# ASSESSMENT in Speech-Language Pathology

## A Resource Manual



Kenneth G. Shipley • Julie G. McAfee

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### Kenneth G. Shipley Julie G. McAfee



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Assessment in Speech-Language Pathology: A Resource Manual, Fifth Edition

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WCN: 02-200-203

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Library of Congress Control Number: 2014959400

Book Only ISBN: 978-1-2851-9807-1

Package ISBN: 978-1-2851-9805-7

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Printed in the United States of America Print Number: 01 Print Year: 2015

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### PREFACE

The purpose of the Assessment in Speech-Language Pathology: A Resource Manual is to provide students and professionals with user-friendly information, materials, and procedures for use in the assessment of communicative disorders. The Resource Manual is a collection of resource materials applicable to a variety of assessment and diagnostic activities. The items included are practical and easy to use. Materials published previously, but unavailable in a single source, as well as materials developed specifically for this work are included.

New in this fifth edition:

- Expanded information on foundations of assessment, including HIPAA guidelines and instructions for determining chronological age
- New information and samples of individualized education plans (IEPs) and individualized family service plans (IFSPs)
- New content related to childhood apraxia of speech
- New content related to early intervention
- New content on autism that reflects current DSM-5 definition
- Dedicated chapters for autism and augmentative and alternative communication (AAC)
- New and updated chapter on voice disorders, with inclusion of laryngectomy and cleft lip and palate
- New content related to neurocognitive disorders that reflects current DSM-5 definitions
- Dedicated chapter for medical diagnoses associated with communicative disorders
- New chapter with quick reference materials and caregiver handouts
- Updated and new recommendations for published assessment tools, sources of additional information, online resources, and apps useful for assessment
- Digital version of the book, which is completely searchable for text, charts and tables, images, forms, and more
- Online access to downloadable forms

Assessment in Speech-Language Pathology: A Resource Manual contains many reproducible forms, sample reports, and quick-reference tables. Guidelines for interpreting assessment data for specific disorders are also included. The text is divided into four major sections. Part I highlights preparatory considerations. Psychometric principles are summarized, including standardization, validity, and reliability. Descriptions of norm-referenced testing, criterion-referenced testing, and authentic assessment are provided, including advantages and disadvantages of each approach. Preparatory considerations when working with multicultural clients are described as well.

Part II includes procedures and materials for obtaining assessment information, interpreting assessment data, and reporting assessment findings to clients, caregivers, and other

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professionals. It also includes case history forms and a wide range of interpretive information, interview questions for various and specific communicative disorders, and instructions and examples for reporting assessment information.

Part III provides a variety of materials and suggestions for assessing communicative disorders. Chapter 5 includes general assessment procedures, materials, and worksheets common to all disorders. The remaining chapters are dedicated to specific communicative disorders. Each chapter contains a variety of reference materials, worksheets, procedural guidelines, and interpretive assessment information specifically designed to address the unique characteristics of speech, fluency, language, voice, dysphagia, or neurologically based disorders.

Part IV is a quick-reference section covering hearing disabilities; medical conditions associated with communicative disorders; normal speech, language, and motor development; and tables, images, and caregiver handouts. Some tables and images from earlier chapters are duplicated in this section, but are presented in a caregiver-handout format to enhance the assessment process.

Each chapter includes a listing of "Sources of Additional Information." The Internet sites recommended were deemed appropriate and stable at the time of printing. Because the Internet is a dynamic environment, some sites may no longer exist or may have changed in content. We apologize for any frustration this may cause. New in this edition, apps appropriate for speech-language assessment are also recommended. Again, this is a burgeoning industry and continually changing. Consider those listed here a springboard into exploring apps for diagnostic purposes.

Prior editions contained a CD with supplemental material. We are pleased to now offer this content online. Forms found throughout the text are available in downloadable format to meet individual clinical needs. Many of the stimulus materials used for assessment are also available, including storyboard art, illustrations, and reading passages. These can be used in their digital form or downloaded and printed. Clinicians are encouraged to download content onto a flash drive or other portable storage device so that they have access to these files if they work in environments where Internet access is not readily available.

Assessment in Speech-Language Pathology: A Resource Manual can be a valuable resource for beginning or experienced clinicians. No other manual provides such a comprehensive package of reference materials, explanations of assessment procedures, practical stimulus suggestions, and hands-on worksheets and screening forms.

#### ABOUT THE AUTHORS

**Kenneth G. Shipley** is Professor of Communicative Disorders and Deaf Studies and Special Assistant to the Provost at California State University, Fresno. Previously, he served as Chair of the Department of Communicative Disorders and Deaf Studies, Associate Dean of the College of Health and Human Services, and the university's Associate Provost. During his career, he also taught at the medical school at the University of Nevada; served as a speech-language pathologist in the schools; taught in a classroom for children with severe oral language disorders; and practiced in various hospital, educational, and private-practice settings.

Dr. Shipley received his bachelor's and master's degrees from California State University, Los Angeles, and his doctoral degree from Wichita State University. He also completed the Management Development Program at Harvard University. Dr. Shipley has authored and co-authored a number of books, instructional programs, and assessment instruments in speech-language pathology; presented or co-presented more than 30 scientific papers at such conferences as Annual Conventions of the American Speech-Language-Hearing Association; and has had a number of articles published in various major journals in the field. He also coaches intermediate and senior high school girls' golf.

**Julie G. McAfee** received her bachelor's and master's degrees from California State University, Fresno. She has significant experience serving a variety of adult and child populations. Over the years, she has enjoyed working in acute care hospitals, rehabilitation hospitals, skilled nursing facilities, client homes, preschools, and elementary schools. She is currently in a private practice in the Bay Area of Northern California and serves clients of all ages and conditions. Mrs. McAfee is passionate about helping individuals obtain the highest possible level of communicative ability in order to improve their quality of life. She is grateful for the opportunity to stay abreast of changes in the field in all areas, and enjoys sharing her knowledge, research, and experience with other professionals and all who are affected by a communicative disorder.

Mrs. McAfee is also an accomplished flutist with a bachelor's degree in music performance. She has toured internationally and continues to perform in Northern California.

### ACKNOWLEDGMENTS

Our grateful appreciation is extended to our colleagues, friends, and family members who offered support and help with this project. M. N. Hegde, Deborah Davis, Celeste Roseberry-McKibbin, Mary Lou Cancio, Henriette Langdon, Lisa Loud, Barbara Papamarcos, Maxine Rucker, Jennifer Lowe, and Linda Gabrielson reviewed or assisted with portions of this text at various stages of preparation and provided helpful suggestions and comments along the way.

We also thank Kenneth McGrath, Laura Stewart, Deborah Bordeaux and Jack Pendleton at Cengage Learning for their guidance during the review and production process, with special thanks extended to Patricia Gaworecki for her substantial contributions. Our appreciation is extended to the professional reviewers who provided helpful feedback during the draft stages of this project. We are grateful to the many publishers and authors who allowed us to include their works in this book. Our families were especially encouraging and supportive during the development of this Resource Manual. We extend our love and appreciation to Peggy, Jennifer, Adam, Mathias, Janelle, and Timothy. This book could not have been written without your support.

#### **Reviewers**

Cengage Learning would like to thank the following reviewers for their valuable feedback throughout the revision process:

Paula S. Currie, Ph.D., CCC-SLP Southeastern Louisiana University Hammond, LA

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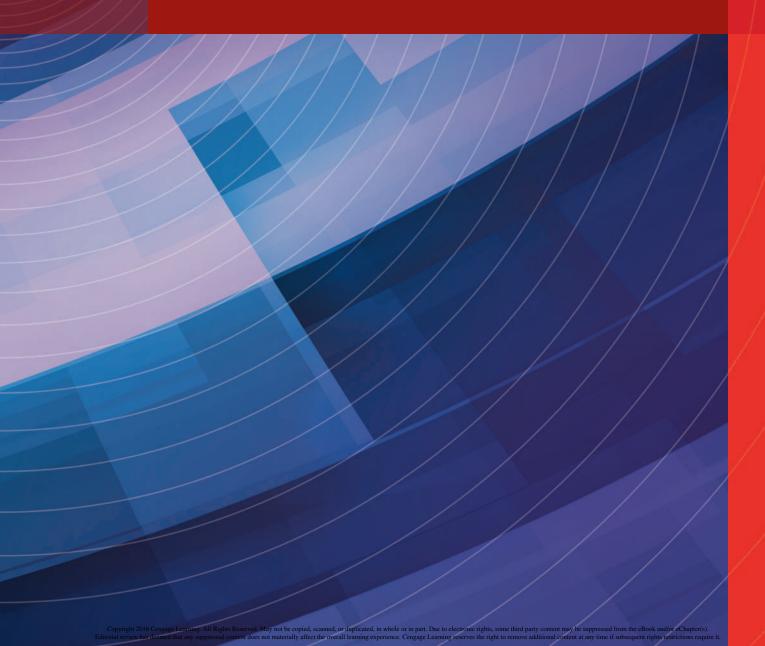
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## Preparatory Considerations





### FOUNDATIONS OF ASSESSMENT

#### Overview of Assessment

#### Assessment Methods

Norm-Referenced Tests Criterion-Referenced Tests Authentic Assessment Approach

#### Psychometric Principles

Validity

Reliability

Standardization

#### Standardized Test Administration

Determining Chronological Age Basals and Ceilings Standardized Administration, Modification, and Accommodation Understanding Standardized Test Scores

- Health Insurance Portability and Accountability Act (HIPAA)
- Code of Fair Testing Practices in Education
- Code of Ethics for Speech-Language Pathologists
- Concluding Comments
- Sources of Additional Information
- Chapter 1 Forms

Before venturing into the assessment process, it is important to gain an understanding of the underlying principles and philosophies of assessment in speech-language pathology. The foundations of assessment provide the framework for all clinical activities. This chapter will define assessment and describe the foundations of assessment that cause it to be meaningful and useful.

#### OVERVIEW OF ASSESSMENT

Assessment is the process of collecting valid and reliable information, integrating it, and interpreting it to make a judgment or a decision about something. It is the process of measuring communicative behaviors of interest. Assessment is synonymous with evaluation. The outcome of an assessment is usually a diagnosis, which is the clinical decision regarding the presence or absence of a disorder and, often, the assignment of a diagnostic label. Speech-language pathologists use assessment information to make professional diagnoses and conclusions, identify the need for referral to other professionals, identify the need for treatment, determine the focus of treatment, determine the frequency and length of treatment, and make decisions about the structure of treatment (e.g., individual versus group sessions, treatment with or without caregiver involvement). Ultimately, all initial clinical decisions are based on information derived from an assessment process.

For an assessment to be meaningful and useful, it must have foundational integrity. This integrity may be assured if each assessment adheres to these five principles:

- 1. *A good assessment is thorough*. It should incorporate as much relevant information as possible so that an accurate diagnosis and appropriate recommendations can be made.
- 2. A good assessment uses a variety of assessment modalities. It should include a combination of interview and case history information, formal and informal testing, and client observations.
- 3. A good assessment is valid. It should truly evaluate the intended skills.
- 4. *A good assessment is reliable*. It should accurately reflect the client's communicative abilities and disabilities. Repeated evaluations of the same client should yield similar findings, provided there has been no change in the client's status.
- 5. *A good assessment is tailored to the individual client*. Assessment materials that are appropriate for the client's age, gender, skill levels, and ethnocultural background should be used.

Completing an assessment involves gathering relevant information, assimilating it, drawing conclusions, and then sharing the findings and recommendations. We have summarized the process by providing this overview of seven steps the clinician should take in completing an assessment:

- 1. Obtain historical information about the client, the client's family or caregivers, and the nature of the disorder.
- 2. Interview the client, the client's family or caregivers, or both.
- 3. Evaluate the structural and functional integrity of the oralfacial mechanism.