

# **Speech or Language Impairment Eligibility Form**Maine Unified Special Education Regulations (MUSER VII.2.K)

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Date of Meeting:			SAU	l:	
Child's Name:			School	l:	
Date of Birth:		Grade:	School Phone	o:	
Parent/Guardian Name:			School Address	::	
Parent/Guardian Address:			City, State Zip	o:	
Parent/Guardian City, State Zip:			School Contact	:	
• If No Scale disable	ance and requirements form is to be or consider a charter Form ased on a various sources if am must first due to check and experience to box formaries and experience to contain the contains and the conta	es special education e completed by the ange in eligibility ( riety of sources is documented complete the fixing "No Assess should indicate a complete the fixing and indicate a complete a complete the complete and indicate a complete a complete a complete a com	on for the child to be IEP Team whene including dismisson for Yes or No four severity rasment Needed e: "Not an area and ardized as a sessments, rate	ting scales of suspections sessments, ting scales	that follow ty Rating cted
Does the child articulation sev	exhibit an <b>articul</b> erity rating scale	<u>-</u>	oased on the	YES	NO 🗆
Verification:					

IGNOLIGOE SEVERITY ROTING SCOIES	YES	NO
language severity rating scale?  Verification:		
Verification.		
3. Does the child exhibit a <b>fluency impairment</b> based on the	YES	NO
fluency severity rating scale?		
Verification:		
4. Does the child exhibit a <b>voice impairment</b> based on the voice severity rating scale?	YES	NO
Verification:		
f the team has checked YES to any of Questions 1-4, check YES on Quest f not, check NO on Question 5; the child does not qualify as a child with a mpairment.	a speech or la	nguage
5. Does a <b>speech or language impairment</b> exist?	YES	NO
6. Does the child's <b>speech or language impairment</b> adversely	YES	NO
affect his/her educational performance?	YES	NO
	m grades, c s, performa sts of acade , teacher ar dence of so endance, d	child work nce on emic nd parent
Verification:  Best Practice: Sources of data may include: classroom products, measures of attainment of academic standard district and state assessments, scores on standardized test achievement (including reading comprehension scores) reports, evidence of functional communication skills, evid cognitive strengths and social pragmatics, records of attentional evidence or behavior rating scales, and observations or social/emotional functioning  If the answer to Question 6 is YES, go to Question 7. If NO, the child does it speech or language impairment.	m grades, of s, performa sts of acade , teacher ardence of so endance, dratings of	child work nce on emic nd parent cial isciplinary
Verification:  Best Practice: Sources of data may include: classroom products, measures of attainment of academic standard district and state assessments, scores on standardized test achievement (including reading comprehension scores) reports, evidence of functional communication skills, evidence or behavior rating scales, and observations or evidence or behavior rating scales, and observations or social/emotional functioning  If the answer to Question 6 is YES, go to Question 7. If NO, the child does in the control of the c	m grades, or s, performants of acade to the control of the control	child work nce on emic nd parent cial isciplinary
verification:  Best Practice: Sources of data may include: classroom products, measures of attainment of academic standard district and state assessments, scores on standardized test achievement (including reading comprehension scores) reports, evidence of functional communication skills, evidence or behavior rating scales, and observations or evidence or behavior rating scales, and observations or esocial/emotional functioning  If the answer to Question 6 is YES, go to Question 7. If NO, the child does to speech or language impairment.  7. If there is a speech or language impairment, the impairment is of succession and summarize the basis for that selection in the area may be a speech or language impairment and the child requires special education.	m grades, or s, performa sts of acade , teacher ardence of so endance, dratings of the nature and marked "Verifications of the	child work nce on emic nd parent cial isciplinary  a child with a  degree that ation"]:
verification:  Best Practice: Sources of data may include: classroom products, measures of attainment of academic standard district and state assessments, scores on standardized test achievement (including reading comprehension scores) reports, evidence of functional communication skills, evidence or behavior rating scales, and observations or evidence or behavior rating scales, and observations or esocial/emotional functioning  If the answer to Question 6 is YES, go to Question 7. If NO, the child does to speech or language impairment, the impairment is of succession and summarize the basis for that selection in the area means.	m grades, or s, performa sts of acade , teacher ardence of so endance, dratings of the nature and marked "Verifications of the	child work nce on emic nd parent cial isciplinary  a child with a  degree that ation"]:

Date:

Child's Name:

Child's Name:	Date:	
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If the box in question 7(a) is checked, the child qualifies as a child with a speech or language impairment. If the box in question 7(b) is checked, the child does not qualify as a child with a speech or language impairment.



No articulation

assessment

Speech or Language Impairment Eligibility Form/Severity Rating Scales

# **Articulation Severity Rating Scale**

To find the presence of an impairment, ratings in

Articulation impairment: The abnormal production of speech sounds including: substitutions, omissions, distortions or additions of speech sounds not commensurate with child's chronological age or cultural linguistic background and not related to dialect.

Compliance: Check when not raised as an area of suspected disability

assessment needed.	Description of Articulation, Standardized Assessments and Informal Assessments <u>MUST</u> fall within the moderate or severe category.			
☐ Compliance	: Must fill, if "no	assessment need	ded" is not chec	ked
	☐ No apparent problem	☐ Mild	☐ Moderate	□ Severe
Description of Articulation	No sound errors present or production is developmentally appropriate.	<ul> <li>Sound errors are intelligible but noticeable.</li> <li>Errors consist of common types of substitutions and/or distortions.</li> </ul>	<ul> <li>More numerous articulation errors are present.         Intelligibility is difficult for an unfamiliar listener.     </li> <li>Excessive use (40% or more) of substitution or omission processes which are inappropriate for age.</li> </ul>	<ul> <li>Many articulation errors are present.</li> <li>Speech is frequently unintelligible to most listeners.</li> <li>Excessive use (40% or more) of omission processes or unique processes which are inappropriate for age.</li> </ul>
	<ul><li>No apparent problem</li></ul>	☐ Mild	☐ Moderate	
Standardized Assessments	<ul> <li>A standard score &lt;1.0 standard deviation below the mean.</li> <li>A standard score of ≥86.</li> <li>16<sup>th</sup> percentile or above.</li> </ul>	<ul> <li>1 to 1.4 standard deviations below the mean.</li> <li>7-15<sup>th</sup> percentile.</li> <li>A standard score of 78-85.</li> <li>≤2 speech sound errors outside developmental guidelines.</li> <li>Children may be stimulable for error sounds.</li> </ul>	<ul> <li>1.5 to 1.9 standard deviations below the mean.</li> <li>2-6<sup>th</sup> percentile.</li> <li>A standard score of 70-77.</li> <li>Substitutions, distortions and some omissions may be present. There is limited stimulability for the error phonemes.</li> </ul>	<ul> <li>≥2 standard deviations below the mean.</li> <li>&lt;2nd percentile.</li> <li>A standard score &lt;70.</li> <li>Deviations may range from extensive substitutions and many omissions to extensive omissions.</li> </ul>
Informal Assessments	<ul><li>No apparent problem</li></ul>	☐ Mild	☐ Moderate	□ Severe
Ages 3-4	Intelligible >80% of the time in connected speech.	Intelligible 61-80% of the time in connected speech.	Intelligible 40-60% of the time in connected speech.	Intelligible <40% of the time in connected speech.
Ages 4-5	Intelligible >80% of th	ne time in connected ech.	Intelligible 60-80% of the time in connected speech.	Intelligible <60% of the time in

Child's Name: Date:

Ages 5-20

Intelligible >80% of the time in connected speech.

Intelligible 60-80% of the time in connected speech.

Intelligible <60% of the time in connected speech.



### Speech or Language Impairment Eligibility Form/Severity Rating Scales

## **Language Severity Rating Scale**

Language impairment: Any deviation in form of language (phonology, morphology and syntax), the content of language (vocabulary, semantics), and/or the functional use of language (pragmatics) perceived to be outside the allowable range for an individual's communication competence and not related to dialect or linguistic/cultural background. A language impairment adversely affects the child's educational performance as rected by his/her social interaction, behavior, emotional development, vocational performance,

#### communication, and/or participation in classroom activities as well as academic achievement. Compliance: Check when not raised as an area of suspected disability No language To find the presence of an impairment, ratings in assessment Standardized Assessments and Informal Assessments needed. MUST fall within the moderate or severe category. Compliance: Must fill, if "no assessment needed" is not checked No apparent Mild Moderate Severe problem A composite A composite A composite A composite standard score of standard score of standard score standard score of <1.0 standard 1.0 to 1.4 1.5 to 2 standard >2 standard **Standardized** deviation below standard deviations below deviations below **Assessments** deviations below the mean. the mean. the mean. • Language the mean. Language Language auotient or auotient or Language auotient or standard score of quotient or standard score of standard score at standard score of 71-77. or <70. ≥86. ≥17<sup>th</sup> percentile. 78-85. ≤2nd percentile. 3-7th percentile.

	Percentile.	• 8-16 <sup>th</sup> percentile.	o-/ percernie.	Szna percennie.
Informal Assessments	☐ No apparent problem	☐ Mild	☐ Moderate	□ Severe
<ul> <li>Criterion referenced</li> <li>Language or speech samples</li> <li>Structured observation</li> </ul>	The child's language skills are within his/her expected language performance range on an informal assessment instrument.	Informal assessment indicates a language deficit.	Informal assessment indicates a language deficit that usually interferes with communication.	Informal assessment indicates the pupil has limited functional language skills. Communication is an effort. Child is nonverbal and cognitive ability has not been ascertained.

Child's Name:	Date:	



## Speech or Language Impairment Eligibility Form/Severity Rating Scales

# Fluency Severity Rating Scale

Fluency impairment: Abnormal speech production with reference to continuity, smoothness, rate and effort.

□ Compliance: Check when not raised as an area of suspected disability				
□ No fluency assessment needed.	To find the presence of an impairment, ratings in <b>Description of Fluency</b> and <b>Informal Assessments</b> <u>MUST</u> fall within the moderate or severe category.			
☐ Compliance:	Must fill, if "no a	ssessment need	ed" is not check	ed
Standardized Assessments/ Description of Fluency	Fluency of speech does not draw attention to the child and is developmentally appropriate.	<ul> <li>Mild</li> <li>3-5% dysfluent syllables of total syllables spoken with two or more speech samples of at least 100 syllables.</li> <li>No secondary characteristics, frustration and avoidance behaviors present.</li> <li>Fluent speech predominates.</li> </ul>	<ul> <li>Moderate</li> <li>6-10% dysfluent syllables of total syllables spoken with two or more speech samples of at least 100 syllables.</li> <li>Secondary characteristics, frustration and avoidance behaviors may be present.</li> </ul>	■ Severe  • ≥11% dysfluent syllables of total syllables spoken with two or more speech samples of at least 100 syllables. • Secondary characteristics, frustration and avoidance behaviors are present, typically noticeable and distracting.
	<ul><li>No apparent problem</li></ul>	☐ Mild	☐ Moderate	□ Severe
Informal Assessments		Transitory dysfluencies are observed in specific situations.	Frequent dysfluencies are observed in many situations.	Habitual dysfluent behaviors are observed in a majority of situations.

Child's Name: Date:



## Speech or Language Impairment Eligibility Form/Severity Rating Scales

## **Voice Severity Rating Scale**

When a child is referred for a voice impairment, a medical referral is indicated.

**Voice impairment:** The absence or abnormal production of voice characterized by: deviant initiation/duration, tonal quality, pitch, loudness and/or resonance for age or speaking situation.

☐ Compliance: (	Check when not	raised as an ar	ea of suspected	disability
No voice assessment needed.	To find the presence of an impairment, ratings in <b>Description of Voice</b> and <b>Informal Assessments</b> <u>MUST</u> fall within the moderate or severe category.			
☐ Compliance:	Must fill, if "no a	ssessment need	led" is not checl	ced
	No apparent problem  Voice production	☐ <b>Mild</b> Inconsistent	☐ <b>Moderate</b> Persistent	□ Severe  Persistent
Description of Voice	quality (tension, resonance), pitch and intensity are not unusual.	noticeable differences in voice production quality (tension, resonance), pitch or intensity.	noticeable differences in voice production quality (tension, resonance), pitch or intensity.	noticeable extreme differences in voice production quality (tension, resonance), pitch or intensity.
	☐ No apparent problem	☐ Mild	☐ Moderate	
Informal Assessments		Voice difference including hoarseness, hypernasality, hyponasality, pitch or intensity is somewhat inappropriate for the child's age. Voice difference is of little or no concern to a physician.	Voice difference including hoarseness, hypernasality, hyponasality, pitch or intensity is significantly inappropriate for the child's age. Voice difference is of concern to a physician.	Voice difference including hoarseness, hypernasality, hyponasality, pitch or intensity is distinctly abnormal for the child's age. Voice difference is of concern to a physician.