

Please find below my assessment report for X to assist with his request for National Disability Insurance Scheme (NDIS) ongoing support. The purpose of this document is to provide an overview of the assessment results and recommendations for X regarding the support he will require under the NDIS.

## **BACKGROUND INFORMATION**

X presented as an energetic X-year-old boy who was referred to Speech Pathology by his mother, Y, to determine the level of his current speech and language skills. Y reported that X has significant difficulties with communication – being able to understand others and also for others to understand him. Y also expressed concerns for X's performance at school and wished for X to be less stressed and more engaged in learning in the school environment. Y reported, "at this point, X just finds school too difficult and often gets frustrated."

X is currently attending Year X at Primary School and receives School Support Officer (SSO) assistance on a daily basis to support his learning and functioning in the classroom.

Prior to accessing our services, X's speech and language skills were assessed in June and 201X, by Department for Education, Assessment results indicated that X presented with a severe speech delay and a severe receptive and expressive language disorder.

X was considered eligible for special education support under the Students with a Disability Policy 'Communication and Language' criteria. Subsequently, X has had a Negotiated Education Plan (NEP) for each year he has attended school.

According to his NEP plans, X is 12 to 18 months behind his peers and is currently on reader level 16 (A level normally achieved by a Reception-aged child in their first year of schooling). Apart from speech services, X is also accessing fortnightly occupational therapy to support developmental skills in areas of sensory processing, emotional regulation, attention and concentration, core and postural strength, motor skills, visual perception and problem-solving skills.

### **Professional Credentials**

This assessment was conducted by Speech Pathologist CPSP in conjunction with and under the direct collaboration/ supervision of, Speech Pathologist CPSP.

We are qualified speech pathologists and members of Speech Pathology Australia. (Certified Practising Status)

## **ASSESSMENT TOOLS**

This report was written with information obtained from interviewing X's mother , assessments administered and the following reports:

- Occupational Therapy Report in September 201X
- Speech Pathology Summary and Program Goals in June 201X written by Speech Pathologist
- Department for Education and Child Development (DECD) Speech Pathology Report in 201X written by Speech Pathologist

- Primary School Negotiated Education Plans (NEP) for X in 201X respectively

X's speech, language and literacy skills were assessed over five sessions earlier this year at the office in a quiet, one to one environment. Overall, X was in good spirits and attended well throughout the assessment process. He made genuine attempts on all assessment items and therefore the assessment results were considered to be a valid representation of his current abilities under optimal conditions.

In a noisier and less structured environment, X is likely to struggle with language comprehension and usage. During a 60-minute assessment session, multiple breaks were given for X to calm down and 'recharge'. Though the assessment tools used are within the age range for X, he often found assessment items too difficult and appeared to be frustrated and teary. He also required some support and words of encouragement to finish all assessment tasks.

X's speech, oral language, pragmatic and literacy skills were assessed using the following:

- Clinical Evaluation of Language Fundamentals – Fifth Edition (CELF-V) • CELF-V Pragmatic Profile
- Sutherland Phonological Awareness Test – Revised (SPAT-R)
- Informal assessment of speech skills
- Informal assessment of oral narrative skills

## **DIAGNOSIS**

Assessment results from the above were analysed along with previous Speech Pathology reports and Occupational Therapy report.

Combined data indicated that X presents with a diagnosis of Developmental Language Disorder (DLD), where his skills are persistently below the expected level for his age across different domains.

DLD is a lifelong condition which can first be diagnosed in childhood. It affects how people understand and express themselves with language. Children with DLD usually struggle to acquire their own language with no obvious reasons. DLD has no single known cause and is likely a result of a number of biological, genetic and environmental risk factors. DLD was previously known as Specific Language Impairment (SLI). DLD, while not identical, is now the agreed term and people with an SLI diagnosis will qualify for a diagnosis of DLD.

Indications are that these difficulties even if improved to a degree by therapy are likely to be permanent. (Royal College of Speech & Language Therapists, 2018). Formal and standardised assessment indicated that X demonstrates ongoing severe difficulties across domains of speech, language, communication, social interaction, learning and phonological awareness (literacy). His significant difficulties in maintaining attention and concentration on task and the ability to self-regulate and manage emotions have further exacerbated his existing impairments.

The overall combined effect of his difficulties has proved to cause issues in his daily communication, learning, functioning in the classroom and socialisation with peers. X's condition will continue to impact him for life, hindering him in being successful in school and in the community, as well as developing relationships. X will require ongoing support

and modifications to maximise his access and participation in both the society and with the curriculum.

## **ASSESSMENT RESULTS**

### **Speech Sound skills**

X's speech sound skills were informally observed during the language assessment and session activities. The following error patterns were observed:

Delayed errors (errors that occur in typically developing children however are no longer age appropriate):

- Affrication, replacement of a fricative with an affricate e.g. treasure à treajure (/zh/ to 'j') (approx. age of elimination: 3 years)
- Gliding: The substitution of /r/ and /l/ sounds with a /w/ sound, e.g. bread à bwead, strawberry à stwawbewi, gloves à gwoves (approx. age of elimination: 5-6 years)
- Fricative simplification: The substitution of 'th' sounds with a /f/ sound, e.g. thumb à fumb (approx. age of elimination: 7-8 years)

Atypical errors (errors that do not usually occur in typically developing children):

- Intrusive consonant, insertion of an additional consonant e.g. bamboo à bamboom

Based on the observations, X clearly presents with a severe speech disorder, characterised by both delayed and atypical speech sound errors.

### **Receptive and Expressive Language Skills**

Receptive and expressive language skills refer to the ability to understand and use spoken language. These skills are important in developing oral communication, and also linked to literacy success.

X's oral language and pragmatic skills were formally assessed using the Clinical Evaluation of Language Fundamentals-V (CELF-V).

This assessment aims to identify areas of strengths and difficulties across receptive and expressive language, as well as language content and language structure. The CELF-V allows X's language skills to be understood alongside other students of the same age.

It is important to note that these results are likely to be his best level of functioning as these have been gained in a quiet, 1:1 environment. In a noisier and more distracting classroom environment his functional skills are likely to be lower.

Core Language Score Four tests of the CELF-V were administered for X's Core Language Score:

- Sentence Comprehension - Word Structure - Formulated Sentences - Recalling Sentences  
The Core Language Score is a measure of general language ability and provides evidence for X's overall language performance.

X received a score of 68, placing him in the 2nd percentile

This places X in the severely impaired range of overall core language functioning. Receptive Language Index (understanding language)

The Receptive Language Index is a measure that probes receptive aspects of language including comprehension and listening.

For X's receptive language index, he received a score of 80, placing him in the 9th percentile. This places X in the mildly impaired range of receptive language functioning.

Expressive Language Index (using language) The Expressive Language Index is a measure that indicates expressive aspects of language including spoken words and sentences. For X's expressive language index, he received a score of 64, placing him in the 1st percentile.

This places X in the severely impaired range of expressive language functioning.

Language Content Index The Language Content Index is a measure that reflects use of language in the aspect of understanding, interpreting and creating meanings.

For X's language content index, he received a score of 72, placing him in the 3rd percentile. This places X in the moderately impaired range of language content functioning.

Language Structure Index

The Language Structure Index is a measure that reflects use of language in the aspect of interpreting and producing sentence structure. For X's language content index, he received a score of 68, placing him in the 2nd percentile.

This places X in the severely impaired range of language content functioning.

Further explanation of the tests that X was assessed with from the CELF-V are below:

X experienced significant difficulty with:

Linguistic Concepts – In this task, X was required to respond to spoken directions of increasing length and complexity by pointing to items in the correct order. Results indicated that X was unable to follow instructions with multiple information. He also struggled to understand sequential and conditional sentences (e.g. “Before you point to a sun, point to the ball.”; “If there is a house in the top row, point to the flower; if not point to an apple.”) This indicates that X can have difficulty following instructions at home or at school, particularly when the instruction consists of multiple steps or complex information.

Formulated sentences – X was required to create a sentence within the context using a word and a scene given to him. He had significant difficulty in this task and struggled to make sentences that relate to the pictures given. There are 24 items in this task. It was terminated at item 7 after he obtained 4 consecutive zero scores. His sentences were poorly structured, and

sometimes illogical. X also struggled to use adverbs, coordinating and subordinate clauses in sentences. His sentences follow a simple structure and lack the grammatical variety that is expected of his age. (e.g. “We are the best. I am the best at Ballet.”; “Before we put all the shopping in the bag, I’ll eat it in the car.”; “Because cross the road safely, can’t see the little child.”; “I finally done my homework.”)

X experienced moderate difficulty with:

Following Directions – In this subtest, X was required to respond to a spoken instruction by pointing to corresponding shapes in the correct order. X was unable to finish this test due to increasing difficulty in the test items and his short attention span. He required frequent support to focus on task and completed some items to his best ability. Recalling sentences – X was asked to repeat sentences exactly as they were read to him in this task. This task consists of 26 sentences read individually to X, he was only able to recall 4 sentences with no errors (2 being trial sentences and 2 being assessment items) He had great difficulty recalling sentences that contain a subordinate or relative clause. He also struggled to recall negative sentences, often omitting or substituting words, causing a change of meaning to the original sentence. This task was terminated at item 16 after he obtained 4 consecutive zero scores.

Understanding spoken paragraphs – Three different stories were read to X and he was required to answer questions relating to the stories. He required a substantial amount of support in this area as he struggled to recall main ideas in the paragraphs. X was only able to recall bits and pieces of scattered information mentioned in the stories. He struggled to expand on the information he gave and could not provide examples of events happened in the stories nor explain ideas when asked ‘why’. Additionally, X’s difficulty in retaining spoken information had further impacted his ability to understand long and complex information, hence he was not able to give appropriate answers to questions requiring logical thinking or prediction. He was, however, able to give the questions a go and came up with answers that he thought were reasonable.

X experienced mild difficulty with:

Sentence Comprehension – In this subtest, X was asked to choose one out of four pictures that best illustrates a sentence spoken to him. X had some difficulties with understanding prepositional phrases such as “going down the ramp.”, and compound concepts such as “the boy is washing dishes and his mum is drying them,” X also struggled with direct and indirect objects such as “Mum showed the dog the cat.”, due to difficulty in correctly identifying the ‘doer’ and the ‘receiver’ in the spoken sentence. However, X was able to identify most items when he focused on the task or when prompted to pay attention. The advantage of this and some of the other subtests however is that there are very strong visual cues which would support his ability to be successful on a multiple choice type task.

Word Structure – In this subtest, X was given pictures as visual prompts and had to demonstrate use of different grammatical structures to finish sentences. X had some difficulties using appropriate irregular plurals (e.g. ‘childs’ for ‘children’). He also struggled with using auxiliary verbs and was unable to demonstrate use of the structure “is/ are + (verb)ing” in the test items, often omitting the auxiliary verb (is/are). (e.g. “This girl drawing.”; “Here the children swinging.”) He was also unable to demonstrate use of irregular past tense verbs (e.g. ‘rode’ for ‘ride’) in the assessment item and in general conversation during play.

Word classes – In this subtest, X was required to identify 2 pictures/ words that best relate to each other out of 3 pictures/ 4 spoken words. X had some difficulty in relating the words without a visual stimulus. He struggled to understand the meaning of words, hence failed to identify the semantic relationship. His knowledge of word classes is at the lower end of the average range (standing at the 37th percentile) comparing to peers of his age. This skill is important for developing semantic networks and understanding categories based on features. Understanding these connections assists in vocabulary development and word retrieval among known and new words.

### **Pragmatic and social skills**

Results from the CELF-V Pragmatic Profile revealed that X has significant difficulties in social skills in comparison to peers of his age. X is functioning at the level of a 3-year-old child, placing him in the 2nd percentile. This indicates severe impairment of X's nonverbal and socialisation skills when interacting with other people. X has most difficulties in responding to information given verbally. He almost never gives or asks for directions nor for clarification if he is confused or if the situation is unclear. X also finds it challenging to use rituals and conversational skills such as maintaining eye-contact/ gaze, and maintaining topics using typical responses. He requires support to participate in structured group activities and turn taking games. Moreover, X does not understand nor use strategies to interrupt others or respond to interruptions in a conversation. Also, X finds it difficult to give reasons or causes for actions or conditions, as a result he is unable to predict appropriate information/ events in a story. In addition, X significantly struggles with interpreting and following nonverbal messages such as facial cues and following tone of voice. It was also reported by Y that X finds it hard to regulate emotions or express himself using words when he feels angry/ tired/ annoyed or frustrated. He often acts out or become teary when he comes across with tasks he finds too challenging. He often chooses to avoid difficult tasks instead of asking for help or "have a go". X also lack the ability to negotiate with other people during play or activities.

### **Oral Narrative**

Oral narrative refers to verbal storytelling skills, these skills are crucial alongside the development of reading comprehension, reasoning, expressive and written language abilities.

X's oral narrative abilities were assessed using the game – Magne-Talk; where a themed background and magnetic picture pieces were given for X to create a story. First, X was introduced the setting and characters of the story, he was then asked to create a meaningful narrative with the picture pieces. The oral narrative X produced was at a lower level than what would be expected for his age. X was able to identify sequences and actions in the story however struggled to formulate a plot. His story was made up of multiple simple-structured sentences and run-on narration explaining what each character was doing and where each piece was placed, instead of giving a cohesive story-like narrative.

X was unable to verbally illustrate important story elements such as the beginning, the problem, the climax and the ending/ solution. When X was asked to explain a scenario, he was unable to give a reasonable answer, in addition, he struggled to suggest appropriate answers to multiple 'why' questions asked in the activity. Y confirmed that X often experiences difficulties with cause and effect relationships and tends to go "off-topic" when

asked to explain something. It was also observed that X experienced difficulties producing grammatically correct words and sentences. Even though he was provided with repeated correct modelling and recasting from the speech pathologist, X was unable to pick up the proper use of grammatical structures during the activity.

### **Phonological Awareness**

Higher level phonological awareness skills include the ability to recognise that words are made up of a variety of sound units. The term encompasses a range of sound related skills necessary for a child to develop reading and literacy skills. When measuring a child's phonological awareness, it is crucial to look at his/her ability to use rhyme, blend, segment and manipulate phonemes (sound units) in words as these are the necessary pre-cursor skills that need to be taught before sound units can be tackled successfully.

X's phonological awareness skills were assessed with the Sutherland Phonological Awareness test – Revised (SPAT-R). X demonstrated the ability to identify:

Syllable counting – X was able to clap out syllables in words e.g. he-li-cop-ter (4), hi-ppopota-mus (5).

- Onset identification – The ability to identify the first sound in a spoken word. E.g. man (m), goat (g)
- Final Phoneme identification – The ability to identify the last sound in a spoken word. E.g. duck (k), sad (d)

X is developing consistent phonological awareness in areas of:

- Rhyme Detection – The ability to identify a word that rhymes with the given word. X struggled to identify rhyming words for 'dive' and 'fin' even though he was provided with stimulus pictures.
- Blending CVC – The ability to put sounds together to form consonant-vowel-consonant single words.

While X can blend sounds to form a word, he substituted and altered some consonant sounds due to his speech sounds errors, hence sounding out an entirely different word.

- Segmentation CVC – The ability to identify and separate consonant and vowel sounds. X was unable to correctly segment sounds in the word 'laugh' (/l/.../a/.../f/), he identified 4 sounds which was incorrect.

- Segmentation Blends – X was unable to segment blends in the word "scrub" (/s/.../c/.../r/.../u/.../b/) and found it difficult to identify individual sounds in blends.

- Deletion Onset – The ability to create a new word by deleting the first sound in a given word. X found this task very difficult and expressed that "Take away (sounds) is hard!". He was unable to form new words and appeared to be teary.

A break was given at this point of the assessment.

- Nonword Reading – The ability to read nonsense words by identifying and blending sounds. X was unable to read 'pilk', 'scriff', 'fouse', and 'mespantal' in a phonetically

acceptable manner, he altered the vowel sounds, omitted a weak syllable and simplified blends in the above nonsense words.

- Nonword Spelling – The ability to spell nonsense words in a phonetically acceptable manner. X was able to spell 3 out of 8 nonsense words, however struggled with the words ‘flonk’, ‘splad’, ‘bouse’, ‘staslent’ and ‘rostandic’. Errors indicated distortion of long vowels (‘al’ for ‘ou’), omission of weak syllables in words, simplification of consonant clusters (‘sp’ for ‘spl’), addition of single consonants and substitution of sounds with similar properties (‘th’ for ‘f’). X struggled with (scored zero points in all of the following subtests): - Rhyme production – The ability to detect rhymes and create rhyming words. X was unable to provide any rhyming words for the given rhyming sets, he struggled to give an example even after SP’s demonstration.

- Deletion Boundary – The ability to create a new word after deleting the first sound in the given word. X was unable to create any new words when prompted to delete beginning sounds for the words ‘clean’, ‘spade’, ‘bred’, ‘swing’ and ‘scream’. - Deletion Internal – The ability to create a new word after deleting a target sound in the given word. X was unable to manipulate sounds in the following words: ‘nest’, ‘speed’, ‘slide’, ‘cold’, and ‘bent’.

Results indicated that X has significant difficulties with multiple phonological awareness skills, placing him in the 2nd percentile when compared to other children who are also in their fourth year of schooling. These difficulties are likely to negatively impact X’s ability to develop literacy skills, he would require ongoing support as literacy demands continue to increase over the school years.

## **SUMMARY & RECOMMENDATIONS**

It was a pleasure to meet X and, based on the above assessment results and diagnosis, it is crucial that X receives ongoing speech and language intervention to support his development in speech, language, literacy and social skills. It is recommended that X receives a minimum of weekly speech therapy, so that the frequency of therapy meets the needs of X and his family across the service period.

Please see below in regard to the recommended budget for the next funding year.

*Speech Therapy 60 mins (for a total of 48 sessions) \$ 193 per hour = \$ 9,264*

*Planning and reporting 3 hours \$ 193 per hour = \$ 579*

### **Some recommendations to assist with X’s language functioning**

- X may benefit from verbal instructions being broken down into smaller parts and someone checking with him that he has understood what is required of him
- Use steps and highlight keywords when giving instructions or directions to assist X in comprehending and following spoken information
- Allow time for X to process information before providing more details.
- Provide opportunities for X to plan and discuss/ rehearse tasks verbally first so that he is able to sequence his thoughts and ideas more clearly



- Explain abstract ideas or figurative language to X and give definitions and examples of use for words that X does not understand
- Role play: Practising appropriate ways to react to and communicate in social situations through role playing scenarios in safe environments made for learning ensure that the knowledge X has learnt can be transferrable into real-life situations
  - Social skills training: Programs such as “The Secret Agent Society” (SAS) or “What’s the Buzz?” are designed to teach social skills and appropriateness of decisions made in social situations in 1:1 or small group therapy and can support transfer of knowledge into everyday life
- Recognise that X may be anxious about a social situation or may not understand social etiquettes or implied rules, explain these etiquettes and rules explicitly or demonstrate nonverbal language cues for X to model after
  - Model and recast X’s use of language to teach appropriate use of grammar structures in conversations
- Expand X’s sentences in conversation by prompting with ‘wh’ and ‘how’ questions (e.g. “When did this happen?”, “Where did this happen?”, “Who was there?”, “What did you do?”, “Why did this happen?”, “How did you feel?”, “How did you react?”, “How did it start?”)
- Explain cause and effect relationships and practice asking and answering ‘why’ questions appropriately in daily life to assist X’s understanding of the concept - Practise recounting information with X to work on his short-term memory and recalling skills (e.g. prompt X to recount his day, re-tell a story read to him, recall steps to for instance, cooking a meal/ building a robot, recall what mum had just said, etc)
- Use word webs and mind webs to explain new words and concepts
- X is a visual learner; he learns more effectively when provided with pictures and hands on items to work with. Incorporate pictures and crafts in his learning plan to promote the incentive to learn and explore
- .Allow X to make mistakes in a safe environment, provide him with appropriate prompts and cues then encourage him to try again, X can be frustrated at times when he finds things too challenging, however he can be encouraged to try when given support
  - Provide movement or activity breaks in between classes or every, for instance, 30 minutes, to allow X to relax and “recharge” - X is very creative and imaginative, his stories are full of fun and whimsical ideas, though these ideas can be “off-topic”, make use of these ideas to engage X in language-rich activities and provide support for X to formulate grammatically appropriate sentences
  - Programs and apps such as “Reading Doctor”, “Phonological Awareness Bubble” and Dr. Seuss’s rhyming books are fun activities that support the development of phonological and phonemic awareness skills.

We invite any relevant parties to contact us in relation to this report on if there are any aspects of this information you would like to discuss or have further clarified.