

Department of Communicative Disorders  
XXXX Center

**Evaluation and Progress Report**

Client:	XXXXXXX	Dates:	XXXX
BC/CA:	5/02/03- 3-6	Clinician:	XXXX XXXX, B.A
Parents:	XXXX and XXXX XXXX		XXXX XXXX, B.A
Address:	XXXXXX	Supervisor:	XXXX XXXX, Ph.D., CCC-SLP
Home Phone:	XXX.XXX.XXXX		
Cell Phone:	XXX.XXX.XXXX		

**Referral Concerns**

XXXX is a 3 year 6 month-old boy, who was brought to the XXXX Center for Communicative Disorders by his mother. XXXX was referred to the center for a fluency evaluation on October 11, 2006. XXXX's mother is a Speech Language Pathologist and first noticed the disfluency in January of 2006. XXXX lives in XXXX with his mom, dad, and younger sister.

**Medical/Developmental History**

XXXX's parents reported that XXXX has asthma and seizures. It is possible that XXXX has epilepsy although this has not been diagnosed yet. XXXX had a brain injury in January of 2004, and a CT scan showed abnormality in the left parietal lobe. XXXX's parents reported that XXXX met his developmental milestones in a timely manner. According to his parents, XXXX's stuttering was first noticed in January of 2006. His parents reposted that he is mainly disfluent on words beginning with /w/. The disfluencies consist of sound and word repetitions. There is no familial history of speech problems.

**School Interview**

XXXX is currently attending XXXX Child Care during the day. A phone interview was conducted with XXX XXXX, the principal of the day care center. Ms. XXXX reported that she has noticed a decrease in XXXX's disfluencies recently. She reported that when he began to attend the day care he was very disfluent, but now it is seldom heard. She reported that XXXX is disfluent when he wakes up from his nap and when he is in a hurry to speak.

**Behavior Description**

XXXX is an active boy; he is content playing by himself and attends to the task. XXXX at times is very distractible and it takes clinicians a while to get him to attend to the task.

During the initial evaluation XXXX was fluent the entire session. Various methods were used to try to provoke a stutter but were unsuccessful. Clinicians use hierarchical questioning and interruption; they ignored XXXX and continuously increased the language demand. XXXX continued to try to obtain their attention but when unable he would play alone or find a new activity.

During the following therapy sessions it was noticed that XXXX is rarely disfluent in this clinical setting. The clinicians once again used the same methods to provoke a stutter and were unsuccessful. The clinicians asked XXXX's mom to join in a play session and ignore him and try to provoke a stutter, but this was unsuccessful as well. Disfluencies were finally noticed when XXXX was excited and trying to ask a question. XXXX was also disfluent when playing a new game with an unfamiliar boy. Clinicians were unable to obtain data on the disfluencies due to infrequency of the stuttering.

Disfluencies noted by the clinicians were present at the beginning of the sentences and phrases and were word repetitions. For example "What what what are we doing next?" No other disfluent characteristics were noted. XXXX exhibits no secondary behaviors.

### **Articulation and Language Skills**

Articulation and language skills were informally assessed during the initial evaluation. Articulation and language appeared to be age appropriate and within normal limits. No further assessment is needed at this time.

### **Impressions and Recommendations**

XXXX is a 3 year old boy who was referred to the XXXX Center for Communicative Disorders by his mother for a fluency evaluation. The evaluation was completed on October 11, 2006. No disfluencies were noted during the initial evaluation. Upon further assessment in therapy sessions XXXX exhibited very mild disfluencies characterized by word repetitions.

It is recommended that XXXX should attend speech and language therapy at the Truesdail Center for Communicative Disorders twice weekly for fifty minute sessions. Goals for therapy should include:

1. Provide education and training on methods to increase fluency, such as modeling slow, smooth speech. Parents will also learn correct ways to reinforce XXXX's fluent speech.
2. XXXX will use a slower rate of speech to facilitate more fluent speech. He will recognize fast/slow speech in others and be able to imitate.

3. XXXX will discriminate smooth and bumpy speech at the sentence level. XXXX will increase his ability to use smooth speech in spontaneous speech.
4. XXXX will understand the concept of turn taking and increase the ease with which he takes turns.

## **Goals and Progress Achieved as of December 5, 2006**

**Goal #1:** Provide parent education and training on methods to increase fluency, such as modeling slow, smooth speech. Parents will also learn correct ways to reinforce XXXX's fluent speech.

*Method:* Mrs. XXXX was brought into a couple of sessions to see first hand the types of techniques being used in therapy. Mrs. XXXX participated in teaching XXXX the difference between fast/slow, smooth/bumpy, and turn taking.

*Progress Achieved:* Mrs. XXXX is encouraging XXXX to use slow, smooth speech at home and to take turns with his sister in play activities. Mrs. XXXX is reinforcing this type of speech with him regularly.

**Goal #2:** XXXX will use a slower rate of speech to facilitate more fluent speech. He will recognize fast/slow speech in others and be able to imitate it.

*Method:* Clinicians used physical movement games to help XXXX understand the concept of fast and slow. Clinicians then moved the therapy activities toward fast and slow as it related to speech. The clinicians read books to XXXX and had him request the reading to be fast or slow. After some practice the clinicians changed the activity to XXXX identifying whether the clinicians were reading fast or slow.

*Progress Achieved:* XXXX was able to correctly identify fast versus slow in physical movement games approximately 95% of the time. XXXX was able to correctly identify fast versus slow in speech, through the use of books, 85% of the time.

**Goal #3:** XXXX will discriminate between smooth and bumpy speech at the sentence level. XXXX will increase his ability to use smooth speech in spontaneous speech.

*Method:* Clinicians used object identification games to help XXXX understand the concept of smooth versus bumpy. In the beginning clinicians brought smooth and bumpy objects (e.g., a leaf and tree bark) to XXXX's attention. Next XXXX was instructed to find and classify objects as smooth and bumpy. Clinicians then moved the therapy activities toward smooth and bumpy as it related to speech. The clinicians read books to XXXX and had him request the reading to be smooth or bumpy. After some practice the clinicians changed the activity to XXXX identifying whether the clinicians were reading smooth or bumpy.

*Progress Achieved:* XXXX was able to correctly identify smooth versus bumpy in a variety of objects appropriately 95% of the time. XXXX was able to correctly identify smooth versus bumpy in speech, through the use of books, 85% of the time.

**Goal #4:** XXXX will understand the concept of turn taking and increase the ease with which he takes turns.

*Method:* Clinicians introduced the idea of turn taking through playing games. Clinicians incorporated turn taking into multiple therapy activities including: playing basketball, board games, and telling stories.

*Progress Achieved:* Initially, XXXX was able to take turns appropriately when only he and one other person were involved. XXXX's increase in his ability to participate in appropriate turn taking was measured by how often he could correctly identify who's turn it was during a specific activity. XXXX can currently use appropriate turn-taking skills when three people are involved 90% of the time.

### **Present Impressions**

XXXX has steadily progressed through therapy and has currently reached all goals previously set for him. He is currently fluent in spontaneous speech as reported by his mother, school and clinicians.

### **Present Recommendations**

It is recommended that XXXX discontinue his individual therapy sessions due to the constant fluency of his speech. A reevaluation can be conducted in the future if needed.

## XXXXX Elementary School District Speech, Language and Communication Report For XXXXX XXXXX Elementary School

#### **Purpose of the Evaluation:**

Initial Assessment       Triennial Assessment       Possible Exit

This speech and language assessment was completed in compliance with the requirements of IDEA and the California Education Code to consider eligibility as a student with exceptional needs.

**Current Vision and Hearing Testing and health related data:**

Vision: Pass  or Fail  Dated 1-26-08 Hearing: Pass  or Fail  Dated: 1-26-08  
Other health related issues:

**Current Primary Language Data**

Primary language per language survey: English  
Proficiency: EO  Beginning  EI  Intermediate  EA  Advanced   
Based on: Interview with Mom  
Language spoken by the student in the Home: English  
Language spoken with peers: English  
Language spoken by parents: English  
Student's primary mode of communication is: Verbal  or nonverbal   
Based on review of existing data all further testing will be completed in English

**Data Utilized For Decision Making**

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Parent Report        | <input checked="" type="checkbox"/> Observations         |
| <input type="checkbox"/> Teacher/Staff Report            | <input checked="" type="checkbox"/> Previous Assessments |
| <input checked="" type="checkbox"/> Health History       | <input checked="" type="checkbox"/> Formal Assessments   |
| <input type="checkbox"/> Student file review (School Hx) | <input checked="" type="checkbox"/> Informal Assessments |
| <input checked="" type="checkbox"/> Work Samples         | <input type="checkbox"/> Other                           |

**Student's Previous Educational Experience**

Student attended Kindergarten at Village Elementary School in Victorville.

**Medical, Social History:**

Information was obtained through an interview with Mom who is a Speech Language Pathologist specializing in school age children. She has been keeping detailed records of her own observations of XXXX's progress as well as all medical problems, interventions, reports, ect.

XXXX suffered a closed head injury at 7.5 months. 2 CT scans showed no bruise or bleeding but he was hospitalized for what was thought to be an intestinal virus 5 days immediately following the head injury.

At 8 months he was put on Phenobarbital for seizures and at 8.5 months began seeing Dr. XXXX XXXX, pediatric neurologist, at La Salle Medical, who indicated that XXXX had a fracture of the right front fissure secondary to closed head injury.

Developmental milestones were met on time with the exception of talking and walking.. XXXX began talking at 10 months and walking at 11 months which are early.

Mom describes XXXX as a very sensitive child. His emotional responses tend to be stronger than the situation would warrant. For example, when XXXX was told that he could not go for ice cream, he cried and threw a toy at his mom. He has thrown toys hard enough to make holes in walls. He also has times when he is very verbose and just won't stop talking. Parents have

noticed this behavior can escalate before bedtime. Parents have at times just turned off the light when he was still talking. XXXX also will become very wound up and run up and down a hallway throwing himself against the walls. Mom estimates that XXXX has a “meltdown” and gets “wound up” (separate events) approximately once daily.

Currently, XXXX moves constantly in his sleep and sleeps with his eyes partially open. He has extreme difficulty falling and staying asleep and does not nap well. He gets approximately 7-8 hours of sleep per day. He has excessive unfounded fear of the dark as well as of strangers that he has not met. He has a great deal of difficulty sleeping on his own and often has needed to crawl into bed with his parents. He has excessive teeth grinding at night and this carries over into the day. He will chew on his wooden bedframe at night.

XXXX is a very messy eater. He does not seem to know that the front of his face and clothing are covered in food. He constantly mouths inedible objects. He doesn't eat them, just chews them up and spits them out (dirt, chalk, sand, sticks, toys.)

XXXX appears to have difficulty with regulating the pressure with which he should touch or move things and this results in his accidentally breaking, dropping items. Writing is laborious. He has many wonderful ideas, but struggles with penmanship. Although he has been writing simple items since he was 3, he is unable to stay within the lines and uses unneeded pressure, often breaking pencils or tearing paper.

XXXX displays risktaking/impulsive behavior. Without parent permission he jumped on a quad in the desert and rode independently doing donuts in the sand. He is unafraid of roller coasters. He rides his bicycle kamikaze style down hills near his home. When playing the Wii, he will situate himself so that he is sitting on his head on the chair or couch during play.

XXXX appears to ignore verbal instruction in the home and school but will follow through with them with a physical prompt. He displays aggressive and loud behavior in the presence of noise or crowds/groups of people. XXXX has learned to ask to find a quiet place to play or calm down. He is startled by loud noise even when it is predictable and covers his ears. He appears to have difficulty regulating his loudness when talking and may talk in a loud voice. He is able to detect a very little noise (ex. A small unusual sound in the car) that others do not notice and it “bothers” him in that he needs to know what it is.

XXXX has difficulty making and maintaining friendships. He deeply desires friendships but is often teased and told that he cannot play with the other children.

Mom had noticed a recent decline in XXXX's motor skills and his language skills- in particular a word finding problem.

According to mom, XXXX has been seen by a nurse practitioner, psychologist, and a psychiatrist in the last 6 months. Each person has seen XXXX for 10-15 minutes. During each visit XXXX sat still, listened attentively, and answered all questions appropriately. Each

professional made the suggestion that XXXX be medicated for ADHD immediately without formal assessments or observations of any activities or concerns. According to mom, she has also been told by school staff that XXXX probably has ADHD.

Mom has also had XXXX evaluated by an Occupational Therapist (08/05/09). Results of the evaluation show that XXXX has sensory integration and praxis difficulties and problems in the area of bilateral integration and sequencing.

This assessment is being done at the request of mom to see if there are any language learning problems that may be interfering with XXXX's learning and contributing to his problems.

<b><u>Current Evaluation</u></b>	
Based on a review of existing data formal and informal assessments were conducted in the following areas:	
<input checked="" type="checkbox"/>	Oral motor
<input type="checkbox"/>	Articulation/Phonology
<input type="checkbox"/>	Fluency
<input checked="" type="checkbox"/>	Language
<input checked="" type="checkbox"/>	Social communication
<input type="checkbox"/>	Functional language (AT and AAC)
<input type="checkbox"/>	Voice (requires a doctors referral)

**Observation of Student behaviors related to the classroom and testing sessions:**

XXXX was evaluated over 3 sessions of approximately 1 ½ - 2 hours in duration. Attention span varied but was often short. He was given breaks as needed. The examiner used turns on different toys to reward compliance. XXXX was often very talkative during the examination and expressed verbally that he did not want to continue the process (toward the end of the sessions). However I was easily able to redirect his attention back to the task by increasing the reward.

<b><u>Specific Tests/Procedures Utilized:</u></b>	
<input checked="" type="checkbox"/>	Clinical Evaluation of Language Fundamentals-4
<input checked="" type="checkbox"/>	Test of Auditory Processing Skills-3
<input checked="" type="checkbox"/>	Other : Oral Peripheral Mechanism Examination, Language Processing Test, CELF-4 Observational Rating Scale, Pragmatics Profile of the CELF-4, Nonverbal Communication Scales of the CELF-4

**Articulation/Phonology**

- Based on the assessment results XXXX does not present a challenge in this area
- Based on the assessment results XXXX presents with challenges as noted in the above chart or the text of this section.

Articulation skills were not assessed. XXXX was intelligible in conversation during the assessment and this is not an area of concern.

**Oral Motor Skills**

- Based on the assessment results XXXX does not present a challenge with this area.

- Based on the assessment results XXXX presents with challenges as noted in the text of this section.

XXXX was able to lateralize, evaluate and depress tongue and showed good tongue- jaw differentiation. He was able to lateralize and pucker his lips and to keep a good lip seal when he puffed his cheeks. He was able to perform diadochokinetic movements rapidly and accurately including “mmmbuh, ooeeee,” and “puhtuhkuh”

**Language:**

Test/Subtest	SS	%ile	AE	SD+/-	Test/Subtest	SS	%ile	AE	SD+/-
CLINICAL EVALUATION OF LANGUAGE FUNDAMENTALS					Reversed	10	50		
1. Concepts and Following Directions	7	16			6. Word Memory	7	16		
2. Recalling Sentences	10	50			7. Sentence Memory	7	16		
3. Formulated Sentences	11	63			8. Auditory Comprehension	10	50		
4. Expressive Vocabulary	No phonemic cues-9/ with phonemic cues13	9/ with phonemic cues 84			9. Auditory Reasoning	7	16		
5. Word Classes Receptive	2	0.4			Phonological Skills	99			
6.. Word Classes Expressive	2	0.4			Auditory Memory	88			
8.. Word Structure	10	50			Auditory Cohesion	93			
9. Understanding Spoken Paragraphs	8	25			LANGUAGE PROCESSING TEST				
TEST OF					1. Associations		47		



AUDITORY PROCESSING SKILLS-3									
1. Word Discrimination	7	16				2. Categorization		23	
2. Phonological Segmentation	11	63				3. Similarities		13	
3. Phonological Blending	11	63				4. Differences		31	
4. Number Memory Forward	10	50				5. Multiple Meanings.		<1	
5. Number Memory	6	9							

- Based on the assessment results XXXX does not present a challenge in this area.
- Based on the assessment results XXXX presents with challenges as noted in the chart above and in the text of this section.

According to the California Educational Code, a student is eligible for Speech/Language Services if they score at the 7th%ile or lower on 2 or more subtests in 2 or more areas of Speech or Language.

#### **Clinical Evaluation of Language Fundamentals-4**

\*SEE CHART FOR EXACT SCORES

##### Concepts and following directions:

In this subtest, the student is asked to point to different objects presented in a row in a illustration. The directions become increasingly longer and more complex. This subtest measures the student's ability to understand particular concepts and to follow directions such as those that might be given in the classroom.

XXXX scored in the low range average range. XXXX had difficulty with the following concepts: sometimes, while, all but one, neither. Nor, after, middle, second, last, left/right. It should be noted, that a couple of times, XXXX repeated the directions to himself out loud and said them incorrectly. On one of the items, I noticed that he did not look at the top row of the test stimuli when choosing items. As length and complexity of utterance increased, comprehension decreased.

##### Recalling Sentences:

In this subtest, the student is asked to repeat back sentences of increasing lengths and complexity which have been read aloud to the student by the examiner. Inability to repeat back sentences can indicate disordered language development in meaning or structure. The ability is required in the classroom for following directions and academic instructions, writing to dictation, note taking, learning vocabulary and related words and subject content.

XXXX scored in the average range. He had a great deal of difficulty attending in this task/subtest so a high motivation reward was offered for participation. Errors were substitutions or additions which generally did not affect the meaning. EX. mom/mother, nurse that / nurse who, kid/student, ect. As length and complexity of utterance increased performance decreased.

#### Formulated Sentences:

In this subtest, the student is shown an illustration, given a word orally, and then asked to make up a sentence orally about the picture using the given word. This subtest measures the student's ability to formulate complete grammatically and semantically correct sentences of increasing length and complexity using given words and contextual restraints imposed by illustrations. It gives information about the student's ability in the classroom to use correct spoken and written sentences in story telling, written and narrative text, and editing and other literacy activities.

XXXX scored in the average range. Expressive morphology was age appropriate or high for age. XXXX tended to use imprecise vocabulary such as "stuff, kid, kids, ect."

#### Expressive Vocabulary

In this subtest, the student is shown an illustrations of people, places or things, and asked to label the illustration using one word. This is a measure of how many words a student knows relative to their age. XXXX scored in the average range. He appeared frustrated during the subtest and indicated that he knew the names of the items but couldn't recall them.

I readministered the items that XXXX got wrong the first time but supplied the first sound of the word to him (phonemic cueing). XXXX's score jumped from 20 correct to 34 correct which is a significant improvement and indicates that XXXX has a word retrieval problem that is helped with phonemic cueing.

#### Word Classes Expressive and Receptive:

In these subtests, the student is read aloud 3-4 words and asked which 2 of the words go together. (Ex: dark, hot, soft, cold). The student is then asked to explain how the 2 words he picked are related. This subtest evaluates a student's ability to understand the relationships between words that are related by semantic class feature and to express those relationships. The abilities evaluated are important in the curriculum objectives for using word associations to focus or extend word meanings in spoken or written discourse, develop semantic meanings, and to facilitate word retrieval.

XXXX's score was in the low range when asked to pick which 2 words went together. However, this was only because I had to discontinue the subtest because he had done so poorly on the second part of the subtest. He actually did not appear to have any difficulty understanding or choosing words that were related.

XXXX's score on the second part of this subtest was low. He had a great deal of difficulty explaining why 2 words were related. His answers were "in the ballpark" but too vague to be correct. For example when asked how SLIDE-SWING are related, XXXX replied "They are a thing to go on". BOTTLE-RATTLE, " They are things that babies play with and drink out of." CIRCLE-SQUARE, "They are a shape that kids find and play with.

#### Word Structure:

In this subtest, the student is shown stimulus pictures and read a sentence by the examiner which is used to demonstrate a particular expressive morphological structure. The examiner then reads another sentence similar to the previous one but leaves off the target structure. The student must complete the sentence with the target structure using the picture(s) as an aid. Expressive morphology is necessary for oral reading and oral expression in the classroom in class activities such as answering questions, giving opinions, describing, ect.

XXXX's score was in the average range. He had difficulty we EZ plurals (horses); irregular plurals (mice, children); the comparative and superlative forms of "good" and with the reflexive pronouns himself and herself. These are all age appropriate errors.

#### Understanding Spoken Paragraphs:

3 different paragraphs are read to the student, one at a time. After each paragraph the student is asked 4 different questions about the paragraph. The student answers the questions orally. This subtest measures a student's ability to: a) sustain attention and focus while listening to paragraphs of increasing length and complexity b) understand oral narrative and text c) understand questions about the content given d) think critically to arrive at logical answers. In the classrooms this is necessary for understanding stories: descriptions of actions, events, or opinions; and instructional material across the curriculum.

XXXX's score was in the average range. He had difficulty with  $\frac{2}{3}$  inference questions.

### **Test of Auditory Processing Skills**

#### 1. Word Discrimination

This subtest measures the student's ability to discern phonological differences and similarities within word pairs.

XXXX's score is in the low/low average range. He had some difficulty when 2 words were the same (missed 8) but had more difficulty when 2 words were not the same byt were similar sounding (missed 15)(Ex. pawn/pond, saddle/settle)

#### 2. Phonological Segmentation

This subtest measures how well a student can manipulate phonemes within words. The student is given a word to say and then asked to say the word again but deleting a part of the word (Ex. beginning or ending syllable, beginning or ending sound, ect)

XXXX's score was in the average range and indicates that he the subtest does not have difficulty with phoneme manipulation.

3. Phoneme Blending

This subtest measures how well a student can synthesize a word given the individual phonemes. XXXX was presented with sounds such as “ f/ ee/ t” and asked to put the sounds together to make a word (feet).

XXXX's score was in the average range and indicates that he has no difficulty with phoneme blending.

4. Number Memory Forward

This subtest measures how well the student can retain simple sequences of auditory information. The student is presented with increasing longer numbers to repeat back to the examiner starting with 2 numbers.

XXXX's score was in the low/ low average range. He was able to repeat back 2 and 3 number sequences only. This indicates that XXXX has difficulty remembering unrelated information. An example of this in the classroom would be when the teacher dictates the letters to the spelling of a word or tells the pages to turn to in a math book and the numbers of math questions to work on.

5. Number Memory Reversed

This subtest measures how well a student can retain and manipulate simple sequences of auditory memory. XXXX was again given increasingly long sequences of numbers to remember. However, in this subtest, he was required to repeat the number sequences backwards to the examiner.

XXXX's score was in the average range.

6. Word Memory Forward

The subtest also measures a student's ability to retain and manipulate increasingly long sequences of unrelated words. The student is read a list of words by the examiner and asked to repeat the words back to the examiner in the order in which they were read.

XXXX's score was in the low/ low average range.

7. Sentence Memory

This subtest is designed to tell how well a student can retain details in sentences of increasing length and grammatical complexity.

XXXX's score was in the low average range. As length and complexity of utterance increased, performance declined.

8. Auditory Comprehension

This subtest measures a student's ability to understand spoken information. XXXX is read increasingly longer and more complex information starting with one simple sentence. He is asked questions about the sentence(s) that he has just heard.

XXXX's score was in the average range. There was one example of extreme literalness. The stimulus sentence was "Rachel put her dog Max in a cage and took him to the vet." The question was asked, "How did Rachel carry Max?" XXXX replied "By holding the handle on the cage."

9. Auditory Reasoning

This subtest measures higher order linguistic processing. The items are designed to determine if the student can understand implied meanings, make inferences, or come to logical conclusions given the information in the sentence/s presented.

XXXX's score was in the low average range. His errors generally showed that he understood the question but had difficulty conveying the answer due to lack of specificity.

### **Language Processing Test:**

#### Associations:

In this subtest a student is read a word and must give a response in the form of a single word that is highly related or associated to the target word. So if the examiner read the word "Shoe", acceptable responses would be, "sock, foot, another shoe, it's mate". If the target word were "Toothpaste", acceptable responses would include, "Toothpaste, teeth floss."

Associations are important because they show a semantic organization that is important for conversational skills such as topic maintenance.

XXXX's score was in the average range. He showed some possible perseveration in response by giving the word "ice cream" to numbers 5 - money and 10 - bread. Both were incorrect and may just have been idiosyncratic since they were separated by 4 other responses.

#### Categorization:

In this subtest, the student is given a category name such as "Color" and asked to name 3 category members (blue, green, and red.)

XXXX's score was in the average range.

#### Similarities:

In this subtest, the student is asked to tell how 2 items such as a "car" and "bus" are alike.

This requires a student to hold the two items in memory, list the attributes of each item and see which attributes overlap, choose the attributes which are most appropriate.

XXXX's score was in the low/ low average range.

#### Differences:

This subtest is similar to the one above but the student must tell how the items are different from each other. XXXX found this test easier than the one above and his score was in the average range.

#### Multiple Meanings:

In this subtest, the student is given a word that has 3 different meanings. The student is read a sentence which makes one meaning of the word obvious. The student is then asked to tell

what the meaning of the target word is in that sentence. For example, ROSE- 1. Ask ROSE to call me. 2. The sun ROSE over the mountains. 3. Put the ROSE in the vase.

XXXX's score was in the low range for this subtest. He seemed to take a very literal interpretation of what was being asked of him in this subtest. In the example above for the first sentence, I asked XXXX "what does Rose mean in this sentence?" XXXX said that Rose meant a friend. (ie What is a Rose...a friend) For the 2nd sentence I asked "What does Rose mean in this sentence?" He replied "It's morning" (ie what does it mean when the sun rose?). XXXX took the literal meaning for many of the questions.

Other examples include: CUT it out- "You are supposed to cut it out."

Let's take a 10 minute BREAK - "Push on the break on a car."

### **Stuttering:**

- Based on the assessment results XXXX does not present a challenge in this area.
- Based on the assessment results XXXX presents with challenges as noted in the text of this section.

No disfluency has been reported by the teacher nor was noticed during this assessment.

### **Social Skills:**

- Based on the assessment results XXXX does not present a challenge in this area.
- Based on the assessment results XXXX presents with challenges as noted in the text from this section.

Information was compiled from questionnaires filled out by Mom who is a Speech Language Pathologist specializing in school age children and is therefore an excellent observer. From these questionnaires, it appears that XXXX has difficulties in the following areas:

### **Significant Problem**

- Using appropriate strategies for getting attention
- Using appropriate strategies for interruptions and interrupting others

### **Sometimes a Problem**

- Observing turn taking rules in classroom or in social situations
- Introducing appropriate topics of conversation
- Making relevant contributions to a topic during conversations
- Avoiding the use of repetitive/redundant information
- Joins or leaves an ongoing communicative interaction appropriately
- participates /interacts appropriately in structured and structured groups
- Asking for help from others appropriately
- gives/asks for reasons and causes for actions/conditions/choices
- Asks clothes for permission when required
- Agrees and disagrees using appropriate language
- accepts/rejects invitations appropriately using appropriate language

- starts/responds to verbal and nonverbal negotiations appropriately
- Reminds others/responds to reminders appropriately
- Responds appropriately when asked to change his actions by accepting or rejecting
- Responds to teasing, anger, failure and disappointment appropriately
- Adjusts body distance (sit/stand) appropriate to the situation
- Reads the social script correctly and behaves/responds appropriately
- Understands posted and implied group/school rules

### **Functional Communication (AAC)**

- Based on the assessment results XXXX does not present a challenge in this area.
- Based on the assessment results XXXX presents with challenges as noted in the text of this section.

### **Voice**

- Based on the assessment results XXXX does not present a challenge in this area.
- Based on the assessment results XXXX presents with challenges as noted in the text of this section.

During the assessment, pitch, volume, resonance, and phonation were appropriate for age and sex.

### **Assistive Technology**

- Based on the review of existing data, including information, observations from parents and classroom teachers. There are factors which may warrant additional assessment for assistive technology devices or services.
- Based on the review of existing data, including information, observations from the parent and classroom teachers, there are no identified needs for assistive technology or services at this time.

### **Summary**

Results of this assessment show:

1. XXXX has difficulty remembering information presented orally to him.
2. XXXX has an excellent vocabulary but is experiencing a word retrieval problem. Phonemic cueing helps him retrieve the word.
3. XXXX has many pragmatic strengths, especially when empathy is involved. However he is having difficulty with some areas in pragmatics which involve waiting his turn and this may be due to his impulsivity and difficulty with controlling his verbosity.
4. XXXX is sensitive to background noise.

### **Behavior Related to the Student Code of Conduct (if appropriate)**

- The student generally has appropriate behavior related to the student code of conduct.

- Minor offenses documented for this student are as follows:
- Persistent, serious offenses related to the student code of conduct are as follows:

**Transition** (Consider when the student will turn 16 within the scope of the IEP)

**Scores listed/Summary of information:**

**Based on the Transition Inventory:**

### **Summary of Findings and Considerations of Eligibility**

As part of XXXX's evaluation, a qualified professional carefully considered existing data, information and evaluations provided by the parent, current classroom based assessments, and observations by the teacher(s) and related services providers to determine the presence of absence of a physical, mental, or emotional deficit, which may be contributing to his or her educational need in the area of speech, language, or communication.

- Based on evaluation, the assessor assures that the following have been considered and ruled out in the process of determination for eligibility: environmental, cultural/linguistic, or economic disadvantage (Ed Code Section 56327 G)

### **Suspected Area(s) of Disability (ies)**

Based on the information reviewed, the suspected area(s) of disability (ies) for this student is/are:

- Speech and/or language impaired (240)
- Hard of Hearing (220)
- Deaf(230)
- Autism (320)
- Student is making satisfactory progress and passing all of his or her subjects in the regular education program. There is no educational need for eligibility at this time.

### **Recommendations for Parents and Teachers**

The following recommendations based on the student's learning style and language/speech needs should be considered in order for the student to reach his or her capacity for involvement and progress in the general education class and curriculum (34 CFR 300.532)

1. From Mom's report, it appears that XXXX is a very sensitive child with long standing difficulties falling and staying asleep, who experiences extreme emotional reactions daily, has periods of frequent non stop talking, can be impulsive and a risk taker, is showing signs of anxiety and is being ostracized by his peers, can have a short attention span and periods of hyperactivity i which he can, at times injure himself or others, and has been diagnosed with a number if problems including a sensory integration problem by an O.T. A referral to a psychologist for further investigation and evaluation is warranted.



2. XXXX is distracted by background noise. It would be helpful to have some headphone ear protection (the kind that people wear to block out noise) in the classroom for all children to wear ( so XXXX is not identified) “as a special treat” when the students (but especially XXXX), need quiet. Alternatively, or as well, if the school has a quiet spot that XXXX might use to complete assignments or just to be able to remove himself from the noise, until he is able to cope, it would help him a great deal. Keeping the classroom as quiet as possible helps many students..... Including those suffering with fluctuating hearing loss due to symptomless conditions.

3. Please see attached handouts.

4. Please feel free to speak to the SLP about and questions or concerns that you might have.

### **Assurances**

- The testing, evaluation materials, and procedures used for the purpose if this evaluation were selected and administered so as not to be racially or culturally discriminatory.
- The tests and other evaluation materials have been validated for the specific purpose for which they were used.
- The tests and other evaluation materials were administered by trained personnel in conformance with the instructions provided by their producers.
- A student will not be determined a student with a disability if the determinant factor is lack of instruction in reading or math, or due to limited English Proficiency.

### **Classroom Strategies to Help Students With Auditory Comprehension Memory / Processing Problems**

- 1) Give preferential seating close to the teacher and to visual aids such as the chalkboard, pictures, TV, ect
- 2) Provide visual cues wherever possible to reinforce the spoken word (ex filmstrips, slides, movies, pictures, chalkboard work, Mindmapping, 3 dimensional materials.)
- 3) Some students with Processing Problems have difficulty functioning in background noise. If you have such a student, keep noise to a minimum. When possible keep doors and windows closed if there is noise outside of the room. Encourage all students to work quietly in their seats.

Have a couple of pairs of Ear Protection (look like ear muffs) available in the classroom to all students (so the student does not feel singled out). Encourage the student to wear them if he / she is feeling uncomfortable with the noise level.

If possible provide an alternative quiet place to do seatwork.

- 4) Alert the students that communication is about to start by calling his/her name and then pausing. With some students it may also be necessary to tap them on the shoulder.
- 5) When presenting new information to the class, put an outline (Mindmapping is an excellent tool for this) on the chalkboard and refer to it while you are teaching.
- 6) Write lengthy or specific directions on the chalkboard> (Ex “do problem 1-4 on Pg. 56 and 6-8 on Pg. 57”).
- 7) Use language which is simple and concrete. Use pausing to separate thoughts. Repeat and rephrase information.
- 8) After giving direction orally, discreetly ask the student to repeat the directions to check for comprehension. Have the student repeat the direction in his/her own words, since some students may be able to repeat word for word without understanding.
- 9) These students after have difficulty when the topic is changed. Alert them to the change in topic for example by saying “That was a good discussion about .....
- 10) Students with processing problems often misinterpret information. This results in misunderstanding inside and outside of the classroom. When this occurs, find out exactly what was said and by whom. Then take the student aside quietly and explain what they have misunderstood.

To help prevent misunderstandings, teach the student to clarify information by learning to ask “ Did you mean.....?” or “ Are you saying.....?”

- 11) When possible, pre-teach or reteach new information.
- 12) Some students will have difficulty listening and taking notes at the same time. Allow the student to listen to the new information being presented without taking notes. Provide them with a copy of another student’s notes.
- 13) These students must work much harder at listening to information presented orally. As a result, they “fatigue” more quickly from listening. Allow the student a “break” from listening by alternating listening activities with activities which do not require or require less listening.
- 14) These students are not auditory learners. Find out how they are best able to learn and incorporate their learning style into lesson plans. (Ex. Multiple Intelligences)

### Classroom Strategies to Help Students with Word Finding Difficulties

Everyone experiences difficulty with word finding. It is that familiar feeling when the word on “the tip of your tongue.” Students with a Word Finding Difficulty however, experience the problem so often that it interferes with their ability to communicate and makes communications frustrating. These students know what they want to say, but are unable to retrieve these words such as “thing” or “stuff” to the point where their communication sounds “vague” and difficult to understand.

Forcing the student to try to find the word will only lead to more frustration.

Below are some strategies which will help your student.

- 1) Ask one concept questions.
- 2) Give ample time for responses.
- 3) Permit short answers from the student.
- 4) If the student is struggling to find a word, help him/her by supplying it.
- 5) Ask multiple choice questions which contain the answer. (Is this a rectangle or a square?"
- 6) Give the student a written question to think about and rehearse at home the night before. Encourage the student to have key words written down on a cue card to glance at when answering.
- 7) These students often have a "disorganized semantic file drawer." Teaching synonyms, antonyms, categories, part/whole relationships, associations, ect may improve word finding ability by organizing their semantic system.
- 8) When teaching new vocabulary, use a mnemonic device to help the child remember the sound of the word and the meaning. (Ex. Keyword Method)
- 9) When students must give oral presentations (Ex. Book Reports, Speeches, role playing, ect.), always allow "cue cards." Encourage the student to over rehearse the information / dialog.

XXXXXX XXXX School District  
Speech, Language and Communication Report  
XXXXXX XXXX XXXX School

**Purpose of the Evaluation:**

Initial Assessment       Triennial Assessment       Possible Exit       Additional Information

This speech and language assessment was completed in compliance with the requirements of IDEA and the California Education Code to consider eligibility as a student with exceptional needs.

**Current Vision and Hearing Testing and Health Related Data:**

Vision: Passed

Hearing: Passed

Dated: 11/4/13

Dated: 11/4/13

Other health related issues: It has been reported by parent, IEP documents, and student's file that XXXX is a student with epilepsy (partial, complex epilepsy). He is currently taking Depakote twice daily at home to control his seizures. He is under the care of a neurologist. His seizure medication is controlled by 250mg of Depakote daily, given at home. Additionally, he is currently taking Concerta to assist with adverse attentional issues intensified by the seizure medication, clonidine for sleep and an appetite stimulant.

### **Current Primary Language Data**

Primary language per language survey: English

Proficiency: EO  Beginning  EI  Intermediate  EA  Advanced

Based on: parent survey

Language spoken by the student in the Home: English

Language spoken with peers: English

Language spoken by parents: English

Student's primary mode of communication is: Verbal  or nonverbal

Based on review of existing data all further testing will be completed in English

### **Data Utilized For Decision Making**

Parent Report

Teacher/Staff Report

Health History

Student file review (School Hx)

Observations

Previous Assessments

Formal Assessments

Informal Assessments

### **Student's Previous Educational Experience**

XXXX is a twelve year old student in XXXX's seventh grade class. He began attending XXXX XXX XXx elementary on August 2014. XXXX has 0 school absences and 0 tardy according to his attendance record to date.

XXXX's academic progress according to AERIES.NET, is not available at this time.

The purpose of this evaluation is to determine qualification as a student with speech and language impairments.

### **Current Evaluation**

Based on a review of existing data formal and informal assessments were conducted in the following areas:

- Oral motor
- Articulation/Phonology
- Fluency
- Language
- Social Communication

### **Observation of Student behavior related to the classroom and testing session:**

XXXX was cooperative and attentive during the testing situation. He appeared to attempt all assessment questions to the best of his ability. There were no unusual or abnormal behaviors noted during the assessment session. Testing results appear to be a reliable indicator of student's abilities.

**Observation (Lunch/Recess, Classroom):** It was observed that XXXX often spends his recreational time alone or with a friend. XXXX exhibited a difficulty answering questions when asked in the classroom setting. XXXX talked about a subject with difficulty narrowing down the details to the most important information to share. XXXX is willing to communicate with peers and has a drive to attend social interactions with peers and adults.

## **Current Results**

### **Specific Tests/Procedures Utilized:**

- Clinical Evaluation of Language Fundamentals- Fifth Edition
- Test of Pragmatic Language-Second Edition

### **Articulation/Phonology**

Based on the assessment results XXXX does not present a challenge in this area. Articulation skills are judged to be within functional limits for speaking purposes and are not an area of concern at this time.

### **Oral Motor Skills**

Based on the assessment results XXXX does not present a challenge in this area. Oral motor strength, speed and accuracy were in functional limits for speaking purposes.

### **Stuttering**

Based on the assessment results XXXX does not present a challenge in this area. No primary or secondary stuttering behaviors were noted during testing or conversational speaking.

## **Language:**

### **Language at a Glance:**

<b>Test</b>	<b>SS</b>	<b>%ILE</b>	<b>SD +/-</b>
<b>CELF</b>	-----	-----	-----
<b>Core Language Score</b>	<b>91</b>	<b>27</b>	<b>-0.6</b>
<b>Receptive Language Index</b>	<b>100</b>	<b>50</b>	<b>0</b>
<b>Expressive Language Index</b>	<b>98</b>	<b>45</b>	<b>-0.1</b>
<b>Language Context Index</b>	<b>104</b>	<b>61</b>	<b>+0.3</b>
<b>Language Memory Index</b>	<b>85</b>	<b>16</b>	<b>-1</b>

- Based on the assessment results XXXX does not present a challenge in this area.

CELF-5 is a tool for identification, diagnosis and follow-up evaluation of language and communication disorders in students 5-21 years old. The test is administered individually. The CELF-5 is a standardized assessment and is designed as a four level assessment process that includes: 1) whether or not there is a language disorder, 2) describe the nature of the disorder, 3) evaluate underlying clinic behaviors, 4) evaluate language and communication in context

### **Word Classes**

The Word Classes text is used to evaluate the student's ability to understand relationships between words based on meaning features, function, or place or time of occurrence. The

student chooses the two words (i.e., pictures or presented orally) that best represents the desired relationship. This test has a mean of 10 and the standard deviation is 3.

XXXX received a scaled score of 10 on the Word Classes test.

According to his performance on the CLEF-5, he was able to give the two words that were related to each other. He scored in the 50th percentile on the word class's subtest this was an area of strength for him. This score is in the average range compared to his peers age.

#### Following Directions

The Following Directions test is used to evaluate the student's ability to (a) interpret spoken directions of increasing length and complexity, (b) follow the order of presented objects with varying characteristics such as color, size, or location, and (c) identify several pictured objects that were mentioned. The student identifies the objects in response to oral directions. This test has a mean of 10 and a standard deviation of 3.

XXXX received a scaled score of 9 on the Following Directions test.

According to his score on the CLEF-5, he was able to follow multistep directions. This score on this subtest indicates he scores in the 37th percentile which is in the average range compared to his peers age.

#### Formulated Sentences

The Formulated Sentences test is used to evaluate the ability to formulate simple, compound, and complex sentences when given grammatical (semantic and syntactic) constraints. The student is asked to formulate a sentence, using target word(s) while using an illustration as a reference. This test has a mean of 10 and the standard deviation is 3.

XXXX received a scaled score of 6 on the Formulated Sentences test.

According to his score on the CLEF-5, this was an area of weakness for XXXX. XXXX's sentences often became run on sentences as he wanted to add more details from the visual given. This score on this subtest indicates he scored in the 9th percentile which is in the low average range.

#### Recalling Sentences

The Recalling Sentences test is used to evaluate the student's ability to recall and reproduce sentences of varying length and syntactic complexity. The student imitates sentences presented by the examiner. The mean for the test is 10 and the standard deviation is 3.

XXXX received a scaled score of 8 on the Recalling Sentences test.

According to his score on the CLEF-5, he was able to recall a sentence that was presented to him orally. XXXX scored in the 25th percentile which is in the average range compared to his peers.

#### Understanding Spoken Paragraphs

The Understanding Spoken Paragraphs test is used to evaluate the student's ability to (a) sustain attention and focus while listening to spoken paragraphs, (b) create meaning from oral narratives and text, (c) answer questions about the content of the information given, and (d) use critical thinking strategies for interpreting beyond the given information. The student answers questions about a paragraph presented orally. The questions probe the student's understanding of the paragraph's main idea, memory for facts and details, recall of event sequences, and ability to make inferences and predictions. This test had a mean of 10 and a standard deviation of 3.

XXXX received a scaled score of 9 on the Understanding Spoken Paragraphs test. According to his score on the CLEF-5, he was able to remember pertinent information presented to him orally. XXXX's scores on this subtest indicate he scored in the 37th percentile which is the average range.

#### Word Definitions:

In this subtest, the examiner says a word to the student and the uses the word in a sentence for the student. The sentence does not give away the meaning of the word. The student is then asked to give the meaning or define the word orally to the examiner. This subtest evaluates the student's ability to analyze words for their meaning features, define words by their class relationships and shared meanings, and describe words that are unique to the reference or instance. This is important in the classroom since defying words is used to broaden word meanings to form concepts. It is emphasized in matching words to definitions, using the lexicon to explain word meaning, acquiring new word meanings and developing in depth understanding of word usage in literature as well as precision of word usage in editing, summarizing, and other literacy activities.

XXXX received a scaled score of 13 on Word Definitions. His scores on this subtest showed that this was an area of strength for XXXX. His scores on this subtest fall in the 84th percentile. He scored in the high average level expectations for students his age.

#### Sentence Assembly

The sentence Assembly test is used to evaluate the student's ability syntactic structures. The student produces two grammatically correct sentences from visually and auditorially presented words or phrases. The test has a mean of 10 and a standard deviation of 3.

XXXX received a scaled score of 15 on the Sentence Assembly test. XXXX had strength in this area. His scores on this subtest indicate he scores in the 95th percentile and is in the high range compared to peers his age.

#### Semantic Relationships

The Semantic Relationships test is used to evaluate the student' ability to interpret sentences that (a) make comparisons, (b) identify locations or directions, ( c) specify time relationships, (d) include serial order, or (e) are expressed in passive voice. After listening to a sentence, the

student selects the two correct choices from four visually presented options. The mean for this test is 10 and the standard deviation is 3.

XXXX received a scaled score of 11 on the Sentence Assembly test. According to his score on the CLEF-5, his score on this subtest indicates he scores in the average range compared to peers of his age group.

### Pragmatics Profile

The Pragmatics Profile is a checklist used to gain information about the student's verbal and nonverbal pragmatic skills that may influence social and academic communication. The examiner completes the checklist with input from parents/caregivers, teachers, and other informants who provide information to evaluate verbal and nonverbal contextual communication. The mean for the Pragmatics Profile is 10 and the standard deviation is 3.

XXXX received a scaled score of 3 on the Pragmatics Profile checklist. This score places him in the 1st percentile which is in the deficient range when compared to his peers. This area is further discussed in the social skills section.

### Social Skills

<u>Pragmatic Language Usage Index</u>	<u>Percentile Rank</u>
97	42 <sup>nd</sup>

- Based on the assessment results XXXX does present a challenge in this area.

**Test of Pragmatic Language (TOPL)** - The TOPL is a test of pragmatic knowledge in which scenarios with drawings are presented and explained verbally. Students are then asked to either devise appropriate responses for the people in the situation, or to answer a question demonstrating knowledge of how or when to use language.

XXXX's responses often were not the most appropriate responses. If they were they were very shallow and did not consider the effects of actions and that sometimes more than the formality of a "thank you" is needed to rectify a social situation.

XXXX's social communication and pragmatic skills are not within functional limits for communication purposes. This is an area of concern at this time.

### Behavior Related to the Student Code of Conduct (if appropriate)

- The student generally has appropriate behavior related to the student code of conduct.

**Transition** (consider when the student will turn 16 within the scope of the IEP)

**Scores listed/Summary of Information: Not an area of concern**



**Based on the Transition Inventory: Not an area of concern**

**Summary of Findings and Considerations of Eligibility**

As part of XXXX's evaluation, a qualified professional carefully considered existing data, information and evaluations provided by the parent, current classroom based assessments, and observations by the teacher(s) and related services providers to determine the presence of absence of a physical, mental, or emotional deficit, which may be contributing to his educational need in the area of speech, language, or communication.

- Based on the evaluation, the assessor assures that the following have been considered and ruled out in the process of determination for eligibility: environmental, cultural/linguistic, or economic disadvantage (Ed Code Section 56327 G)

**Suspected Area(s) of Disability (ies)**

Based on the information reviewed, the suspected area(s) of disability (ies) for this student is/are:

- Speech and/or language impaired (420)

California Education Code Criteria for Qualification for Speech/language impairment (56333): A pupil shall be assessed as having a language or speech disorder which makes him eligible for special education and related services when he demonstrates difficulty understanding or using spoken language to such an extent that it adversely affects his educational performance and cannot be corrected without special education and related services. In order to be eligible for special education and related services, difficulty in understanding or using spoken language shall be assessed by a language, speech and hearing specialist who determines that such difficulty results from any of the following disorders:

- (a) Articulation disorder, such that the pupil's production of speech significantly interferes with communication and attracts adverse attention.  
NO
- (b) Abnormal voice, characterized by persistent, defective voice quality, pitch, or loudness. An appropriate medical examination shall be conducted, where appropriate.  
NO
- (c) Fluency difficulties which result in an abnormal flow of verbal expressions to such a degree that these difficulties adversely affect communication between the pupil and listener.  
NO
- (d) Inappropriate or inadequate acquisition, comprehension, or expression of spoken language such that the pupil's language performance level is found to be significantly below the language performance level of his peers.  
YES
- (e) Hearing loss which results in a language or speech disorder and significantly affects education performance.  
NO

**Recommendations for Parents and Teachers**

The following recommendations based on the student's learning style, and language/speech needs should be considered in order for the student to reach his capacity for involvement and progress in the general education class ad curriculum (34 CFR 300.532)

1. It is recommended to the IEP team that XXXX does qualify for special education services as a studnet with speech language impairments per education code according to speech and language assessments, his skills are not within the average range.
2. Proposed Goal areas include: Pragmatics-conversational norms and appropriate reactions.
3. It is recommended that all final decisions with regards to least restrictive environment, special education qualification, services and possible goals be determined by the IEP team upon review of all available data and evaluations.

### **Assurances**

- The testing, evaluation materials, and procedures used for the purposes of this evaluation were selected and administered so as not to be racially or culturally discriminatory.
- The tests and other evaluation materials have been validated for the specific purpose for which they were used.
- The tests and other evaluation materials were administered by trained personal in conformance with the instructions provided by their producers.
- A student will not be determined a student with a disability if the determinant factor is a lack of instruction in reading or math, or due to limited English Proficiency.