

PLEASE RETURN TO THE SPEECH LANGUAGE PATHOLOGIST BY:

Language/Cultural Background:

TEAM Input: Fluency

Date:

Student:

Team Member(s):

Grade/School:

**Skills related to a student's voice are aligned with Common Core State Standards: SL.1,4,6.**

Your observations of this student's ORAL communication skills will help determine if there is a fluency problem which adversely affects the student's ability to communicate appropriately in school learning and/or social situations.

Fluency refers to the typical rate and rhythm of connected speech. When disruption occurs, this is known as disfluency/stuttering

	Yes	No
1. Check any of the following behaviors that you have noticed in this student's speech	<input type="checkbox"/>	<input type="checkbox"/>
a) Revisions (starting and stopping and starting over again)	<input type="checkbox"/>	<input type="checkbox"/>
b) Frequent interjections (um, like, you know)	<input type="checkbox"/>	<input type="checkbox"/>
c) Phrase repetitions (and then, and then)	<input type="checkbox"/>	<input type="checkbox"/>
d) Pauses or hesitates whole speaking (He...went to the car")	<input type="checkbox"/>	<input type="checkbox"/>
e) Word repetitions (we-we-we)	<input type="checkbox"/>	<input type="checkbox"/>
f) Part word repetitions (t-t-t-take; mo-mo-mom)	<input type="checkbox"/>	<input type="checkbox"/>
g) Draws out certain sounds while speaking (noooooobody)	<input type="checkbox"/>	<input type="checkbox"/>
h) Blocks (noticeable tension/no speech comes out)	<input type="checkbox"/>	<input type="checkbox"/>
i) Unusual movements or characteristics (tension, head nods, eye movements, pitch changes)	<input type="checkbox"/>	<input type="checkbox"/>
j) Abnormal breathing patterns	<input type="checkbox"/>	<input type="checkbox"/>

Other:

Please indicate range for 2 thru 8.

Most of the time (~80%)

Sometimes (~50%)

Never (0%)

2. Do you listen to HOW the student is speaking rather than WHAT is being said?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does this student avoid speaking in the classroom?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Do classmates react to this student when he/she is disfluent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. If so, does this student have a negative response to the peers reaction? (i.e. stop talking, more fluency, withdraws)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Do you feel that student's communication skills interfere with social interactions and peer relationships?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does the speaking rate of the student interfere with intelligibility of speech?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the student's disfluency impact his/her classroom performance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Do you think this student is aware of his/her fluency problem?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have any additional observations?