

Webwords 40

Speech-language pathology assessment resources

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Speech-language pathology intervention starts and ends with a detailed assessment. We gather history, read the reports of others, observe, screen, measure, quantify, analyse, set baselines, encounter ceilings, probe, allow time, watch for trends, and think critically about whether treated behaviours have changed more than untreated ones.

Our skilled, evidence-based assessments are a form of data collection and analysis that may be informal, observational, speedy, and clear-cut ("Yes, it's a lateral-s all right!"), or small contributions to a complicated, drawn-out, dynamic process that combines standardised and non-standardised procedures and consultation with families and colleagues, not necessarily leading to a definitive diagnosis ("Well, even after a year of intervention I'm not all that convinced that it isn't severe phonological disorder and not childhood apraxia of speech"). You know how it goes! We assess along the way for the purposes of accountability, for our own elucidation – fine-tuning target selection, goal-setting and intervention choices relative to change in a client's performance – and in response to clients' and family members' and others' needs for progress reports.

Assessment resources on the Internet

For speech pathologists, trustworthy Internet sources of assessment information are the scholarly journals that specialise in communication sciences and disorders, the informational pages developed by test publishers like **Pearson/PsychCorp**¹ and **PRO-ED**², and reviews such as those provided by the BUROS Institute, which has a dedicated **speech and hearing**³ category. Most assessment-related net offerings comprise information about assessments, and not the assessments themselves, or their manuals. Some assessment and screening instruments, however, are available on-line and are reasonably easy to locate by using advanced searches, especially within journal databases.

Journal sources

A few examples among many of the journal articles that include assessment tools are: Lee, Stemple, Glaze, and Kelchner (2004) with a voice screener; Miccio (2002) with a screening oral peripheral examination for children and a protocol for eliciting later developing sounds and a variety of phonotactic structures during a play routine; and Johnson, Weston, and Bain (2004) with a fun, time-efficient method for establishing the severity of a child's speech sound disorder.

Gaining access to journals usually requires a subscription, or a visit to a library, either of which may be impractical for some speech pathologists with regard to cost, travel, or both. It is good to know, therefore, that there are several quality journals that are freely offered on-line and that from time to time report assessment-focused work. One is *Contemporary Issues in Communication Science and Disorders*, the biannual, peer-reviewed, on-line-only, open-access journal of the National Student Speech Language Hearing Association (NSSLHA). Its fall 2010 issue holds two treasures: **A Tutorial in Advanced Phonetic**

Transcription, Part II: Vowels and Diacritics⁴ and **Part III: Prosody and Unattested Sounds**⁵. The latter won the NSSLHA Editor's Award for 2010 as an invaluable guide to assessing unusual speech patterns. The first part in the series, **Part I: Consonants**⁶, appeared in the journal's fall 2009 issue. Other free electronic journals include the **Canadian Journal of Speech-Language Pathology and Audiology**⁷, **EPB Briefs**⁸ and the **Journal of Medical Speech-Language Pathology**⁹.

Several non-standardised assessments that were originally published in journals have found their way on-line divested of crucial background information. For instance, there are the M-CHAT (Robins, Fein, & Barton, 2001) **checklist**¹⁰ and **score sheet**¹¹ for autism in toddlers and the 2007 revision of the Garrett and Lasker (2005) **aphasia assessment materials**¹².

Conference sources

Conference websites are a ready source of free assessment tools and procedures. There are the **Computer Aided Assessment of Cluttering Severity**¹³, the **Predictive Cluttering Inventory**¹⁴ from an ISAD fluency disorders conference and Elaine Pyle's **Screening Protocols for Cleft Palate Team Speech-Language Pathologists**¹⁵ that was presented at an ASHA convention in 2006. An assessment tool that was generated at a conference is Sharynne McLeod's **SPAAC2**¹⁶ which can be used to evaluate the activity and participation in society of children with speech impairment.

Collegial sharing

Speech-language pathologists often share assessment resources on faculty or personal web pages. For example, there are Gail Gillon's **Phonological awareness probes, administration and record forms**¹⁷ and **pictures**¹⁸, Steven Long's **Computerized Profiling**¹⁹ and related language analysis procedures, Robert J. Lowe's **ALPHA Test of Phonology**²⁰, Sharynne McLeod and Linda Hand's **Single Word Test of Consonant Clusters**²¹, Charity Rowland's **Communication Matrix**²² for measuring early communication development, and the author's **Quick Screener**²³ of phonological development and the **Quick Vowel Screener**²⁴.

Assessment tools and tricky subjects

The tools we use to perform assessments range from high-tech to low-tech, from qualitative to quantitative, from budget-breaking to free, from sophisticated to simple, and from familiar and well tried to new and a little-bit-scary. The clients we assess also range in terms of "testability" on a scale that goes from piece of cake to gruelling via "please Jeremy, come out from under the chair"! Some clients seem to be born test subjects and take it all in their stride, while others (or their families) are uncomfortable in the spotlight. It can take special skill, learned over years of practice, to placate parents who find case history questions intrusive or offensive and help them to see their relevance, or to respond appropriately to criticism of the test protocol ("I can't even answer some of these questions!"), its

administrator (“He knows the answers but he’s just not trying for you”) or its content (“She can’t tell you that because we don’t watch TV”).

Similarly, reporting results, verbally or in writing takes practice. At times the news is a pleasure to deliver (“ninety-eighth percentile” and “far more progress than I could have predicted” roll off the tongue and generally draw beaming smiles), but at other times it can evoke in a clinician anxiety and anguish as we picture and empathise with a family’s reaction to falling standard scores or the news that a child is “not a candidate for therapy” or that no further progress in therapy is probable in an adult affected by global aphasia. How does one find words to break disappointing news when prognosis is poor? The answer is, “with difficulty” and it is especially tricky towards the beginning of our careers.

Mutual understanding

Experienced colleagues have usually “been there” and most willingly assume a mentoring role with less seasoned clinicians – if they seek such support. Talking to someone who understands the issues can be helpful, whether to role-play or plan the words to use, explore the strengths that the treating clinician can bring to the situation, prepare personally and emotionally, or debrief after “the news” has been communicated. It may also help to know that clients regularly meet us half way. They, or their families, often anticipate the conversation, know that therapy is not producing great outcomes, and are waiting to have the discussion. Of course, when the moment comes, some people will react angrily or sceptically, and some will want to try new avenues, or seek out someone to prove one wrong. In a lot of instances, however, if we support them through this agonising period, and leave the door open, they will come back when ready to talk. But mostly the “bad news” or the “poor prognosis” is greeted with relief as well as sadness, and rather than being the end of the client–clinician relationship, it can be the beginning of a positive, joint exploration of the next step.

References

Garrett, K., & Lasker, J. (2005). Adults with severe aphasia. In D. R. Beukelman and P. Mirenda (Eds.), *Augmentative and alternative communication: Supporting children and adults with complex communication needs* (3rd ed.) 467–704. Baltimore, MD: Paul Brookes.

Johnson, C. A., Weston, A. D., & Bain, B. A. (2004). An objective and time-efficient method for determining severity of childhood speech delay. *American Journal of Speech-Language Pathology*, 13, 55–65.

Lee, L., Stemple, J., Glaze, L., & Kelchner, L. (2004). Quick screen for voice and supplementary documents for identifying pediatric voice disorders. *Language, Speech, and Hearing Services in Schools*, 35, 308–319.

Miccio, A. W. (2002). Clinical problem solving: Assessment of phonological disorders. *American Journal of Speech-Language Pathology*, 11, 221–229.

Robins, D., Fein, D., Barton, M., & Green, J. (2001). The modified checklist for autism in toddlers: An initial study investigating the early detection of autism and pervasive developmental disorders. *Journal of Autism and Developmental Disorders*, 31(2), 131–144.

Links

1. http://www.pearsonassessments.com/pai/ca/SpeechandLanguage.htm?Community=CA_Speech
2. <http://www.proedinc.com/customer/productLists.aspx?idCategory=4>
3. <http://buros.unl.edu/buros/jsp/clists.jsp?cateid=17&catename=Speech+and+Hearing>
4. <http://www.nsslha.org/publications/cicsd/cicsdF10/#1>
5. <http://www.nsslha.org/publications/cicsd/cicsdF10/#2>
6. <http://www.nsslha.org/publications/cicsd/cicsdF09/#4>
7. http://www.caslpa.ca/english/resources/cjslpa_home.asp
8. <http://www.speechandlanguage.com/ebp-briefs>
9. <http://www.accessmylibrary.com/archive/2167-journal-of-medical-speech-language-pathology.html>
10. http://www.firstsigns.org/downloads/Downloads_archive/m-chat.PDF
11. http://www.firstsigns.org/downloads/Downloads_archive/m-chat_scoring.PDF
12. <http://aac.unl.edu/screen/screen.html>
13. <http://www.mnsu.edu/comdis/isad8/papers/bakker8/bakker8.html>
14. http://associations.missouristate.edu/ICA/Resources/Resources%20and%20links%20pages/clinical_materials.htm
15. http://www.eshow2000.com/asha/2006/handouts/855_1232Pyle_Elaine_090792_111406091003.pdf
16. <http://athene.riv.csu.edu.au/~smcleod/SPAAC2.pdf>
17. <http://www.education.canterbury.ac.nz/people/gillon/PA%20Assessment%20probe%20instructions.pdf>
18. <http://www.education.canterbury.ac.nz/people/gillon/PAProbepictures.pdf>
19. <http://www.computerizedprofiling.org/index.html>
20. <http://www.speech-language-therapy.com/alpha.html>
21. <http://athene.riv.csu.edu.au/~smcleod/Consonantclustertest.pdf>
22. <http://www.communicationmatrix.org>
23. <http://speech-language-therapy.com/tx-a-quickscreeener.html>
24. <http://www.speech-language-therapy.com/TheQuickVowelScreeener.pdf>

Webwords 40 is at <http://speech-language-therapy.com/webwords40.htm> with live links to featured and additional resources.

ASD Education and Resources Online

A range of Autism Spectrum Disorders (ASD) resources and education modules have been developed by Speech Pathology Australia with the aim of providing professional development and capacity building for speech pathologists working in the area of ASD, to assist in their provision of services under the Helping Children with Autism package.

These initiatives have been supported by funding from the Government Department of Health and Ageing.

The speech pathology specific resources available are as follows:

- ASD Position Paper
- Online Peer Support Discussion Board
- DVD production of the Autism National Tour presentation
- Independent Study Resource

Visit: www.speechpathologyaustralia.org.au

