North Shore School District 112

Speech and Language Service Guidelines

CLINICAL JUDGMENT MAY NECESSITATE MODIFICATION OF THESE GUIDELINES

	MILD	MODERATE	SEVERE	PROFOUND
	Consultation to a minimum of 15-30 minutes per week	Minimum of 31-60 minutes per week	Minimum of 61-90 minutes per week	Minimum of 91+ minutes per week
Severity of Disorder	Impairment minimally impacts student's ability to communicate in school learning and/or social situations as noted by at least three listeners, such as teachers, building staff, peers, or other familiar listeners.	Impairment interferes with the student's ability to communicate in school learning and/or social situations as noted by at least three listeners, such as teachers, building staff, peers, or other familiar listeners.	Impairment <u>limits</u> the student's ability to communicate appropriately and respond in school learning and/or social situations. Environmental and/or student concern is evident.	Impairment <u>prevents</u> the student from communicating appropriately in school and/or other social situations.
ARTICULATION/ PHONOLOGY	Intelligible 80-90% of the time in connected speech (as judged by at least 3 raters), And/Or No more than 2 classes of speech sound errors or 1 phonological process, not developmental in nature.	Intelligible 50-80% of the time in connected speech (as judged by at least 3 raters). Substitutions, distortions, and some omissions may be present. There is limited stimulability for errors. May demonstrate at least 2 phonological processes, not developmental in nature.	Intelligible 20-49% of the time in connected speech (as judged by at least 3 raters). Deviations may range from extensive substitutions and many omissions to extensive omissions. A limited number of phoneme classes are evidenced in a speechlanguage sample. Consonant sequencing is generally lacking. Or, at least 3 phonological processes, not developmental in nature. Augmentative communication systems may be warranted.	Speech is unintelligible without gestures or cues, and/or knowledge of the content. Usually there are additional pathological or physiological problems, such as neuro-motor deficits or structural deviations. Augmentative communication systems may be warranted. Service minutes will be identified to support programming in addition to direct service.
LANGUAGE	The student demonstrates a deficit in receptive, expressive, or pragmatic language as measured by two or more diagnostic procedures/standardized tests. Performance falls from 1 to 1.5 standard deviations below the mean standard score.	The student demonstrates a deficit in receptive, expressive, and/or pragmatic language as measured by two or more diagnostic procedures/standardized tests. Performance falls from 1.5 to 2.0 standard deviations below the mean standard score.	The student demonstrates a deficit in receptive, expressive, and/or pragmatic language as measured by two or more diagnostic procedures/standardized tests (if standardized tests can be administered). Performance falls greater than 2.0 standard deviations below the mean standard score. Augmentative communication systems may be warranted.	The student demonstrates a deficit in receptive, expressive, or pragmatic language which prevents appropriate communication in school and/or social situations. Augmentative communication systems may be warranted. Service minutes will be identified to support programming in addition to direct service.
FLUENCY	The student demonstrates 2-5% atypical disfluencies within a speech sample of at least 100 words or 200 syllables, with minimal tension. Rate/Prosody: Minimal interference with communication.	The student demonstrates 6-10% atypical disfluencies within a speech sample of at least 100 words. Noticeable tension and/or secondary characteristics are present. Rate/Prosody: Sometimes interferes with communication.	The student demonstrates 11-15% atypical disfluencies within a speech sample of at least 100 words. Excessive tension and/or secondary characteristics are present Rate/Prosody: Interferes with communication.	The student demonstrates more than 15% atypical disfluencies within a speech sample of at least 100 words. Excessive tension and/or secondary characteristics are present. Rate/Prosody: Prevents communication.
VOICE	A medical referral must be completed, at the parents' expense. The student demonstrates a voice difference including hoarseness, nasality, denasality, pitch or intensity, that minimally impacts communication.	A medical referral must be completed, at the parents' expense. The student demonstrates a voice difference that sometimes impacts communication.	A medical referral must be completed, at the parents' expense. The student demonstrates a voice difference that usually impacts communication.	A medical referral must be completed, at the parents' expense. The student demonstrates a voice difference that always impacts communication. Speech is largely unintelligible due to aphonia or severe hypernasality. Extreme effort is apparent in production of speech.

Factors that may contraindicate services, may include:

- 1. The interference of physiological factors such as unrepaired cleft palate, enlarged adenoids, orthodontia,
- 2. The presence of dialectical differences, including regional, social, or cultural/ethnic variations of a symbol system.

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This matrix is fundamentally based on the "Speech/Language Eligibility Criteria Matrix" created by the School Affairs Committee of the Illinois Speech/Language and Hearing Association (2007-08) and Kevin Eldridge, PhD, CCC-SLP.