

SCHOOL DISTRICT No. 62 (SOOKE)

STUDENT SUPPORT SERVICES

AT JOHN STUBBS ELEMENTARY SCHOOL

301 ZEALOUS CRESCENT, VICTORIA, B.C. • V9C 1H6

TELEPHONE/FAX: (250) 478-4494

SPEECH-LANGUAGE THERAPY REPORT

NAME: Jessie Weir

REPORT DATE: May 2002

INTERVENTION AND PROGRESS:

Jessie finds it easy to use his S sound in short sentences with me. He is not clenching his teeth together when he uses his new S sound anymore, but he is still not hearing his incorrect pronunciations in rapid conversation.

We have continued to work on the R sound. He is now using it correctly in most R blend words and in some words with ER at the end of words. We have been playing board games with the R at the beginning of words and he pronounces the R very nicely unless there is a rounded vowel after the R. ex: robot, rose, roll. With these words, I remind him to smile and then make his lips into a circle.

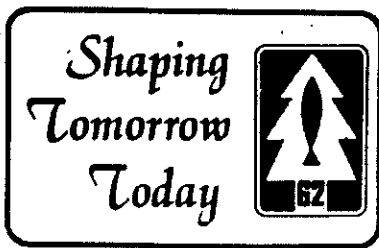
RECOMMENDATIONS:

Continue to play the board games that I have sent home for the R sound and go over the imitation sentences for the practice of S. I will review his speech in the fall to determine if he needs to remain on my therapy caseload.

A handwritten signature in cursive script that reads 'Carol George'.

Carol George, M.Sc.
Speech-Language Pathologist

A handwritten signature in cursive script that reads 'J. Willemott'.



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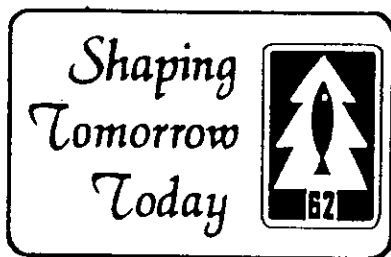
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Carol George, M.Sc.
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Telephone: (250) 478-4494 • FAX: (250) 478-4494

SPEECH-LANGUAGE THERAPY REPORT

NAME: Jessie Weir

REPORT DATE: May 2001

INTERVENTION AND PROGRESS:

We have continued to work on the S sound in short sentences and in conversation. If Jessie concentrates, he now finds it easy to use the correct S sound. He is starting to use it automatically, some of the time in regular conversation, after we have been working on it in short sentences, during therapy.

We have started working on the R sound in R blend words (greasy, great, green, cream, cry) and at the beginning of some words (race, recess, ready, really). He can make a very nice R if he keeps the corners of his mouth up in a smile rather than rounding them as in the letter O. It also helps if he holds the R sound for a few seconds (rrrrrecess)

RECOMMENDATIONS:

I will review Jessie's speech next fall to determine whether he will need to remain on my therapy caseload. During the summer you may want to find some phrases that he uses all of the time (Is it time for supper?) and have him use his new S sound when he says these phrases.

Carol George, M.Sc.
Speech-Language Pathologist

A handwritten signature in cursive script, appearing to read "J. Wilmett".



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301 Zealous Crescent, Victoria, B.C. • V9C 1H6
Telephone: (604) 478-4494 Fax: (604) 478-7318

SPEECH-LANGUAGE THERAPY REPORT

NAME: Jessie Weir

REPORT DATE: May 2000

INTERVENTION AND PROGRESS:

We have been working on the S sound since January. Jessie can now use this sound correctly in single words and short phrases. We have just started working on this sound using simple pattern books (Clifford).

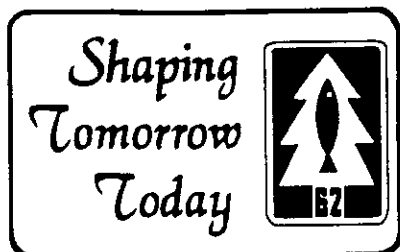
He still needs to hear a model before he remembers to use his new S sound, but it is becoming easier for him to say it right after he hears it.

RECOMMENDATIONS:

I will review Jessie's speech next Fall to determine whether he needs to remain on my therapy caseload. It may be helpful for him to continue to play the S games until then, so that he doesn't forget what he has learned so far.

Carol George, M.Sc.
Speech-Language Pathologist

RR



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301 Zealous Crescent, Victoria, B.C. • V9C 1H6

Telephone: (250) 478-4494 • FAX: (250) 478-7318

September 27, 1999

Mr. & Mrs. Weir
4755 Cardsview Terrace
Victoria, BC
V9C 4C9

Dear Mr. & Mrs. Weir

We received a speech and language referral for your child, Jesse. You will be contacted once a Speech and Language Screening/Assessment has been completed.

To assist us, please phone us at 478-4494 if any other speech or hearing professionals or agencies have seen your child. In addition, please request from these professionals/agencies that a copy of their report be sent to us at the above address.

For example, your child might have been seen by:

- Capital Regional District (CRD) Speech and Hearing Clinic
- Victoria Hearing Clinic, Glendale Lodge
- G.R. Pearkes Centre for Children
- Special Services of other School Districts
- Physicians: Ear-Nose Throat, Allergists
- Another Speech Therapist in our School District
- Others

If you have any questions or concerns regarding the speech and language referral, please contact me at 478-4494.

Sincerely,

Carol George

for Carol George, M.Sc.
Speech-Language Pathologist (C)

CG:hm



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Telephone: (250) 478-4494 • FAX: (250) 478-7318

INITIAL SPEECH-LANGUAGE EVALUATION PROFILE

Name	: WEIR, Jesse	Phone	: 478-5873
Address	: 4755 Cardsview Terrace Victoria, BC V9C 4C9	D.O.B.	: 94/09/18
		Age	: 5 years
School	: Hans Helgesen	Grade	: K
		Teacher	: Mr. G. Skala
Clinician	: Carol George		
Date(s) Seen:	September 18, 1999	Date of Report	: 99/09/29

INITIAL DIAGNOSIS:

Developmental (1) Within normal range for articulation

These areas were not formally assessed: language, voice, fluency/rate.

REFERRAL STATEMENT:

Jesse was referred for a speech-language assessment by his classroom teacher, G. Skala.

BACKGROUND INFORMATION:

Jesse was seen for speech therapy by Laura Paterson at the Esquimalt Health Unit from November 1998 to February 1999. She felt that his overall speech intelligibility had significantly increased.

ASSESSMENT:

Response to test situation:

Jesse was a good worker. He tried to pronounce all of the sounds that I asked him to say.

Administration of this test revealed errors in the following positions in words:

SOUND:	SUBSTITUTION:	WORD POSITION:**	EXAMPLE:
s	th	all	houth for house
z	th	all	buth for buzz
l	w	all	wift for lift
th	f	I	fumb for thumb
r	w	all	cawots for carrots

(*Initial, Medial, Final)

The Oral Peripheral Exam:

An informal assessment of the tongue, lips, jaw and teeth revealed no significant anatomical or functional problems for speech.

REMARKS:

Jesse was pronouncing the /l/ and /r/ sounds correctly, at the beginning of some words, during a conversation. He is pronouncing the voiced /th/ sound (that, feather, bathe) correctly in all word positions and the voiceless /th/ (teeth, toothbrush) correctly in the middle and at the end of words. He was easily able to produce the /s/ sound when I told him to "keep the pink pig (his tongue) behind the white fence (his teeth)." All of the sounds that he is having difficulty with are within the normal range for children his age, however, since he has had previous therapy I will monitor his progress.

RECOMMENDATIONS:

Because his speech errors seem to be self correcting, I am putting Jesse on my review list. This means that I will see him again in January, to reassess his progress.

The test scores reported in this report reflect the student's performance on the days tests were administered. The results should be interpreted with caution since students, especially those under 8 years of age, may experience considerable change. Test results are outdated after 12 months and interpretation is best realized with repeated testing over time that permits an established pattern.

If you have any concerns about this report please contact me at 478-4494.

Carol George



Child, Youth and Family Health ♦ Building Partnerships for Better Health ♦ Prevention Services ♦ Speech Program
♦Tel: (250) 360-5600 ♦Fax: (250) 360-5605 ♦

CONFIDENTIAL

SPEECH-LANGUAGE DISCHARGE REPORT

NAME:	WEIR, Jesse	PHONE:	478-5873
C.A.:	4:8	ADDRESS:	4755 Cardsview Terrace
D.O.B.:	September 18, 1999		Victoria, BC V9B 5B4
PARENTS:	Irene/Bill	PHN:	9897 939 071

May 4, 1999

BACKGROUND

Jesse's communication skill development has been followed by the Capital Health Region (CHR) Speech Clinic since his initial evaluation on May 15, 1998. At that time, Jesse presented with mildly delayed articulation skills. Home program suggestions and materials were provided and it was recommended that Jesse attend a review of his speech sound development in six months' time.

Jesse attended a speech-language review on November 6, 1998, when he presented with an articulation delay for which treatment was recommended.

TREATMENT RESULTS

Jesse attended 30-minute treatment sessions twice weekly from November 10, 1998 to January 14, 1999, and once weekly from January 28 to February 25, 1999. The following were the levels attained for target sounds.

1. S-Blends had emerged into Jesse's spontaneous speech.
2. /k/ initial word position was emerging into Jesse's spontaneous speech.
3. Jesse was able to correctly produce /l/ initial word position, during structured conversational tasks 100% of the time and approximately 60% of the time during spontaneous conversation.
4. The "sh" sound at the beginning of words had emerged into Jesse's spontaneous speech.
5. R-Blends were emerging into Jesse's spontaneous speech.

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A package of L-Blend materials was provided upon discharge to encourage facilitation of those sounds into Jesse's spontaneous speech.

Jesse's overall speech intelligibility had significantly increased and Mrs. Weir indicated many friends, family members and his preschool teacher had commented on the improvement in Jesse's speech. Mrs. Weir felt Jesse could be discharged from the Speech Clinic and this clinician was in agreement. Activities for increasing Jesse's phonemic awareness skills (i.e., rhyming, alliteration) were discussed with Mrs. Weir who was in agreement with the following recommendations.

RECOMMENDATIONS

1. Discharge Jesse from the CHR Speech Clinic.
2. The family to contact the CHR Speech Clinic should they have any questions, concerns or require additional materials prior to Jesse starting kindergarten.
3. Once Jesse starts kindergarten, any questions or concerns regarding his speech and language development are to be addressed by the school Speech Language Pathologist.



Laura Paterson, MSLP (C) (R)
SPEECH-LANGUAGE PATHOLOGIST

LP: kc

cc: Dr. G. Urban
Public Health Nurse, Western Communities
Mr. and Mrs. Weir



Child, Youth and Family Health ♦ Prevention Services ♦ Speech Program
♦ Tel: (250) 360-5600 ♦ Fax: (250) 360-5605 ♦

CONFIDENTIAL

SPEECH-LANGUAGE SCREENING REPORT

NAME:	WEIR, Jesse	PHONE:	478-5873
C.A.:	3:7	ADDRESS:	4755 Cardsview Terrace
D.O.B.:	September 18, 1994		Victoria, BC
PARENTS:	Irene/Bill		V9C 4E9

May 15, 1998

INTRODUCTION

Jesse was seen for an initial speech-language evaluation on May 15, 1998 at the Capital Health Region Speech Clinic. He was referred by his mother due to articulation concerns.

Mrs. Weir accompanied Jesse to the assessment and described him to be difficult to understand at times. Jesse attends both a pre-school and a daycare, whereupon he has been observed to get frustrated when his peers do not understand him. Mrs. Weir had no concerns regarding Jesse's expressive or receptive language skills.

Jesse reportedly had two ear infections before the age of one year, both of which were treated with antibiotics. Otherwise, medical history was unremarkable.

TEST RESULTS

Hearing

Mrs. Weir had no concerns in this area.

Oral-Motor Mechanism

A formal examination was not conducted, however structures and functions appeared adequate for speech.

Articulation

The *Structured Photographic Articulation Test - D (SPAT-D)* was administered to evaluate Jesse's ability to produce various speech sounds in single words. Jesse produced a number of substitutions for later developing sounds, which resulted in reduced speech intelligibility. These included the following.

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Esquimalt Health Unit

530 Fraser Street, Victoria, B.C. V9A 6H7

Sound	Substitution	Word Position (Initial, Medial, Final)	Example
k, g	t, d	Initial	tan for can
f	j, d	Initial, Medial	jish for fish
v	b, th	All	ban for van
th	f	Initial	fumb for thumb
s	j	Initial	joap for soap
sh	j, th	Initial, Medial	jop for shop
l	w	Initial, Medial	wamb for lamb

Jesse also reduced S-Blends (e.g. poon for spoon) and substituted /dr/ for many R and L Blends (e.g. drag for flag, dries for fries). Many of Jesse's sound substitutions were inconsistent in his spontaneous speech and he was observed to use some of the erred sounds correctly, indicating the emergence of these sounds. Jesse was highly stimuable for the erred sounds. Typically, for a child of Jesse's age (three years seven months), overall speech intelligibility should be approximately 81-90%. Jesse's articulation skills were observed to be mildly delayed.

Language

Jesse's language skills were not formally assessed, however a spontaneous language sample was obtained. Jesse demonstrated strong expressive language skills.

Voice and Fluency

Fluency and speech rate were normal, as were vocal quality, pitch and intensity.

IMPRESSIONS

Jesse, age three years seven months, presented with mildly delayed articulation skills resulting in reduced speech intelligibility. Prognosis for continued speech sound development was good as Jesse demonstrated the emergence of various erred sounds. As Jesse was highly stimuable for erred sounds, it was recommended that home practice suggestions be provided to encourage the acquisition of later developing sounds. It was also recommend that Jesse attend a review of his speech-language development in six months time to ensure continued development. Mrs. Weir was in agreement with the following recommendations.

RECOMMENDATIONS

1. Provision of Home Program materials for the family to work on at home.
2. Review Jesse's communication skills development in six months (November 1998). The Speech Clinic will contact the family closer to that time to schedule an appointment.

RECOMMENDATIONS (cont'd)

3. The family to contact the speech clinic should they have any questions or concerns, or should they require additional materials for home practice.

A handwritten signature in cursive script, appearing to read 'Paterson'.

Laura Paterson, MSLP (C) (R)
Speech-Language Pathologist

LP:wla

cc: Dr. G. Urban
Public Health Nurse, Western Communities
Irene & Bill Weir

Child, Youth and Family Health
Prevention Services
Speech Program
Tel: (250) 360-5600
Fax: (250) 360-5605

May 22, 1998

Irene & Bill Weir
4755 Cardsview Terrace
Victoria, B.C. V9C 4E9

Dear Mr. & Mrs. Weir:

I observed Jesse having difficulty saying the following speech sounds: f, k, g, sh, s, l, v and th. Some of these sounds are a little more difficult than others to say. However, we can get started with /f/, **S-blends and /sh/ in his words. Only work on** one sound at a time. Try working on that sound for about three weeks, then move on to another sound.

Please consider the following recommendations when practising speech sounds with Jesse:

- a) Set aside 10 - 15 minutes each day to do a speech activity.
- b) Choose one or two activities/games at a time (see attached sheets entitled *Picture Card Games to Play With...*).

To help Jesse in successful production of his /f/ sound, we can use these cues:

- ✧ use a mirror so he can see his lip position;
- ✧ cues for /f/ are: bite your bottom lip and blow a little air;
- ✧ say /f/ yourself, emphasizing the lip and teeth placements;
- ✧ when Jesse has the position, make short ones and long ones to practice;
- ✧ extend or shape the sound slowly into syllables (fe, fi, fo, fum);
- ✧ when Jesse has mastered the syllable level, move to simple words such as 'feet, fat, fan, four, five';
- ✧ it can be called by a catchy name (I call it the mad cat sound).

When working on "f" at the beginning of words, it is best to choose simple one syllable words first, such as fee, foot, fat, fan, farm, four, five, field.

.../2

*** Remember** to always call the "f" sound as it sounds and *not* by the alphabet name (*not* "eff"). This is very important, as children of this young age are beginning to focus on sounds in words in their speech. It tends to be far too confusing for them to mix orthographics (alphabet letters) on top of speech work.

Use the following sequence of stages with Jesse:

1. Warm up. "F" sounds on their own (do this at the beginning of *each* speech session).
2. Sounds in single words (first few sessions).
3. Words in phrases, e.g. I'm four, fat pig, my finger, number five.
4. Words in simple sentences, e.g. I want number four; I have my finger.
5. Words in recurring "f" phrases, such as:

I found the _____ *

Let's feed the _____ *

I see four _____ *

* = /f/ word

Hint: To move to the next sequence of stages, make sure Jesse is saying at least 19 out of 20 pictures correctly at the previous stage.

6. Words in longer sentences: There's a cow in the field; The fire is hot. I usually encourage the child to say a "little story about this picture" (which gives you a sentence).
7. Words in a short monologue. I usually put several (three or four) pictures down and have them make a funny story about the pictures. For example, "There is a fire engine in a field and I see four faces".

Remember when you are working at the word level, choose words to say that:

- ✧ are meaningful;
- ✧ Jesse can say all the sounds correctly in the word so it sounds accurate. (This may be difficult, as Jesse has a number of sound errors.) For example, a word choice like 'feather' is best avoided; use words such as 'fan, four, fin'.

Be aware that you are providing good, clear speech models.

At other times of the day, it is a good idea to try to focus on *what* Jesse is saying rather than *how* he is saying it. Thus, we try to minimize his self-consciousness or concern about his speaking ability.

Please use the same sequence of stages when practising S-blends and /sh/. Here are some helpful cues for getting started with S-blends and /sh/:

- ◆ Call /s/ a snake sound – “Close your teeth, hide your tongue.”
- ◆ Call /sh/ a quiet sound – “Bite your teeth, make round lips. This time, let’s make the sound *long!* Sssshhhhhh ...”

If you have any questions, feel free to call me at 360-5600.

Enjoy the activities!

Yours truly,

A handwritten signature in black ink, appearing to read 'Laura Paterson', written in a cursive style.

Laura Paterson, MSLP (C) (R)
SPEECH-LANGUAGE PATHOLOGIST

CT:wla
enclosures