

Speech and Language Observation

Student: _____ Student's Age: _____ Date: ____/____/____

Grade: _____ Time: _____ Length of Observation (15+ minutes): _____

Reason for Observation: _____

Setting (classroom, playground, cafeteria, etc.): _____

Where is student seated?

- | | | | |
|-----------------------------------|------------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> At table | <input type="checkbox"/> At desk | <input type="checkbox"/> On chair | <input type="checkbox"/> On floor |
| <input type="checkbox"/> In group | <input type="checkbox"/> At center | Other: _____ | |

Is the student's proximity to teacher appropriate? Yes No

Where is the teacher?

- | | | | |
|-----------------------------------|--|---|---------------------------------------|
| <input type="checkbox"/> At board | <input type="checkbox"/> Front of room | <input type="checkbox"/> Center of room | <input type="checkbox"/> Back of room |
| Other: _____ | | | |

Auditory Environment: background noise / outside noise / quiet

Additional Comments - Setting: _____

Instructional strategies and/or behavioral supports used during the instruction:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Wait time | <input type="checkbox"/> Repetition
of directions | <input type="checkbox"/> Visual supports | <input type="checkbox"/> Graphic
organizers |
| <input type="checkbox"/> Manipulatives | <input type="checkbox"/> Redirection | <input type="checkbox"/> Positive reinforcement | |
| Other _____ | | | |

Did the student appear to comprehend the auditory commands of the activity? Yes No Not Observed

Did the student respond appropriately to verbal demands of the activity? Yes No Not Observed

Is the student's communication comparable to the other students? Yes No

Grammatical errors observed:

- | | | | |
|--|--|---------------------------------------|---|
| <input type="checkbox"/> Present progress. | <input type="checkbox"/> Pronouns | <input type="checkbox"/> Regular past | <input type="checkbox"/> Irregular past |
| <input type="checkbox"/> Regular plurals | <input type="checkbox"/> Irregular plurals | <input type="checkbox"/> Articles | <input type="checkbox"/> Word order |
| <input type="checkbox"/> Incomplete sent. | <input type="checkbox"/> Other: _____ | | |

Comments/Example Utterances: _____

Articulation errors observed: _____

Phonological processes observed: _____

Intelligibility Affected: YES NO

Consistent/Inconsistent Errors

Comments/Example Utterances: _____

Disfluencies observed: YES NO If yes, what type of disfluencies?

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Part word repetitions | <input type="checkbox"/> phrase repetitions | <input type="checkbox"/> blocks |
| <input type="checkbox"/> whole word repetitions | <input type="checkbox"/> prolongations | <input type="checkbox"/> other: _____ |

Voice Quality observed: hoarse/breathy/hypernasal/hyponasal

Pragmatics skills observed:

- | | | |
|---|---|--|
| <input type="checkbox"/> appropriate eye contact | <input type="checkbox"/> responded appropriately | <input type="checkbox"/> initiated conversations |
| <input type="checkbox"/> appropriate physical spacing | <input type="checkbox"/> on topic OR off topic | <input type="checkbox"/> faced speaker |
| <input type="checkbox"/> takes cues from peers | <input type="checkbox"/> appropriately participated in group activities | |

Other skills observed:

- | | | |
|---|--|---|
| <input type="checkbox"/> understood/followed directions | <input type="checkbox"/> began tasks appropriately | <input type="checkbox"/> attended to task |
| <input type="checkbox"/> raised hand/waited to be called on | <input type="checkbox"/> followed classroom rules | <input type="checkbox"/> asked for help/clarification |
| <input type="checkbox"/> demonstrated knowledge from content | <input type="checkbox"/> exhibited age appropriate grammar | |
| <input type="checkbox"/> repeated or rephrased comments when needed/repared conversational breakdowns | | |

Other comments:

Speech Language Observation

Student: _____ Student's Age: _____ Grade: _____

Date: _____ Time: _____ Length of Observation (15+ minutes): _____

Speech-Language Pathologist: _____

Reason for Observation:

Setting (classroom, playground, cafeteria, etc.):

Auditory Environment (background noise, outside noise, etc):

Language Demands of the activity/classroom instruction:

Comprehension:	Low	High
Verbal demands:	Low	High

Is the student's communication comparable to other students in the classroom? Yes No

Comments:

TIER 1
SPEECH STRATEGIES IN THE REGULAR EDUCATION CLASSROOM

ARTICULATION

- Create a non-verbal cue with child to let the student know you are listening, (e.g. put hand on shoulder, before you call on them to read aloud.)
- Highlight words on classroom worksheets that contain sounds that the child is misarticulating.
- If a consistent sound error is detected, and student can produce the sound correctly most of the time, provide student with list of words to “practice” with adult partner.
- If the student’s response contains a known sound error, it’s important to repeat what the child said with an appropriate model.

STUTTERING/FLUENCY

- Allow the student to complete his/her thoughts without interrupting or completing the sentence for them.
- It is important not to ask the child to stop or start over their sentence. Asking the student to ‘take a breath’ or ‘relax’ can be felt as demeaning.
- Maintain natural eye contact with the student. Try not to feel embarrassed or anxious as the student will pick up on your feelings and could become more anxious.
- Use a slow and relaxed rate with your own speech, but not so slow that you sound unnatural. Using pauses in your speech rate is an effective way to slow down your speech rate as well as the students.
- Give the student your full attention when they are speaking so that they know you are listening to what they have to say.
- After a student completes a conversational turn, it would be helpful for you to rephrase what they said in a fluent manner to demonstrate active listening and a fluent model.
- Try to call on the student in class when you feel that they will be successful with the answer (when the student raises his/her hand) versus putting the student on the spot when they have not volunteered information.

VOICE/VOCAL QUALITY

- Allow them to have a water bottle at their desk for the student to take frequent sips when needed.
- Discuss healthy ways for students to use their voices, i.e. drink water, no yelling or making strange noises, or to use a more quiet voice (not a whisper voice).
- Provide a positive comment to a student for using good vocal hygiene, such as not shouting to get attention.
- Place a visual cue on the students’ desk (like a picture of someone talking or a simple rating scale such as 1-3). When you hear vocal misuse, touch the picture or rating scale on the desk to help remind the student to use good vocal techniques.

TIER 2
SPEECH BEHAVIORS CHECKLIST

Name: _____ Teacher: _____ Grade: _____ Date: _____

The following behaviors are indicators of possible problems in speech, voice or fluency. Please check the behaviors that describe this student most of the time. Then return to the Speech-Language Pathologist in your school. Thank you.

Articulation Behaviors

- Speech is difficult to understand most of the time
- Speech is difficult to understand unless the topic is known
- Difficulty making speech sounds
- Difficulty with phonemic awareness
- Shows awareness of communication problems
- Errors interfere with academic areas (ex. reading, writing, phonics)

Voice Behaviors

- Voice is hoarse
- Nasal voice (sounds like the student is talking through their nose)
- Voice is too loud or too quiet (please specify in comments section)
- Pitch is too high or too low for age and gender (please specify in comments section)
- Voice is monotone (no sign-song quality)
- Student loses voice occasionally

Fluency Behaviors

- Repeats words or phrases or parts of them in speech
- Prolongs a sound that begins a word, phrase or sentence
- Gets “stuck” on words or sounds
- Student seems reluctant to speak due to dysfluencies
- Others seem to notice and react to dysfluencies
- Uses “um”, “a,” “you know” excessively while speaking

If you placed a checkmark next to any of the above behaviors, please further specify the impact with respect to academic areas in the classroom: _____

TIER 3
SPEECH BEHAVIORS CHECKLIST

Name: _____ Teacher: _____ Grade: _____ Date: _____

The following behaviors are indicators of possible problems in speech, voice or fluency. Please check the behaviors that describe this student most of the time. Then return to the Speech-Language Pathologist in your school. Thank you.

Articulation Behaviors

- Has physical abnormalities of the face, mouth, nose or teeth
- Has difficulty saying many sounds correctly – 3 or more sounds
- Has difficulty saying just one or two sounds – errors are consistent or inconsistent
- Cannot repeat sound correctly even with a model
- Does not use sound correctly in conversational speech, but can repeat the sound after a model
- Talks in an unusual way, but individual sound errors are not consistent

Voice Behaviors

- Voice is hoarse or breathy often, not just during cold/allergy season
- Does not use quiet voice, is always loud even with reminders
- Cough or clears throat continuously (lasting over a month)
- Voice sounds “wet”, like he or she needs to clear throat
- Pitch is not appropriate for age and gender (too high or too low)
- Student sounds like he/she has a cold and is congested – consistent over time

Fluency Behaviors

- Even with extra time to respond, the student cannot seem to get answer out
- Secondary behaviors (eye blinks, twitching) exist with word or sound repetitions
- Speaks at a rapid rate
- Speech is difficult to understand, but cannot determine the specific issue
- Peers seem to be bothered by dysfluencies – sometimes “talks” for student
- Student hesitates to speak in class

If you placed a checkmark next to any of the above behaviors, please further specify the impact with respect to academic areas in the classroom: _____

TIER 1

LANGUAGE STRATEGIES IN THE REGULAR EDUCATION CLASSROOM

GENERAL STRATEGIES

- Simplify verbal directions. Breaking directions down in a step-by-step presentation prevents the student from becoming overwhelmed by the overall task.
- Post rules, directions, classroom routines, etc. in a visible place. A child who demonstrates language weaknesses often has difficulty processing information auditorily. They are more often visual learners, rather than auditory learners.
- Obtain the child's attention prior to giving a direction. For example, provide verbal prompts such as, "I'll give you directions now," or "get ready to listen." A student with language delays does not always recognize that it is time to listen when the teacher begins talking.
- Ask the student to repeat the directions back to the teacher, or have the student explain the directions to another student. Provide prompts and fill in missing pieces of information as needed. Asking the student if he has any questions is not the same thing as having the student repeat the directions back. A child having difficulties with language will most likely not have any questions for the teacher.

FOLLOWING DIRECTIONS

- When giving directions, repeat directions in a variety of ways by using different vocabulary and/or modes of presentation. The variety will help the child will understand the directions. Using gestures and physical prompts when giving directions can also be beneficial because it utilizes The visual channel.
- Be specific when giving directions.
- If possible, give a visual cue. For example, if making an activity you can demonstrate the steps as you go along. Showing the completed project would also provide them assistance.
- When working with projects that have multi-step directions, it may be helpful to write the directions on the board or use visuals of steps.
- The student may benefit from sitting next to an individual who would be willing to provide assistance with multi-step tasks.
- Create a list on common directions used throughout the day. When needed, laminated and place on the board for the entire class, or make smaller to be placed on the individual's desk.

PROCESSING INFORMATION

- Provide adequate time for the child to process what you have asked and form their answer. If the child does not respond after a given period of time, ask the question in a different way.
- Use several modalities when teaching materials (speaking, reading, writing, listening, visual, hands-on).
- Do frequent comprehension checks when teaching. Stop periodically and discuss the information you have presented.
- Encourage the child to ask for help.
- Provide additional support for writing down information, such as assignments and related directions in the student's homework notebook.

TIER 1
LANGUAGE STRATEGIES IN THE REGULAR EDUCATION CLASSROOM
CONTINUED

GRAMMAR/SENTENCE STRUCTURE

- If the child says something incorrectly repeat it for them correctly in a natural way. Be sensitive about not calling negative attention to their language. For example, if the child says “I goed to the store.” You’d say, “Oh, you went to the store.”
- When the child’s speech or writing contains grammar or word order errors, show them in writing the correct form.
- When working with the child individually with written or oral language, repeat the error and ask the child how the sentence sounds. For example, the child says or writes, “I goed to the store.” You say, “I goed to the store? Does that sound right?” If the child is unable to correct it, give them a choice. For example, “which sounds better, ‘I goed to the store.’ Or ‘I went to the store.’”
- For frequent occurring errors, build it into daily oral language as practice for the entire class.

VOCABULARY/WORD MEANINGS

- Prior to introducing new units/stories, compile a list of key vocabulary words. Discuss words and possible meanings with students to preteach vocabulary.
- When introducing words, try using a graphic organizer or visual mapping to come up with word relationships including antonyms, or synonyms.
- When possible, pair a visual picture with the vocabulary words. When vocabulary is abstract and pictures are not available, try to relate the words to a personal experience for students to relate to.
- Place words and definitions on note cards. Use cards to play games such as matching or memory.
- Create word list with vocabulary and definitions to display in a visible place within the classroom.
- Provide student with vocabulary list including definitions one week prior to beginning a new unit.
- Encourage use of word games with family. (Tribond, etc)

SOCIAL LANGUAGE SKILLS/PRAGMATICS

- Visual schedules assist students with transitions and expectations for the day.
- Allow student to work in a group with students who are accepting and supportive.
- Search for opportunities that support appropriate social interactions to model appropriate interactions for students and allow for practice of social skills.
- Board games and card games promote turn-taking and sportsmanship.
- Comment on positive models for targeted social skill when used by other students in the classroom. (Jenny, I really like how you raised your hand instead of interrupting me when I was talking to the class.)

TIER 2
LANGUAGE BEHAVIORS CHECKLIST

Name: _____ Teacher: _____ Grade: _____ Date: _____

The following behaviors are indicators of possible problems with receptive and expressive language skills. Please check the behaviors that describe this student most of the time. Then return to the Speech-Language Pathologist in your school. Thank you.

Comprehension Behaviors

- Has difficulty following directions (spoken/written) or asks to have repeated
- Trouble understanding new information, especially information heard
- Difficulty asking or answering questions
- Difficulty in drawing conclusions, making predictions, or inferring information
- Easily distracted by sounds, noise or other students
- Confuses similar sounding words
- Has trouble understanding humor, sarcasm or other figurative language
- Does not ask questions even though it appears child does not understand concept
- Does not understand or use grade level vocabulary

Verbal Expression Behaviors

- Is not able to tell ideas verbally or incorrect sequential order
- Requires large amount of “wait time” before responding to questions
- Uses incorrect word order in conversation
- Incorrect use of grammatical structures (inappropriate for environment)
- Has trouble formulating questions
- Cannot maintain topics during a conversation or written work
- Difficulty using question forms correctly
- Has difficulty with vocabulary – synonyms, antonyms, multiple meaning words
- Difficulty misnaming or finding correct words to use, uses “thingy”, “stuff”

Social Language Behaviors

- Does not take turns in conversation
- Does not greet or respond to greetings appropriately
- Uses limited or no eye contact with communication partner
- Has trouble using language to request info, persuade, direct others appropriately
- Rarely initiates conversations with others or avoids interaction with others
- Trouble with following classroom routines or rules
- Difficulty reading non-verbal signals from others (facial expression, body language)
- Talks in an unusual way (robotic voice or strange accent, etc.)

If you placed a checkmark next to any of the above behaviors, please further specify the impact with respect to academic areas in the classroom: _____

TIER 3
LANGUAGE BEHAVIORS CHECKLIST

Name: _____ Teacher: _____ Grade: _____ Date: _____

The following behaviors are indicators of possible problems with receptive and expressive language skills. Please check the behaviors that describe this student most of the time. Then return to the Speech-Language Pathologist in your school. Thank you.

Comprehension Behaviors

- ___ Given directions one-to-one, student still has difficulty following them
- ___ Asks for information to be repeated consistently
- ___ Seems “lost” during class; difficulty staying caught up with class
- ___ Has trouble learning the meaning of classroom vocabulary words
- ___ Cannot sequence events of a story
- ___ Cannot identify cause and effect relationships
- ___ Seems to “mishear” or misunderstand what is said to him/her
- ___ Answers given to teacher questions are not on topic
- ___ Has trouble recalling facts and ideas from things we read aloud or I say in class

Verbal Expression Behaviors

- ___ Cannot retell the details of or the beginning, middle, end of stories heard or events
- ___ Has difficulty answering questions that require student to make an inference
- ___ Has difficulty categorizing or classifying objects or items
- ___ Has difficulty generating complete sentences when speaking
- ___ Has word finding difficulties, uses words like “thingy” or “you know”
- ___ Difficulty stating solutions to problems presented
- ___ Difficulty using question forms correctly
- ___ Sentences contain numerous grammatical errors not typical for student’s age
(i.e., verb tenses, plurals, word order, etc.)

Social Language Behaviors

- ___ Interrupts others conversations continuously
- ___ Switches the topic of a conversation without warning
- ___ Does not request help when having difficulties in class
- ___ Cannot accept the decision of others
- ___ Even with reminders, does not follow rules of the classroom
- ___ Cannot handle a change to schedule
- ___ Does not appear to understand the actions of others even when explained
- ___ Difficulty making a friendship OR maintaining one even after initiated by a peer

If you placed a checkmark next to any of the above behaviors, please further specify the impact with respect to academic areas in the classroom: _____

Request for Parent Permission to Provide Speech Intervention

Student: _____

Grade: _____

Date of Birth: _____

Informal screening indicates that your child has the following concerns with speech production: _____.

We would like to provide speech interventions at school for your child to try and correct these problems. Speech interventions would be provided by on a periodic basis outside the regular classroom in an individual or small group setting. A speech/language pathologist and your child's classroom teacher would plan together to determine the best time for your child to receive this intervention.

This is a plan for intervention, and is not a special education or related service under the Individuals with Disabilities Education Act (IDEA). If your child's response to this intervention indicates a long-term problem which may negatively impact educational performance, a referral would be made for evaluation. You may also request an evaluation.

Your permission is requested in order to provide speech interventions. Please mark your choice where indicated and return this form to the school office. A copy is provided for your records. Contact us if you have any questions about speech services or this request.

_____, Principal

Phone: _____

_____, Speech Therapist Phone: _____

___ I agree to speech interventions for my child to address speech concerns.

___ I would prefer that my child not receive speech intervention at this time.

Parent/Guardian Signature

Date: _____

Parent Permission to Provide Speech Articulation RtI Services

Student:

Date:

Date of Birth:

Grade:

School:

Informal screening indicated your child has the following delays and errors in speech articulation:

We would like to provide RtI speech services at school for your child to try and correct these speech errors. The RtI speech services would be provided by a qualified Speech-Language Pathologist employed by the school district. Services would be on a periodic basis in an individual or small group setting. The Speech-Language Pathologist and your child's classroom teacher would plan together to determine the best time for your child to receive this instruction.

This is a plan for intervention, and is not a special education or related service under the Individuals with Disabilities Education Act (IDEA). If your child's response to this intervention indicates a long-term problem which may negatively impact educational performance, a referral will be made for evaluation. You may also request an evaluation.

Your permission is requested in order to provide RtI speech services. Please mark your choice where indicated and return this form to the school office. A copy is provided for your records. Please contact us if you have any questions about speech interventions or this request.

_____, Principal

_____, Speech-Language Pathologist

Phone: _____

_____ I agree to RtI speech services for my child to address errors in speech.

_____ I prefer that my child not receive RtI speech services at this time.

Parent/Guardian Signature

Date

Parent Permission to Provide Speech Fluency RtI Services

Student:

Date:

Date of Birth:

Grade:

School:

Informal screening indicated your child has a speech fluency difficulty that is considered non-developmental.

We would like to provide RtI speech fluency services at school for your child to try to correct this fluency difficulty. The RtI speech fluency services would be provided by a qualified Speech-Language Pathologist employed by the school district. Services would be on a periodic basis in an individual or small group setting. The Speech-Language Pathologist and your child's classroom teacher would plan together to determine the best time for your child to receive this instruction.

This is a plan for intervention, and is not a special education or related service under the Individuals with Disabilities Education Act (IDEA). If your child's response to this intervention indicates a long-term problem which may negatively impact educational performance, a referral will be made for evaluation. You may also request an evaluation.

Your permission is requested in order to provide RtI speech fluency services. Please mark your choice where indicated and return this form to the school office. A copy is provided for your records. Please contact us if you have any questions about speech fluency interventions or this request.

_____, Principal

_____, Speech-Language Pathologist

Phone:

_____ I agree to RtI speech services for my child to address fluency difficulties in speech.

_____ I prefer that my child not receive RtI speech services at this time.

Parent/Guardian Signature

Date

Parent Permission to Provide Speech Voice RtI Services

Student:

Date:

Date of Birth:

Grade:

School:

Informal screening indicated your child has a voice difference (in pitch, loudness, and/or quality of voice) that is considered non-developmental. I encourage you to have this checked by your child's doctor and/or an Ear Nose and Throat physician.

Once I receive documentation from a physician that it would be appropriate for me to provide voice services for your child's voice difference, we would like to provide RtI voice services at school for your child to try to alleviate and/or decrease his/her voice difference. The RtI voice services would be provided by a qualified Speech-Language Pathologist employed by the school district. Services would be on a periodic basis in an individual or small group setting. The Speech-Language Pathologist and your child's classroom teacher would plan together to determine the best time for your child to receive this instruction.

This is a plan for intervention, and is not a special education or related service under the Individuals with Disabilities Education Act (IDEA). If your child's response to this intervention indicates a long-term problem which may negatively impact educational performance, a referral will be made for evaluation. You may also request an evaluation.

Your permission is requested in order to provide RtI voice services. Please mark your choice where indicated and return this form to the school office. A copy is provided for your records. Please contact us if you have any questions about voice interventions or this request.

_____, Principal

_____, Speech-Language Pathologist

Phone:

_____ I agree to RtI voice services for my child to address his/her voice difference.

_____ I would prefer that my child not receive RtI voice services at this time.

Parent/Guardian Signature

Date

Dismissal from RtI Speech Articulation Services

Student:

Date:

Date of Birth:

Grade:

School:

I am pleased to inform you that your child's response to RtI Speech Articulation Services has been incredibly positive. Your child no longer exhibits speech concerns that are considered to be non-developmental. Your child is able to correctly produce the _____ sound at the conversation level with at least 85% accuracy across 3 to 4 days. This level of mastery is considered age appropriate for your child. Therefore, your child will not continue to see the Speech-Language Pathologist for RtI Speech Services. Please contact us if you have any questions.

, Principal

, Speech-Language Pathologist

Phone:

Dismissal from RtI Speech Fluency Services

Student:

Date:

Date of Birth:

Grade:

School:

I am pleased to inform you that your child's response to RtI Speech Fluency Services has been incredibly positive. Your child no longer exhibits a fluency difficulty that is considered non-developmental. Therefore, your child will not continue to see the Speech-Language Pathologist for RtI Speech Fluency Services. Please contact us if you have any questions.

, Principal

, Speech-Language Pathologist

Phone:

Dismissal from RtI Speech Voice Services

Student:

Date:

Date of Birth:

Grade:

School:

I am pleased to inform you that your child's response to RtI Speech Voice Services has been incredibly positive. Your child no longer exhibits a voice difference that is considered non-developmental. Therefore, your child will not continue to see the Speech-Language Pathologist for RtI Speech Voice Services. Please contact us if you have any questions.

, Principal

, Speech-Language Pathologist

Phone: