent language skills are age appropriate. He/she is successful in participating in most low comprehension and low verbal demand educational activities with minimum support. However, the student’s participation in high comprehension and high verbal demand situations may occasionally be limited.</td>
<td>Language skills are developing and can be addressed in the general educational/developmentally appropriate setting.</td>
</tr>
<tr>
<td>Level 2 (13 – 16 points) <strong>Moderate</strong></td>
<td>The student’s independent language skills are often age appropriate in low comprehension and low verbal demand educational activities. The student’s successful participation is frequently limited in high demand activities unless maximum support is provided to reduce the comprehension and verbal demands.</td>
<td>Language skills have an effect on the student’s ability to participate in educational/developmentally appropriate settings.</td>
</tr>
<tr>
<td>Level 3 (17 – 20 points) <strong>Severe</strong></td>
<td>The student’s independent language comprehension and verbal messages are rarely age-appropriate even in low comprehension and low verbal demand educational activities. His/her participation in high comprehension and high demand educational activities is not age appropriate and tends to be extremely limited even with supports.</td>
<td>Language skills have a significant impact on the student’s ability to participate in educational/developmentally appropriate settings.</td>
</tr>
</tbody>
</table>
Preschool Language Criteria

A Language Disorder is defined as a breakdown in communication that is characterized by difficulties in expressing needs, ideas, or information that may be accompanied by problems in understanding. Language patterns attributed to dialectical, cultural or ethnic differences or the influence of a foreign language must not be identified as a disorder.

How to complete the Language Rating Scale (Circle the appropriate scores for each of the three categories)

Rows A and B (Formal/standardized assessment)

- Determination of the rating for formal assessment should be based on derived scores of relative standing, such as standard scores or percentiles.
- **Total test score or composite scores must be used—not individual subtests**
  - For children transitioning from Infant Development Part C to Part B (2.7 to 2.9 years of age), all information available should be considered for eligibility. When data presented indicate that skills are below age level using age ranges or percent of delay, this may be considered sufficient data to support the eligibility for speech/language services without further assessment. The existing data can be used to support eligibility without plotting scores on the rubric. This could include assessment data from private practice SLPs, medical centers, or university clinics. If the team determines insufficient data is available to make the determination of eligibility, additional assessment should be completed.

Row C (Informal/non-standardized assessment)

- Determination of the rating for informal assessment requires professional judgment and reference to normative data. Consider the results of criterion referenced tools, language samples, teacher-made tests, observation, etc.

Row D (Adverse affect on educational performance)

- Use the Teacher Input Form regarding language to assess the adverse affect on educational performance.

Circle the score for each row and add them to obtain the Total Score.

<table>
<thead>
<tr>
<th>Total Score</th>
<th>Language Impairment</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-8</td>
<td>No Language Impairment (ineligible)</td>
</tr>
<tr>
<td>9-12</td>
<td>Mild (ineligible)</td>
</tr>
<tr>
<td>13-16</td>
<td>Moderate</td>
</tr>
<tr>
<td>17-20</td>
<td>Severe</td>
</tr>
</tbody>
</table>

The comment section on the criteria form may include statements regarding discrepancies among individual tests, subtests and other factors that are relevant to the determination of severity.

Considerations

- The purpose of assessment is for determining eligibility and/or programming needs. Certain assessment tools are more appropriate for programming than for eligibility determination.
## Preschool Language Severity Rating Scale

<table>
<thead>
<tr>
<th>A</th>
<th>Formal/Standardized Comprehensive Language Assessment (Lowest Composite score may be used) [e.g., CELF-P, PLS, TELD, TOLD, OWLS]</th>
<th>No Disability</th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
<th>Points Assigned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Score = 0</td>
<td>Score = 2</td>
<td>Score = 3</td>
<td>Score = 4</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>SS 86-100</td>
<td>SS 78-85</td>
<td>SS 70-77</td>
<td>SS &lt; 70</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>50% ile</td>
<td>16% ile</td>
<td>7% ile</td>
<td>2% ile</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>SD 0 -.99 below the mean</td>
<td>SD 1.0 -1.49 below the mean</td>
<td>SD 1.5 – 1.99 below the mean</td>
<td>SD 2.0 &gt; below the mean</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B</th>
<th>Second Formal Measure [e.g., vocabulary, basic concepts; etc.]</th>
<th>No Disability</th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
<th>Points Assigned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Score = 0</td>
<td>Score = 2</td>
<td>Score = 3</td>
<td>Score = 4</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C</th>
<th>Informal / Non-Standardized Assessment (e.g., language sample, observation)</th>
<th>No Disability</th>
<th>Mild</th>
<th>Moderate</th>
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<td></td>
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<td>Language skills are developmentally appropriate and do not interfere with communication</td>
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</table>

<table>
<thead>
<tr>
<th>D</th>
<th>Educational Impact (social/emotional) (Parent Questionnaire, Teacher Checklist)</th>
<th>No Disability</th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
<th>Points Assigned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Score = 0</td>
<td>Score = 4</td>
<td>Score = 6</td>
<td>Score = 8</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Language skills are adequate for the student’s participation in varied environments i.e. – Preschool – Daycare – Home</td>
<td>Language skills are developing and can be addressed in varied environment i.e. – Preschool – Daycare – Home</td>
<td>Language skills have an effect on the student’s ability to participate in varied environments i.e. – Preschool – Daycare – Home</td>
<td>Language skills have a significant impact on the student’s ability to participate in varied environments. i.e. – Preschool – Daycare – Home</td>
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### TOTAL POINTS

1. Circle the score for each row and add them to obtain the Total Score.

   - Total Score: 0-8  No Language Disability **(ineligible)**
   - Total Score: 9-12  Mild **(ineligible)**
   - Total Score: 13-16  Moderate
   - Total Score: 17-20  Severe

2. For students referred for social-communication concerns that significantly impact their functional interactions with peers and adults, ADD the following additional points to the total points, then re-total. *(See features listed on page 8):*
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Comments:
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### Overall Functional Level

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<tr>
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<td>Language skills have a significant impact on the child’s ability to participate in educationally/developmentally appropriate settings.</td>
</tr>
</tbody>
</table>
Language Appendices

(Attached are resources that MAY be used in the assessment process to help the SLP determine eligibility)

1. Classroom Observational Checklist
2. Classroom Based Communication Skills Checklist for Kindergarten
3. Basic Concept Chart
4. Classroom Based Communication Skills Checklist for First Grade
5. Classroom Based Communication Skills Checklist for Second – Third Grade
6. Classroom Based Communication Skills Checklist for Fourth – Fifth Grade
7. Classroom Based Communication Skills Checklist for Middle and High School
8. Informal Measure of Phonemic Awareness
9. Preschool Language Skills Checklist (Birth – Age 6)
10. Predicted MLU Ranges
11. Observation for Preschool Speech/Language
12. Parent Questionnaire
Classroom Observational Checklist

Student ______________________________ Date of Birth ___________ Age __________ Grade______
Observer: ______________________________ Date ________

Directions: Check areas of concern.

LISTENING
The student has difficulty:
_____ 1. paying attention
_____ 2. following spoken directions
_____ 3. remembering things people say
_____ 4. understanding what people are saying
_____ 5. understanding the meaning of words
_____ 6. understanding new ideas
_____ 7. looking at people when talking or listening
_____ 8. understanding facial expressions, gestures, or body language

SPEAKING
The student has difficulty:
_____ 1. answering questions people ask
_____ 2. answering questions as quickly as other students
_____ 3. asking for help when needed
_____ 4. asking questions
_____ 5. using a variety of vocabulary words when talking
_____ 6. thinking of (finding) the right word to say
_____ 7. expressing thoughts
_____ 8. describing things to people
_____ 9. staying on the subject when talking
_____ 10. getting to the point when talking
_____ 11. putting events in the right order when telling stories about things that happened
_____ 12. using correct grammar when talking
_____ 13. using complete sentences when talking
_____ 14. expanding an answer or providing details when talking
_____ 15. talking with a group of people
_____ 16. saying something another way when someone doesn’t understand

READING
The student has difficulty:
_____ 1. sounding out words when reading
_____ 2. understanding what was read
_____ 3. explaining what was read
_____ 4. identifying the main idea
_____ 5. remembering details
_____ 6. following written directions

WRITING
The student has difficulty:
_____ 1. writing down thoughts
_____ 2. using correct grammar
_____ 3. writing complete sentences
_____ 4. expanding an answer or providing details when writing
_____ 5. putting words in the right order when writing sentences

Comments:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
Classroom Based Communication Skills
Checklist for Kindergarten

Student’s Name __________________________ Teacher __________________ Date ________
Please return to __________________________ by __________________________

I. LISTENING/UNDERSTANDING
The student does NOT:
   _____ 1. hear and identify familiar sounds
   _____ 2. hear and identify rhythmic patterns
   _____ 3. hear and identify rhyming words
   _____ 4. identify initial consonants
   _____ 5. listen and appropriately respond to nursery rhymes, fairy tales, poetry
   _____ 6. discriminate between sounds effectively
   _____ 7. recall what is heard
   _____ 8. follow oral instructions
      _____ a. in individual direction
      _____ b. in group direction
   _____ 9. listen for specific purposes
   _____ 10. listen during group discussions
   _____ 11. retain information heard
   _____ 12. ignore auditory distractions

II. SPEAKING
A. The student does NOT demonstrate appropriate grammar using:
   _____ 1. nouns
      _____ a. singular
      _____ b. plural
   _____ 2. verb tenses, except irregular past
   _____ 3. helping/linking verbs (e.g. “is, are”)
   _____ 4. pronouns

B. The student does NOT:
   _____ 1. express ideas clearly
   _____ 2. retell directions, events and pictured sequences of four
   _____ 3. give oral presentations (i.e., “show and tell”)
   _____ 4. recite from memory
   _____ 5. respond to questions and discussions
   _____ 6. speak clearly and audibly
   _____ 7. speak in complete sentences
   _____ 8. produce all sounds appropriately

III. VOCABULARY/CONCEPTS
A. The student does NOT:
   _____ 1. understand and use age appropriate basic concepts (see attached chart)

B. The student does NOT:
   _____ 1. sequence left to right
   _____ 2. recognize and name colors
   _____ 3. recognize and name shapes
   _____ 4. recognize and name numbers 0-20
   _____ 5. use age appropriate vocabulary
   _____ 6. group vocabulary by common categories
Classroom Based Communication Skills (Continued)
Checklist for Kindergarten

Page Two

_____ 7. associate words with objects and activities
_____ 8. identify simple cause and effect relationships
_____ 9. distinguish between: “pretend” and “real”
_____10. identify basic emotions (e.g. happy, sad, angry)
_____11. predict outcomes
_____12. draw inferences/solve simple riddles

IV. SOCIAL LANGUAGE
The student does NOT:
_____ 1. stay on topic giving relevant information
_____ 2. take conversational turns
_____ 3. begin and terminate conversations appropriately
_____ 4. demonstrate the ability to make choices
_____ 5. accept decisions made by others and themselves
_____ 6. complete tasks independently or in groups

V. EARLY LITERACY SKILLS
The student does NOT:
_____ 1. recognize capital and lower case manuscript letters
_____ 2. match capital and lower case manuscript letters
_____ 3. recognize his own name
_____ 4. participate in language experience stories
_____ 5. use correct paper, pencil and proper body positions
_____ 6. copy and follow lines, shapes, etc. on paper
_____ 7. copy numerals, capitals, and lower case letters in manuscript
_____ 8. write numerals, capitals, and lower case letters in manuscript
_____ 9. segment sentences to show number of words (clapping)
_____10. tell sounds associated with letters
_____11. blend sounds in CVC words when segmented sounds are said to him
_____12. read sight words
_____13. accurately track enlarged print (big books, pocket charts)

Check the item that best summarizes your impression of this child’s language:

_____ Language skills are adequate for the student’s participation in educational setting
_____ Language skills are developing and can be addressed in the general educational setting
_____ Language skills have an effect on the student’s ability to participate in educational settings
_____ Language skills have a significant impact on the student’s ability to participate in educational settings.

Comments:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
## BASIC CONCEPT CHART

<table>
<thead>
<tr>
<th>Concept Type</th>
<th>2-3 years</th>
<th>3-4 years</th>
<th>4-5 years</th>
<th>High-Utility Concepts 5 years and up</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SPATIAL</strong></td>
<td>together, behind, away from</td>
<td>top, low, next to, beside, forward, in back of</td>
<td>right, side, second, third, ahead, center, corner</td>
<td>edge, upper right, lower right, upper left, lower left, across from, through</td>
</tr>
<tr>
<td><strong>TEMPORAL</strong></td>
<td></td>
<td></td>
<td>first, starting, morning, evening, late, following</td>
<td>afternoon, yesterday, tomorrow, after, before</td>
</tr>
<tr>
<td><strong>QUANTITY/QUALITY</strong></td>
<td>some, all, small, large</td>
<td>empty, full, same, less than</td>
<td>short, long, thick, many, few, none, each, different</td>
<td>a little, enough, both, medium sized, half, whole, another</td>
</tr>
<tr>
<td><strong>SOCIAL-EMOTIONAL</strong></td>
<td></td>
<td></td>
<td>tired, surprised, scared, angry, afraid, excited</td>
<td>bored, worried</td>
</tr>
</tbody>
</table>
Classroom Based Communication Skills
Checklist for First Grade

Student’s Name _______________________________ Teacher __________________ Date __________
Please return to _______________________________ by ________________________________

I. LISTENING/UNDERSTANDING
The student does NOT:

____ 1. follow oral directions
   _____ a. in individual direction
   _____ b. in group direction
____ 2. follow written directions
____ 3. identify main ideas, details and characters of a story
____ 4. draw conclusions from facts given in a story
____ 5. identify character’s motives and feelings
____ 6. sequence four events
____ 7. ignore auditory distractions
____ 8. identify initial/final consonants
____ 9. identify vowel sounds
____ 10. discriminate between sounds effectively

II. SPEAKING
The student does NOT:

____ 1. identify groups of words as sentences
____ 2. identify asking vs. telling sentences
____ 3. identify nouns
____ 4. identify verbs and action words
____ 5. identify adjectives
____ 6. produce complete sentences
____ 7. produce appropriate grammar
____ 8. participate in group discussions
____ 9. comprehend and respond to wh questions
____ 10. produce all sounds appropriately

III. VOCABULARY/CONCEPTS
The student does NOT:

____ 1. associate text with pictures
____ 2. recognize emotion in stories
____ 3. differentiate true and false statements
____ 4. predict outcomes
____ 5. make inferences/solve simple riddles
____ 6. use context clues
____ 7. recognize antonyms
____ 8. use age appropriate vocabulary
____ 9. understand and use basic concepts

IV. SOCIAL LANGUAGE
The student does NOT:

____ 1. stay on topic giving relevant information
____ 2. take conversational turns
____ 3. begin and terminate conversations appropriately
Classroom Based Communication Skills (Continued)
Checklist for First Grade

Page Two

V. LITERACY SKILLS
The student does NOT:

_____ 1. capitalize appropriately
_____ 2. punctuate appropriately
_____ 3. compose one sentence
_____ 4. compose multiple related sentences
_____ 5. demonstrate sound, letter, and letter pattern recognition and manipulation by substituting and deleting sounds
_____ 6. segment words into sounds
_____ 7. blend sounds into words
_____ 8. recognize, read, and write sight words
_____ 9. read with fluency
_____ 10. retell a story in sequence
_____ 11. identify story elements

Check the item that best summarizes your impression of this child’s language:

_____ Language skills are adequate for the student’s participation in educational settings
_____ Language skills are developing and can be addressed in the general educational setting
_____ Language skills have an effect on the student’s ability to participate in educational settings
_____ Language skills have a significant impact on the student’s ability to participate in educational settings.

Comments:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
I. LISTENING/UNDERSTANDING

A. The student does NOT:
   _____ 1. follow directions
      _____ a. in individual direction
      _____ b. in group direction
   _____ 2. comprehend and answer “wh” questions

B. The student does NOT identify key elements of who, what, when and where
   _____ 1. from orally presented materials
   _____ 2. from written material

C. The student does NOT:
   _____ 1. identify the main idea
   _____ 2. differentiate between relevant and irrelevant information
   _____ 3. discriminate likeness and differences of sounds in words
   _____ 4. ignore auditory distractions

II. SPEAKING

The student does NOT:
   _____ 1. use grammatically correct sentences
   _____ 2. participate in group discussions
   _____ 3. give description with appropriate detail
   _____ 4. compare and contrast
   _____ 5. recall and discuss personal experiences
   _____ 6. convey information in an organized manner
   _____ 7. use specific vocabulary rather than general words (thing, stuff)
   _____ 8. ask/answer questions appropriately
   _____ 9. use appropriate articulation

III. VOCABULARY/CONCEPTS

The student does NOT:
   _____ 1. relate to cause and effect
   _____ 2. recognize synonyms, antonyms, homonyms, and multiple meaning words
   _____ 3. use appropriate vocabulary
   _____ 4. understand idioms and non-literal forms
   _____ 5. understand and give descriptions with appropriate detail
   _____ 6. appropriately compare and contrast

IV. SOCIAL LANGUAGE

The student does NOT:
   _____ 1. stay on topic giving relevant information
   _____ 2. take conversational turns
   _____ 3. begin and terminate conversations appropriately
V. LITERACY SKILLS
The student does NOT:

1. identify groups of words as sentences
2. differentiate between sentences and questions
3. use correct capitalization and punctuation
4. write 2 to 4 complete sentences about a topic
5. write a sentence with descriptive words
6. write time ordered story using first, next and last
7. proof and edit his work
8. recognize, read and write sight words
9. retell a story in sequence
10. retell a story in sequence
11. identify story elements

Check the item that best summarizes your impression of this child’s language:

Language skills are adequate for the student’s participation in educational settings
Language skills are developing and can be addressed in the general educational setting
Language skills have an effect on the student’s ability to participate in educational settings
Language skills have a significant impact on the student’s ability to participate in educational settings.

Comments:
Classroom Based Communication Skills
Checklist for Fourth/Fifth Grade

Student’s Name ___________________________________ Teacher ________________ Date ________

Please return to __________________________________ by ___________________________________

I. LISTENING/UNDERSTANDING
A. The student does NOT:
   _____ 1. understand directions and assignments
   _____ 2. takes notes and ask questions
   _____ 3. answer specific literal questions
   _____ 4. answer specific inferential questions
   _____ 5. recall main ideas and supporting details
   _____ 6. interpret and evaluate information
   _____ 7. distinguish between fact and opinion in an oral message
   _____ 8. relate cause and effect
   _____ 9. use strategies to enhance memory

II. SPEAKING
The student does NOT:
   _____ 1. use grammatically correct sentences
   _____ 2. give concise and accurate directions or information
   _____ 3. respond to questions appropriately
   _____ 4. ask questions to clarify or gain additional information
   _____ 5. retell a story or event with appropriate sequence and detail
   _____ 6. speak with appropriate articulation

III. VOCABULARY/CONCEPTS
The student does NOT use or understand grade appropriate:
   _____ 1. vocabulary
   _____ 2. antonyms, synonyms, multiple meaning words, homonyms
   _____ 3. idioms and figurative language
   _____ 4. inferences
   _____ 5. cause and effect relationships
   _____ 6. drawing of conclusions

IV. SOCIAL LANGUAGE
The student does NOT:
   _____ 1. contribute and stay on topic
   _____ 2. give relevant information
   _____ 3. take conversational turns
   _____ 4. begin and terminate conversations appropriately

V. LITERACY SKILLS
A. The student does NOT write appropriately:
   _____ 1. using correct capitalization and punctuation
   _____ 2. combining two simple sentences to make compound and/or complex sentences
   _____ 3. using pre-writing experiences such as brainstorming, webbing, etc.
   _____ 4. writing 2-3 paragraphs about topics
   _____ 5. writing different forms:
      a) a book report; b) personal stories; c) a research report
Classroom Communication & Learning Checklist (Continued)
Fourth and Fifth Grade

Page Two

_____ 6. write complete, grammatical sentences
_____ 7. editing his work

Check the item that best summarizes your impression of this child’s language:

_____ Language skills are adequate for the student’s participation in educational settings
_____ Language skills are developing and can be addressed in the general educational setting
_____ Language skills have an effect on the student’s ability to participate in educational settings
_____ Language skills have a significant impact on the student’s ability to participate in educational settings.

Comments:
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Return this form to: ____________________________ at ____________________________ by _____________
Classroom Communication & Learning Checklist  
Middle School and High School

Student: ______________________________________ Date: ___________________________
Teacher: ______________________________________

RATE the extent to which each of the statements below describes the student:
Scale: 0 (never) 1 (rarely) 2 (sometimes) 3 (most times)

<table>
<thead>
<tr>
<th>THE STUDENT:</th>
<th>LISTENING</th>
<th>RATING</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>has trouble paying attention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>has trouble following spoken directions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>has trouble remembering things people say</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>has trouble understanding what people are saying</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>asks people to repeat what they have said</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>has trouble understanding word meanings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>has trouble understanding new ideas</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>has trouble looking at people when talking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>has trouble understanding facial expressions (body language)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>THE STUDENT:</th>
<th>SPEAKING</th>
<th>RATING</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.</td>
<td>has trouble answering questions people ask</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>has trouble answering questions as quickly as others</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>has trouble asking for help</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>has trouble asking questions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>has trouble using a variety of vocabulary words when talking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>has trouble retrieving the right words</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16.</td>
<td>has trouble saying what he or she is thinking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17.</td>
<td>has trouble describing things to people</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18.</td>
<td>has trouble staying on the subject when talking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19.</td>
<td>has trouble getting to the point when talking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20.</td>
<td>has trouble putting things in the right order</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21.</td>
<td>uses poor grammar when talking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22.</td>
<td>has trouble using complete sentences when talking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23.</td>
<td>talks in short, choppy sentences</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24.</td>
<td>has trouble expanding on an answer or providing details</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25.</td>
<td>has trouble having a conversation with someone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26.</td>
<td>has trouble talking with a group of people</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27.</td>
<td>has trouble being understood (saying things another way)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28.</td>
<td>gets upset when people don’t understand him/her</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>THE STUDENT:</th>
<th>READING</th>
<th>RATING</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>29.</td>
<td>has trouble sounding out words when reading</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30.</td>
<td>has trouble using contextual cues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31.</td>
<td>has trouble understanding what he/she has read</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32.</td>
<td>has trouble explaining what he/she has read</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33.</td>
<td>has trouble identifying the main idea of what is read</td>
<td></td>
<td></td>
</tr>
<tr>
<td>34.</td>
<td>has trouble remembering details from something read</td>
<td></td>
<td></td>
</tr>
<tr>
<td>35.</td>
<td>has trouble following written directions</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Student: ____________________________ Date: ____________________________

<table>
<thead>
<tr>
<th>RATING</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Writing**

36. has trouble writing what he/she is thinking
37. uses poor grammar when writing
38. has trouble writing complete sentences
39. writes short, choppy sentences
40. has trouble explaining an answer or providing details in writing
41. has trouble putting words in the right order in sentences

Additional Comments

_____________________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________

Return this form to: ____________________________ at ________________ by _____________
Informal Measure of Phonemic Awareness

Name ___________________________  Grade _______  Date____________

1. Ability to hear rhyme and alliteration *(Emerges at age 4-5)*

<table>
<thead>
<tr>
<th>Do these words rhyme?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>out/spout</td>
<td></td>
<td></td>
</tr>
<tr>
<td>short/out</td>
<td></td>
<td></td>
</tr>
<tr>
<td>stout/out</td>
<td></td>
<td></td>
</tr>
<tr>
<td>up/out</td>
<td></td>
<td></td>
</tr>
<tr>
<td>shout/out</td>
<td></td>
<td></td>
</tr>
<tr>
<td>rain/out</td>
<td></td>
<td></td>
</tr>
<tr>
<td>spider/out</td>
<td></td>
<td></td>
</tr>
<tr>
<td>without/spout</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Tell me two words that rhyme with:

<table>
<thead>
<tr>
<th>Responses</th>
<th>Errors:</th>
<th>Nonws.</th>
<th>Correct:</th>
</tr>
</thead>
<tbody>
<tr>
<td>see</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>toe</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>bat</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>man</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>bell</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>meat</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>fit</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>one</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>take</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL ERRORS

2. Ability to discriminate between sounds

Which two of these words *begin* with the same sound? *(Emerges in kindergarten)*

<table>
<thead>
<tr>
<th>PHONEME LEVEL</th>
<th>Correct</th>
<th>Error</th>
</tr>
</thead>
<tbody>
<tr>
<td>tap/hug/hit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>rain/rug/apple</td>
<td></td>
<td></td>
</tr>
<tr>
<td>pen/song/pipe</td>
<td></td>
<td></td>
</tr>
<tr>
<td>fire/cloud/food</td>
<td></td>
<td></td>
</tr>
<tr>
<td>run/lamb/rain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>what/rot/win</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ram/lamb</td>
<td></td>
<td></td>
</tr>
<tr>
<td>look/yell/let</td>
<td></td>
<td></td>
</tr>
<tr>
<td>win/rain/why</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Which two of these words *end* with the same sound? *(Emerges in kindergarten)*

<table>
<thead>
<tr>
<th>RIME LEVEL</th>
<th>Correct</th>
<th>Error</th>
</tr>
</thead>
<tbody>
<tr>
<td>hit/split/wear</td>
<td></td>
<td></td>
</tr>
<tr>
<td>cake/train/snake</td>
<td></td>
<td></td>
</tr>
<tr>
<td>fun/sun/tap</td>
<td></td>
<td></td>
</tr>
<tr>
<td>trip/fish/whip</td>
<td></td>
<td></td>
</tr>
<tr>
<td>hop/camp/sand</td>
<td></td>
<td></td>
</tr>
<tr>
<td>wish/tan/bun</td>
<td></td>
<td></td>
</tr>
<tr>
<td>track/bike/wrap</td>
<td></td>
<td></td>
</tr>
<tr>
<td>hunt/run/bat</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTALS

3. Ability to split and blend sounds into syllables

Assess Splitting | Assess Blending

<table>
<thead>
<tr>
<th>SYLLABLE LEVEL <em>(Emerges at ages 3-4)</em></th>
<th>SYLLABLE LEVEL <em>(Emerges in kindergarten)</em></th>
<th>ONSET &amp; RIME LEVEL</th>
<th>PHONEME LEVEL <em>(Emerges at age 6)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>I’m going to say some words. Clap to show how many syllables or word parts you hear.</td>
<td>I’m going to say some words slowly by stretching them into parts. Listen to the parts and put them back together.</td>
<td>I’m going to say some words slowly by stretching them into parts. Listen to the parts and put them back together.</td>
<td>I’m going to say some words slowly by stretching them into parts. Listen to the parts and put them back together.</td>
</tr>
<tr>
<td>seek</td>
<td>cow</td>
<td>boy</td>
<td>can</td>
</tr>
<tr>
<td>twilight</td>
<td>sun shine</td>
<td>nigh</td>
<td>/w/ /a/ /sh/</td>
</tr>
<tr>
<td>Tinkerbell</td>
<td>win dow</td>
<td>dr ess</td>
<td>/l/ /u/ /m/ /p/</td>
</tr>
<tr>
<td>butterfly</td>
<td>pen cil</td>
<td>str ike</td>
<td>/s/ /m/ /c/ /l/</td>
</tr>
<tr>
<td>dinner</td>
<td>Errors: /4</td>
<td>Errors: /4</td>
<td>Errors: /4</td>
</tr>
<tr>
<td>Errors: /5</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4. **Ability to segment sounds**

<table>
<thead>
<tr>
<th>SYLLABLE LEVEL</th>
<th>Errors: ____</th>
<th>PHONEME LEVEL</th>
<th>Errors: ____</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Emerges at age 4)</td>
<td></td>
<td>(Emerges at ages 5-7)</td>
<td></td>
</tr>
<tr>
<td>I’m going to say some words. Tell me the parts you hear.</td>
<td>I’m going to say some words. Say the word slowly and tell me each the sound you hear.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>bedroom</td>
<td>bed room</td>
<td>pan</td>
<td>/p/ /a/ /n/</td>
</tr>
<tr>
<td>sometimes</td>
<td>some times</td>
<td>tape</td>
<td>/t/ /a/ /p/</td>
</tr>
<tr>
<td>finger</td>
<td>fing ger</td>
<td>went</td>
<td>/w/ /e/ /n/ /t/</td>
</tr>
<tr>
<td>chattering</td>
<td>cha ter ing</td>
<td>block</td>
<td>/b/ /l/ /o/ /k/</td>
</tr>
<tr>
<td>television</td>
<td>tel a vi zhun</td>
<td>smart</td>
<td>/s/ /m/ /ar/ /t/</td>
</tr>
<tr>
<td>alligator</td>
<td>al li ga tor</td>
<td>stand</td>
<td>/s/ /t/ /a/ /n/ /d/</td>
</tr>
</tbody>
</table>

5. **Ability to manipulate (add, delete, or substitute) sounds**

<table>
<thead>
<tr>
<th>ASSESS DELETION</th>
<th>SYLLABLE LEVEL</th>
<th>Errors: ____</th>
<th>ONSET &amp; RIME LEVEL</th>
<th>Errors: ____</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Emerges at age 5-first grade)</td>
<td></td>
<td>(Emerges at age 7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Say CAMPSITE without the CAMP.</td>
<td>site</td>
<td>Say BEAT without the /b/.</td>
<td>eat</td>
<td></td>
</tr>
<tr>
<td>Say BASEBALL without the BALL.</td>
<td>base</td>
<td>Say SELL without the /s/.</td>
<td>ell</td>
<td></td>
</tr>
<tr>
<td>Say AIRPLANE without the AIR.</td>
<td>plane</td>
<td>Say CRUNCH without the UNCH.</td>
<td>kr</td>
<td></td>
</tr>
<tr>
<td>Say NOTEBOOK without the BOOK.</td>
<td>note</td>
<td>Say TRACK without the TR.</td>
<td>ack</td>
<td></td>
</tr>
<tr>
<td>Say UNLOCK without the LOCK.</td>
<td>un</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Say RUNNING without the ING.</td>
<td>run</td>
<td>Say CAN’T without the /t/.</td>
<td>can</td>
<td></td>
</tr>
<tr>
<td>Say TWENTY without the TWEN.</td>
<td>ty</td>
<td>Say TRICK without the /t/.</td>
<td>rick</td>
<td></td>
</tr>
<tr>
<td>Say EXTRA without the TRA.</td>
<td>ex</td>
<td>Say SNEEZE without the /s/.</td>
<td>neeze</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ASSESS SUBSTITUTION</th>
<th>SYLLABLE LEVEL</th>
<th>Errors: ____</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Emerges at age 7+)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Change the first part of CLASSROOM to BALL.</td>
<td>ballroom</td>
<td></td>
</tr>
<tr>
<td>Change the last part of RAINCOAT to BOW.</td>
<td>rainbow</td>
<td></td>
</tr>
<tr>
<td>Change the last part of SUNTAN to SHINE.</td>
<td>sunshine</td>
<td></td>
</tr>
<tr>
<td>Change the first part of WATCHDOG to HOT.</td>
<td>hotdog</td>
<td></td>
</tr>
<tr>
<td>ONSET &amp; RIME LEVEL</td>
<td></td>
<td>Errors: ____</td>
</tr>
<tr>
<td>Change the /sm/ in SMELL to /t/,</td>
<td>tell</td>
<td></td>
</tr>
<tr>
<td>Change the /tr/ in TRICK to /st/.</td>
<td>stick</td>
<td></td>
</tr>
<tr>
<td>Change the /pl/ in PLATE to /sk/.</td>
<td>skate</td>
<td></td>
</tr>
<tr>
<td>PHONEME LEVEL</td>
<td>Errors: ____</td>
<td></td>
</tr>
<tr>
<td>(Emerges at age 7+)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Change the /t/ in HOT to /p/.</td>
<td>hop</td>
<td></td>
</tr>
<tr>
<td>Change the /ch/in BEACH to /t/.</td>
<td>beet</td>
<td></td>
</tr>
<tr>
<td>Change the /k/ in CAT to /h/.</td>
<td>hat</td>
<td></td>
</tr>
<tr>
<td>Change the /ng/ in SING to /k/.</td>
<td>sick</td>
<td></td>
</tr>
</tbody>
</table>
# Preschool Language Skills Checklist

Child's Name ______________________________________________________________________
DOB: _________________________________ Age: _______________________________________
Parent’s Name(s): __________________________________________________________________
DOE: ___________________________________ Examiner: ________________________________

*Key: A=Always/Accurately/Yes, S=Sometimes/Somewhat, N=Never/Not at all/No*

## 0 to 6 months:
- _____ Startles in response to sounds
- _____ Smiles when spoken to
- _____ Recognizes voices
- _____ Turns head toward sounds
- _____ Fixes gaze on face
- _____ Anticipates feeding on sight of bottle and/or spoon
- _____ Frequently coos, gurgles and make sounds
- _____ Uses different cries to express different needs
- _____ Vocalizes in response to speech
- _____ Laughs when playing
- _____ Uses sounds or gestures to indicate wants
- _____ Uses P, B, M in babbling

## 7 to 12 months:
- _____ Understands “no”
- _____ Recognizes common items
- _____ Understands simple commands (ie “give me”)  
- _____ Reaches to request an object
- _____ Vocalizes to request or indicate need
- _____ Looks for objects out of sight
- _____ Shakes head “NO” and pushes undesired objects away
- _____ Waves “bye”
- _____ Directs others’ behavior by pulling, tugging or patting
- _____ Participates in “pat-a-cake”, “peek-a-boo”, and/or “so big”  
- _____ Has a vocabulary of 1-3 words
- _____ Uses speech sounds rather than only crying to get attention
- _____ Uses M, N, T, D, P, B, Z in babbling/jargon

## 13 to 18 months:
- _____ Identifies 1-3 body parts
- _____ Understands and responds to own name
- _____ Follows simple routine commands
- _____ Uses echolalia and jargon
- _____ Uses jargon to fill gaps in fluency
- _____ Uses adult like intonation patterns
- _____ Combines gestures and vocalizations
- _____ Expressive vocabulary of 3 to 20 words
- _____ Asks “What this?”
- _____ Requests “more”
- _____ Produces 1 to 2 word phrases
- _____ Says “NO”

**Normal speech patterns for this age range include: produces mostly unintelligible with omissions of many final and medical consonants and some initial consonants**
Preschool Language Skills Checklist

19 to 23 months:
- Identifies 5 body parts
- Receptive vocabulary of 300 or more
- Enjoys listening to stories
- Answers “what’s that?” questions
- Uses words more frequently than jargon
- Uses appropriate intonation for questions
- Expressive vocabulary of 50 to 100 words
- Combines nouns and verbs
- Uses pronouns
- Speech is 25-50% intelligible to strangers

2-0 to 3-0 years:
- Identifies several body parts
- Points to pictures in a book when named
- Comprehends concepts: in, on, under, one and all
- Names everyday items
- Requests items by name
- Answers simple questions; what doing, who
- Asks simple questions, what’s that
- Uses 2 to 3 word phrases
- Uses articles such as; a, the
- Uses “ing” (ex. Running)
- Uses contractions such as don’t, can’t
- Refers to self as “me” versus first name
- Engages in short dialogue
- Uses attention getting words such as; hey, look
- Marks initial consonants
- Has mastered P, M, N, H and vowels
- Speech is 50% intelligible to strangers

** Normal speech patterns for this age range include: omission of medial sounds and omission or substitution of final sounds

3-0 to 4-0 years:
- Understands object function
- Identifies things that go together (associations)
- Sort objects into basic categories
- Comprehends concepts: big, little, empty, full, top, in front, in back, around
- Follows one step non routine directions with known concepts
- Uses specific location word (ex. In the barn vs. over there)
- Combines 3 to 4 words in sentences
- Uses a variety of nouns and verbs
- Uses “S” to indicate possession
- Uses regular past tense verbs (ed)
- Uses “S” for regular plurals
- Uses pronouns; he, she, I, you, me, and mine
- Uses negative “Not”
- Uses is, are, am + ing
- Uses conjunction: and
- Asks and answers simple questions; who, what, where, yes/no
- Initiates conversation
- Maintains topic (2-3 turns)
Preschool Language Skills Checklist

3-0 to 4-0 years continued:
_____ Tells two events in chronological order
_____ Consonants mastered: B, W, D, T
_____ Speech is 75% intelligible to strangers

**Typical speech patterns for this age range include: TH errors, cluster reduction, gliding, depalatalization and stopping**

**Typical disfluencies for this age range include: whole and part word repetitions at the beginning of a sentence/phrase**

4-0 to 5-0 years:
_____ Follows two step non routine directions with known concepts
_____ Comprehends concepts: between, bottom, short, long, next to, same, different
_____ Pays attention to a story and answers simple questions about it
_____ Combines 4 to 7 words in sentences
_____ Uses pronouns; our, their, they
_____ Asks and answers simple questions; when, why
_____ Answers questions about function
_____ Answers questions about association
_____ Labels basic categories
_____ With question prompts can describe an object using several descriptors
_____ Tells about past event (ex. event that happened at school, friend’s house)
_____ Accurately retells a story just heard
_____ Refers to self as “I” versus first name/me
_____ Tells name and age
_____ Uses language to express emotion
_____ Consonants mastered: K, G, F
_____ Speech is 100% intelligible to strangers

**Typical speech patterns for this age range include: TH errors, Stopping of SH, CH and J, gliding and depalatalization**

**Typical disfluencies for this age range include: whole and part word repetitions at the beginning of a sentence/phrase**

5-0 to 6-0 years:
_____ Follows three step non-routines directions with known concepts
_____ Comprehends concepts: first, last, day, night, before, after
_____ Understands humor
_____ Uses reflexive pronouns (ex. myself)
_____ Uses pronouns his, her
_____ Uses comparative –er, -est
_____ Uses irregular plurals (ex. feet/teeth)
_____ Uses conjunctions: or, but
_____ Sentence length decreased due to complexity
_____ Name opposites
_____ Can tell one difference and one similarity between two items
_____ Asks and answers simple questions; how, what if
_____ Sequences 4 pictures of events and tells the related story given the pictures
_____ Without question prompts can describe an object using several descriptors
_____ Consonants mastered: NG, Y (stridency should be present in speech – S distortion is still okay but they should mark stridency with another strident s/sh)
_____ Speech is 100% intelligible to strangers

**Typical speech patterns for this age range include: TH errors, gliding and depalatalization**
### Table 3.2
PREDICTED MLU RANGES AND LINGUISTIC STAGES OF CHILDREN WITHIN ONE PREDICTED STANDARD DEVIATION OF PREDICTED MEAN

<table>
<thead>
<tr>
<th>Age ± 1 Mo</th>
<th>Predicted MLU</th>
<th>Predicted SD</th>
<th>Predicted MLU ± 1 SD (Middle 68%)</th>
<th>EI</th>
<th>LI</th>
<th>II</th>
<th>III</th>
<th>EIV</th>
<th>LIV/EV</th>
<th>LV</th>
<th>Post V</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>1.31</td>
<td>.325</td>
<td>.99 – 1.64</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>1.62</td>
<td>.386</td>
<td>1.23-2.01</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>1.92</td>
<td>.448</td>
<td>1.47-2.37</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>2.23</td>
<td>.510</td>
<td>1.72-2.74</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>2.54</td>
<td>.571</td>
<td>1.97-3.11</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>2.85</td>
<td>.633</td>
<td>2.22-3.48</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>36</td>
<td>3.16</td>
<td>.694</td>
<td>2.47-3.85</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>39</td>
<td>3.47</td>
<td>.756</td>
<td>2.71-4.23</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>42</td>
<td>3.78</td>
<td>.817</td>
<td>2.96-4.60</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>45</td>
<td>4.09</td>
<td>.879</td>
<td>3.21-4.97</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>48</td>
<td>4.40</td>
<td>.940</td>
<td>3.46-5.34</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>51</td>
<td>4.71</td>
<td>1.002</td>
<td>3.71-5.71</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>54</td>
<td>5.02</td>
<td>1.064</td>
<td>3.96-6.08</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>57</td>
<td>5.32</td>
<td>1.125</td>
<td>4.20-6.45</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>60</td>
<td>5.63</td>
<td>1.187</td>
<td>4.44-6.82</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a) MLU is predicted from the equation MLU = -.548 +.103 (AGE)
b) SD is predicted from the equation SD MLU= -.0446 + .0205 (AGE)


### KEY:
- EI= Early (stage) I
- LI= Late (stage) I
- II= Stage II
- III= Stage III
- EIV= Early (stage) IV
- LIV/EV= Late (stage) IV to Early (stage) V
- LV=Late (stage) V
- Post V
Observation for Preschool Speech/Language

Student: ____________________________________  DOB: _______________  Date: _______________
Teacher: ____________________________________  School/Setting: ___________________________
Observer: __________________________________________________________________________

Check those items that describe the child’s speech/language skills.

I. Attending

[] Localizes to sounds
[] Responds to his/her name
[] Attends to voices
[] Attends to task

II. Vocalizations

[] Vocalizes spontaneously
[] Vocalizes to indicate wants/needs How?
[] Imitates vocalizations How?
[] Produces words

III. Language

A. Expressive:

[] Typical for age
[] Speaks in:
[] single words
[] 2-3 word phrase
[] complete sentences
[] Vocabulary
[] Uses verb forms (-ing, -ed)
[] Confuses pronouns (I, he, she)
[] Difficulty forming sentences

Uses:
[] 0-10 words
[] 11-20 words
[] 21-50 words
[] over 50 words

B. Receptive:

[] Typical for age
[] Does not follow directions well
[] Difficulty answering yes/no questions (e.g., “Do you want more?”)
[] Vocabulary
[] Difficulty with comprehension

Uses:
[] 0-10 words
[] 11-20 words
[] 21-50 words
[] over 50 words

IV. Articulation

[] Can be easily understood
[] Can seldom be understood
[] Has noticeable errors but can be understood
[] Understood only when topic is known
[] Substitutes sounds for other sounds(e.g., w/l, t/k, d/g, t/f) __________________________
[] Leaves out sounds __________________________
[] Difficulty expressing thoughts clearly

V. Social

What is child’s primary form of communication? (gestures, words, sentences)

[] Initiates communication
[] Demonstrates turn – taking behavior
[] Indicates emotion – How?
[] Retells immediate experiences

VI. Fluency

[] Typical
[] Stutters
[] Blinks eyes
[] When:
[] Conversation
[] Jerks head/leg
[] Answering questions
[] Other: __________________________

VII. Voice

[] Typical
[] Nasal (through nose)
[] Hoarse (as if losing voice)
[] Sounds like a cold

Parent Questionnaire

Date: __/__/__

We are preparing to evaluate/screen your child. Since information from parents is an essential part of the process, we would like you to fill out this form as completely as possible and return it.

We understand that it takes time to answer these questions, and that you may have provided some of the information before. However, complete and up-to-date information is very important to help us understand your child’s situation and plan for each student.

We also know that some of the information asked for is personal and of a private nature. Please be assured that the information you give will be treated confidentially, used in the best interest of your child, and made available only to appropriate school personnel. If you have questions about any item, or concerns about responding to a particular question, or would like to go over the questions with a member of the Diagnostic Team, please do not hesitate to call the school. Thank you.

STUDENT and FAMILY INFORMATION

Child’s name ________________________________ Birth date__/__/____ Age
Address_____________________________________ Zip__________ Phone
School ___________________________________ Grade_________ Work Phone__________________________
Email____________________________________ Alternate number____________________________

Mother’s name ________________________________ Address______________________________
Father’s name ________________________________ Address______________________________
Parents’ marital status: Married Separated Divorced Widowed Single Parent (circle one)

Who has legal authority to sign papers for this child? ______________________________________

If your child does not live with both biological parents, what visitation arrangements are made? ____________________________

Language spoken at home __________________________ Who does the child live with? ____________________________

Brothers and Sisters

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Grade</th>
<th>School</th>
<th>Child Care</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Other people also living in the household

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Relationship To Student</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Birth History

Did mother have any problems during the pregnancy? ______ If yes, please tell us about them.
__________________________________________________________________________________
__________________________________________________________________________________

Did mother smoke cigarettes during the pregnancy? _____ If so, how many packs per day? _________

Did mother take or use any drugs or alcohol while she was pregnant? _______ What was taken or used?

Were there any stressful events or accidents during the pregnancy? ______ Please explain

Was your child premature? _____ How many weeks?_______ What was done to assist the baby?

Were there any injuries or problems at birth? _____ If so, please tell us what happened. __________

Were there any delivery complications, such as breach, C-section, or jaundice? If yes, please explain.

What was the baby’s birth weight? _____lbs _____oz. How long did you and the baby stay in the hospital?
__________________________________________________________________________________

Health History

Please check the illnesses or problems your child has had and describe below:

☐ Meningitis ☐ Fainting spells ☐ Eczema/Rashes ☐ Tics/Twitching
☐ Head Injury ☐ Overweight ☐ Hay Fever ☐ Ear infections/tubes
☐ Concussion ☐ Underweight ☐ Asthma ☐ Constipation/Diarrhea
☐ Allergies ☐ Diabetes ☐ Fevers above 104 ☐ Wetting/Soiling

Please explain the details of the items you checked, such as age or date, complications, etc.
__________________________________________________________________________________
__________________________________________________________________________________

Does your child wear glasses? ______ Since when? _______ Date of last vision exam ___ / ___ / _____
• What is the nature of the vision problem? (near or far-sighted, crossed eyes, etc.)
__________________________________________________________________________________

Does your child seem to have typical hearing? ______ Date of last hearing test ___ / ___ / _____
• What is the medicine, and how often is it taken?
__________________________________________________________________________________

Does your child take any medication? _____ For what? ________________ Since when? _________
• What is the medicine, and how often is it taken?
__________________________________________________________________________________

Does your child have a typical amount of energy? __________ If no, is the problem not enough or too much?
__________________________________________________________________________________

Does your child eat breakfast regularly? ______ Is he/she absent from school too much? __________

Does your child have any nervous habits, such as nail biting or thumb sucking? ______ When did this begin?
__________________________________________________________________________________

Developmental History

At about what age did your child first do each of the following?

Turn over ______ months  Say first words ______ months
Sit up alone ______ months  Ask simple questions ______ years
Stand alone ______ months  Talk in sentences ______ years
Begin to crawl ________ months  Start toilet training ______ years
Start to walk alone ______ months  Finish toilet training ______ years
Feeds him/herself _______ years
In the following section, several stages of childhood are listed, along with groups of words that often describe children at those stages. Please check all of the words that describe your child during each one of the following stages.

**Early Infancy - Birth to 1 year**
- Hard to wean
- Contented
- Rocking
- Crying
- Head banging
- Underactive
- Feeding problems
- Fussy
- Demanding
- Good natured
- Difficult to soothe

**Late Infancy - Ages 1 to 3 years**
- Cooperative
- Uncoordinated
- Affectionate
- Clingy
- Destructive
- Fearful
- Wanderer
- Whining
- Overactive
- Demanding
- Independent
- Happy
- Tantrums
- Underactive
- Night Terrors
- Dependent

**Early Childhood - Ages 3 to 5 years**
- Careless
- Loving
- Excitable
- Fearful
- Underactive
- Untruthful
- Angry
- Friendly
- Tearful
- Helpful
- Lonely
- Imaginative
- Destructive
- Nightmares
- Defiant
- Talkative
- Considerate
- Eating problems
- Motivated
- Demanding
- Neat
- Tempt tantrums
- Funny
- Moody
- Sad
- Restless sleeper
- Follows directions
- Overactive
- Stubborn
- Distractable
- Awkward
- Shy

**Speech Development**

Is your child’s speech understandable? ______ If not, why?______________________________
- Does your child seem to have a difficult time expressing thoughts or ideas?________________
- Does your child stutter? ______ If so, it is occasionally or frequently?________________________

Do any other family members have speech problems? ______ If so, please describe them.________________

Please tell us about any other concerns about your child’s speech development________________

**General Information**

Has your child ever been evaluated/tested? If so, where and when?________________________

Has your child ever been tested by any other agency? If yes, when and by what agency?________________
- What were the findings?_________________________________________________________
Please tell us about any past or present family situations which may have had an impact on your child, such as a death in the family, separations or divorce, problems with siblings, depression, substance abuse problems.

Does your child like school? _______. What do you think your child has the most difficulty with at school? (school work, following rules, getting along with classmates, teachers, etc.) Please describe.

Have other members of your family had similar problems? _______. If yes, please tell us about them.

What other family members have received special education services? ____________________________

What classes or services were provided for them? ____________________________

Please check any of the following problems your child may have, and describe your concerns below.

- Daydreams
- Overeating or under-eating
- Lying
- Nervousness
- Sad/depressed
- Refusal to obey
- Cruelty to animals
- Stealing
- Swears
- Cries easily
- Complaints of being picked on
- Withdrawn/loner
- Fire setting
- Excessive fighting
- Bullies other children
- Running away
- Destructive of property

Please explain your concerns ______________________________________________________________

Who usually disciplines your child?

- Which method of discipline is used most often?
  - Scolding
  - Removing privileges
  - Time-out
  - Spanking

- How often is this necessary?
  - 1-2 times/week
  - 3-4 times/week
  - 1-2 times/month
  - less than once/month

- Do you feel this works well?

Thank you again for taking the time to complete this questionnaire. Please sign and date it below.

Is there anything else you wish to share?

Signature ____________________________

Date ____/____/______
SPEECH
Considerations

Evaluation Data

The following measures are appropriate for use in determining the presence of a speech sound impairment:

- Speech sample
- Contextual probe
- Structured observation
- Classroom work
- Other curriculum/academic results
- Standardized test(s)
- Teacher report, interview, or checklist
- Child report, interview, or checklist
- Parent report, interview, or checklist

NOTE: Teacher, child, and parent reports, interviews, or checklists are not sufficient evidence by themselves and must be supported with additional data.

Overall Functional Level

The speech-language pathologist should complete the attached rating scale first, adding the points assigned to each factor. Then the total points should be applied to the Speech Rating Scale Overall Functional Level to determine an overall severity rating.

Intelligibility

One procedure would be to select 100 consecutive words from contextual speech. Determine the percentage of words understood based on a tape-recorded sample (Weiss, 1980). For additional information on evaluating intelligibility of children’s speech, the following article may be useful: The Intelligibility of Children's Speech: A Review of Evaluation Procedures American Journal of Speech-Language Pathology, Vol.3 81-95, May 1994. http://ajslp.asha.org/cgi/content/abstract/3/2/81

Speech sound (segmental) production:

A standardized articulation test should be administered. Percentile rank and standard scores are used for determining point allocation for category B1. If a Phonological Process analysis is used, the SLP should use a standardized assessment which allows for phonological analysis e.g., Goldman-Fristoe Test of Articulation (Khan-Lewis) or the HAPP-3 (Hodson).

Speech-language pathologists may find it helpful to refer to normative data when explaining speech sound development. You may determine developmental appropriateness by using the Iowa-Nebraska (I-N) norms (Smit, et al, 1990. See Appendix 1, pg.48). These norms were originally published in a Journal of Speech and Hearing Disorders article and reflect the most recent and comprehensive normative study that has been reported. While results are comparable to those of Templin (1957), the I-N norms represent a larger normative sample. Sanders’ (1972) report of normative data does not reflect data that is original to him, but rather represent a reinterpretation (albeit useful) of Templin’s normative data.

There is literature to support children with lateral productions of fricatives and affricates will typically need intervention to correct these misarticulations because they are not developmental patterns. If students are not determined eligible using the Speech Severity Rating Scale, the IEP team may determine eligibility based on this knowledge.
**Phonological Processes**

The following are *minimal requirements* for qualifying a sound change error as a phonological process:

1. **A process must affect more than one sound from a given sound class.** For example, the omission of [t] from the end of words does not necessarily signal the process of final consonant deletion. Deletion of at least one additional plosive [p, b, d, k, g] must also be observed.

2. **The sound change or process must occur at least 40% of the time.** An inconsistent sound change indicates only a potential phonological process. In other words, if the student uttered ten words containing final consonants, s/he must delete the consonant in at least four of those words in order for the pattern to be considered as that of final consonant deletion. An inconsistent sound change may also signal that the student is in a transition phase of development, i.e., the student is gradually eliminating the process on his/her own as sound productions become more developmentally appropriate.

**Stimulability**

Data suggest that lack of stimulability for a misarticulated sound is a good indicator of the error’s impact on intelligibility. In addition, if a child is not stimulable for a sound that is developmentally appropriate, it is less likely that it can be acquired without direct intervention. Stimulability is determined for all error sounds, regardless of developmental appropriateness. Determine stimulability using the Miccio Probe, the GFTA, or clinician-designed measures.
**School-Aged Speech Criteria**

A speech sound disorder (impairment) is characterized by a failure to use speech sounds that are appropriate for a person’s age and linguistic dialect. Such errors in sound productions may interfere with intelligibility, social communication, and/or academic and vocational achievement. Students cannot be considered to have a speech sound disorder based on dialect characteristics that are consistent with cultural and/or linguistic diversity.

Children who evidence problems with hearing, and/or the structure and function of the speech mechanism (e.g., cleft palate), or motor speech difficulty (e.g., apraxia) should be viewed differently than those with more common developmental speech sound disorders. The presence of such etiological variables would suggest a high priority for intervention. After intervention, when the child has reached a plateau in his/her motor skills and has mastered compensatory strategies, the child may not require continued services.

This rating scale represents the most current research in the area of speech sound disorders at the time of initial implementation (2010).

The presence of a speech sound disorder does not guarantee the child’s eligibility for special education, as its impact on the child’s overall communication and educational performance must be considered.

**How to complete the Speech Rating Scale** (Assign the appropriate score for each of the four categories)

Row A (Intelligibility)

Row B1 (Speech Sounds) **OR** Row B2 (Phonological Processes)

Row C (Stimulability)

Row D (Adverse affect on educational performance)
- Use the Teacher Input Form regarding articulation to assess the adverse affect on educational performance.

1. Circle the score for each row and add them to obtain the Total Score.

<table>
<thead>
<tr>
<th>Total Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-3</td>
<td>No Speech Sound Disorder (ineligible)</td>
</tr>
<tr>
<td>4-6</td>
<td>Mild (ineligible)</td>
</tr>
<tr>
<td>7-9</td>
<td>Moderate</td>
</tr>
<tr>
<td>10-12</td>
<td>Severe</td>
</tr>
</tbody>
</table>

2. The comment section may include statements regarding discrepancies among individual tests, subtests, classroom performance and other factors that are relevant to the determination of severity.
## Speech Severity Rating Scale

<table>
<thead>
<tr>
<th>Factors</th>
<th>No Disability (0 pts)</th>
<th>Mild (1 pts)</th>
<th>Moderate (2 pts)</th>
<th>Severe (3 pts)</th>
<th>Points Assigned</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Intelligibility (connected speech) OR Percent Consonants Correct</td>
<td>Age 5+: 90% or &gt; 85-100% = typical</td>
<td>Age 5+: 80-90% OR 65-84% = mild</td>
<td>Age 5+: 70 – 80% OR 50-64% = moderate</td>
<td>Age 5+: &lt;70% OR 0-49% = severe</td>
</tr>
<tr>
<td>B 1</td>
<td>Speech sounds (segmental productions) (e.g., GFTA, Arizona,)</td>
<td>SS 86-100 50%ile SD 0 -.99 below the mean</td>
<td>SS 78-85 16%ile SD 1.0-1.49 below the mean</td>
<td>SS 70-77 7%ile SD 1.5-1.99 below the mean</td>
<td>SS &lt; 70 2%ile SD 2.0&gt; below the mean</td>
</tr>
<tr>
<td>B 2</td>
<td>Phonological Processes (e.g., HAPP-3, Khan-Lewis)</td>
<td>No error processes</td>
<td>One or more of the following error processes occur in 40% or more available opportunities:  - gliding of liquids  - cluster reductions with /l/, /r/, /w/  - vowelization of post-vocalic liquids (/r/,/l/)</td>
<td>One or more of the following error processes occur in 40% or more of available opportunities:  - weak syllable deletion  - cluster reduction with /s/  - fronting of velars</td>
<td>One or more of the following error processes occur 40% or more of available opportunities:  - initial consonant deletion  - final consonant deletion  - stopping  - depalatization of final singletons</td>
</tr>
<tr>
<td>C</td>
<td>Stimulability (Miccio, GFTA, informal)</td>
<td>90% of the error sounds are stimulable</td>
<td>60 – 89% of the error sounds are stimulable.</td>
<td>50 -59% of the error sounds are stimulable.</td>
<td>Less than 50% of the error sounds are stimulable.</td>
</tr>
<tr>
<td>D</td>
<td>Educational Impact</td>
<td>Articulation skills are adequate for the student’s participation in educational settings</td>
<td>Articulation skills are developing and can be addressed in the general educational setting</td>
<td>Articulation skills have an effect on the student’s ability to participate in educational settings</td>
<td>Articulation skills have a significant impact on the student’s ability to participate in educational settings</td>
</tr>
</tbody>
</table>

### TOTAL POINTS

Circle the score for each row and add them to obtain the Total Score.

- Total Score: 0-3  No Speech Sound Disorder (ineligible)
- Total Score: 4-6  Mild (ineligible)
- Total Score: 7-9  Moderate
- Total Score: 10-12  Severe

Comments: ____________________________________________________________
______________________________________________________________________
______________________________________________________________________
# Speech Severity Rating Scale
## Overall Functional Level

<table>
<thead>
<tr>
<th>Level</th>
<th>Condition</th>
<th>Educational Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 0 (0-3 points)</td>
<td>The student’s connected speech during educational activities is consistently understood and not distracting to the listener. Student’s verbal participation in educational activities is rarely limited by self-consciousness or listener reaction.</td>
<td>Speech skills are adequate for the student’s participation in educational/developmentally appropriate settings.</td>
</tr>
<tr>
<td>Ineligible</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level 1 (4 – 6 points)</td>
<td>The ability to understand the student’s connected speech in educational activities may be affected by listener familiarity and/or knowledge of the context. The student’s articulation is occasionally distracting to the listener. The student’s verbal participation in educational activities may occasionally be limited by self-consciousness about listener reactions to his/her speech.</td>
<td>Speech skills are developing and can be addressed in the general educational/developmentally appropriate setting.</td>
</tr>
<tr>
<td>Mild (Ineligible)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level 2 (7 – 9 points)</td>
<td>The student’s connected speech in educational activities requires context cues to be understood. The student’s articulation is usually distracting to the listener. The student is aware of errors. The student’s verbal participation in educational activities may frequently be limited by self-consciousness about listener reactions to his/her speech.</td>
<td>Speech skills have an effect on the student’s ability to participate in educational/developmentally appropriate settings.</td>
</tr>
<tr>
<td>Moderate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level 3 (10 – 12 points)</td>
<td>The student’s connected speech in educational activities is rarely understood in known context. The student may or may not be aware of errors and is rarely stimulable for correct production. The student’s verbal participation in educational activities is usually limited by self-consciousness about listener reactions to his/her speech.</td>
<td>Speech skills have a significant impact on the student’s ability to participate in educational/developmentally appropriate settings.</td>
</tr>
<tr>
<td>Severe</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Preschool Speech Criteria

A speech sound disorder (impairment) is characterized by a failure to use speech sounds that are appropriate for a person’s age and linguistic dialect. Such errors in sound productions may interfere with intelligibility, social communication, and/or academic and vocational achievement. Students cannot be considered to have a speech sound disorder based on dialectal characteristics that are consistent with cultural and/or linguistic diversity.

Children who evidence problems with hearing, or the structure and function of the speech mechanism (e.g., cleft palate), or motor speech difficulty (e.g., apraxia) should be viewed differently than those with more common developmental speech sound disorders. The presence of such etiological variables would suggest a high priority for intervention. After intervention, when the child has reached a plateau in his/her motor skills and has mastered compensatory strategies, the child may not require continued services.

This rating scale represents the most current research in this area of speech sound disorders at the time of initial implementation (2010).

The presence of an articulation/phonological impairment does not guarantee the child’s eligibility for special education.

**How to complete the Speech Rating Scale for PRESCHOOLERS** (Assign the appropriate score for each of the four categories)

- **Row A (Intelligibility OR Percent of Consonants Correct)**
- **Row B1 (Speech Sounds) OR Row B2 (Phonological Processes)**
- **Row C (Impact on Social Development)**
  - Use the ‘Observation of Speech/Language for Preschool’ to assist with determining score for this category.

1. Circle the score for each row and add them to obtain the Total Score.

<table>
<thead>
<tr>
<th>Total Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-3</td>
<td>No Speech Sound Disorder (ineligible)</td>
</tr>
<tr>
<td>4-5</td>
<td>Mild (ineligible)</td>
</tr>
<tr>
<td>6-9</td>
<td>Moderate to Severe</td>
</tr>
</tbody>
</table>

2. The comment section may include statements regarding discrepancies among individual tests, subtests, classroom performance and other factors that are relevant to the determination of severity.
# Preschool Speech Severity Rating Scale

<table>
<thead>
<tr>
<th>Factors</th>
<th>No Disability (0 pts)</th>
<th>Mild (1 pts)</th>
<th>Moderate (2 pts)</th>
<th>Severe (3 pts)</th>
<th>Points Assigned</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A</strong></td>
<td><strong>Intelligibility</strong></td>
<td>Age 2.5-3: 75% or &gt;</td>
<td>Age 2.5-3: 65-75%</td>
<td>Age 2.5-3: 50-65%</td>
<td><strong>%</strong></td>
</tr>
<tr>
<td></td>
<td>(connected speech)</td>
<td>Age 4: 85% or &gt;</td>
<td>Age 4: 75-85%</td>
<td>Age 4: 65 – 75%</td>
<td>or 0.99 below the mean</td>
</tr>
<tr>
<td>OR</td>
<td>Percent</td>
<td>Age 5+: 90% or &gt;</td>
<td>Age 5+: 80-90%</td>
<td>Age 5+:70 – 80%</td>
<td>1%ile</td>
</tr>
<tr>
<td></td>
<td>Consonants Correct</td>
<td><strong>OR</strong></td>
<td><strong>OR</strong></td>
<td><strong>OR</strong></td>
<td>5%ile</td>
</tr>
<tr>
<td></td>
<td>85-100% = typical</td>
<td><strong>65-84% = mild</strong></td>
<td><strong>50-64% = moderate</strong></td>
<td><strong>0-49% = severe</strong></td>
<td></td>
</tr>
<tr>
<td><strong>B</strong></td>
<td><strong>Speech sounds</strong></td>
<td>SS 86-100</td>
<td>SS 78-85</td>
<td>SS 70-77</td>
<td><strong>%</strong></td>
</tr>
<tr>
<td></td>
<td>(segmental productions)</td>
<td>50%ile</td>
<td>16%ile</td>
<td>7%ile</td>
<td>or 1.89 below the mean</td>
</tr>
<tr>
<td>(e.g., GFTA, Arizona, PAT)</td>
<td>SD 0 -.99 below the mean</td>
<td>SD 1.0-1.49 below the mean</td>
<td>SD 1.5-1.99 below the mean</td>
<td>SD 2.0&gt; below the mean</td>
<td></td>
</tr>
<tr>
<td><strong>B1</strong></td>
<td><strong>Phonological</strong></td>
<td>No error</td>
<td>One or more of</td>
<td>One or more of</td>
<td><strong>%</strong></td>
</tr>
<tr>
<td></td>
<td>Processes (e.g.,</td>
<td>processes</td>
<td>the following</td>
<td>the following</td>
<td>or 40% of</td>
</tr>
<tr>
<td></td>
<td>HAPP-3, Khan-Lewis)</td>
<td>occur in</td>
<td>error processes</td>
<td>error processes</td>
<td>or of</td>
</tr>
<tr>
<td></td>
<td></td>
<td>40% or more</td>
<td>occur in 40% or</td>
<td>occur in 40% or</td>
<td>available</td>
</tr>
<tr>
<td></td>
<td></td>
<td>of available</td>
<td>more of</td>
<td>more of</td>
<td>opportunities:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>opportunities:</td>
<td>available</td>
<td>available</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>gliding of</strong></td>
<td><strong>weak syllable</strong></td>
<td>**cluster</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>liquids</strong></td>
<td><strong>deletion</strong></td>
<td><strong>reduction</strong></td>
<td></td>
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<td></td>
<td></td>
<td><strong>cluster</strong></td>
<td><strong>cluster</strong></td>
<td><strong>with</strong></td>
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<td></td>
<td></td>
<td><strong>reductions</strong></td>
<td><strong>reduction</strong></td>
<td><strong>/s/</strong></td>
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<td><strong>with</strong></td>
<td><strong>with</strong></td>
<td><strong>/s/</strong></td>
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<td><strong>/s/</strong></td>
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<td><strong>/w/</strong></td>
<td><strong>/w/</strong></td>
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<td></td>
<td></td>
<td><strong>vowelization</strong></td>
<td><strong>vowelization</strong></td>
<td><strong>vowelization</strong></td>
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<td></td>
<td></td>
<td><strong>post-vocalic</strong></td>
<td><strong>post-vocalic</strong></td>
<td><strong>post-vocalic</strong></td>
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<td></td>
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<td><strong>liquids</strong></td>
<td><strong>liquids</strong></td>
<td><strong>liquids</strong></td>
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<td><strong>(/r/)</strong></td>
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<td><strong>(/l/)</strong></td>
<td><strong>(/l/)</strong></td>
<td><strong>(/l/)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>C</strong></td>
<td><strong>Social/Emotional</strong></td>
<td>Speech skills</td>
<td>Speech skills</td>
<td>Speech skills</td>
<td><strong>%</strong></td>
</tr>
<tr>
<td></td>
<td>Impact</td>
<td>are adequate</td>
<td>are developing</td>
<td>have an</td>
<td>or 40% of</td>
</tr>
<tr>
<td></td>
<td></td>
<td>for the child’s participation in</td>
<td>and child can</td>
<td>effect on the</td>
<td>available</td>
</tr>
<tr>
<td></td>
<td></td>
<td>varied settings:</td>
<td>be understood</td>
<td>the child’s</td>
<td>opportunities:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Preschool</td>
<td>in varied</td>
<td>ability to</td>
<td><strong>initial</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Daycare</td>
<td>settings:</td>
<td>participate in</td>
<td>consonant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Home</td>
<td>– Preschool</td>
<td>varied settings:</td>
<td>consonant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No awareness</td>
<td>– Daycare</td>
<td>– Preschool</td>
<td>deletion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>of sound errors</td>
<td>– Home</td>
<td>– Daycare</td>
<td>deletion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Limited</td>
<td>Child shows</td>
<td>– Home</td>
<td>deletion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>awareness of</td>
<td>some frustration</td>
<td>Child shows</td>
<td><strong>final</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>errors</td>
<td>when not</td>
<td>some frustration</td>
<td>consonant</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>understood.</td>
<td>significant</td>
<td>deletion</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Child shows</td>
<td>impact on child’s</td>
<td>deletion</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>significant</td>
<td>ability to</td>
<td>deletion</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>frustration</td>
<td>participate in</td>
<td>deletion</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(e.g., tantrums,</td>
<td>varied settings:</td>
<td>deletion</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>withdrawal…)</td>
<td>– Preschool</td>
<td>deletion</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>– Daycare</td>
<td>deletion</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>– Home</td>
<td>deletion</td>
</tr>
</tbody>
</table>

**TOTAL POINTS**

Circle the score for each row and add them to obtain the Total Score.

- **Total Score**: 0 - 3  No Speech Sound Disorder **(ineligible)**
- **Total Score**: 4 - 5  Mild **(ineligible)**
- **Total Score**: 6 - 9  Moderate to Severe

**Comments**: ____________________________________________________________

__________________________________________________________

__________________________________________________________
## Preschool Speech Severity Rating Scale
### Overall Functional Level

<table>
<thead>
<tr>
<th>Level</th>
<th>Condition</th>
<th>Educational Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 0 (0-3 points) <strong>Ineligible</strong></td>
<td>The child’s connected speech during educational activities is consistently understood and not distracting to the listener. The child’s verbal participation in educational/developmental activities is rarely limited by self-consciousness or listener reaction.</td>
<td>Speech skills are adequate for the student’s participation in educational/developmentally appropriate settings.</td>
</tr>
<tr>
<td>Level 1 (4 – 5 points) <strong>Mild (Ineligible)</strong></td>
<td>The ability to understand the child’s connected speech in educational/developmental activities may be affected by listener familiarity and/or knowledge of the context. The child’s articulation is occasionally distracting to the listener. Verbal participation in educational/developmental activities may occasionally be limited by self-consciousness about listener reactions to his/her speech.</td>
<td>Speech skills are developing and can be addressed in the general educational/developmentally appropriate setting.</td>
</tr>
<tr>
<td>Level 2 (6 points) <strong>Moderate</strong></td>
<td>The child’s connected speech in educational/developmental activities requires contextual cues to be understood. The child’s articulation is usually distracting to the listener. The child is aware of errors and verbal participation in educational/developmental activities may frequently be limited by self-consciousness about listener reactions to his/her speech.</td>
<td>Speech skills have an effect on the student’s ability to participate in educational/developmentally appropriate settings.</td>
</tr>
<tr>
<td>Level 3 (7-9 points) <strong>Severe</strong></td>
<td>The child’s connected speech in educational/developmental activities is rarely understood in known context. The child may or may not be aware of errors. The child’s verbal participation in educational/developmental activities is usually limited by self-consciousness about listener reactions to his/her speech.</td>
<td>Speech skills have a significant impact on the student’s ability to participate in educational/developmentally appropriate settings.</td>
</tr>
</tbody>
</table>
SPEECH APPENDICES

(Attached are resources that MAY be used in the assessment process to help the SLP determine eligibility)

1. Iowa-Nebraska Articulation Norms
2. MICCIO Stimulability Probe (Instructions and chart)
3. Percent Consonants Correct (Instructions and chart)
4. Sound Development chart – Age at which 90% of males have acquired each phoneme and word-initial cluster
5. Sound Development chart – Age at which 90% of females have acquired each phoneme and word-initial cluster
6. Teacher Input – Speech Sound Production
7. Phonological Processes (3 pages)
8. Oral Speech Mechanism Screening

Iowa – Nebraska Articulation Norms

Listed below are the recommended ages of acquisition for phonemes and clusters, based generally on the age at which 90% of the children correctly produced the sound.

Note regarding phoneme positions:
/m/ refers to prevocalic and postvocalic positions
/h-/ refers to prevocalic positions
/-l/ refers to postvocalic positions

<table>
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<tr>
<th>Phoneme</th>
<th>Age of Acquisition (Females)</th>
<th>Age of Acquisition (Males)</th>
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The Miccio Stimulability Probe

Use of the Miccio Probe is best described in Miccio’s article in the American Journal of Speech-Language Pathology, Volume 11, Issue 3. “To facilitate quick administration of a stimulability probe, only sounds absent from the inventory are tested. The student is asked to imitate these specific consonants in isolation or nonsense syllables. Those sounds imitated correctly some of the time (at least 30% of possible opportunities) are presumed to be stimulable….If multiple sounds are absent from the inventory, the probe may be shortened by administering only one vowel context during the initial assessment. In the complete probe, a child has 10 opportunities to produce a sound: in isolation and in three word positions in three vowel contexts, [i], [u], and [a]. The corner vowel contexts: a high (or close) unround front vowel, a high round back vowel, and a low unround vowel usually reveal any consonant-vowel dependencies. If time does not permit the completion of the probe, stimulability is tested in isolation and with the vowel [a], for example, [sa], [asa], [as]”.

[i] as in beat
[u] as in shoe
[a] as in pop

Nonstimulable sounds are least likely to change without direct treatment (Powell, Elbert, & Dinnsen, 1991). In addition, Miccio, Elbert, & Forrest (1999) found that sounds that are stimulable undergo the most change in the absence of treatment. These results suggest that stimulable sounds are being acquired naturally and may not require direct treatment.

Miccio Stimulability Probe

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Transcriber:  
Date:  
Prompt: “Look at me, listen, and say what I say.”

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<th>a_</th>
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**Percentage of Consonants Correct**

The procedures below are based on the recommendations of Shriberg and Kwiatkowski (1982), but are abbreviated for purposes of simplicity.

1. Obtain a tape-recorded connected speech sample that will include 90 different words. Usually a sample of around 225 total words is sufficient. If the child is so unintelligible that it is impossible to identify this number of different words, then a single word assessment tool can be used to gather a corpus of single word productions for analysis.
2. Only consonants are scored, not vowels (i.e., only the consonantal /r/ is scored).
3. Score only the first production of a consonant if a syllable is repeated (e.g., ba-balloon. Score only the first production of /b/).
4. Do not score consonants if a word is unintelligible or only partially intelligible.
5. Errors include substitutions, deletions, distortions, and additions. Voicing errors are only scored for consonants in the initial position of words.
6. If /ng/ is replaced with /n/ at the end of a word, do not score it as an error. Likewise, minor sound changes due to informal speech and/or selection of sounds in unstressed syllables are not scored as errors (e.g., /fider/ for “feed her,” /dono/ for “don’t know”).
7. Dialectal variations are not scored as errors.
8. To determine the PCC value use the following formula:

\[
\frac{\text{Number of Correct Consonants}}{\text{Total Number of Consonants}} \times 100 = \text{PCC}
\]

# Percentage of Consonants Correct Summary

<table>
<thead>
<tr>
<th>Name:</th>
<th>Age:</th>
<th>Source of Speech Sample:</th>
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<th>Target Word</th>
<th>Target Consonants</th>
<th>Child's Production</th>
<th>Number of Consonants in Target Word</th>
<th>Number of Consonants Correct</th>
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**Total**

\[
\frac{\text{Number of consonants correct}}{\text{number of consonants in target word}} = \frac{\square}{\square} \\
\times 100 = \frac{\square}{\square} \% \text{ consonants correct}
\]

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<td>Mild–moderate disorder</td>
<td>65–84%</td>
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<td>Typical development</td>
<td>85–100%</td>
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# Sound Development Chart

Age at which 90% of **MALES** have acquired each phoneme and word-initial cluster

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## Sound Development Chart

Age at which 90% of **FEMALES** have acquired each phoneme and word-initial cluster

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Teacher Input – Speech Sound Production

Student: ________________________________________________  Grade: ________________
School: ____________________________________________  Teacher: ______________________

Your observations and responses concerning the above student will help determine if this student has a sound problem which adversely affects educational performance. Please return the completed form to the speech-language pathologist.

1. Is this student’s intelligibility reduced to the extent that you find it difficult to understand him/her?
   If Yes, check appropriate descriptions:  □ Occasional Difficulty
                                              □ Frequent Difficulty
                                              □ Considerable Difficulty

   Student’s speech is ____% intelligible even though some sound errors may be present.

2. Does this student appear frustrated or embarrassed because of his/her production errors?

3. Does the student avoid speaking in class or in other situations because of his/her production errors?

4. Has this student ever expressed concern about his/her production errors?

5. Does the student’s speech distract listeners from what the student is saying?

6. Does the student have age-appropriate awareness of sounds in words and ability to rhyme, segment, and manipulate sounds in words?

7. Does the student make the same errors when reading aloud as s/he does when speaking?

8. Does the student have difficulty discriminating sounds and/or words from each other?

9. Does the student make spelling errors that appear to be associated with speaking errors?

10. Does the student self-correct articulation errors?

11. Does the student have reading problems due to articulation problems?

12. Does the student mispronounce during reading of words containing error sounds?

13. Rate the impact of the student’s speech errors on his/her social, emotional, academic and/or vocational functioning. Check one.
    □ does not interfere  □ minimal impact
    □ interferes          □ seriously limits

   It is my opinion that these behaviors:
    □ Do not adversely affect educational performance.
    □ Do adversely affect educational performance.

Comments

__________________________________________________________
__________________________________________________________
__________________________________________________________
__________________________________________________________
__________________________________________________________

Classroom Teacher Signature                     Date
**PHONOLÓGICAL PROCESSES** (Page 1 of 3)

Definition: Systematic changes that affect entire phoneme classes or phoneme sequences. These changes are age appropriate up to the ages listed below.

<table>
<thead>
<tr>
<th>Ages</th>
<th>DELETIONS</th>
</tr>
</thead>
</table>
| 2    | 1. Initial Consonant Deletion  
     | 2. Final Consonant Deletion  
     | 3. Consonant Cluster Reduction  |
| 3    | at/hat  
     | no/noze  
     | tap/stop (deleting one or more)  |
| 4    | SUBSTITUTIONS |
| 3½ – 5 | 1. Stopping  
        | 2. Voicing/Devoicing  
        | 3. Gliding  
        | 4. Fronting/Backinning  
        | 5. Affrication/Deaffrication  |
| 3    | ton/sun  
     | die/tie  
     | ju/shoe  
     | dum/gum  
     | chew/shoe  |
| 3 – 6 | dus/juice  
       | crip/crib  
       | wef/leaf  
       | cop/top  
       | ship/chip  |
| 4 – 5 | ASSIMILATION |
| 5 – 6 | 3 – 4 | 1. Progressive  
       | 2. Regressive  
       | OR  
       | 3. Velar Assimilation  
       | 3 – 4 | beb/bed  
       | dod/dog  
       | lellow/yellow  
       | lellow/yellow  
       | 3 | 4 | 5 | 6 | Nasal Assimilation  
       | gog/dog  
       | beb/bed  
       | beads/bed  
       | lellow/yellow  
       | lellow/yellow  
       | dod/dog  
       | 3 | 4 | 5 | 6 | Neon/pencil  
       | 3 – 4 | 1. Vocalization (vowelization)  
       | 4 | 2. Weak Syllable Deletion  
       | 7 | 3. Transposition (Metathesis)  
       | 5 | 4. Vowel Neutralization  
       | 2 | 5. CC Deletion  
       | 2 | 6. Reduplication  
       | 3 – 4 | bado/bottle  
       | 4 | tefon/telephone  
       | 7 | aks/ask  
       | 5 | bad/bad  
       | 2 | op/stop  
       | 6 | wawa/water  

### PHONOLOGICAL PROCESSES (Page 2 of 3)

<table>
<thead>
<tr>
<th>Phonological Process</th>
<th>Description</th>
<th>Example</th>
<th>Developmental Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Syllable Structure Processes</strong></td>
<td>Reduction of CVC words or syllables to CV form, not usually sound specific</td>
<td>book → /b1/</td>
<td>Children who are developing language normally will begin to include final consonants by age 3¹</td>
</tr>
<tr>
<td>1. Deletion of Final Consonant</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Cluster Reduction</td>
<td>Simplification of clusters of consonants usually by deleting the one that is most difficult to produce</td>
<td>tree → /ti/</td>
<td>Most children (90%) do not use cluster reduction after age 4¹</td>
</tr>
<tr>
<td>3. Weak Syllable Deletion</td>
<td>Deletion of unstressed syllables</td>
<td>telephone → /t fon/</td>
<td>Process does not exist in speech of normally developing children beyond age 4¹</td>
</tr>
<tr>
<td>4. Glottal Replacement</td>
<td>Replacement of final consonant of a syllable, usually in the intervocalic position, by a glottal stop; may mark the place of a consonant that is deleted.</td>
<td>kitchen → /kiʔan/</td>
<td></td>
</tr>
<tr>
<td><strong>B. Harmony Processes</strong></td>
<td>Substitution of a labial phoneme for a non-labial phoneme due to influence of a dominant labial phoneme contained within the word</td>
<td>thum → /wʌm/</td>
<td></td>
</tr>
<tr>
<td>1. Labial Assimilation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Alveolar Assimilation</td>
<td>Substitution of a phoneme which is produced with alveolar placement for a non-alveolar phoneme due to influence of a dominant alveolar phoneme within the word</td>
<td>yellow → /lɛlo/</td>
<td></td>
</tr>
<tr>
<td>3. Velar Assimilation</td>
<td>Substitution of a phoneme which is produced with velar placement for a non-velar phoneme due to influence of a dominant velar phoneme within the word</td>
<td>dog → /gɔɡ/</td>
<td></td>
</tr>
<tr>
<td>4. Prevocalic Voicing</td>
<td>Substitution of a voiced stop for its voiceless cognate due to influence of the following vowel</td>
<td>pig → /big/</td>
<td></td>
</tr>
<tr>
<td>5. Final Consonant Devoicing</td>
<td>Substitution of a voiceless stop for its voiced cognate due to influence of the silence following the word</td>
<td>bed → /bɛt/</td>
<td>Devoicing of final consonants does not occur after age 3 in normal phonological development¹</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phonological Process</th>
<th>Description</th>
<th>Example</th>
<th>Developmental Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>C. Feature Contrast Processes</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Stopping</td>
<td>Substitution of a stop for a fricative</td>
<td>sun $\rightarrow$ /tʌɳ/</td>
<td></td>
</tr>
<tr>
<td>2. Affrication</td>
<td>Substitution of affricatives for fricatives; usually occurs more often with sibilant fricatives than others</td>
<td>sun $\rightarrow$ /tsʌɳ/</td>
<td>Most fricatives should be correctly produced by age 4.</td>
</tr>
<tr>
<td>3. Fronting</td>
<td>Substitution of phonemes by others which are produced anterior to the target phonemes; occurs commonly with velar stops</td>
<td>wagon $\rightarrow$ /wadn/</td>
<td>Reported to no longer be evident by age 4 in normally developing children.</td>
</tr>
<tr>
<td>4. Gliding of Fricatives</td>
<td>Substitution of glides for fricative phonemes</td>
<td>soap $\rightarrow$ /jop/</td>
<td></td>
</tr>
<tr>
<td>5. Gliding of Liquids</td>
<td>Substitution of /w/, and /j/ for /l/ or /t/, simplification process</td>
<td>red $\rightarrow$ /wed/</td>
<td>Majority of children reported to produce correct liquids by age 4.</td>
</tr>
<tr>
<td>6. Vowelization</td>
<td>Substitution of vowels for syllable consonants, most frequently /u/ and /o/</td>
<td>table $\rightarrow$ /tebo/</td>
<td>Syllabics are usually acquired by age 4</td>
</tr>
<tr>
<td>7. Denasalization</td>
<td>Substitution of stops for nasals; usually affects word-initial and word-medial nasals more than word-final nasals</td>
<td>smoke $\rightarrow$ /bok/</td>
<td></td>
</tr>
</tbody>
</table>

Examines of the Oral Peripheral Mechanism

Name: __________________________ Age: _______ Examiner: _______________________
School: _________________________ Date: ___________

1. **Facial Appearance**

2. **Lips**
   - Habitual Posture: Closed _______ Parted _______
   - Mobility: Press _______ Purse _______ Retracts _______

3. **Jaw Mobility**
   Sufficient _______ Insufficient _______ Excessive _______

4. **Tongue**
   Appearance at rest: ______________________
   Size _______ Appropriate _______ Too large _______ Too small _______
   Protrusion _______ Tremors _______ Deviation _______
   Mobility Evaluation _______ Lateralization _______ Licks lips with tongue _______
   Lingual Frenum _______ Moves independently with jaw _______
   Sweeps palate from alveolar ridge _______

5. **Palate**
   Appearance of hard palate _______ Length of soft palate _______
   Mobility _______ Gag Reflex _______
   Closure evidently complete _______
   Uvula _______ Length _______ Mobility _______ Bifid _______

6. **Tongue Thrust**
   Does s/he swallow with teeth apart? Yes _______ No _______
   Can you see the tongue when s/he swallows? Yes _______ No _______
   If s/he swallows with the lips closed, can you see tensing of the chin? Yes _______ No _______

7. **Dental observations**
   Spacing _______ Missing teeth _______
   Alignment: normal _______ misaligned _______ spaced _______
   Condition: good _______ slight decay _______ excessive decay _______
   Occlusion: normal _______ overjet _______ edge to edge _______
   crossbite _______

8. **Breathing**
   Mouth breather? Yes _______ No _______
   Other deviations noted:
   __________________________________________
   __________________________________________

9. **Comments**
   __________________________________________
   __________________________________________
VOICE
**Voice Criteria**

A voice impairment is defined as a pitch, loudness or quality condition that calls attention to itself rather than to what the speaker is saying.

**How to complete the Voice Rating Scale:** Circle the score for each of the five categories:

Row A: Voice Quality
Row B: Resonance
Row C: Loudness
Row D: Pitch
Row E: Educational impact

- Use the Teacher Input Form regarding voice to assess the adverse affect on educational performance.

1. Circle the score for each row and add them to obtain the total score.

<table>
<thead>
<tr>
<th>Total Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-3</td>
<td>No Voice Impairment (ineligible)</td>
</tr>
<tr>
<td>4-6</td>
<td>Mild (ineligible)</td>
</tr>
<tr>
<td>7-10</td>
<td>Moderate</td>
</tr>
<tr>
<td>11-15</td>
<td>Severe</td>
</tr>
</tbody>
</table>

2. The comment section may include statements of clinical impressions based on observations that are relevant to the determination of severity.

**Considerations**

There are multiple aspects to consider when evaluating voice impairments:
- pitch
- loudness
- quality
- resonance
- duration

Many disorders of voice or resonance have an organic etiology with a related medical history. Other disorders are functionally based, caused by “faulty usage” or behavioral histories. For assessment and instructional purposes, classifying voice disorders by vocal behaviors or symptoms provides the most useful information for the speech-language pathologist. Boone and McFarlane (2005) suggest “For those patients not referred by laryngologists, part of the evaluation process may include a medical evaluation. Occasional voice patients, such as those who do not talk loudly enough or those who use aberrant pitch levels for what appear to be functional reasons, may not require medical evaluation. Patients with voice quality and resonance problems generally require some medical evaluation of the ears, nose, oral cavity, and throat as part of the total voice evaluation…A laryngeal examination must be completed before a patient can begin voice therapy for problems related to quality or resonance.” (p. 133)

A student may be eligible for speech-language pathology services when vocal quality, pitch, loudness, resonance (hypernasality, hyponasality, nasal emissions, mixed), and/or duration adversely affect educational performance and the ability to communicate. If structural etiology is suspected, a referral to the regional cleft palate team may be warranted. Parent may elect to consult their personal physician. Information can be obtained by contacting the Children’s Health Services at (701)328-2436, toll free at (800)755-2714, or at [www.ndhealth.gov/CSHS/clinic.htm](http://www.ndhealth.gov/CSHS/clinic.htm). There is currently no cost to the family to participate in the cleft palate team evaluation.
Evaluation

The following measures are appropriate for use in determining the presence of a voice impairment:

1. Speech sample
2. Structured observation
3. Observation of oral presentations
4. Teacher report, interview, or checklist
5. Child report, interview, or checklist
6. Parent report, interview, or checklist

Note: Teacher, child, and parent reports, interviews, or checklists are not sufficient evidence by themselves and must be supported with additional data.

Best Practice: A comprehensive voice examination should include information obtained from both subjective measures (e.g., perceptual ratings and clinical impressions based on observations and analysis of speech samples) and objective measures (e.g., standardized tests or instrument evaluations). Observations should take place in situations calling for both low and high vocal demand:

- Low vocal demand: utterances produced in a relatively quiet environment or short responses that do not require talking over a prolonged period of time.
- High vocal demand: talking in a noisy environment (e.g., in the cafeteria), for a prolonged period of time (e.g., oral presentation or reading aloud), or controlling the voice over a wide pitch range (e.g., singing).

NOTE: Before a child may be found eligible for services for a voice impairment, the child should receive a medical examination from an otolaryngologist (i.e., ear, nose and throat physician), clearing the child for intervention. This is important to ensure the source of the voice impairment is not an organic problem for which therapy is contraindicated.
# Voice Severity Rating Scale

<table>
<thead>
<tr>
<th>Factors</th>
<th>No Disability (0 pts)</th>
<th>Mild (1 pt)</th>
<th>Moderate (2 pts)</th>
<th>Severe (3 pts)</th>
<th>Points Assigned</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A</strong> Voice Quality (hoarse, breathy, no voice)</td>
<td>Normal voice quality</td>
<td>Inconsistent problems; noticeable to the trained listener.</td>
<td>Frequent problems in conversational speech. Noticeable to most listeners.</td>
<td>Persistent problem. Noticeable at all times.</td>
<td></td>
</tr>
<tr>
<td><strong>B</strong> Resonance (hypernasality, nasal emissions, and/or hyponasality)</td>
<td>Normal resonance</td>
<td>Inconsistent problems; noticeable to the trained listener.</td>
<td>Frequent problems. Inappropriate for age, gender or culture. Noticeable to most listeners.</td>
<td>Persistent problem. Always inappropriate for age, gender or culture. Noticeable at all times.</td>
<td></td>
</tr>
<tr>
<td><strong>C</strong> Loudness (judged for appropriateness for age and gender, and for appropriate variability)</td>
<td>Normal loudness.</td>
<td>Inconsistent problems; noticeable to the trained listener.</td>
<td>Frequent problems. Inappropriate for age, gender or culture. Noticeable to most listeners.</td>
<td>Persistent problem. Always inappropriate for age, gender or culture. Noticeable at all times.</td>
<td></td>
</tr>
<tr>
<td><strong>D</strong> Pitch (judged for appropriateness for age and gender, and for appropriate variability)</td>
<td>Normal pitch.</td>
<td>Inconsistent problems; noticeable to the trained listener.</td>
<td>Frequent problems. Inappropriate for age, gender or culture. Noticeable to most listeners.</td>
<td>Persistent problem. Always inappropriate for age, gender or culture. Noticeable at all times.</td>
<td></td>
</tr>
<tr>
<td><strong>E</strong> Educational Impact (social/emotional) (e.g., Teacher input)</td>
<td>Voice skills are adequate for the student’s participation in educational settings</td>
<td>Voice skills are developing and can be addressed</td>
<td>Voice skills have an effect on the student’s ability to participate in educational setting</td>
<td>Voice skills have a significant impact on the student’s ability to participate in educational setting</td>
<td></td>
</tr>
</tbody>
</table>

Circle the score for each row and add them to obtain the total score.

Total Score: 0-3  No Voice Impairment (ineligible)
Total Score: 4-5  Mild (ineligible)
Total Score: 6-10  Moderate
Total Score: 11-15  Severe.

Comments: ____________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
### Voice Severity Rating Scale

#### Overall Functional Level

<table>
<thead>
<tr>
<th>Level</th>
<th>Condition</th>
<th>Educational Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Level 0</strong></td>
<td>The student’s voice consistently sounds normal and does not call attention to itself.</td>
<td>The student’s ability to participate in educational activities requiring low or high vocal demands is not limited by his/her voice. The student self-monitors vocal production as needed.</td>
</tr>
<tr>
<td>(0 –3 points)</td>
<td><strong>Ineligible</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Level 1</strong></td>
<td>The student’s voice occasionally sounds normal and is usually not distracting to the listener. There is some situational variation.</td>
<td>The student’s ability to participate in educational activities requiring voice is rarely limited in low vocal demand activities, but occasionally limited in activities with high vocal demand. The student occasionally self-monitors.</td>
</tr>
<tr>
<td>(4 -5 points)</td>
<td><strong>Mild (Ineligible)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Level 2</strong></td>
<td>The student’s voice is occasionally functional for communication but is consistently distracting to the listener.</td>
<td>The student’s ability to participate in educational activities requiring voice is usually limited to low vocal demand activities, but consistently limited in high vocal demand activities.</td>
</tr>
<tr>
<td>(6-10 points)</td>
<td><strong>Moderate</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Level 3</strong></td>
<td>The student’s voice is persistently abnormal.</td>
<td>The student may not be able to use his/her voice to communicate.</td>
</tr>
<tr>
<td>(11–15 points)</td>
<td><strong>Severe</strong></td>
<td></td>
</tr>
</tbody>
</table>
Voice Appendices

(Attached are resources that MAY be used in the assessment process to help the SLP determine eligibility)

1. Voice Terminology

2. Quick Screen for Voice

3. Teacher Input/Voice

4. Voice Evaluation Worksheets (3 pages)

5. Vocal Self perception: Attitudinal Questionnaire

6. Voice Conservation Index Self Rating

Assessment in Speech-Language Pathology: A Resource Manual, 4th Edition, Delmar-Cengage (2009), has useful evaluation tools and checklists such as the Vocal Characteristics Checklist, Forms 1 and 2
Voice Terminology

**Abusive Vocal Behaviors** – activities such as frequent “throat clearing” or shouting (e.g., cheerleading)

**Breathing Pattern** – the general contributions of the thoracic, clavicular, and abdominal areas involved in breathing during conversational speech. Look for reliance upon one pattern to the exclusion of the others.

**Glottal Attack** – the relative (soft vs. hard) onset of vocal fold activity.

**Loudness Level** – the estimated level of the student’s speech during normal conversation in a quiet environment. Persistent whispering or shouting would be positive indications.

**Maximum Phonation Time** – averaged over three different trials, the maximum amount of time (in seconds) that the student can continuously sustain /a/ (or /i/) on one exhalation.

**Muscle Tension** – the amount of tension visible in the student’s face, neck, and chest areas during normal conversation. Abnormal tension suggested by a stiff posture and/or accompanying strain.

**Nasal Emission** - audible or inaudible (“visible”) nasal escape during production of speech, especially pressure consonants.

**Nasal Resonance** – the amount of perceived resonance associated with the production of nasal consonants. An inappropriate degree of hypo – hyper nasality perceived during conversation would be a positive indication. Note: mixed nasal resonance (i.e., both hypo – and hypernasal resonance perceived within the same speaker) may occur.

**Oral Resonance** - the perceived amount of resonance associated with oral consonants and vowels. Positive indications might include speaking with limited oral openings and reduced intelligibility.

**Phonation Breaks** - the inappropriate cessation of voicing during speech. A positive indication would be an unintentional and relatively brief period of silence during a normally voiced consonant or a vowel.

**Pitch** – consider if the vocal pitch is too high, too low, or monotonic for a student’s height/weight, age and gender.

**Pitch Break** – the cessation of a continuous and appropriate pitch level during speech.

**Quality** – the overall quality of the student’s conversational speech including hoarseness, breathiness, and/or harshness.

**s/z ratio** – the ratio of the maximum sustained production of /s/ (in seconds) relative to /z:/ (in seconds). Two trials with the longer production of each sound used to compute the ratio. A ratio greater than 1.4 is an indication of possible laryngeal inefficiency for speech. Report data to the nearest single decimal place.
Quick Screen for Voice

Student_________________________ DOB:__________________Screening Date:____________
Teacher:____________________________________School:________________________________

Speech-Language Screening  Date:_________________________  Passed  Failed
If failed, describe communication status:___________________________________________________________
___________________________________________________________________________________________

Hearing Screening  Date:_________________________  Passed  Failed
If failed, described hearing status:___________________________________________________________
___________________________________________________________________________________________

Pertinent Medical and Social History ________________________________________________________________
_______________________________________________________________________________________________
_______________________________________________________________________________________________

Directions: The Quick Screen for Voice should be conducted in a quiet area. Elicit verbal activities, such as spontaneous conversation, picture description, imitated sentences, recited passages, counting, and other natural samples of voice and speech, or perform the tasks requested. The screening test is failed if one or more disorders in production are found in any area, indicating that a more thorough evaluation is needed.

Mark all observations that apply, as the individual produces connected speech:

Respiration
[ ] Inhalatory stridor or expiratory wheeze  [ ] Limited breath support for speech
[ ] Infrequent breaths; talking too long on one breath  [ ] Reduced loudness or vocal weakness
[ ] Normal respiration for speech

Phonation
[ ] Rough or hoarse quality  [ ] Breathy quality
[ ] Vocal strain and effort  [ ] Aphony
[ ] Persistent glottal fry  [ ] Hard glottal attacks
[ ] Conversational pitch is too high or too low  [ ] Conversational voice to too loud or too soft
[ ] Conversational voice is limited in pitch or loudness variability

Resonance
[ ] Hyponasality (observed humming, nasal consonant contexts: Mommy makes me muffins; Man on the moon; Many men make money, etc.)  [ ] Nasal turbulence or audible nasal emission observed during pressure consonant contexts: Count from 60 to 69; Popeye
[ ] Consistent mouth breathing  [ ] Flat nasal emissions observed during vowel contexts: A Doctor, Bats, Dad
[ ] Hypernasality (observed during vowel and oral consonants)  [ ] Nasal turbulence or audible nasal emission observed during pressure consonant contexts: Count from 60 to 69; Popeye

Quick Screen for Voice

Nonverbal Vocal Range and Flexibility
Model the series of nonverbal tasks that are described on the test form. Multiple trials are allowed. Visual cues such as hand gestures moving a toy car across the table (for maximum phonation time) or up and down a hill (for pitch range), etc. may be used to supplement auditory model.

1. **Habitual pitch and loudness task**: “Count from 1 to 10. Repeat, but stop at “three” and hold out the /i/.”
   - [ ] Abnormal pitch and/or loudness
   - [ ] Normal pitch and loudness

2. **Maximum phonation time (MPT)**: “Take your biggest breath and hold out an /a:/ as long as possible.”
   - Number of seconds /a:/ was sustained: _________
   - MPT less than: ______________

<table>
<thead>
<tr>
<th>Age in Years</th>
<th>Normal Mean in Seconds (Range)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>7 (3-11)</td>
</tr>
<tr>
<td>4</td>
<td>9 (5-15)</td>
</tr>
<tr>
<td>5</td>
<td>10 (5-16)</td>
</tr>
<tr>
<td>6-7</td>
<td>13 (5-20)</td>
</tr>
<tr>
<td>8-9</td>
<td>16 (5-29)</td>
</tr>
<tr>
<td>10-12</td>
<td>Males: 20 (9-39)</td>
</tr>
<tr>
<td></td>
<td>Females: 16 (5-28)</td>
</tr>
<tr>
<td>13-17</td>
<td>Males: 23 (9-43)</td>
</tr>
<tr>
<td></td>
<td>Females: 28 (9-34)</td>
</tr>
<tr>
<td>18+</td>
<td>Males: 28 (9-62)</td>
</tr>
<tr>
<td></td>
<td>Females: 22 (6-61)</td>
</tr>
</tbody>
</table>

**Note**: MPT values are related to age and height; multiple attempts also influence results.

**MPT within normal limits**: ______________

3. **Pitch range task**: “Make your voice go from low to high like this (demonstrate pitch glide on the word “whoop” now go down from your highest to low (demonstrate rapid downward pitch glide like a bomb falling).” OR model and elicit a fire siren sound.
   - [ ] Little pitch variation
   - [ ] Voice breaks in pitch glides up or down
   - [ ] Acceptable pitch range and flexibility

**Comments or Observations**: __________________________________________________________

Teacher Input – Voice

Student ___________________________ DOB: ___________ Screening Date: ___________
Teacher: ___________________________ School: ___________________________

Your observations of the above student’s speech will help determine if s/he has a voice problem which adversely affects educational performance. Please answer all questions and return this form to:

________________________________________________________________________

1. Is the student able to project loudly enough to be adequately heard in your classroom during recitations?
   Yes ___ No ___

2. Does this student avoid reading out loud in class?
   Yes ___ No ___

3. Does this student appear generally to avoid talking in your classroom?
   Yes ___ No ___

4. Does this student ever lose his or her voice by the end of the school day?
   Yes ___ No ___

5. Does this student use an unusually loud voice or shout a great deal in your classroom? Or on the playground?
   Yes ___ No ___

6. Does this student engage in an excessive amount of throat clearing or coughing? If so, when?
   Yes ___ No ___

7. Does the student’s voice quality worse during any particular time of the day? If so, which?
   Yes ___ No ___
   If so, how does it appear to disturb the other students, (e.g., their concentration, listening)?
   Yes ___ No ___

8. Does this student’s voice quality make it difficult to understand the content of his or her speech?
   Yes ___ No ___

9. Does this student’s voice quality in itself distract you from what he or she is saying?
   Yes ___ No ___

10. Has this student ever mentioned to you that he or she thinks he or she has a voice problem?
    Yes ___ No ___

11. Have you ever heard any of his or her peers mention his or her voice sounds funny or actually make fun of this student because of his or her voice problem?
    Yes ___ No ___

12. If this student has a pitch that is too low or too high, does his or her pitch make it difficult to identify him or her as male or female just by listening?
    Yes ___ No ___

13. During speaking, does this student’s voice break up or down in pitch to the extent that s/he appears to be embarrassed by this?
    Yes ___ No ___

Additional observations/comments:

**It is my opinion that these behaviors:**
   ___ Does not interfere with the child’s participation in the educational setting
   ___ Do interfere with the child’s participation in the educational setting

Classroom Teacher’s Signature: ___________________________ Date: ___________
Children ____________________ DOB _____________ Date ________________ SLP__________________
School __________________________ Teacher____________________________ Grade ____________

Record areas assessed. The assessment should reflect areas of concern described in the referral and those that arise during the evaluation. Areas not assessed should be marked N/A.

<table>
<thead>
<tr>
<th>Voice Area</th>
<th>Impairment</th>
<th>Evidence</th>
<th>Adverse Effects on Educational Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHONATION</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Isolation</td>
<td></td>
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</tr>
<tr>
<td>Total Pitch Range</td>
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<tr>
<td>Optimum Pitch</td>
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<tr>
<td>Pitch Appropriate for Age</td>
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<tr>
<td>Pitch Appropriate for Gender</td>
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<tr>
<td>Loudness Range</td>
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<tr>
<td>Aphonia</td>
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<tr>
<td>Breathiness</td>
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<tr>
<td>Diplophonia</td>
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<tr>
<td>Glottal Fry</td>
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<tr>
<td>Hoarseness</td>
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<tr>
<td>Harshness</td>
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</tr>
<tr>
<td>Tremor</td>
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</tbody>
</table>

Adapted from North Carolina Department of Public Instruction, Guidelines for Speech-Language Pathology Services in Schools, 2006.
# Voice Evaluation Worksheets

Child ______________________________________________________ Date_____________________________

<table>
<thead>
<tr>
<th>Voice Area</th>
<th>Impairment</th>
<th>Evidence</th>
<th>Adverse Effects on Educational Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PHONATION</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Connected Speech</td>
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</tr>
<tr>
<td>Voice Onset</td>
<td></td>
<td></td>
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<tr>
<td>Voiceless to Voiced</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Appropriateness of Loudness</td>
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<td></td>
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</tr>
<tr>
<td>Pitch Breaks</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Pitch Range</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Habitual Pitch</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aphonia</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Breathiness</td>
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<td>Diplophonia</td>
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</tr>
<tr>
<td>Harshness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tremor</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>RESONANCE IN CONNECTED SPEECH</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hypernasality</td>
<td></td>
<td></td>
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<tr>
<td>Hyponasality</td>
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<td></td>
<td></td>
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<tr>
<td>Throatiness/Cul De Sac</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Nasal Emission</td>
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<tr>
<td>Assimilation Nasality</td>
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</table>

Adapted from North Carolina Department of Public Instruction, Guidelines for Speech-Language Pathology Services in Schools, 2006.
## Voice Evaluation Worksheets (Page 3)

<table>
<thead>
<tr>
<th>Voice Area</th>
<th>Impairment</th>
<th>Evidence</th>
<th>Adverse Effects on Educational Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PROSODY IN CONNECTED SPEECH</strong></td>
<td></td>
<td></td>
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<tr>
<td>Stress</td>
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<tr>
<td>Intonation</td>
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<tr>
<td><strong>RESPIRATION</strong></td>
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<tr>
<td>Type of Breathing Pattern</td>
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<tr>
<td>At rest</td>
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<tr>
<td>In Connected Speech</td>
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<tr>
<td><strong>Breath Support for Speech</strong></td>
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<tr>
<td>Posture</td>
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<tr>
<td>Tension</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ASSOCIATED FACTORS</strong></td>
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</tr>
<tr>
<td>Vocal Abuse Behaviors</td>
<td></td>
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<tr>
<td>Personality Factors</td>
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<tr>
<td><strong>ORAL MECHANISM</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Structure</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Function/Tension</td>
<td></td>
<td></td>
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<tr>
<td><strong>OTL EXAMINATION RESULTS</strong></td>
<td></td>
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</table>

Adapted from North Carolina Department of Public Instruction, Guidelines for Speech-Language Pathology Services in Schools, 2006.
### Vocal Self Perception: Attitudinal Questionnaire

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Do you ever think about your voice?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>2.</td>
<td>Have you ever heard your voice on tape playback (e.g., on cassette recorder, answering machine)?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3.</td>
<td>Did you like your voice on tape playback?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4.</td>
<td>Has anyone ever commented on your voice? If yes, what was said?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>5.</td>
<td>Do you think your voice represents your image of yourself (masculine, feminine, intelligent, educated, friendly, etc.)? If Yes or No, in what way?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>6.</td>
<td>Do any of your friends, male or female, have voices that you especially like? If yes, explain.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.</td>
<td>Do any of your friends, male or female, have voices that you especially dislike? If yes, explain.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>8.</td>
<td>Does your voice sound like that of any other member of your family? If yes, explain.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>9.</td>
<td>Circle any words below that describe your voice and the way you speak in general (either on tape replay or while actually talking).</td>
<td>Pleasant</td>
<td>raspy</td>
</tr>
</tbody>
</table>
Voice Conservation Index Self Rating

Name __________________________ Age __ Gender ______ Date __________________ (Please circle the answer that is best)

1. When I get a cold, my voice gets hoarse.
   All the time  Most of the time  Half the time  Once in a while  Never

2. After cheering at a ballgame, I get hoarse.
   All the time  Most of the time  Half the time  Once in a while  Never

3. When I’m in a noisy situation, I stop talking because I think I won’t be heard.
   All the time  Most of the time  Half the time  Once in a while  Never

4. When I’m in a noisy situation, I speak very loudly.
   All the time  Most of the time  Half the time  Once in a while  Never

5. When I’m at home or at school, I spend a lot of time talking every day.
   All the time  Most of the time  Half the time  Once in a while  Never

6. I like to talk to people who are far away from me.
   All the time  Most of the time  Half the time  Once in a while  Never

7. When I play outside with my friends, I yell a lot.
   All the time  Most of the time  Half the time  Once in a while  Never

8. I lose my voice when I don’t have a cold.
   All the time  Most of the time  Half the time  Once in a while  Never

9. People tell me I talk too loudly.
   All the time  Most of the time  Half the time  Once in a while  Never

10. People tell me I never stop talking.
    All the time  Most of the time  Half the time  Once in a while  Never

11. I like to talk.
    All the time  Most of the time  Half the time  Once in a while  Never

12. I talk on the phone.
    All the time  Most of the time  Half the time  Once in a while  Never

13. At home, I talk to people who are in another room.
    All the time  Most of the time  Half the time  Once in a while  Never

14. I like to make car or other noises when I play.
    All the time  Most of the time  Half the time  Once in a while  Never

15. I like to sing.
    All the time  Most of the time  Half the time  Once in a while  Never

16. People don’t listen to me unless I talk loudly.
    All the time  Most of the time  Half the time  Once in a while  Never

FLUENCY
Fluency Criteria

Stuttering is primarily characterized by repetitions (sounds, syllables, part words, whole words, and phrases), pauses, and prolongations that differ in number and severity from those of normally fluent individuals. The onset usually occurs during the time that language skills are developing, and onset is generally gradual in nature. Secondary characteristics are frequently evident, and these vary in type and severity from individual to individual. The disfluencies may interfere with intelligibility, social communication, and/or academic and vocational achievement.

How to complete the Fluency Rating Scale: Circle the score for each of the five categories:
Row A: Frequency of Disfluency
Row B: Description of Disfluency
Row C: Secondary Characteristics
Row D: Avoidance
Row E: Educational Impact

Use the Teacher Input Form regarding fluency to assess the adverse affect on educational performance.

1. Circle the score for each row and add them to obtain the total score.
   a. Total Score: 0-3 No Fluency Impairment (ineligible)
   b. Total Score: 4-6 Mild (ineligible)
   c. Total Score: 7-10 Moderate
   d. Total Score: 11-15 Severe

   The comment section may include statements of clinical impressions based on observations that are relevant to the determination of severity.

Considerations
The following measures are appropriate for use in determining the presence of a stuttering impairment:
1. speech sample
2. total disfluency index of the types and number of disfluencies and secondary characteristics obtained in the language sample and a structured reading activity
3. multiple environments/listeners
4. structured observation
5. anecdotal records – impact of disfluencies on oral/expressive language task standardized tests
6. standardized tests
7. teacher report, interview, or checklist
8. student report, interview or checklist
9. parent report, interview or checklist

Note: Teacher, student and parent reports, interviews, and checklists are not sufficient evidence by themselves and must be supported with additional data.

Best Practice: An assessment for a fluency disorder should include the following components:
- Background: a history of the development of the student’s stuttering, family history of stuttering, etc;
- Communication abilities: a report of his/her skills in the five parameters of communication – stuttering, articulation, voice, language, and hearing;
- Oral-peripheral examination: a description of any atypical structures and the functional abilities of the oral mechanism;
- Reports, interviews, checklists: completed by the parents, the student, and the teacher;
- Structured observation: observation of student’s speech and language during oral language activities in the classroom/school environment;
- Age of student; and/or,
- Length of time disfluent speech pattern has been present.
Fluency Rating Scale

The stuttering rating scale uses the following terminology:

- Description of disfluency addresses the duration of pauses (from less than 1 second to more than 3 seconds) and number of repetitions.

- Associated non-verbal behaviors means the presence of facial grimaces; visible tension of the head, neck, jaw, and/or shoulders; audible tension, as noted in uneven stress, pitch changes, increased rate, or tension during inhalation or exhalation.
# Fluency Severity Rating Scale

<table>
<thead>
<tr>
<th>Factors</th>
<th>No Disability (0 pts)</th>
<th>Mild (1 pt)</th>
<th>Moderate (2 pts)</th>
<th>Severe (3 pts)</th>
<th>Points Assigned</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Frequency of Disfluency</td>
<td>Less than 4% disfluencies</td>
<td>4% disfluencies</td>
<td>5 – 9% disfluencies</td>
<td>10% or more disfluencies</td>
<td></td>
</tr>
<tr>
<td>B Description of Disfluency</td>
<td>Primarily whole multisyllabic word repetitions. Occasional whole-word interjections and phrase/sentence revisions</td>
<td>Transitory disfluencies in specific speaking situations which may include repetitions, prolongations, blocks, hesitations or interjections, and vocal tension.</td>
<td>Frequent disfluencies in many speaking which may include repetitions, prolongations, blocks in which sounds and airflow are shut off, hesitations or interjections and vocal tension</td>
<td>Habitual disfluencies in a majority of speaking situations, which may include repetitions, prolongations, blocks (long and tense with some noticeable tremors), hesitations or interjections, and vocal tension</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Less than 1 second pauses OR less than 4 repetitions</td>
<td>1 second pauses OR 4 repetitions</td>
<td>2 second pauses OR 5 repetitions</td>
<td>3 or more second pauses OR 6 or more repetitions</td>
<td></td>
</tr>
<tr>
<td>C Secondary Characteristics</td>
<td>No associated behaviors</td>
<td>One or more associated behaviors that are noticeable and distracting and occurs inconsistently</td>
<td>One associated behavior that is noticeable and distracting and occurs consistently</td>
<td>Two or more associated behaviors that are noticeable and distracting and occur consistently</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Does not avoid speaking situations</td>
<td>Occasionally avoids speaking situations</td>
<td>Avoids specific speaking situations (e.g., presentations, phone)</td>
<td>Avoids many speaking situations</td>
<td></td>
</tr>
<tr>
<td>D Avoidance (rate for children 7 and older)</td>
<td>Fluency skills are adequate for the student’s participation in educational</td>
<td>Disfluencies are noticeable and in some situations limit the student’s verbal participation in educational settings</td>
<td>Disfluencies are having an impact on the student’s ability to speak and verbally participate in educational settings</td>
<td>Disfluencies are having a significant impact on the student’s ability to speak and verbally participate in educational settings</td>
<td></td>
</tr>
<tr>
<td>E Educational Impact</td>
<td>Disfluencies are noticeable and in some situations limit the student’s verbal participation in educational settings</td>
<td>Disfluencies are having an impact on the student’s ability to speak and verbally participate in educational settings</td>
<td>Disfluencies are having a significant impact on the student’s ability to speak and verbally participate in educational settings</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total Points**

**Circle the score** for each row and add them to obtain the Total Score.

- **Total Score:** 0-3  No Stuttering Disability (ineligible)
- **Total Score:** 4-6  Mild (ineligible)
- **Total Score:** 7-10  Moderate
- **Total Score:** 11-15  Severe

Comments: ________________________________
## Fluency Severity Rating Scale
### Overall Functional Level

<table>
<thead>
<tr>
<th>Level</th>
<th>Conditions</th>
<th>Educational Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Level 0 (0 – 3 points)</strong>&lt;br&gt;Ineligible</td>
<td>Disfluencies are primarily characterized by easy whole word repetitions that comprise less than 4% disfluent speech. The student’s speech and language skills during educational activities are consistently understood and not distracting to the listener.</td>
<td>Student’s verbal participation in educational activities is not limited by self-consciousness about listener reaction to his/her speech.</td>
</tr>
<tr>
<td><strong>Level 1 (4 -6 points)</strong>&lt;br&gt;Mild</td>
<td>Disfluencies are transitory and characterized by easy repetitions, prolongations and some hesitations that comprise 4-5% disfluent speech. Blocking, if it occurs, is less than a full second. Tension is noticeable but disfluencies and tensions are not distracting to the listener. Student does not usually avoid speaking situations and participates in oral language activities.</td>
<td>Student’s verbal participation in educational activities may occasionally be limited by self-consciousness about listener reactions to his/her speech.</td>
</tr>
<tr>
<td><strong>Level 2 (7 – 10 points)</strong>&lt;br&gt;Moderate</td>
<td>Disfluencies are frequent and characterized by repetitions, prolongations, and some hesitations/interjections, and blocking that comprise 5-9% disfluent speech. Tension is noticeable, distracting to the listener. Associated behaviors, such as grimacing, and other distracting behaviors may be evident during speaking situations. Student is aware of disfluent speech and avoids some speaking situations and oral language activities.</td>
<td>Student’s verbal participation in educational activities is impacted by self-consciousness about listener reactions to his/her speech.</td>
</tr>
<tr>
<td><strong>Level 3 (11-15 points)</strong>&lt;br&gt;Severe</td>
<td>Disfluencies are habitual and are characterized by repetitions, prolongations, hesitations/interjections, and blocking that lasts 3 or more seconds. Disfluencies comprise greater than 9% disfluent speech. There is evidence of significant vocal tension, some noticeable tremors, and noticeable associated behaviors that are distracting to the listener. Student generally avoids speaking situations and oral language activities.</td>
<td>Student’s verbal participation in educational activities is significantly impacted by self-consciousness about listener reactions to his/her speech.</td>
</tr>
</tbody>
</table>
Preschool Fluency Criteria

Stuttering is primarily characterized by repetitions (sounds, syllables, part words, whole words, and phrases), pauses, and prolongations that differ in number and severity from those of normally fluent individuals. The onset usually occurs during the time that language skills are developing, and onset is generally gradual in nature. Secondary characteristics are frequently evident, and these vary in type and severity from individual to individual. The disfluencies may interfere with intelligibility, social communication, and/or academic and vocational achievement.

How to complete the Fluency Rating Scale: Circle the score for each of the five categories:
Row A: Frequency of Disfluency
Row B: Description of Disfluency
Row C: Secondary Characteristics
Row D: Awareness
Row E: Educational Impact (social-emotional)

1. Add one point for EACH of the following risk factors:
   a. consistently disfluent for more than 6 months
   b. family history
   c. male
   d. onset after age 3.5
   e. presence of other speech or language disorders

2. Circle the score for each row and add them to obtain the total score.
   Total Score: 0-3 No Fluency Impairment (ineligible)
   Total Score: 4-6 Mild (ineligible)
   Total Score: 7-10 Moderate
   Total Score: 11-15 Severe

Considerations
The following measures are appropriate for use in determining the presence of a stuttering impairment:
1. speech sample
2. total disfluency index of the types and number of disfluencies and secondary characteristics obtained in the language sample and a structured reading activity
3. multiple environments/listeners
4. structured observation (note level of awareness)
5. anecdotal records – impact of disfluencies on oral/expressive language task standardized tests
6. standardized tests
7. teacher/caregiver report, interview, or checklist
8. parent report, interview or checklist

Note: Teacher, caregiver and parent reports, interviews, and checklists are not sufficient evidence by themselves and must be supported with additional data.

Best Practice: An assessment for a fluency disorder should include the following components:
- Background information: a history of the development of the student’s stuttering, family history of stuttering, etc;
- Communication abilities: a report of his/her skills in the five parameters of communication – stuttering, articulation, voice, language, and hearing;
- Oral-peripheral examination: a description of any atypical structures and the functional abilities of the oral mechanism;
- Reports, interviews, checklists: completed by the parents, the caregiver, and the teacher;
- Structured observation: observation of student’s speech and language during oral language activities;
Fluency Rating Scale

The stuttering rating scale uses the following terminology:

- Description of disfluency addresses the duration of pauses (from less than 1 second to more than 3 seconds) and number of repetitions.

- Associated non-verbal behaviors means the presence of facial grimaces; visible tension of the head, neck, jaw, and/or shoulders; audible tension, as noted in uneven stress, pitch changes, increased rate, or tension during inhalation or exhalation.

For a preschool-age child who is exhibiting disfluent behavior, research indicates that the chances of success are greater the sooner a problem and its contributing factors are identified. When a preschool-aged child exhibits the following chronic non-fluent behaviors, it is likely the child will benefit from early intervention: the insertion of the schwa, uneven stress and rhythm, difficulty initiating and sustaining airflow, body tension and struggle behavior during speech, and the presence of significant predictors such as family history (Runyan, 2004).

For preschool children, the consideration of the adverse effect should be based on the effect of the stuttering impairment on the child’s developmental skills in play, adaptive/self-help, communication, social-emotional, cognitive, and sensorimotor domains.
## Preschool Fluency Severity Rating Scale

<table>
<thead>
<tr>
<th>Factors</th>
<th>No Disability (0 pts)</th>
<th>Mild (1 pt)</th>
<th>Moderate (2 pts)</th>
<th>Severe (3 pts)</th>
<th>Points Assigned</th>
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</thead>
<tbody>
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<tr>
<td>C</td>
<td>Secondary Characteristics</td>
<td>No associated behaviors</td>
<td>One associated behavior that is noticeable and distracting and occurs inconsistently</td>
<td>One associated behavior that is noticeable and distracting and occurs consistently</td>
<td>Two or more associated behaviors that are noticeable and distracting and occur consistently</td>
</tr>
<tr>
<td>D</td>
<td>Awareness</td>
<td>Is not aware of the speech disfluencies</td>
<td>Shows occasional awareness of by commenting to parent or caregiver</td>
<td>Is aware of disfluencies and occasionally shows some frustration with speaking</td>
<td>Is aware of disfluencies and shows frustration with not being able to communicate fluently</td>
</tr>
<tr>
<td>E</td>
<td>Educational Impact/ Social/Emotional (Teacher Checklist, Parent Questionnaire)</td>
<td>Fluency skills are adequate for the student’s participation in educational or preschool settings (home, child care or center-based programs)</td>
<td>Disfluencies are noticeable and in some situations limit the student’s verbal participation in educational/preschool settings</td>
<td>Disfluencies are having an impact on the student’s ability to speak and verbally participate in educational/preschool settings</td>
<td>Disfluencies are having a significant impact on the student’s ability to speak and verbally participate in educational/preschool settings</td>
</tr>
</tbody>
</table>

**TOTAL POINTS**

1. **Add one point for EACH** of the following risk factors to the total: consistently disfluent for more than 6 months; family history; male; onset after age 3.5; and/or presence of other speech or language disorders.
2. **Circle the score** for each row and add them to obtain the total score.

<table>
<thead>
<tr>
<th>Total Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-3</td>
<td>No Fluency Impairment (ineligible)</td>
</tr>
<tr>
<td>4-6</td>
<td>Mild (ineligible)</td>
</tr>
<tr>
<td>7-10</td>
<td>Moderate</td>
</tr>
<tr>
<td>11-15</td>
<td>Severe</td>
</tr>
</tbody>
</table>
## Preschool Fluency Severity Rating Scale

**Overall Functional Level**

<table>
<thead>
<tr>
<th>Level</th>
<th>Conditions</th>
<th>Educational Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 0 (0 – 3 points) Ineligible</td>
<td>Disfluencies are primarily characterized by easy whole word repetitions that comprise less than 4% disfluent speech. The child’s speech and language skills during educational/developmental activities are consistently understood and not distracting to the listener.</td>
<td>Child’s verbal participation in educational/developmental activities is not limited by self-consciousness about listener reaction to his/her speech.</td>
</tr>
<tr>
<td>Level 1 (4 -6 points) Mild</td>
<td>Disfluencies are transitory and characterized by easy repetitions, prolongations and some hesitations that comprise 4-5% disfluent speech. Blocking, if it occurs, is less than a full second. Tension is noticeable but disfluencies and tensions are not distracting to the listener. Child does not usually avoid speaking situations and participates in oral language activities.</td>
<td>Child’s verbal participation in educational/developmental activities may occasionally be limited by self-consciousness about listener reactions to his/her speech.</td>
</tr>
<tr>
<td>Level 2 (7 – 10 points) Moderate</td>
<td>Disfluencies are frequent and characterized by repetitions, prolongations, and some hesitations/interjections, and blocking that comprise 5-9% disfluent speech. Tension is noticeable and distracting to the listener. Associated behaviors, such as grimacing, and other distracting behaviors may be evident during speaking situations. Child is aware of disfluent speech and avoids some speaking situations and oral language activities.</td>
<td>Child’s verbal participation in educational/developmental activities is impacted by self-consciousness about listener reactions to his/her speech.</td>
</tr>
<tr>
<td>Level 3 (11-15 points) Severe</td>
<td>Disfluencies are habitual and are characterized by repetitions, prolongations, hesitations/interjections, and blocking that lasts 3 or more seconds. Disfluencies comprise greater than 9% disfluent speech. There is evidence of significant vocal tension, some noticeable tremors, and noticeable associated behaviors that are distracting to the listener. Child generally avoids speaking situations and oral language activities.</td>
<td>Child’s verbal participation in educational/developmental activities is significantly impacted by self-consciousness about listener reactions to his/her speech.</td>
</tr>
</tbody>
</table>
Fluency Appendices

(Attached are a number of resources that MAY be used in the assessment process to help the SLP determine eligibility)

1. Stuttering Evaluation Guidelines

2. Types of Disfluencies

3. Teacher Input – Fluency

4. Stuttering: Parent Interview Form (K-grade 12) (2 pgs)

Note: The following useful forms can be purchased Assesment in Speech-Language Pathology, A Resource Manual, 4th Edition, Demlar-Cengage (2009), has useful evaluation tools and checklists,

- FORM 10-1: Fluency Charting Grid
- FORM 10-2: Frequency Count for Disfluencies
- FORM 10-3: Calculating the Disfluency Index
- FORM 10-4: Assessment of Associated Motor Behaviors
Stuttering Evaluation Guidelines

I. Assessment of Stuttering Behaviors

A. Speech Samples
   1. Conversation: at least 10 minutes, or 300 words.
   2. Narrative: 3-5 minutes of uninterrupted talking about a movie, book, or situation that the client experienced. Picture description may also be used. Emotional context should be fairly neutral, unless attempting to get indications of stuttering variability.
   3. Reading: assure sample is at client’s level, one paragraph of sufficient length (5-10 sentences).
   4. Conversation with pressure: about 2-3 minutes of interaction where the clinician imposes some type of communicative pressure, in the form of: loss of eye contact, challenging or disagreement with the client’s statements (e.g., “I watch Sesame Street, and that’s not Grover, that’s Cookie Monster.”), verbal interruption, competition, and/or time pressure.
   5. Telephone call(s), as appropriate to child’s age.

B. Frequency of Stuttering
   1. Transcribe the sample(s) including markings for all disfluencies; calculate frequency in percentage of stuttered words/syllables; each can be stuttered only once. Determining the intended message can assist when attempting to calculate the stuttered and/or disfluent words/syllables.
   2. Count the number of syllables contained in the transcript (only intended message syllables should be counted).

C. Types of Stutters
   1. Count the stuttered disfluencies,
   2. Count the normal/typical disfluencies,
   3. Determine the percentage of each, of the total number of disfluencies.

D. Duration of Stutters: using a stopwatch, time the duration of the three longest stutters, and average them.

E. Secondary Behaviors: count the number of different behaviors observed; determine how noticeable they are, and rate them in terms of severity, as part of an overall severity assessment.

F. Overall Severity: The most commonly used measure is the Stuttering Severity Instrument-4 (Riley, 2009), available from Pro-Ed.

II. Additional Measures related to Stuttering

A. Speech Rate: Using a stopwatch, calculate the duration of selected utterances (count the number of intended syllables in the utterance, and calculate syllables per minute. It may be beneficial to select mainly fluent utterances/segments.

B. Speech related Beliefs, Feelings and Attitudes: “talk about talking” to determine:
   1. Level of awareness about what stuttering is,
   2. Thoughts and beliefs about why he/she stutters,
   3. Awareness of what s/he does to help speak more fluently,
   4. Level of worry or concern about stuttering,
   5. Perceptions of parental level of worry or concern (interview with parent(s) are typically necessary).
C. Perceptions about Therapy: particularly helpful when working with any child who has awareness of the stuttering problem. Determine what the client believes has helped, what has not helped, goals, likes/dislikes in therapy, willingness to include others, expectations, etc.

D. Experiences with teasing: determine when, how often, reactions, present situation, previous methods of dealing with it, etc.

E. Teacher Interview: determine what they would like to know about stuttering, the child’s treatment, and about how to manage the problem in the classroom.

F. Classroom Observation: determine how much the stuttering interferes with the child’s educational experience(s).

III. Additional Assessments

A. Articulation Skills

B. Language Skills

C. Confrontation naming/word retrieval skills/word finding skills: Physical Development

D. Cognitive Development

E. Social-Emotional Development

F. Educational Impact
## Types of Disfluencies

**Observable Characteristics of Stuttering**

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Definition</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hesitation</td>
<td>Any nontense break in the forward flow of speech</td>
<td>I___ am going home.</td>
</tr>
<tr>
<td>Broken words</td>
<td>With unacceptable within-word hesitations</td>
<td>Partially uttered words:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I am g__ oing home.</td>
</tr>
<tr>
<td>Repetition</td>
<td>Repeated utterances of parts of words (PWR), words (WR), and phrases (PR)</td>
<td>I am g going.(PWR)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>I am am going.(WR)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>lam lam going (PR)</td>
</tr>
<tr>
<td>Interjections</td>
<td>Use of sounds, syllables, and words that are independent of context of utterance</td>
<td>I er er am uh going.</td>
</tr>
<tr>
<td>Prolonged sounds</td>
<td>Unacceptably prolonged sounds, usually at the start of a word</td>
<td>I am s-s-s-so late</td>
</tr>
<tr>
<td>Dysrhythmic phonation</td>
<td>Distortion of the prosodic elements within a word, with improper stress, timing, or accenting</td>
<td>I am going (rising inflection) home.</td>
</tr>
<tr>
<td>Tension</td>
<td>Audible manifestation of abnormal breathing or muscular tightening between words, parts of words, or interjections</td>
<td>I am (forced breathing) going home.</td>
</tr>
<tr>
<td>Revisions, modifications</td>
<td>Grammatical or content</td>
<td>I am, I was going.</td>
</tr>
<tr>
<td>Incomplete phrases</td>
<td>Failure to complete an initiated unit of speech</td>
<td>I am---but not today.</td>
</tr>
</tbody>
</table>

Teacher Input – Stuttering

Student: ________________________________________________

Teacher: ____________________________ Grade: _____ DOB: ____________

Your observations of this student’s speech fluency will help determine if the problem adversely affects educational performance. **Check all items that have been observed.**

1. Does the student have characteristics associated with stuttering (e.g., part or whole word repetitions, silent blocks, sound or word prolongations)? [Yes] [No]

2. Are the stuttering characteristics accompanied by other behaviors (e.g., tension in the upper trunk, head, and neck, facial tics, body movements)? [Yes] [No]

3. Does stuttering make it difficult to understand the content of his/her speech? [Yes] [No]

4. Does the student appear to talk less in the classroom because of stuttering? [Yes] [No]

5. Does the student avoid verbal participation during classroom activities? [Yes] [No]

6. Does the student avoid verbal participation in social situations? [Yes] [No]

7. Do you think the student is aware of his/her communication problems? [Yes] [No]

8. Have the student’s parents talked to you about his/her fluency disorder? [Yes] [No]

In my opinion, these behaviors do NOT adversely affect educational performance. [Yes] [No]

In my opinion, these behaviors DO adversely affect educational performance. [Yes] [No]

What other observations do you have relating to this student’s communication skills:
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

Teacher’s Signature: ____________________________ Date: ________________

*Adapted from Standards for the Delivery of Speech-Language services in Michigan Public Schools, Michigan Speech-Language Hearing Association (1985)*
Stuttering: Parent Interview Form
(Kindergarten through Grade 12)

Student: ____________________________ Age: ______________________ Date: ______________________
Grade: ____________________________ School: ____________________________
Parent’s Name: ____________________________ Address: ____________________________
Phone: ____________________________ Siblings: ____________________________
SLP: ____________________________

1. What are your concerns about this child’s speech? _______________________________________
   ___________________________________________________________________________

2. Is anyone else in the family concerned? □ Yes □ No If yes, please describe: __________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

3. Is there a history of stuttering in your family?
   mother ______________________ aunt ______________________
   father ______________________ uncle ______________________
   child’s brother ______________ grandmother ______________
   child’s sister ______________ grandfather ______________

4. Describe the type of stuttering of the family member and their treatment, if any:
   __________________________________________________________________________
   __________________________________________________________________________

5. At what age did your child first… Age:
   speak words: ______________________
   say two-word combinations: ______________
   say sentences: ______________

6. How often does your child… (Circle answer) Frequently Sometimes Never
   a. Repeat sounds 1 2 3
   b. Repeat parts of words 1 2 3
   c. Repeat words 1 2 3
   d. Repeat phrases 1 2 3
   e. Prolongs sounds 1 2 3
   f. Holds breath 1
   g. Adds interjections (um, ah) 1 2 3
   h. Makes facial grimaces (or other behaviors) 1 2 3

7. Does your child appear concerned about his/her speech? □ Yes □ No

8. Do siblings/friends tease your child about his/her speech? □ Yes □ No

In each of the following speaking situations, does your child’s disfluencies
Increase [I] Decrease [D] or Remain the Same [RS]? (Circle one)
   a) talks with mother/father I D RS
   b) talks with strangers I D RS
   c) talks with friends I D RS
d) talks with teacher       I D RS
e) talks in front of class   I D RS
f) talks in small groups     I D RS
g) asks questions            I D RS
h) is excited                I D RS
i) is upset                  I D RS
j) talks on the phone        I D RS
k) other (describe: __________) I D RS

9. How long have the disfluencies been evident in your child’s speech?
   [ ] Just occurred   [ ] one month   [ ] several months   [ ] a year or more

10. To help my child to speak fluently, I tell my child to:
    __________ Stop and start over again
    __________ Take a deep breath and start over again
    __________ Speak more slowly
    __________ Think of the word(s) before talking
    __________ Tell my child the difficult word(s) if I know what they are
    __________ Remind my child not to stutter
    __________ Finish speaking the phrase or sentence for my child
    __________ Answer immediately when my child asks a question
    __________ Ask my child to practice speaking without stuttering
    __________ I try to provide uninterrupted, unhurried speaking opportunity for my child

11. Describe the speaking environment at home:
    __________ Child is frequently interrupted by siblings
    __________ Child has many opportunities to talk without interruption
    __________ Child frequently has opportunity to talk with parents without presence of other family members.

12. Describe any help/treatment your child has received for his/her speech:
    __________________________________________________________________________________
    __________________________________________________________________________________
    ________________________________________________________________________________

13. Child’s preferences:
    Food: ___________________ Toys: ___________________ TV: ___________________
    Beverages: ______________ Games: ________________ Music: _______________
    Sports: ________________ Other (describe): __________________
CONTINUED ELIGIBILITY
Continued Eligibility
Speech/Language Pathology Services

Evaluation of a student is required by the Individuals with Disabilities Education Act (IDEA 2004) [34 CFR 300.305(e)] to determine that a child no longer has a disability. Exit decisions must be individualized, based on developmental norms, progress data collected, assessment information and the current best practices as determined by the IEP team. The IEP team may choose one or more of the following conditions as reason for discontinuation of speech-language services. These decisions must be made on a case-by-case basis determined by the rate of progress, discrepancy from peers/standards, instructional need of the student and the IEP process.

Consider the following:

- The student has met all speech-language goals and data indicate no additional needs.
- Given current medical, dental, neurological, physical, emotional, and/or developmental factors, the student’s speech-language performance is within his/her expected performance range and compensatory skills have been achieved and documented on the IEP.
- The student has made minimal or no measurable progress over three progress reporting periods even though program modifications, varied approaches, and/or colleague consultations have been attempted and documented.
- Limited carry-over, self monitoring or generalization has been documented in one or more environments over the IEP year.
- The student is unwilling or unmotivated to participate in treatment, attendance has been limited and/or participation precludes progress through therapeutic intervention. Attendance record over a period of time with attempts to improve attendance and participation are documented on the IEP.
- Parent/legal guardian of student requests that speech-language services be discontinued.
- Goals can be met through efforts of teachers and other professionals as documented on the IEP.
- Data indicate that with modifications and/or alternative methods of responding to academic/social tasks the student performs satisfactorily within the general education environment.
Exit Considerations

The decision to dismiss a student from speech-language services (terminate eligibility) is the responsibility of the IEP/assessment team. When the speech-language pathologist, or anyone with a legitimate educational interest in the student, perceives that the student no longer requires speech-language services to benefit from the special or general education programs, the IEP team must be convened to discuss the possible change in services.

The regulations require schools to follow the assessment process before determining that a child no longer meets the definition of “a child with a disability.” A comprehensive evaluation is not required before the termination if a student’s eligibility is due to exceeding the age of eligibility for FAPE or due to graduation with a regular high school diploma. For these individuals the evaluation team must provide a Summary of Performance (SOP). The SOP must include information about the student’s academic achievement and functional performance, as well as recommendations on how to assist the student in meeting the student’s postsecondary goals.

The evaluation team may have the same composition as the IEP team. The number of persons involved in the evaluation process will vary from one student to another. The evaluation team will review existing data about the child. This information can consist of relevant data collected through a variety of methods. Such performance data may be collected on the student’s daily performance on activities associated with meeting the IEP goals, performance on class assignments, small or large group interactions, parental reports of performance outside the school environment, or student self-reporting. The evaluation may warrant the administration of standardized assessment instruments. In these instances, parental consent for testing must be obtained prior to administration of the standardized assessment unless that particular instrument was already noted in the student’s IEP as a means of measuring progress. The various severity rating scales included in the appendices of these guidelines may also be helpful in determining progress.

After all available information has been organized and reviewed; the team will identify whether a disability continues to exist, whether the current levels of academic achievement are related to the developmental needs of a child, and whether the child continues to need special education and related services. In essence, the decision to dismiss is based on the same principles as the decision to find the child eligible:

- Does the child have a speech-language impairment?
- Is there an adverse educational impact?
- As a result, does the child need special education and related services?

Reasons for dismissal might include:

- The child no longer has a speech-language impairment;
- The child has a speech-language impairment, but it no longer affects his/her educational performance;
- The child has a speech-language impairment that affects his/her educational performance, but the IEP team determines the child no longer needs related services to benefit from special education. For example, the child’s communication needs can be met through the communication goals worked on in the regular or special education classroom.

When a child reaches a level that is commensurate with his or her ability, demonstrating little if any progress over a period of time, the IEP team must review the child’s IEP to determine whether the annual goals are being met and revise the IEP as appropriate to address any lack of progress. Any decision to dismiss a child who continues to have a speech-language impairment and who is not making progress should occur only after an IEP team has reviewed the child’s progress and has pursued a variety of options for achieving progress. Those options may include working with other special and general education teachers to incorporate the communication goals into their classrooms. This may be especially effective for children with other disabilities (e.g., intellectual disability). Some children may simply lack motivation to continue to work on their speech-language impairment. The IEP team should consider the causes of the motivation problem and may develop a joint effort to address motivation (e.g., working with the school social worker, guidance counselors, the teacher(s), or another speech-language pathologist).
If the lack of progress is not related to any of the above, the IEP team should consider whether further evaluation may be needed to understand the lack of progress. This evaluation may be conducted by a school-based speech-language pathologist, an outside speech-language pathologist with specialized skills, another school professional, or outside professionals.

Prior to dismissal from receiving special education and related services, the school district must complete the evaluation process before determining that the child is no longer a child with a disability. This includes a child who is dismissed from a single service, but who continues to receive other special education or related services. A comprehensive evaluation is not required before the termination of a student’s eligibility due to exceeding the age of eligibility for FAPE or due to graduation with a regular high school diploma. For more information on assessment procedures, refer to the ND Department of Public Instruction Guidelines: Evaluation Process at [http://www.dpi.state.nd.us/speced1/laws/evalproc.pdf](http://www.dpi.state.nd.us/speced1/laws/evalproc.pdf).

A parent signature is required on the Integrated Written Assessment Report, indicating that assessment information has been shared. If a parent disagrees with the determination, he/she may access the procedural safeguards found in the Parental Rights for Public School Students Receiving Special Education Services: Notice of Procedural Safeguards at [http://www.dpi.state.nd.us/speced1/laws/PGuide07.pdf](http://www.dpi.state.nd.us/speced1/laws/PGuide07.pdf).
Appendices to Eligibility Determination

(Attached are two resources that MAY assist in documenting eligibility.)

NOTE: The following forms do not replace required forms adopted by the ND Department of Public Instruction, Office of Special Education or your local school district. They were incorporated as supplementary means by which to document continued eligibility considerations.

1. Need for special education worksheet

2. Educational Relevance of the Communication Disorder
## Need for Special Education

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
</table>
| Yes | 1. Does the student have needs that cannot be met in regular education?  
If yes, list the needs below. (Use reverse side or attach additional pages if needed) |
| No | If no, there is no need for special education. |
| Yes | 2. Are there accommodations/adaptations that can be made in the regular education program to allow the student access to general education curriculum and to meet the educational standards that apply to all students? (Consider adaptations of content, methodology and/or delivery of instruction.)  
If yes,  
A. List accommodations/adaptations that do not require special education. Use reverse side of page or attach additional pages if needed.  
B. List accommodations/adaptations that require special education. Use reverse side of page or attach additional pages if needed. |
| No | If no, go to question 3. |
| Yes | 3. Are there accommodations or adaptations that the child needs which are not provided through the general education curriculum? (Consider replacement content, expanded core curriculum, and/or other supports.) If yes, list below. Use reverse side of page or attach additional pages if needed. |
| No |   |

In order for the IEP team to determine that the student needs special education, the IEP team must have answered “yes” to question 1 AND list needs under 2B and/or 3.
Educational Relevance of the Communication Disorder

Name of Student: ____________________________  Date: ____________________________
Teacher: ____________________________

Academic- ability to benefit from the curriculum
Social- ability to interact with peers and adults
Vocational- ability to participate in work related activities

<table>
<thead>
<tr>
<th>Academic Impact</th>
<th>Social Impact</th>
<th>Vocational Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>List academic areas impacted by communication problems:</td>
<td>List social areas impacted by communication problems:</td>
<td>List job related competencies and/or skills impacted by the student’s communication problems:</td>
</tr>
<tr>
<td>____________________________</td>
<td>____________________________</td>
<td>____________________________</td>
</tr>
<tr>
<td>____________________________</td>
<td>____________________________</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

- ☐ Below average grades
- ☐ Inability to complete language-based activities vs. non-language-based activities
- ☐ Inability to understand oral directions
- ☐ Grades below the student’s ability level
- ☐ Other

- ☐ Peers tease student about communication problem
- ☐ Student demonstrates embarrassment and/or frustration regarding communication problem
- ☐ Student demonstrates difficulty interpreting communication intent
- ☐ Other

- ☐ Inability to understand/follow oral directions
- ☐ Inappropriate response to coworker/supervisor comments
- ☐ Unable to answer/ask questions in a coherent concise manner
- ☐ Other

Adapted from A training and Resource Manual for the Implementation of State Eligibility Criteria for the Speech and Language Impaired [Addendum] (p. 20), Florida Department of Education, Bureau of Instructional Support and Community Services, Division of Public Schools, 1997, Tallahassee, F.L.
References

State Education Agency Guidance Documents


- Wisconsin Department of Public Instruction (2003). *Speech and Language Impairments Assessment and Decision Making Technical Assistance Guide.*


Author References


Hodson, B (2002). Enhancing children’s phonological and metaphonological skills. *Upper Midwest Regional Programs.*


