

SSADD Cases

Facts about SIC

SD City Schools SLP Caseload Data

San Diego Unified School District's Speech Improvement Class Summary of ASHA Presentation 11/22/08 (Session 2388)

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Initiated in 2004-05 school year 2004 Survey - 821 students on IEPs; 14 full-time SLPs Children with mild articulation errors - could be any number Critical Reform Features (Staskowski & Rivera, 2005) of sounds in error (including clusters) Do not meet IEP criteria (In California, must meet all three •buy-in from community/administration criteria - 1. significant impact on intelligibility AND 2. attracts adverse attention AND 3. adverse educational impact) **Ideal Candidates for SIC** ·Coordinator - two-day assignment •Around age seven - leaves 1.5 years before the speech normalization •Works from central location boundary of 8;5 (Shriberg et al, 1994) (Atypical pattern exceptions lateral patterns and cluster reduction after 5;6 (Smit, 1993a; 1993b)) •Mild articulation errors •Three IEP criteria not met (documented by teacher questionnaire) •Nonstimulable for target sounds (monitor/watch stimulable K/1st) **Innovation 3 – Evidence-Based Intervention** •Motivated and willing to practice at home Complexity Approach (Gierut, 2007) •Phonemic (What to Teach) **RtI Tiers of Intervention** Language Laws •Clusters (Gierut & Champion, 2001) **Tier I** – Teacher/family education through PPT & conv. recasts Tier II - Speech Improvement Class (approx. 17-20 hours) Tier III - Extended time in SIC Motor Learning Approach (Skelton, 2004) • Phonetic (How to Teach It) SSADD Cases Over Time (Mild Articulation) •Three phases of motor learning 880 821 Randomization 703.8 560 569 527.6 470 SSADD 415 w/IFP 351.4 322 SSADD w/oIFP 175.2 95 July 2004 July 2005 July 2006 July 2007 October 2007 Date in library during recess, etc.) (Hazel, 1990)



Innovation 1 – Shift to General Education

•well-organized set of procedures (streamlined forms/flow maps)

•prioritizing time for SLPs (allocate up to 5 SIC students/full-time SLP)

Innovation 2 – Articulation Resource Center

•Educates, models, coaches, consults about articulation/phonological treatment •Provides ongoing professional development - Best Practices workshop and /r/ treatment workshop each year and Phonology Conference every other year

- •High-Frequency/Low-Density Words (Morrisette & Gierut, 2002)
 - 1. pre-practice/placement, 2. practice, 3. generalization
- •Delayed feedback and self-monitoring (Strand & Kent, 2005)
- •Lots of meaningful practice (like real communication)
- •Monitor progress through SI Sound Inventories and conv. Samples

Innovation 4 – Required Home Practice

Initial letter home - one homework assignment not completed courtesy call home to explain policy again and talk about moving to next child on wait list (enough to motivate most families)

For children with limited home support - SLP can arrange something creative for extra practice in another environment (peer buddy in class, practice



Terrebonne Parish Schools- Early Intervening Services (EIS) for Speech Summary of ASHA Presentation 11/22/08 (Session 2388)

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EIS Pilot Program •2004-05 school year •Children with mild articulation errors – 1-2 sound errors •Baseline probes of errors sounds completed •2 week intervention completed by SLP prior to referral •Four 30 minute small group sessions •Support Services provided by SLP up to 9 months	Innovation 1 – Shift to General Education •General Education •Consultation •Interventions for At Risk Students •Special Education •IEP Students
•Small group •30 minutes, twice weekly •Periodic sound probes completed	Innovation 2 – EIS Services for Speech •Prior to referral for IDEA •Component of screening process •Provided by SLP
Pilot Program Results •Baseline Sound Probes: •26% achieved criterion •26% achieved criterion •2 week intervention: •42% achieved criterion •Support Services: •92% achieved criterion	•Use of Intervention Data to drive referral decisions Innovation 3 – Incorporating Principles of RtI for Speech • Tiered approach • Tier 1- Regular Ed only • Tier 2- At Risk-Provided by SLP
Current EIS Program Overview •Referral •Parent Permission •Screening – •Observation, interview, history,	•Tier 3- IEP •Progress Monitoring • Projected Progress • Generalization Probes •Planned and Periodic •Analysis of Data with Program Modification •Data Based Decision Making
 screening tests, baseline probes EIS- Intervention with progress monitoring Referral for IDEA Evaluation if indicated by data Based on projected treatment duration Data indicating treatment duration will exceed 6 months indicates referral Dismissal From EIS Communication concerns resolved IEP 	Innovation 4 – Workload •Workload Analysis •IEP Therapy Time •IEP Therapy Time •EIS Time •Other Assigned Duties •Excel •Workload Scheduling •Workload Scheduling

Terrebonne Parish Schools- Early Intervening Services (EIS) for Speech Summary of ASHA Presentation 11/22/08 (Session 2388)

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Speedy Speech Pilot Program •2005-06 school year •13 At Risk Students without IEPs •Regular Ed Students •Short Individual Sessions •5-7 minutes a day, 3-4 days a week •8 week intervention program •Provided services at small table place in each hallway	Innovation 1 – Shift to General Education •General Education •At Risk Students are considered and treatment provided as regular education students •Special Education •IEP Students
Pilot Program Results Year 1 15% achieved goals in 8 weeks 54% achieved goals in 16 weeks 31% did not achieve goals in 16 week program 1 self-corrected over the summer	Innovation 2 – Provided Services Prior to Referral for Evaluation •Prior to referral for IDEA •Provided by SLP •Prevent need for referral for special education
3 other students continued intervention program the next school year. Year 2 •19% achieved goals in 8 weeks •69% achieved goals in 16 weeks •12% did not achieve goals in 16 week program	Innovation 3 – Speedy Speech Service Model • Individual • Service Intensity • Significantly shorter than traditional 30 minutes • Frequency • More frequent than traditional twice weekly
Speedy Speech Advantages Reduction in amount of classroom instruction student is missing Articulation drill more appealing due to shorter duration 	•Duration •Pre-determined duration of 8 week •Extensions allowed •Establishes expectations for short term treatment duration
 Increase in target repetitions 7 students seen in 40-50 minutes Easier data collection Reduced time spent picking up and returning students to class Reduction in scheduling constraints 	Innovation 4 – Service Location •Services provided in hallway •Location close to classroom reduces travel time within school up and return students •Actual time of therapy/intervention varies each day