



Early Childhood Speech and Language Assessments Best Practices Panel

October 26, 2023 12:00 - 1:00 p.m.



Today's Presenters

Multilingual Students with Exceptional Needs

Carrie Rodrigues, M.S., LEP, NCSP **CalECSE Exemplar Lead, Assessment Practices School Psychologist Preschool Program Specialist Piedmont USD**

Linsey Sandrew, M.S. CCC-SLP **Speech Pathologist Piedmont USD**

Anu Joy, M.S. CCC-SLP **Research Associate CalECSE EdD Student, Concordia University Irvine Speech Language**

Thank you to **DHH Interpreter Elisabett Brambila!** Christina Zavala, M.S., LEP, ABSNP Senior Director, Imperial County SELPA **Improving Outcomes for Multilingual Learners** with Exceptional Needs (MuSE)

Vanessa Lopez, M.A.

Assistive Technology & Adapted PE Specialist Inclusion Coordinator Imperial County SELPA Improving Outcomes for Multilingual Learners with Exceptional Needs (MuSE)







CalECSE

California Early Childhood Special Education Network

Funded by the CDE



Implementation Leadership

Co-Executive Director- Dr. Scott Turner, East San Gabriel Valley SELPA Co-Executive Director-Melanie Hertig, Irvine Special Education/SELPA Project Coordinator-Marion Springett, Saddleback Valley USD



CalECSE

California Early Childhood Special Education Network

Funded by the CDE

Funded by the CDE

CalECSE.org

CalECSE is a new technical assistance project funded under the California Department of Education (CDE) that will support Local Educational Agencies (LEAs), Special Education Local Plan Area (SELPAs), County Offices of Special Education (COEs), and other Agency Partners in the areas of IDEA Part C to B Transitions, Preschool Assessment Practices, and Preschool Child Find by providing technical assistance, professional learning, and demonstration of tangible practices that have been proven successful.

The CalECSE Network will leverage collaboration amongst agencies, disseminate resources, highlight existing exemplar practices, and provide direct technical assistance to improve the capacity, knowledge, collaboration, and implementation of evidence-based practices across agencies throughout California.

The CalECSE Network is committed to *improving outcomes* for children and their families by *eliminating and addressing barriers* to successful transition for California's youngest children with disabilities.

What We Will Be Covering Today



- The Why
- Typical Speech & Language Development
- Components of a Comprehensive Assessments
- Gathering Parent Input
- Play-Based Assessment and Collecting Language
 Samples
- Observations: Clinical & Naturalistic
- Oral Motor Examination

- Speech Sound Production Assessment
- Receptive & Expressive Language Assessments
- Pragmatic Language and Social Skills
- Voice & Fluency
- Assessing English Language Learners
- Ed Code & Educational Impact for Early
 Childhood
- Questions

The Why

 Early Identification and Intervention Changes Lives and Long-Term Outcomes

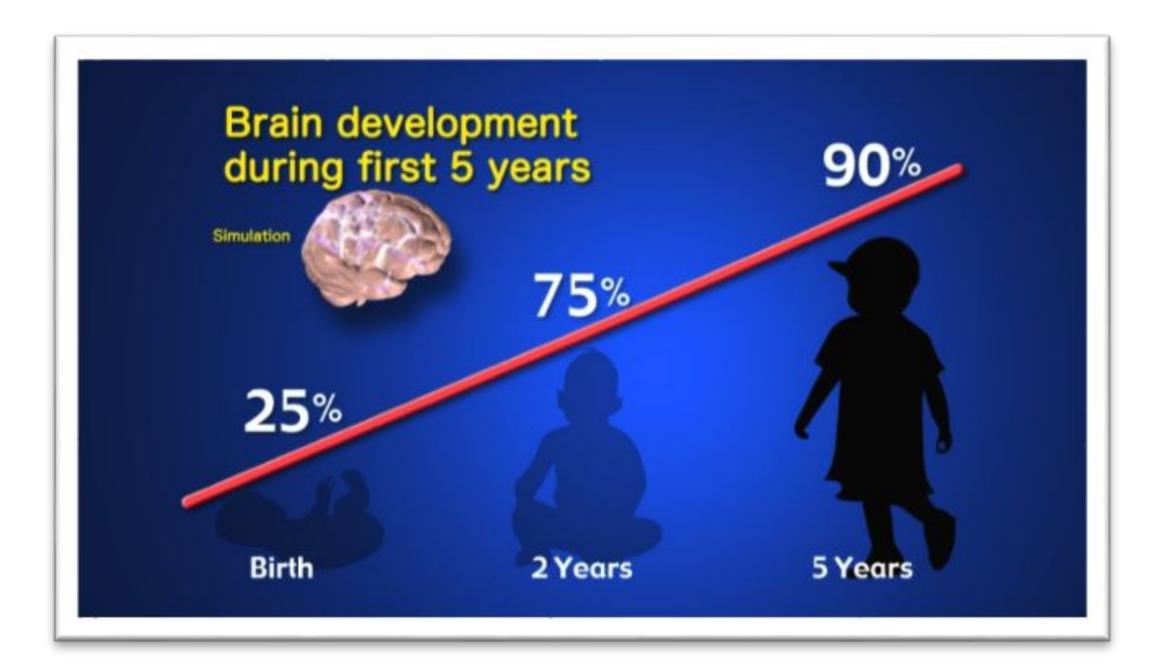


- IDEA Part C to B
 Transitions
- Preschool Assessment Practices
- Preschool Child Find

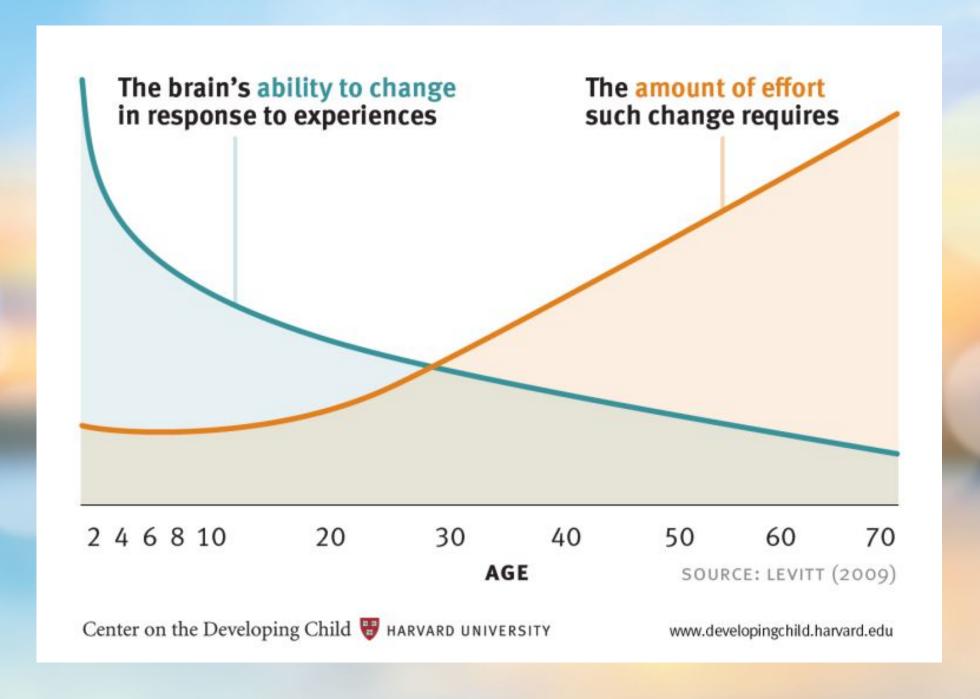








Source: the science of early learning.com



Early Childhood Speech and Language Assessments





Different from assessments of older children



Dynamic, flexible, creative, play-based, standardized measures may not work



Parents/caregivers important source of information/integral to assessment



Know Typical Early Childhood Development First: Know the Speech Milestones



CDC Developmental Milestones

Tracker

Learn the Signs. Act Early.

Checklist

Resources for Early Childhood

Educators from the CDC website

Communication Sample Videos

MILESTONES MATTER: LET'S TALK ABOUT THEM!













Get free milestone checklists for these ages and more at www.cdc.gov/Milestones or by calling 800-CDC-INFO (800-232-4636).



Speech & Language Milestones AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION



7-12 months

- Babbles longer strings of sounds such as mimi upup babababa.
- •Says 1 or 2 words around first birthday. Such as hi, dog, dada, mama, or uh-oh.



1-2 years

- ·Use many new words.
- Puts 2 words together, such as "More apple." "No bed", and "Mommy book".



2-3 years

- Follows 2-part directions such as "Get the spoon and put it on the table."
- •Puts 3 words together to talk about and ask for things.



3-4 years

- ·Puts 4 words together.
- Talks about what happened during the day.

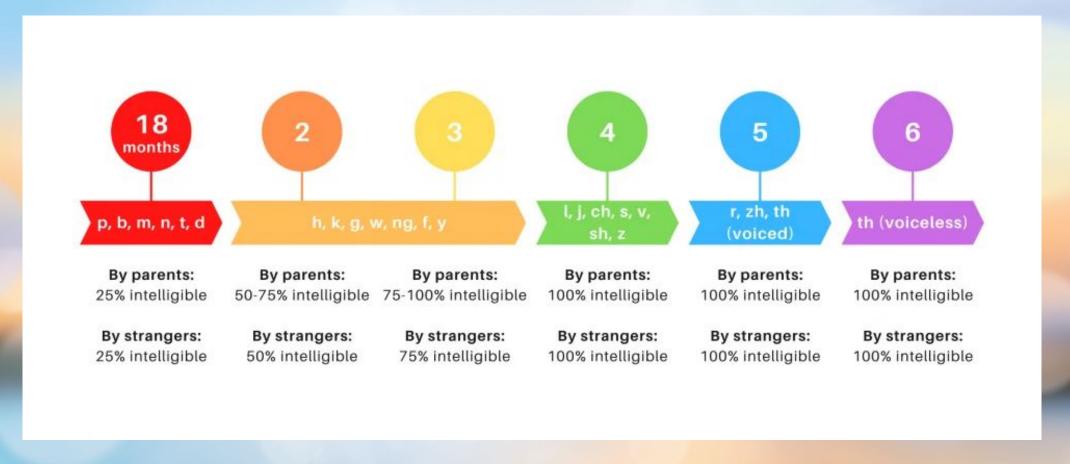


4-5 years

- Follows longer directions such as "Get the box of crayons, find some paper, and pick out three colors.
- Tells a short story.



Speech sound ages of acquisition



Source: sandiegooccupationaltherapy.com

Collected and averaged by McLeod and Crowe (2018) and Bowen (2011)

Additional Information: https://pubs.asha.org/doi/10.1044/2018 PERS-SIG1-2018-0014

Additional Speech and Language/ Developmental Milestones Resources

 American Speech Language Hearing Association https://www.asha.org/slp/schools/prof-consult/norms/



- National Institutes of Health
 https://www.nidcd.nih.gov/sites/default/files/Documents/health/voice/NIDCD-Speech-Language-Dev-Milestones.pdf
- Ages & Stages Questionnaire, 3rd Edition
 http://www.bestkc.com/wp-content/uploads/2017/05/3-year-ASQ-ENGLISH.pdf

How Referrals Come In

Early Childhood referrals come in from many sources:

- Regional Center Part C to Part B referral (32-34 months) or Family Resource Center
- Parent referred due to concerns with an area or areas of development/may have no diagnosis
- Teacher referred—new influx of Transitional Kindergarten referrals
- Pediatrician referred
- Medical/private diagnosis triggers a request for assessment
- Community developmental screenings

Speech and Language Stats



- Nearly 1 in 12 (7.7 percent) U.S. children ages 3-17 has had a disorder related to voice, speech, language, or swallowing.
- Boys ages 3-17 are more likely than girls to have a voice, speech, language, or swallowing disorder (9.6 percent compared to 5.7 percent).1
- The prevalence of voice, speech, language, or swallowing disorders is highest among children ages 3-6 (11.0 percent), compared to children ages 7-10 (9.3 percent), and children ages 11-17 (4.9 percent).

From National Institute on Deafness and Other Communication Disorders

Components of a Comprehensive Speech &

Language Assessment

- Health & Developmental History
- □ Parent/Caregiver Report
- ☐ Review and Consideration of Outside Reports/Diagnoses
- ☐ Preschool Teacher/Daycare Provider Reports (if applicable)
- Assessment/Clinical Observations
- Naturalistic Observations (preschool, home, park, etc.)
- Language Sample
- Standardized Assessments
 - Expressive and Receptive Language
 - Speech Sounds
 - ☐ Voice & Fluency
 - Pragmatics
- → Statement of Validity
- Summary of Findings
- Discussion of Eligibility Recommendations under Education Code

Speech and Language Assessment Report Template

Multi-Disciplinary Report Template





Parents/Caregivers

- Know their children and are essential to the assessment process
- Parents can sometimes understand and translate unintelligible speech during assessment
- Can be helpful to elicit language for a language sample
- First introduction to the school system: use it as an opportunity to build trust
- Explain the process and explain it again
- Define acronyms and "SPED speak" terms, first defining all acronyms
- During assessment, explain what you are doing and why, especially wait time and observing



Tips on Taking Language Samples

- Take a language sample while playing, looking at wordless book, having a conversation, or while observing child play with parent.
- Elicit language through commenting rather than asking questions.
- Record and transcribe later.
- What to look for: Depends on the concerns
 - If there are intelligibility concerns, transcribe speech errors.
 - If looking at pragmatics, look at social responsiveness.
 - Syntax and morphology.
 - Type token ratio for semantic diversity
- The PLS-5 has a guide for what to look for in a language sample.
- SALT Systematic Analysis of Language Transcripts Software can be helpful.

Play-Based Assessment





- Start with play on the floor to develop rapport
- Toys that children will need help with or require interaction with SLP.
- Toys that will elicit comments.
- Provide a variety of age-appropriate toys and see what the child gravitates to without leading play.
 - Bubbles
 - Rocket balloons
 - Pull-back cars
 - Stomp Rockets
 - Wordless Books
 - Wind-Up Toys
 - Cause and Effect Toys
 - Baby Dolls/ Farm Animals (Pretend Play)

Your Preschool Play Kit...



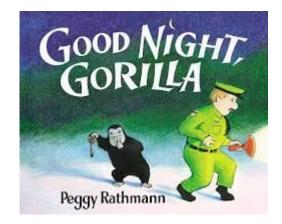














Play-Based Assessment, Continued



- O How do they ask for help or problem solve?
- O How do they protest?
- O Does the child show you toys?
- Does the child try to involve you in their play?
- O Do they show joint attention?
- Do they share enjoyment (smiling at you or a caregiver?)
- O Do they play with they toys the way intended?
- O Do they respond to their name?
- Do they engage in make believe play (feeding a baby, doctor)?
- O Do they point to show you things?
- Can they state their name/age when asked?
- Will they request more of a fun activity such as bubbles or balloons being blown up? How do they request?
- Will they engage in games like peek a boo, rolling a ball back-and forth?

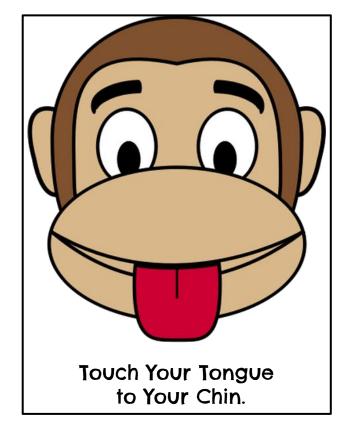




Oral Motor Examinations

- Appeal to child's sense of imagination: Make connections to animals, light sabers, or pretend their tongue is getting ready to throw a party to encourage different movements
- Use visuals (ipad filters, mirrors, picture cards)
- Observe movement through the OM exam and when they are talking and eating.





Naturalistic Observations

- Whenever possible observe in natural setting (preschool, daycare, home, park).
- Best way to evaluate educational impact and pragmatic skills.
- Ed code and case law: most legally defensible stance is to observe in child's natural environment / outside assessment setting
- Things to look for:
 - **General Use of Language/Communication**
 - **Joint Attention**
 - **Echolalia/Scripting**
 - **Prosody/Intonation**
 - **Voice Volume**
 - **Topic Maintenance**
 - Fluency
 - Gesturing
 - **Use of Eye Contact/Joint Attention**
 - Response to Name 0
 - Other Early Signs of Autism (wonderful video to watch on your own time) 0



Making a Referral

If you suspect a child make have additional areas of need beyond speech and language or other eligibility categories such as Autism/Intellectual Disability should be considered, refer to Sped **Director/Program** Specialist/School Psychologist for additional assessments.

EARLY SIGNS OF AUTISM







Repeating Words and **Phrases** Continually



Prefers alone

Resistant to **Any Slight** Change



Become Obsessed with Certain Interests



Won't point at objects or show interest in them (by 14 months)



Abnormal Body Movements



Delayed speech and language skills



Sensitivity to Light, Sound, Smell, Taste, Touch, etc.



Expressive and Receptive Language





Receptive and Expressive One Receptive Picture Vocabulary Tests- 4 (ROWPVT-4, EOWPVT-4)

Age range 2-70+ 2010

Available in Spanish.

Peabody Picture Vocabulary Test-5 (PPVT-5)

Age range 2.6-90+

2018

Available in Spanish.

Clinical Evaluation of Language Fundamentals Preschool-3 (CELF P-3)

Age range 3-6:11 2020

2nd Edition available in Spanish.





Expressive and Receptive Language, Continued





Preschool Language Scales, 5th Edition (PLS-5)

Age range Birth-7:11

2011

Available in Spanish.



Age range Birth-36 months 2020





Pragmatic Assessments





SRS-2

Parent/Teacher Forms Age Range 2:6-4:6

2012

Social Awareness, Social Cognition,

Social Communication, Social Motivation, and Restricted Interests and Repetitive Behavior.

Spanish available



Speech Sound Production





Goldman Fristoe Test of Articulation-3 (GFTA-3)

Age Range 2-21:11 2015 Spanish Version Available

Kaufman Speech Praxis Test (KSPT)

Age Range 24-72 months 1995

Looks at speech patterns rather than articulation of single sounds





Voice/Fluency





Stuttering Severity Instrument - Fourth Edition (SSI-4)
Age range 2-10+
2009

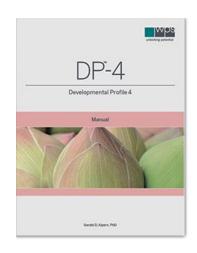


Assessments that Look at Whole Child



DP-4

Age Range Birth-21 Recently Updated-2020



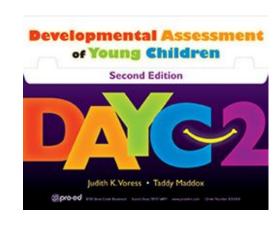
Bayley-4

Age Range 16 Days-3:6 Recently updated-2019



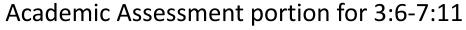
DAYC-2

Age Range Birth-5 2012



Battelle-3

Age Range Birth-7:11 Recently updated-2020 Spanish version available





What are some possible challenges of assessing preschoolers?



While challenges may exist, they can also yield pertinent assessment and diagnostic information:

- Time it takes to warm to a new environment or people
 - May take multiple assessment sessions
- Separation difficulties child and/or parent may be unwilling to seperate
- Performance when parents/caregivers are present
 - Child may perform differently
- Attention some preschool age children may not be able to sit, attend
- Behavior/Refusal to participate
 - Tantrums

Possible Challenges of Assessing Children with Autism & Intellectual Disabilities



Consider limiting factors to conducting valid standardized assessments

- Language impairments verbally loaded assessments may not be valid
- Limited engagement with non-preferred tasks
- Limited joint attention (limited ability to look at what you are looking at and share attention)
- Limited ability to respond when spoken to
- Difficulty with change in routine (testing in an unknown setting, with unknown person, or disruption to normal schedule may cause upset/low scores)
- Inability to point to indicate answers affects scoring

Standardized Assessments with Supports







- Have parent/teacher prep child about change to routine
- Use a visual schedule of tests/breaks/reward time



Build rapport/Use the child's interests

Use token boards/reinforcers: consult w parents/ABA providers/teachers

You may have to conduct testing on the floor and intersperse subtests with "first then" play breaks

"first...then" play breaks





Never rely on a single measure for eligibility or never rule out eligibility because of single measure: Use your clinical judgement looking at the whole picture and always cross reference all information that the intake and assessment yields.



Bilingual Assessments



The Individuals with Disabilities **Education Act (IDEA) requires that all** students referred for assessment to determine eligibility for special education receive an assessment that meets the requirements found in the IDEA (<u>Title 34, Code of Federal Regulations [CFR] sections 300.304–305</u>) & in state statute (California Education Code [EC] sections





<u>56320–56330</u>) •

Bilingual Assessments



While planning to conduct & during the process of conducting a comprehensive assessment consider the following for ELs:

- The normal process of English language development, as well as manifestations of dialect and sociolinguistic variance shall not be diagnosed as a disabling condition (5 CCR 3023[b]).
- Testing and assessment materials and procedures used for the purposes of assessment and placement of an individual with exceptional needs are selected and administered so as to not be racially, culturally, or sexually discriminatory (EC 56320[a])
 - Are used for the purposes for which the assessments or measures are valid and reliable (<u>EC 56320[b][2]</u>)
 - Are selected and administered to best ensure that when administered to a pupil with impaired sensory, manual, or speaking skills produce test results that accurately reflect the student's aptitude, achievement level, or any other factors the test purports to measure and not the student's impaired sensory, manual, or speaking skills, unless those skills are the factors that the test purports to measure

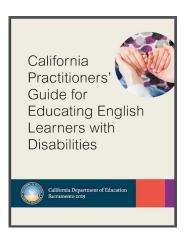
(EC 56320[d])

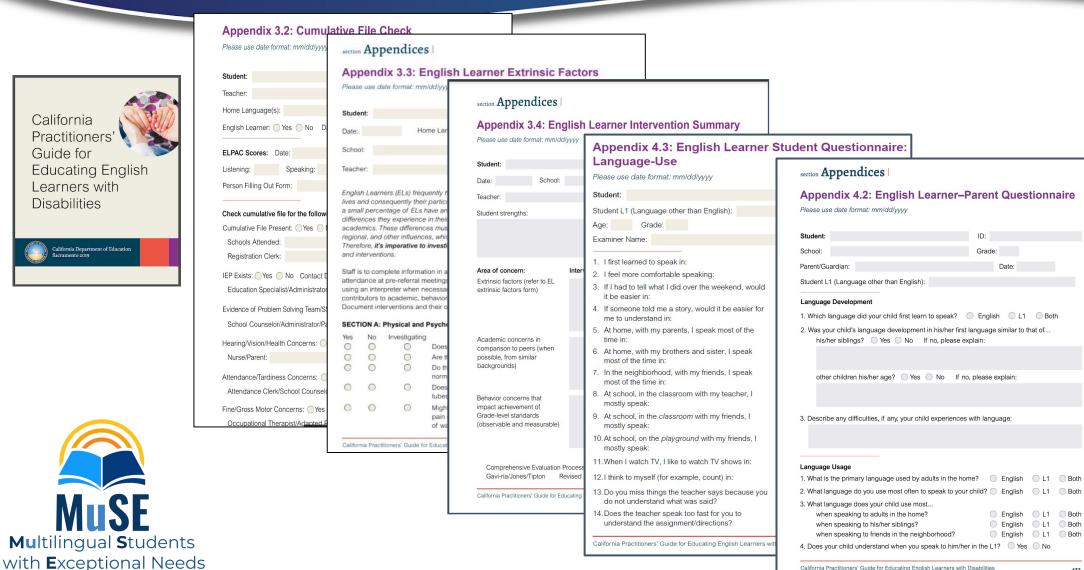




Appendices & Data Gathering Tools







Bilingual Assessments



"Assessments are administered in the child's native language or other mode of communication and in the form, most likely to yield accurate information on what the child knows and can do academically, developmentally, and functionally, unless it is clearly not feasible to do so".[34 CFR §300.304 (c)(ii)]





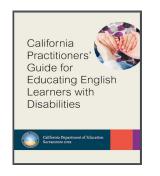
Language of Assessment Options (1)



First Best Option

with Exceptional Needs

- First administer cross-cultural, non-discriminatory
 assessments that align to the referral concerns regardless of
 language difference in a standardized manner in English.
- If analysis of the data indicates the student is performing in the average or above-average range, there is likely no disability; however, assess the student in the primary language in relative or suspected areas of weakness to confirm scores using fully bilingual assessors.



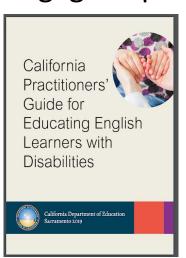
Language of Assessment Options (2)



Multilingual **S**tudents with **E**xceptional Needs

Based on the requirements in the regulations to assess students in their primary language, the following hierarchy of best practices is recommended when conducting assessment of English Learners to determine eligibility for special education:

If the student does not perform in the average or above-average range in English, engage in primary language assessment in all areas of concern.



- Engage in structured interviews with parents and staff.
- Engage in observation of the student in varied environments.
- Collect data from curriculum-based and criterion-based assessment measures to validate potential areas of concern and strength as compared to like peers.

Language of Assessment Options (3)

with Exceptional Needs



Guide for Educating Englis

If it is not feasible to engage in the first best assessment option for ELs because no assessor is available in the primary language:

- 2nd option: Use a trained interpreter, administer the <u>primary language</u> <u>assessments</u> under the <u>supervision of a licensed assessor</u> and <u>document the limitations in the assessment report</u> of the student.
- 3rd option: Use an interpreter who speaks the primary language to provide an oral translation of assessments normed and written in English. Be sure to document any limitations due to this condition in the assessment report and do not report the standardized test scores but document the patterns of strengths and weaknesses.

California Education Code Speech & Language Impairment Definition



A pupil has a language or speech disorder as defined in Education Code section 56333, and it is determined that the pupil's disorder meets one or more of the following criteria:

A. Articulation disorder:

- 1. The pupil displays <u>reduced intelligibility or an inability to use the speech mechanism which significantly interferes with communication and attracts adverse attention</u>. Significant interference in communication occurs when the pupil's production of <u>single or multiple speech sounds on a developmental scale of articulation competency is below that expected for his or her chronological age or developmental level, and which adversely affects educational performance.</u>
- 2. A pupil does not meet the criteria for an articulation disorder if the sole assessed disability is an abnormal swallowing pattern.

California Education Code Speech & Language Impairment Definition, Continued



- (B) Abnormal Voice. A pupil has an abnormal voice which is characterized by persistent, defective voice quality, pitch, or loudness.
- (C) Fluency Disorders. A pupil has a fluency disorder when the flow of verbal expression including rate and rhythm adversely affects communication between the pupil and listener.



California Education Code Speech & Language Impairment Definition, Continued

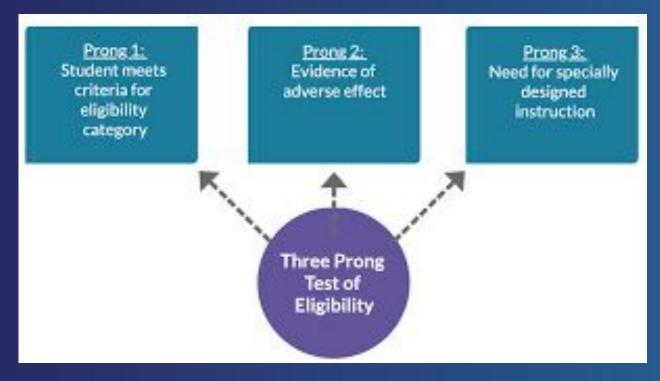


- **D. Language Disorder:** The pupil has an expressive or receptive language disorder when they meets one of the following criteria:
- 1. The pupil scores at least 1.5 standard deviations below the mean, or <u>below the 7th percentile</u>, for his or her chronological age or developmental level on two or more standardized tests in one or more of the following areas of language development: <u>morphology, syntax, semantics, or pragmatics</u>. When standardized tests are considered to be invalid for the specific pupil, the expected language performance level shall be determined by alternative means as specified on the assessment plan

or

2. The pupil scores at least 1.5 standard deviations below the mean or the score is <u>below the 7th percentile</u> for his or her chronological age or developmental level <u>on one or more standardized tests</u> in one of the areas listed in subdivision (A) <u>and displays inappropriate or inadequate usage of expressive or receptive language as measured by a representative spontaneous or elicited language sample of a minimum of 50 utterances. The language sample must be recorded or transcribed and analyzed, and the results included in the assessment report. If the pupil is unable to produce this sample, the language, speech, and hearing specialist shall document why a fifty utterance sample was not obtainable and the contexts in which attempts were made to elicit the sample. When standardized tests are considered to be invalid for the specific pupil, the expected language performance level shall be determined by alternative means as specified in the assessment plan.</u>

Determining Eligibility



Educational Impact in Early
Childhood = participation in
age-appropriate activities (play,
communication at home and at
school, preschool activities, peer
interactions, self-care, making
needs known)

Recommendations are made by assessors.

Questions?

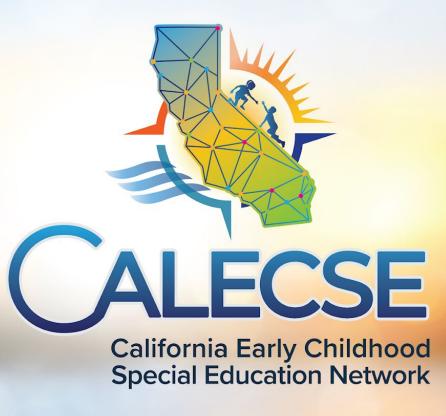












Thank you for attending!

Follow us for updates on training opportunities:



@CalECSE



@Cal ECSE



@CalECSE



@CalECSE



@Cal Ecse



Contact Us!



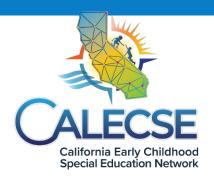
www.calecse.org

Marion Springett
CalECSE Project Coordinator
mspringett@calecse.org

https://www.icoe.org/selpa/el-swd

Vanessa Lopez
MUSE Coordinator of Inclusionary Practices
vanessa.lopez@icoe.org

Carrie Rodrigues
CalECSE Assessment Practices, Exemplar Lead
crodrigues@piedmont.k12.ca.us



Spring Symposium

