

SPEECH OR LANGUAGE **RESOURCES, DEFINITION & CRITERIA**

Local Resources

Center for Hearing & Speech
9526 Manchester
St. Louis, MO 63119
314-968-4710

www.hearing-speechstlouis.org

Center's primary goal is to identify, treat, and prevent communication disorders by offering speech/language and audiology services to infants, children, and adults, whether or not they have the insurance and/or financial resources to afford these services.

Eardley Family Clinic for Speech, Language and Hearing

Fontbonne University
6800 Wydown Blvd.
St. Louis, MO 63105
314-889-1407

www.fontbonne.edu

Speech and language clinic provides evaluation and treatment in articulation phonology, language, voice, fluency, augmentative communication and associated communication disorders.

Good Shepherd School for Children

1170 Timber Run Drive
St. Louis, MO 63146
314-469-0606

www.goodss.org

Inclusive preschool and childcare center for all children ages 6 weeks to 6 years. Therapies include speech/language, occupational, physical and developmental.

Miriam School

501 Bacon Ave.
Webster Groves, MO 63119
314-968-5225

www.miriamschool.org

Offers services and specialized therapy to children ages four through grade 8 with

learning disabilities, behavior disorders, attention deficit disorder, speech/language disorders and fine and gross motor delays. Consultation services to schools and individual families.

Missouri First Steps Program

1215 Fern Ridge
Parkway, Suite 101
St. Louis, MO 63141
314-453-9203

www.dese.mo.gov/divspeced/FirstSteps/

Offers coordinated services and assistance to young children with special needs and their families. Designed for children, birth to age 3, who have delayed development or diagnosed conditions that are associated with development disabilities.

Ranken-Jordan Pediatric Specialty Hospital

11365 Dorsett Road
Maryland Heights, MO 63043
314-872-6400

www.rankenjordan.org

Provides 24-hour, sub-acute nursing care, rehabilitation and treatment for children with complex medical needs ages 2 weeks to 18 years. On-site parent training, respite care, speech-language and other therapy.

St. Louis Children's Hospital

400 S. Kingshighway
St. Louis, MO 63110
314-454-6154

www.stlouischildrens.org

Evaluation and treatment for speech-language disorders.

St. Luke's Hospital Team for Cleft Palate and Oral-Facial Speech Problems

232 S. Woods Mill Road
St. Louis, MO 63017
314-576-2470

www.stlukes-stl.com

Parent Handbook — Section IV

Multidisciplinary group helps children, teenagers and adults who have cleft palate and/or oral-facial speech problems.

Speech-Language-Hearing Clinic
St. Louis University
Department of Communication Disorders
3750 Lindell Blvd.
St. Louis, MO 63108
314-977-3362
www.slu.edu/x12349.xml

Provides services to children ages 3-5, with communication disorders. The center is a place where children learn to communicate in a group setting.

United Cerebral Palsy (UCP) Heartland
13975 Manchester Road
Manchester, MO 63011
636-227-6030
www.ucpheartland.org

Provides parent-infant program, early learning center, home and center-based supports, occupational, physical and speech-language therapy.

Walker Scottish Rite Clinic for Childhood Language Disorders
3632 Olive Street
St. Louis, MO 63108
800-358-5656
www.srclinic.org

Serves children under the age of 6 years old with evaluation and therapy at no charge.

State Resources

Missouri Speech-Language-Hearing Association
MSHA Central Office
2000 E. Broadway, PMB 296
Columbia, MO 65201-6092
888.729.6742
www.showmemsha.org

National Resources

American Speech-Language-Hearing Association (ASHA)
www.asha.org

Cleft Palate Foundation
www.cleftline.org

Council for Exceptional Children
Division for Children with Communication Disorders
www.cec.sped.org

Stuttering Foundation of America
www.stutteringhelp.org

Online Resources

Family Village
<http://www.familyvillage.wisc.edu>
Library (click on first letter of a specific disability in the card catalog to go to resources)

National Dissemination Center of Children with Disabilities (NICHCY)
<http://nichcy.org>

Support Group

SPEAK (St. Louis Parent Extension for Apraxic Kids)
www.speechville.com/communication-station/missouri-speak.html

Speech, Language & Communication

Speech:

- Oral expression of language
- Complex set of motor activities
- Speech sounds
- Includes articulation, voice and fluency

Language:

- A shared system of verbal symbols and rules
- Language rules and symbols are arbitrary, creative and learned

Communication:

- The function of both speech and language
- Can occur without the use of speech or language

Helpful Hints

Parent Handbook — Section IV

Sometimes speech and language skills are not separated but considered globally as communication skills. In order to develop communication, the child must have:

- Reason to communicate
- Something about which to communicate
- Method of communication
- Someone with whom to communicate

It is also important to remember the basic reasons to communicate:

- Communication of needs and wants
- Information transfer
- Social closeness
- Social etiquette

All children communicate in some way. Sometimes inappropriate behavior is an attempt to communicate. Each person wants to choose his or her preferred mode or style of communication. A primary goal may be to develop increasing complex or age-appropriate communication skills.

Remember that no one wants to use his or her best communication abilities all the time. Acknowledging the content of your child's message rather than "correcting" the method will reinforce communication attempts and build social closeness.

DEFINITION AND ELIGIBILITY CRITERIA FROM APPENDIX A OF THE MISSOURI STATE PLAN

Speech or Language Impairment Definition

“Speech or Language Impairment” means a communication disorder, such as stuttering, impaired articulation, a language impairment or a voice impairment, that adversely affects a child’s educational performance.

Criteria for Initial Determination of Eligibility – Language

A language disorder is present when:

A. The child consistently exhibits inappropriate use in any of the structures of language (e.g., morphology, syntax, semantics, and pragmatics) as measured by language sampling or other clinical tasks;

B. The child’s language functioning is significantly below the child’s abilities as measured by two (2) or more standardized language assessments. Significantly below is defined as two (2) standard deviations below the mean for children 3 to 5 years of age but not eligible for kindergarten; one standard deviation below cognitive ability for children who are kindergarten age eligible through age 8 and 1.5 standard deviation below cognitive ability for children who are age 9 and older;

C. The language disorder adversely affects the child’s educational performance;

D. The language disorder is not a result of dialectal differences or second language influence;

Professional Judgment

A child may also be deemed eligible if the evaluation documents through formal and informal assessment that a language deficit is present even though the standard scores do not meet the criteria in B above. In such cases, sufficient data must be presented in the evaluation report to document the existence of the language deficit.

Criteria for Determination of Initial Eligibility - Sound System Disorder

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A Sound System Disorder, which includes articulation and/or phonology, is present when:

- A. The student exhibits a delay of correct sound production based on accepted normative data. The child's sound system is evaluated based on a single word test and/or a sentence/phrase repetition task and a connected speech sample;
- B. Consideration must be given to the type of error recorded (substitutions, omissions, distortions and/or additions). These errors may be described as single sound errors or errors in phonological patterns;
- C. A Sound System Disorder may also be present if multiple errors in the child's speech compromise intelligibility and/or listener perception even though the recorded errors are considered within normal developmental guidelines;
- D. The Sound System Disorder adversely affects the child's educational performance;
- E. The sound system disorder is not a result of dialectal differences or second language influence.

The evaluation report must include sufficient data to document the existence of the Sound System Disorder and if, during the collection and analysis of the data, the child's language abilities appear to be impaired, a language evaluation will need to be completed prior to a designation of language disorder.

Criteria for Initial Determination of Eligibility - Fluency

A fluency disorder is present when:

- A. The child consistently exhibits one or more of the following symptomatic behaviors of dysfluency:
 - 1) Sound, syllabic, or word repetition;

- 2) Prolongations of sounds, syllables, or words;

- 3) Blockages; or,
- 4) Hesitations;

- B. The child's fluency is significantly below the norm as measured by speech sampling in a variety of contexts. A significant discrepancy is defined as five (5) or more dysfluencies per minute or a 10 percent dysfluency rate and distracting to the listener;

- C. The fluency disorder adversely affects the child's educational performance

Professional Judgment

A child may also be deemed eligible if the evaluation documents through formal and informal assessment that a fluency deficit is present even though the criterion in B above is not met. In such cases, sufficient data must be presented in the evaluation report to document the existence of the fluency deficit.

Criteria for Initial Determination of Eligibility - Voice

A voice disorder is present when:

- A. The child consistently exhibits deviations in one or more of the parameters of voice: pitch, quality, or volume;

- B. The child's voice is discrepant from the norm as related to his/her age, sex, and culture and is distracting to the listener;

- C. The voice disorder is not the result of a temporary problem such as: normal voice changes, allergies, colds, or other such conditions;

- D. The voice disorder adversely affects the child's educational performance.