SEVERE COMMUNICATION IMPAIRMENT ASSESSMENT

REFERRAL QUESTIONS

BACKGROUND

Parent/Teacher/Client Interview/Relevant Case History: Information gathered or information provided in the following areas:

- current daycare/educational or vocational status
- socioeconomic, cultural and/or linguistic background
- Summaries of previous services in accordance with all relevant legal and agency guidelines.
- Review of auditory, visual, motor, and cognitive status.
- Collection of relevant case history information, including behavioral and communication status, swallowing and feeding status, developmental status, and teacher and family perspectives on the problem.

ASSESSMENT FINDINGS

Hearing screening: Used to examine hearing adequacy overall and for purposes of ascertaining likely effects on the day’s results; follow ASHA guidelines.

Use of standardized and nonstandardized measures sensitive to cultural and linguistic diversity to assess listening, speaking, reading, writing, and thinking, as applicable to the individual client:

- Identification of severe communication impairment and possible co-occurring conditions (e.g., communication difference or swallowing disorder).
- Administration of non-standardized sampling or observation methods (e.g., antecedent-behavior-consequence (ABC) analyses) to interpret the messages apparently being conveyed by any maladaptive or self-injurious behaviors, and analyzing any other needs, social desires, or emotions the individual might be communicating through the maladaptive or challenging behaviors or other unconventional modes of communication.
- Assessment of the individual's resources for communicating and consideration of the need for augmentative and alternative communication (AAC) supports.
- Assessment of the individual's communication skills and other behaviors that affects activities and participation in functional activities.
- Assessment of contextual factors that influence the individual's communicative interactions and behaviors.
• Assessment of the individual's functional communication needs
• Evaluation of the effectiveness of prior intervention and supports.
• underlying structural/functional strengths and deficits in cognitive and executive function/self-regulatory factors

SUMMARY (INTERPRETATION)

Include information about:

  o Addressing the referral questions
  o Overall summary of findings including a summary of strengths and challenges
  o A diagnosis if applicable including the type and severity of the communication disorder or difference and associated conditions (e.g., medical diagnoses).
  o How the severe communication impairment affects the individual's activities and participation in specific educational, social, and vocational activities.
  o Contextual factors that serve as barriers to or facilitators of successful communication and participation in educational, social, and vocational activities.
  o If a referral question has pertained to whether a client’s disability meets the Vermont eligibility requirements for services in the schools, address this question in this section. A separate paragraph or subheading may be useful when addressing this issue.

RECOMMENDATIONS

Recommendations may include the following as applicable to the individual client:

  o The need for further assessment, or follow-up services to monitor cognitive-communication status and reduction of challenging behaviors to ensure appropriate intervention and support in individuals with severe communication impairments.
  o Intervention, contextual modifications or other activities, including more socially acceptable means for communication and self-regulation. If intervention is recommended, include information concerning frequency, estimated duration, and type of service delivery. In addition, state specific treatment approaches (if recommended), degree of family involvement, suggestions regarding reinforcements.
  o Augmentative and alternative communication or other assistive technology.
  o Documentation may include recommendations for social-interaction and message value interpretations; strategies for replacing challenging behaviors with more socially acceptable communication behaviors and other self-regulation abilities.
  o When progress should be reviewed
  o Any citations and/or handouts as needed

PROGNOSIS
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Adapted from 2010 ASHA Preferred Practice Patterns / SC