

Describing Speech Misarticulations
Teacher Questionnaire

1. Does this student misarticulate sounds when talking? **Yes** **No**

2. In general, how intelligible is the student to you?
Unintelligible Fairly Intelligible Highly Intelligible Completely Intelligible

3. Is the student's academic performance satisfactory?
 Yes, the student meets grade level standards.
 No, the student does not meet grade level standards.

4. If no, in which of the following areas is the student performing below grade level?
Speaking Reading Writing Spelling Math

5. Does the misarticulation(s) have a *significant* adverse affect on any of the areas that are below grade level? **No** **Yes**

6. If yes, identify each area of impact and tell how the misarticulation affects academic performance.
Area _____ Impact _____
Area _____ Impact _____
Area _____ Impact _____

7. What accommodations for the misarticulation(s) have you made to support the student in each affected academic area?

8. What have you done to correct the misarticulation(s)?

9. Do classmates react negatively to the misarticulations? **No** **Yes**

10. If yes, describe the negative reactions and their impact on the student.

11. What have you done to stop the negative reactions?

12. In your judgment, does this student have an articulation problem that adversely affects educational progress in a significant way? **Yes** **No**

San Diego City Schools Transdisciplinary Services

Permission to Enroll in the Speech Improvement Class

San Diego City Schools offers a Speech Improvement Class for students with mild speech differences that affect the way they pronounce a sound. As you know from your discussion with the school's speech-language pathologist, your child has been invited to enroll in the class.

About the Class

The class is offered to general education students who have speech differences that do not significantly affect communication, self-esteem, and educational achievement. The class is scheduled so that it does not interfere with literacy instruction. Classes are typically offered twice a week for 30 minutes in a small group setting. While the SLP is responsible for planning and implementing the curriculum, a trained adult may guide some lessons. Placement and practice methods are individualized for each student, as appropriate.

Students are expected to complete daily practice assignments at home. The speech-language pathologist works with the classroom teacher and parents to reinforce and transfer skills and to provide periodic progress updates. Classes generally last for 17–20 hours.

If you have any questions, please contact the speech-language pathologist at your school.

Detach and return this permission slip to your child's classroom teacher. The school's speech-language pathologist will call you to talk about class times and parent training opportunities.

Student's Name _____ Teacher _____

- I am not interested in the class at this time.
- I would like to enroll my child in the Speech Improvement Class. I understand that this is a general education opportunity.

Parent signature _____ Date _____



Checklist for Speech Improvement Student Files

Enrollment

1. Asked teacher to fill out *Describing Speech Misarticulations* _____
2. Received signed *Permission to Enroll* form from family _____
3. Received signed *Homework Contract* from family _____
4. Administered *Speech Improvement Sound Inventory* _____
5. Placed *Speech Improvement Participation* form in child's cumulative file _____

During Class

6. Documented attendance on back of *Sound Inventory* _____
7. Documented homework completion on back of *Sound Inventory* _____

Class Completion

8. Readministered *Speech Improvement Sound Inventory* _____
9. Placed *Speech Improvement Completion* form in child's cumulative file _____
10. Put forms together in a working file to provide documentation _____

Student's Name _____ Entry/Completion Date _____
 (circle one)

ID # _____ Grade _____ School _____ Teacher _____

Speech Improvement Sound Inventory for /s/

Record the percentage correct for each section in the Score box below and circle Adequate or Inadequate for each item in the Oral Peripheral Screening box.

Singletons

Mark the box with a 1 or 0.

Initial

1. soccer

2. seven

Final

5. bus

6. house

3. sink

4. sandwich

7. tennis

8. mouse

Clusters

str

1. strawberry

2. street

skr

3. screwdriver

4. screw

spr

5. spring

6. spray

Stimulability

Assess the stimulability of /s/ in isolation or in syllables (1 for stimutable, 0 for nonstimutable).

1. /s/ in isolation

2. /sæ/

3. /ɛs/

Sentences

Mark the number of sounds correctly produced (2, 1, or 0).

1. The circus is coming to Dallas.

2. Sam made a ham sandwich.

3. We have recess every day at school.

4. Chris feeds the geese by the pond.

5. He put ice on his knee after playing soccer.

Score	Oral Peripheral Screening	
Singletons: _____/8	1. lifts tongue tip	Adequate/Inadequate
Clusters: _____/6	2. retracts lips	Adequate/Inadequate
Stimulability: _____/3	3. purses lips	Adequate/Inadequate
Sentences: _____/10	4. bulges back of tongue	Adequate/Inadequate
	5. uses jaw and tongue independently	Adequate/Inadequate
	6. has tongue thrust	Present /Absent
	7. structure of hard palate	Normal/High, Narrow

Name _____

Enrollment Date _____ Completion Date _____

Attendance Record

Date				
Code				
Date				
Code				
Date				
Code				
Date				
Code				
Date				
Code				

Number of Minutes per Session _____

Total Number of Hours Upon Completion _____

Homework Turned In On:

Attendance Codes	
X	present
E	absent with excuse
U	absent without
S	excuse
SLP	absent

Observations/Comments:

Sonority Sequencing Principle For Clusters (Gierut, 1999)

Least to most sonorous (Steriade, 1990)

- 7 – voiceless stops
- 6 – voiced stops
- 5 – voiceless fricatives
- 4 – voiced fricatives
- 3 – nasals
- 2 – liquids
- 1 – glides

adjunct clusters – /sp/, /st/, /sk/

Marked → Unmarked

sonority difference = 2

voiceless fricative + nasal

/sm/

/sn/

sonority difference = 3

voiceless fricative + liquid

/fl/

/fr/

/θr/

/sl/

/ʃr/

sonority difference = 4

voiced stops + liquid or voiceless fricative + glide

/bl/

/br/

/dr/

/gl/

/gr/

/sw/

/fw/, /ʃw/, /θw/ (non-English)

sonority difference = 5

voiceless stop + liquid or voiced stop + glide

/pl/

/pr/

/tr/

/kl/

/kr/

/bw/, /dw/, /gw/ (non-English)

sonority difference = 6

voiceless stop + glide

/tw/

/kw/

Speech Assessment and Intervention Best Practices Guidelines for Articulation Impairments

Fact	Practice
Differences are frequently developmental. (Smit, 1993a, 1993b)	Check the developmental age chart before recommending assessment.
Lateral /s/ and /z/ are not developmental. (Smit, 1993a, 1993b)	Intervene at any time.
The speech normalization boundary is 8 years, 5 months. (Shriberg et al, 1994)	Begin instruction no later than 7.5 years.
The typical time to change a speech difference is 15-20 hours. (Jacoby et al, 2002)	Consider offering initial services of 20 hours, allowing 3 hours for absences.
The typical frequency rate is two times a week for 30 minutes. (ASHA, 2004)	Offer block sessions of two times a week for 30 minutes for 20 weeks, or 20 hours a year. Do not include pick-up or record-keeping time in the 30-minute total.
Treating nonstimulable, later-developing sounds for children with phonological disorders yields more change throughout the child's sound system. (Gierut, 2007)	Treat students who are nonstimulable for target sounds and monitor students (ages 7 and younger) who are stimulable for target sounds.
Correct placement is essential to progress. Bauman-Waengler (2004); Secord (2007)	Be skilled in a range of elicitation methods.
Mass practice is essential to progress. (Skelton, 2004)	Each student should produce a minimum of 150 correct productions a session. Schedule no more than four students per group. Trained adults (SLPs, SLPAs, parents, teachers) can guide the additional practice time.
Home practice leads to significantly faster progress and generalization. (ASHA, 2004)	Each student should practice a minimum of 5 minutes, five days a week.
Cognitive monitoring of production is essential to progress. (Ertmer & Ertmer, 1998)	Build cognitive monitoring from the first session. Ask all students in group to monitor their own and each other's productions. All students should be engaged in every moment of instruction.
Conversational recasts facilitate progress and meaningful productions of sounds. (Camarata, 1993)	The SLP, teacher and family should provide recasts (not corrections) to child as a model in a variety of contexts.
High-frequency treatment words lead to greater generalization than low-frequency words. (Morrisette & Gierut, 2002)	Teach the target sounds in real words. (Resource – <i>High Frequency Word List</i>)
There is no research evidence that oral motor exercises improve speech production. (Lof, 2006)	Differentiate between general oral motor exercises and placement methods that promote positioning of the articulators for specific sound production.
There is research evidence that single sound errors often impact students socially and emotionally. (Crowe-Hall, 1994)	Provide high-quality services that address these issues they relate to speech production.
There is no research evidence that articulation disorders impact academic achievement. (Schuele, 2004)	Provide careful documentation showing the effects on educational progress.

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