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ABSTRACT

This report describes a 12-week practicum that was designed to decrease the number of special education referrals of at-risk kindergarten students for developmental delays in communication through a direct, in-class, social language program. The program was implemented in five kindergarten classrooms and used developmentally appropriate, collaborative, and inclusive practices in combination with increased parental education and involvement to increase communication skills in the kindergarten students. This was accomplished by providing a direct service program in the classroom to address the problem of poor or delayed communication skills. A portable amplification system was used to increase the communication teachers' volume and intelligibility during lesson presentations. Direct language services were provided by having students discuss problems presented in stories and asking students to brainstorm ideas for solutions. Additional language opportunities were also provided such as dramatic play situations to allow children to role play and practice social language skills. Books were used to model language skills in context and discuss problems in typical school situations. After the program, only 4 of the 22 children who appeared to require a referral before the program for poor language skills continued to demonstrate such a need. (Contains 47 references.) (CR)

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Working from Within the Classroom:
Improving the Delivery of Speech-Language Services
to Kindergarten At-Risk Students

ED 420 967

by
Carol Ann Sanford
Cluster 78

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A Practicum I Report Presented to
the Ed.D. Program in Child and Youth Studies
in Partial Fulfillment of the Requirements
for the Degree of Doctor of Education

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1997

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APPROVAL PAGE

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Approved:

August 4, 1997
Date of Final Approval of Report

Roberta S. Schomburg
Roberta Schomburg, Ph.D. Adviser

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This practicum project is dedicated to the memory of Barbara C. Jordan, 1936-1996.

We have been the instrument of change in the past. We know what needs to be done. We know how to do it.

[We need] an economy where [a person] can go to a public school [and] learn the skills that will enable him or her to prosper.

This country can ill afford to continue to function using less than half its human resources, less than half its kinetic energy, less than half its brain power . . . [T]he 20th century will not close without the presence of women being keenly felt.

Keynote Address
July 13, 1992
Democratic National Convention

A special thanks to Dr. Roberta Schomburg, under whose personal guidance and advisement this project was undertaken.

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Abstract

Working from Within the Classroom: Improving the Delivery of Speech-Language Services to Kindergarten At-Risk Students. Sanford, Carol A., 1997: Practicum Report, Nova Southeastern University, Ed.D. Program In Child and Youth Studies. Speech-Language Pathology/Kindergarten Screening/Whole Language Therapy/Inclusion/Collaboration/Social Language Program/Developmental Delays/At-Risk Kindergartners.

This practicum was designed to decrease the number of special education referrals of at-risk kindergarten students for developmental delays in communication through a direct, in class, social language program. This program was designed and implemented in 5 kindergarten classrooms by the writer. Pre and post data was collected by the communication teacher and the classroom teacher.

The writer developed a classroom communication rating scale to assist the teachers in recognizing and analyzing the speech and language skills of their students. A parent survey was designed to monitor the parent involvement portion of the program.

Analysis of all data revealed that the social language program was effective for decreasing language difficulties but was not effective for articulation deficits. Continued teacher training in the recognition of children's communication skills in the classroom was needed. The program was effective and will be continued.

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Chapter 1 Introduction

Description of Community

In the rolling wooded hills 22 miles east of a major metropolitan city lies the writer's rural independent school district. The close knit community of 2,500 had a 100 year history, and approximately 40% of the teachers lived in the area. The district's boundaries included 82 square miles which was situated at the apex of three counties. An increase in available housing had led to higher enrollment as more families moved out of the city into the surrounding small towns. There had also been an increase in the number of businesses in the past year (3 restaurants and 5 stores) with the promise of a large discount store to be built three miles west of town. The community had raised funds to build a new library on donated property on the main street and the Army Corps of Engineers constructed a small recreational lake five miles south of the school district. The town expected an influx of new businesses to support the accompanying fishing and recreational activities and a corresponding wider tax base to increase funding to the schools despite recent federal cutbacks.

The district served 1,800 students and had a 28% minority population of which 79% was Native American. It employed 94 teachers assigned to the elementary (K-3), intermediate (4-6), junior high (7-8), and high school (9-12). Sixty percent of the staff commuted from surrounding towns. The special education department consisted of 13 special education teachers, (6 for learning disabilities, 4 for mental retardation, 1 for hearing impairment and 2 for communication disorders) and one half-time director. Students represented a

wide variety of culturally and linguistically diverse family structures and socioeconomic levels (50% qualified for the free or reduced meal program) and 5% were in foster care placements with local families. Located three miles north of the board of education was the tribal headquarters and lands of the dominant Native American tribe. Native American children in the district represented a heritage of 15 distinct Indian tribes with federal housing for their families within walking distance of all school buildings.

Description of Work Setting

The elementary school had a population of 500 students from grades K-3. The building was built in 1953 as a high school with additions in 1980 (cafeteria), 1985 (K and 1st wing), and 1994 (multimedia center). Classroom size was held at 22 and there were 3 teacher assistants and 1 Indian educator assistant. Additional professional staff was used for the computer lab, art, music, physical education and library classes. Special needs classes were available for mental retardation, learning disabilities and communication disorders. Enrollment for the 1996-97 school year had increased by 10% over 1995-96 which required the addition of a new kindergarten, first and third grade teacher. A higher percentage of new students enrolled this year had been placed in special service programs at their previous schools and 30% of these children required medication for attention deficit disorder.

Writer's Role

The writer was employed as the speech-language pathologist at the elementary school, grades K-3, with an office located in the multimedia

center. The office had been divided into two rooms and was shared with the speech-language pathologist (SLP) for the intermediate school (4-6th grade). The elementary SLP position involved the provision of services to 60 students each week as mandated by the state department of special education. Specifically, this included the evaluation and remediation of developmental delays and language learning disorders, periodic screening of kindergarten students, and collaboration with classroom teachers. These services included preschool students from the community, the Head Start and the county Early Intervention program.

The 1996-97 school year marked the third year of the writer's employment in this school district and 13 years experience as a speech-language pathologist. Prior to employment in this educational setting, the writer had worked in private practice and had provided supervisory services to rehabilitation companies for childhood and adult populations in medical facilities. In addition to certification in education as a master's level specialist in communication disorders, the writer had obtained certification and experience in early childhood and as a primary Montessori directress. The professional title of "speech-language pathologist" was not used by this writer in the work setting. Instead, the writer referred to the position as the "communication teacher" (Dodge & Mallard, 1992, p 131.) as this designation was a better description of both roles assumed by communication disorders specialists in educational institutions.

The practicum project was originally to be implemented in one half day

kindergarten classroom. However, the kindergarten teacher wanted the program in her morning and afternoon classes. The other two kindergarten teachers and a first grade teacher also requested the program. Therefore, the project was implemented in five kindergarten classes and one first grade class.

Chapter II Study of the Problem

Problem Statement

The problem to be solved in this practicum was to address the high percentage of kindergarten students who arrived at school without the communication skills needed to succeed in the academic setting and required referral for special services . This had created a dilemma for the classroom teachers to meet the state mandated curriculum requirements and the developmental needs of each child. The classroom teachers turned to the communication specialist for assistance with this problem.

Problem Description

A large number of students were identified through the kindergarten screening process each year as "at-risk for academic failure" due to poor communication skills, and required evaluation for potential placement in special education to remediate these deficits. This resulted in several problems for the communication teacher due to limited resources available to evaluate and service large numbers of kindergarten students. The main difficulty was due to the fact the evaluation process can take anywhere from one month to one year due to increased federal regulations and paperwork. This procedure ultimately defeated the goal of providing special services to reduce or eliminate the communication difficulty as quickly as possible, and increase educational performance.

In the past, one of the solutions had been to hire more special service personnel. Hiring additional speech-language pathologists increased the

number of students who received services; however, there was a national shortage of certified SLPs willing to work in rural school systems. Also, the district had limited funds available to hire additional speech-language pathologists and experienced difficulty locating staff to fill its two full-time primary positions.

A large number of students moved into the district already qualified for special services. This was due to the reputation for quality services provided by the special education staff and the lack of qualified personnel available in the surrounding schools. In addition to these variables, the district had a large culturally and linguistically diverse minority population. Twenty-eight percent of the students were Native Americans which reflected an increase of 9% in the past two years.

There were additional factors to be considered when looking at the mandated child find screening programs in school systems. Although children needed to be identified as quickly as possible, it was not always an easy task to determine which children required and would benefit from services (Charlesworth, 1989, Fazio, Naremore & Connell, 1996). Initial screening results may not reflect the child's ability to communicate due to lack of familiarity with the setting, the type of questions asked, or exposure to mainstream communication expectations. However, delaying instruction in the language skills needed to succeed in the academic environment might have increased the number of students requiring services from special education in later grades. The problem faced by the communication teacher was to deliver services in a

timely manner to all who were in need within the limited resources of the facility.

Problem Documentation

Evidence for this problem was obtained by analyzing kindergarten screening results for the past three years, playground and classroom observations, teacher, counselor and parent reports.

The results of kindergarten screening for the past three years revealed a consistent pattern of poor or delayed communication skills (21 of 92 in 95-96, 18 of 102 in 94-95, and 18 of 100 in 93-94) in the writer's elementary school. When parents of these at-risk students were contacted and permission to test for special education was requested the reaction was often negative and hostile. It became apparent that the traditional procedure used by speech-language pathologists for screening and referral needed to be revised. A new procedure was implemented in 94-95 in which the fall kindergarten screening was used as a baseline with a rescreening of at-risk students in January. Only those students with continued at-risk results were placed on the list to refer. Results were provided to parents during both screenings in writing and by telephone contact. With additional preparation, the requests for evaluation were accepted by a larger number of parents. Unfortunately, the number of students who required referral to special services did not decline after five months in the school setting and at-risk students continued to indicate poor or delayed communication skills. Additional efforts by the communication teacher needed to be implemented to address this problem.

Playground and classroom observations by the communication teacher

revealed that 9 of 10 students used ineffective communication skills to resolve problems, to tell stories, to request information, to make demands, or to ask for clarification from peers and teachers. During activities such as “show and tell” which required students to spontaneously speak in front of their peers, the at-risk students required constant prompting from their teacher to produce one or two complete, intelligible sentences. They also required consistent one-on-one assistance from teachers and peers to follow directions and stay on task. These students interrupted the teacher’s lessons with off-topic remarks and repeated requests for assistance while the teacher was working with another child. A large number of these students exhibited severe articulation disorders which decreased the ability of peers and teachers to understand their messages. Frustration was frequently seen as they tried to describe an event from home or ask for assistance with a problem they were having in class or on the playground.

Classroom observation reports from kindergarten teachers indicated that 8 of 10 students displayed increased difficulty following directions, using complete sentences, resolving problems, or being socially appropriate with peers or the teacher. The teachers expressed concern over the at-risk child’s ability to keep up with peers and immature behavior. These students required constant supervision and were frequently fighting with peers in the classroom and on the playground. They were also defiant and frequently required intervention services of the counselor. The teachers also noted that most of the students recommended for retention each year were students with

communication difficulties.

Data analysis of disciplinary referrals to the counselor revealed that 9 of 10 at-risk students identified in the kindergarten screening were behavioral problems in the classroom. Multiple requests by classroom teachers for disciplinary intervention by the counselor with these students was needed as inappropriate and hostile verbal behaviors were displayed with peers and teachers. Poor problem solving and a lack of knowledge regarding behavioral expectations in the educational setting were suspected.

During intake interviews, 7 of 10 parents of students identified as at-risk reported that they were unaware their children had any difficulty with communication and they did not understand how language skills and academics were connected. A program for parental involvement and education was needed to help parents confidently expand their role as their children's first teacher. Unfortunately, parental involvement was not easy for many families. Many of the school's parents commuted to work, lived 30 or more minutes from the school or lacked transportation to come to the school to participate in various school activities.

Causative Analysis

There were a number of causes leading to this problem. Poverty and its associated problems is the number one factor contributing to the lack of adequate communication skills seen in kindergarten children today. Fifty percent of the elementary students qualify for the federal free or reduced lunch program based on family income levels. Many of these children live in

substandard housing and lack access to adequate health care. This often results in poor nutritional status and chronic health problems that go untreated. Many children from lower SES families have a history of middle ear infections since infancy. Middle ear infections can result in a mild hearing loss for many weeks after each incident which reduces the child's ability to understand and learn from the environment. Coupled with poor classroom acoustics, the auditory signal is often too weak for the child to attend to the teacher's voice. The result is often seen in the form of negative classroom behaviors requiring disciplinary intervention.

Parents need more information about the significance of communicative competence and its affect on academic success since they are their child's first teacher. According to Elkind (1994) children in today's post modern families watch an alarming amount of television daily which often replaces contact with their parents. Unfortunately a television set cannot stop and repeat a message or correct a child's articulation or grammar errors. It cannot expand on a topic or determine if a child has understood the message. Television could be a valuable educational tool for expanding a child's knowledge about the world, but should never be considered a primary source for acquiring a first language.

Bilingualism has created many challenges for children and educators in the academic setting and often results in a reduced opportunity to learn new information and to make and maintain peer relations due to ineffective communication skills. The ability to understand and respond to a second language becomes an even more complicated process when the child has poor

or delayed communication skills in a primary language. Inability to effectively use language as a tool to acquire knowledge in a second language presents numerous obstacles for culturally and linguistically diverse children.

Increased school expectations, as seen in today's accelerated curriculums, distort the true communicative ability of kindergarten children by requiring them to function above their developmental level. These kindergarten curriculums were developed as an extension of the elementary curriculum. Instead of taking developmental needs into consideration and allowing the kindergarten year to serve as a transition from preschool into the academic institution, the curriculums focus only on academic requirements.

Relationship of the Problem to the Literature

The most important skill a child needs to succeed in school is the ability to effectively use language as a tool for learning and interacting with others. The problem of poor or delayed communication skills in kindergarten has been documented nationally. Kindergarten teachers expect children to have appropriate communication skills when they arrive for the first day of school. The problem of poor or delayed communication skills exhibited by children upon entrance to elementary school for academic needs has been discussed in the scholarly works of early childhood educators and speech-language pathologists.

Boyer (1992) stated that "according to a survey of kindergarten teachers taken by the Carnegie Foundation in 1991, a nationwide average of 35% of their students were not ready to participate successfully in school" (p. 15). In a

predictive study conducted by Walker, Greenwood, Hart & Carta (1994) receptive language (vocabulary) and expressive language (verbal ability) were two of the most predictive variables of future academic success. These predictive indicators were significant not only for children entering kindergarten, but for students throughout their school careers. In a study by Hadley, Wilcox & Rice (1994), teachers cited language skills and emotional maturity as two developmental criteria that had not been achieved by these students. Miller (1994) agreed and stated that children with at-risk communication skills may not have the basic linguistic skills which would enable them to benefit from the educational setting.

The causes of the problem are seen in multiple factors in the child's home and school environments. Conditions associated with poverty contribute to delayed communication skills seen in entering kindergarten students (Kunesh & Farley, 1993). Many children from low-SES families initially scored lower on readiness tests than their actual capabilities which presented additional difficulties for making appropriate referral decisions (Fazio, Naremore, & Connell, 1996). What appears to be a communication delay or disorder in kindergarten frequently has changed by second grade. The effects of poverty may serve to artificially depress scores seen in kindergarten screening results. Once many of these children are exposed to the communication demands of the school, the environmental effects fade as the child's capabilities emerge.

According to Damico & Damico (1993) relying on the results of a single static assessment to initiate referral for special education services may not be

appropriate due to environmental influences on kindergarten children. Multiple opportunities to observe the child's best communicative performance are needed.

Fisher and Terry (1990) stated that "there is a tendency to devalue oral communication in school. . ." (p.21). Since student's do not receive a grade for oral communication skills in the same way they are graded in reading, math, or social studies, teachers, parents and society deemphasize this skill. This is indeed unfortunate since people spend the greatest amount of time each day listening, talking, reading and writing (i.e. communicating). Students need language in and out of the school setting " . . . to describe, to clarify, to compare or contrast, to summarize, to make analogies and to evaluate ideas" (Fisher & Terry, 1990, p. 22).

A mild hearing loss due to middle ear infections can contribute to communication delays, inability to attend, and behavioral problems in the school setting (Weiner, Creighton, & Lyons, 1989; Gravel & Wallace, 1995; Feagans, 1996; Matkin, 1996). Auditory processing skills have been identified as the underlying basis of many learning difficulties exhibited in children in the elementary grades. Poor acoustics, the noise of 22 students and the environment, place many children with a history of early or chronic ear infections at-risk for learning orally presented information. According to Matkin (1996) even a mild hearing loss which reduces the auditory signal by only 10% can result in significant learning difficulties which persist throughout the child's academic career. Children with a mild hearing loss also exhibit language

difficulties, but the extent of these problems may not be apparent until they come to school and are required to function in a noisier environment. Thus, relying on one time only audiometric screening results is not the most dependable method to determine if a child has ongoing hearing difficulties which interferes with learning.

Contact with adult speakers is a central factor to language acquisition for every child and verbal contact with adults does not happen frequently enough for many children from lower SES families to develop age-appropriate language skills (Walker, Greenwood, Hart & Carta, 1994; Elkind, 1994). Chapman (1981) states that adults change the way they use language depending on the age and needs of the individual child and adapt their message to help children understand. This is done by slowing down speech, using shorter and simpler sentences, as well as repeating portions of what is said. The study by Walker et al. (1994) also point's out that parents of disadvantaged children play fewer language games and require less language from their children in home situations.

Students who come from culturally and linguistically different home environments may not be prepared to communicate and socially interact with mainstream peers or teachers (Damico & Damico, 1993). These children bring different expectations from their home cultures to the classroom about the establishment and maintenance of relationships with others which can set them up for failure. Learning appropriate social interaction skills for culturally and linguistically diverse children (CLD) and mainstream children should be a

reciprocal not a one way process. Ongoing efforts must be made to educate all children in the various ways individuals respond to one another. The issue of differences could be dealt with in an authentic manner by providing examples through story formats.

Instead of the kindergarten year serving as a socialization or transitional period, five-year-olds are more often required to begin their academic training. “[School] . . . expectations have become increasingly high and unrealistic as the curriculum from upper grades has been pushed down to lower levels, thus dooming large numbers of young children to inevitable failure” (Charlesworth, 1989, p. 5.). Children who have poor or delayed communication skills need additional time and exposure to classroom language demands to develop overall communication abilities before being required to use language as a learning tool. Once they have a communicative base for learning then they are ready to meet the academic demands of first grade.

Topical areas touched upon concerning this problem are the widespread nature of this problem, the impact of mild hearing loss in the classroom environment, the necessity of communication skills for academic success and the inappropriateness of kindergarten curriculums.

Chapter III Anticipated Outcomes and Evaluation Instruments

The following goals and objectives were designed for this practicum:

Goals and Expectations

The goal of this practicum was to decrease the number of kindergarten students requiring intervention services by increasing their communication skills.

Expected Outcomes

The following outcomes were projected for this practicum:

1. The results of the kindergarten post screening would reveal that 9 of 10 students could demonstrate appropriate communication skills in the classroom and on the playground as measured by a First Step language domain score of 9 or above and a Quick Screen of Phonology standard score of 85 or above.
2. Playground and classroom observation by the communication teacher would reveal that 8 of 10 students could effectively use communication skills with peers and teachers as measured by observation and checklist.
3. Teachers would report that 9 of 10 students could demonstrate the ability to use effective communication skills in the classroom as measured by observation and checklist.
4. The counselor would report a decrease in disciplinary actions for kindergarten students identified with poor or delayed communication skills to no more than 2 of 10 students as measured by disciplinary data analysis.
5. Results of a parental survey of students identified at-risk in the initial kindergarten screening would reveal an increased awareness of the importance

of language skills and academic success for 8 of 10 parents.

Measurement of Outcomes

A combination of formal and informal assessment tools were used in this practicum to measure and document program outcomes.

The kindergarten screening consisted of two assessment tools, the FirstStep (FS; Miller, 1993) and the Quick Screen of Phonology (QSP, Bankson & Bernthal, 1990). The FirstStep identified potential developmental disorders in children between the ages of 2 to 6. The FS addressed the five domains required by IDEA (cognitive, motor, social-emotional, adaptive behavior and communication). For the purposes of kindergarten communication screening, only the language domain test of the FirstStep was used. Early identification of communication disorders was needed to provide intervention services as quickly as possible to reduce potential language learning related difficulties. The other four domain tests were given only to children referred for comprehensive evaluation by the communication teacher. Referrals to specialists for the other domains were made as necessary. The FS language domain test could be given in 5 minutes and consisted of developmentally appropriate receptive and expressive language tasks in a game format. Raw scores were converted to domain scores according to the child's age. Domain scores were represented on a green (within normal limits), yellow (borderline at-risk), and red (at-risk) scale. Those children who scored in the yellow or red scale were targeted for further screening in the winter semester before referral for comprehensive evaluation was recommended.

Also, beginning with the kindergarten screening in spring 1996, the writer's communication department replaced the previous articulation test with the Quick Screen for Phonology. The QSP was designed to provide a brief appraisal of the phonological status of children ages 3 to 8. This information could be used to determine if a child's speech errors were developmental in nature or in need of further testing. According to Bankson and Bernthal (1990) the test targets the following phonological processes: "assimilation, fronting, gliding, stopping, cluster simplification, weak syllable deletion, final consonant deletion, vocalization, depalatalization, and deaffrication." Standard scores were reported in three-month intervals and decisions for referral could be made using 85% as a cut off point. Results of prior screenings using this instrument revealed that it was appropriate for the writer's kindergarten population.

A communication teacher-made informal-observational rating scale was used to gather ongoing data on at-risk children (see Appendix A). The classroom teacher and the communication teacher used this instrument to document children's communicative competence in the classroom and in playground activities. The teachers met weekly to discuss the program and results of the ongoing assessments. Training in the use and scoring of the rating scale was provided at the beginning of the program.

An oral parental-survey instrument prepared by the writer, consisted of open-ended questions and a four point Likert scale to collect data on the effectiveness of the overall parental involvement component of the program (see Appendix B). This survey was conducted in person or by phone with

parents of at-risk children and took approximately 10 minutes each.

Disciplinary records were obtained from the counselor and the number of disciplinary interventions from the kindergarten class was calculated. Problems which required administrative support were categorized. Frequency of referral and at-risk status from the kindergarten communication screen were noted. Results were summarized, and patterns checked.

Description of Plans for Analyzing Results

Individual kindergarten screening results were maintained in a file on each child as required by district policy. Written notification of individual results were sent to parents in accordance with regulations stated in the student handbook.

Results from the Miller FirstStep and the Quick Screen of Phonology were analyzed in accordance with procedures stated in the administration manual of each instrument with data recorded on each child for the language and phonological tests. An overall pattern of deficits were noted for the entire kindergarten class and were compared to the 1995-96 school year results to note any changes.

Observational checklist results were kept on at-risk children and data was plotted over time to note changes.

The results of the parent-survey were used to gauge the effectiveness of the parental involvement home program.

Mechanism for Recording Unexpected Events

Events not anticipated by the writer occurred in the implementation of this practicum. Daily events, expected and unexpected were recorded by the writer in a journal. A separate section of the journal was used to record such events. Unexpected events were handled on a case by case basis in accordance with district policy and special education regulations.

Observational checklists on at-risk students were kept in individual students files along with kindergarten screening results. Multiple observations were made on at-risk students to note changes over time.

Dated anecdotal and running notes were kept on students in the classroom on self-adhesive address labels and transferred to sheets in each child's portfolio file.

Chapter IV: Solution Strategy

Statement of Problem

The problem to be solved in this practicum was to address the high percentage of kindergarten students arriving at school without the communication skills needed to succeed in the academic setting and required referral for special services. This had created a dilemma for the classroom teachers who had to meet state mandated curriculum requirements and the developmental needs of each child. The classroom teachers turned to the communication specialist for assistance to address this problem.

Discussion

A review of the literature presented several solutions to the writer's problem.

One possible solution for children at-risk due to poverty was to provide direct training in social language skills to increase their ability to make and maintain relationships with peers and adults, thus making them more resilient to their environment (Wolin & Wolin, 1996; Gallagher, 1993). The ability to use these skills could mean the difference between school failure and success. Teachers needed to provide programs that built and reinforced these important life skills, empowering students with the ability to overcome their environmental circumstances.

Another solution was amplification of the educator's voice to increase the auditory message to an acceptable level, and overcome the temporary effects of a mild hearing loss due to otitis media (Matkin, 1996; Berg, Blair &

Benson, 1996). Difficulty understanding orally presented information in the early childhood classroom increases learning problems for CLD students, hearing impaired students, learning disabled students and students with communication disorders. The recommended optimal student-teacher distance for intelligibility of orally presented information is about three feet. Carpeting and acoustic ceiling tiles installed in most classrooms to absorb extraneous sounds can negatively impact the environment by decreasing the volume and intelligibility of the teacher's message. Uncarpeted rooms, on the other hand, often have reverberation and echo effects which increase competing noise levels and distort the auditory signal. Noise from various sources, inside and outside the classroom, can peak up to 75dB periodically during the school day while the human voice rarely exceeds 60dB, thus decreasing the intelligibility of the teachers instructions. Possible solutions include decreasing the teacher-student distance ratio, reducing the noise level in the classroom, or using individual or sound field amplification (Berg et al., 1996).

Parents should be involved in their child's programs even if they are unable to come into the classroom during the day. This could be accomplished through phone calls, newsletters sent home on a frequent basis, and informal parent inservice meetings (McLain & Heaston, 1993; Swick, 1995; Mize & Abell, 1996). Buchanan & Burts (1995) state that today's two-career and single parent families have fewer opportunities to become involved in their children's education. These parents often have fewer reliable personal or financial resources and increased demands on their time. After basic obligations are met,

most parents have little time or energy for the traditional types of parental involvement programs that have been used in the past. Yet, most of these parents are committed to assisting with their child's education and want to do all they can. Educators need to stay in touch with the parent's perspective by informally interacting with parents on a frequent basis. The outcome of greater parental involvement in school often results in increased involvement in the home. Parents of at-risk children need to understand that encouraging the development of communication skills is necessary throughout childhood.

Culturally and linguistically diverse (CLD) students need direct modeling of appropriate social language skills to benefit from the academic setting and develop relationships with mainstream peers (Damico & Damico, 1993). The acquisition of social language skills for CLD students increases their acculturation into the classroom community. The Native American student in the writer's setting exhibited non mainstream behaviors which could be misinterpreted by his peers and teachers. Not answering questions immediately after questioning is an appropriate response in Indian culture where one shows respect by reflecting on a question before answering. Using a quiet tone of voice and the avoidance of eye contact is also another sign of respect seen in these students which could be misunderstood (Stillsmoking, 1996). Assisting these children by providing explanations and examples of social language expectations in the schools increases the effectiveness of their relationships with peers and teachers. In this way, they can more effectively interact in the educational environment. According to Damico & Damico (1993)

the goal is not to assimilate these children, but to provide them with information and skills in the way language is used to establish and maintain relationships within the mainstream context.

Developmentally appropriate social language instruction should be provided in a collaborative partnership between the communication and classroom teacher (Dodge, 1992; Ferguson, 1992; Montgomery, 1992; Ellis, Schlaudecker & Regimbal, 1995; Prelock, Miller & Reed, 1995; & Magnota, 1991). Traditional services for children with communication delays have been conducted by pulling children out of class. Language skills are sometimes practiced in an isolated therapy room with the goal of generalization to the classroom setting. By coming into the educational setting and applying those same lessons in the classroom context, generalization of language goals can often be more easily realized. Also, by providing the lesson to the entire class, all children could benefit. Those children with poor or delayed communication could then practice language skills in a natural context which makes carryover a more attainable goal.

Description of Selected Solutions

This writer used developmentally appropriate, collaborative, and inclusive practices in combination with increased parental education and involvement as an effective delivery model to increase communication skills in kindergarten students. This was accomplished by providing a direct service program in the classroom to address the problem of poor or delayed communication skills. A portable amplification system was used to increase

the communication teacher's volume and intelligibility during lesson presentations.

Providing direct language services in the classroom allowed the communication teacher to increase language skills for the largest number of children (Dodge, 1994; Miller, 1989; Christensen & Lockett, 1990; Wadle, 1991; Butler, Silliman, & Karr, 1995). By focusing on the acquisition of appropriate social language skills at-risk, low-SES, and culturally and linguistically diverse children were given an opportunity to increase their success in the academic setting (Damico & Damico, 1993; Wolin & Wolin, 1996). Additional opportunities were offered by creating dramatic play situations in the classroom. This allowed children to role play and practice social language skills and provided the teachers a vehicle to model effective language strategies (Gallagher, 1993; Rice, Sell & Hadley, 1991).

Introducing social language topics through books provided the writer with an appropriate format to model language skills in context and discuss problems in typical school situations (Zeece, 1995; Miller, 1994; McLain & Heaston, 1993). Books provided a controlled format for demonstrating appropriate use and structure of the language used in social situations such as politeness markers, asking questions, and taking conversational turns. Speech production was slowed down when teachers read to the students, thus increasing the intelligibility of individual words children may have misunderstood. This format provided a model for the acquisition of language skills within a meaningful context. Matching intonation and facial expressions to the story supplied a rich

environment for demonstrating and developing nonverbal and prosodic aspects of the communicative interactions between the characters, and highlighted the situation.

Increased parental involvement could be accomplished through inservice programs, phone calls, and weekly newsletters (Buchanan & Burts, 1995; McLain & Heaston, 1993; Swick, 1995; West & Mild, 1994). This was especially important for the parent who wanted to be involved in their child's education but were unable to come to the school. The first goal was to provide parents with information on the developmentally appropriate language skills needed by all children to succeed in the academic environment. The second goal was to furnish the children with the communication skills they could use beyond the classroom doors. By providing information and increasing contact with the child's family, the classroom and communication teachers assisted parents in their role as their child's first teacher.

Report of Action Taken

In this practicum, the writer designed and implemented methods to involve teachers, parents and children in developing the social language communication skills needed for academic success in a mainstream school setting.

The first phase included screening all kindergarten students in compliance with IDEA child find mandates using the language domain subtest of the FirstStep (FS) and the Quick Screen of Phonology (QSP). One hundred and one children were screened over a three week period. The screening

process took longer than expected due to an increase in kindergarten enrollment. Letters to parents were sent home informing them of the intent of the social language program and permission to include the child's data in the practicum report. The writer received permission from all but three of the children's parents.

Program implementation began October 7, 1996 and consisted of two 30 minute weekly visits, for 12 weeks, to the classroom by the communication teacher. The classroom and communication teacher scheduled regular weekly meeting times to discuss the program's objectives and plan for each week's activities. During the first meeting the teachers looked over the results of the kindergarten screening and completed classroom communication profiles for each child considered "at-risk" for a communication disorder.

Direct training in social language skills was accomplished by discussing the problems presented in the stories and ask the students to brainstorm ideas for solutions. Student solutions were used as a springboard to broach topics such as why shouting at people was not a good way to communicate or why taking turns and sharing are important. When these social skills were needed during activities, the teachers took this opportunity to review the skill and connect it to a specific context. Suggestions for appropriate behavior and inappropriate behavior were listed. By discussing and reviewing skills previously presented throughout the program the teachers were able to reinforce these concepts. This was accomplished by noting verbal and behavioral responses in unstructured situations. It was not uncommon to hear the children

remind one another which behavior was expected in a play scenario.

Since the classrooms at the writer's school were equipped with carpeting and acoustic ceiling tiles, vocal amplification during the reading of each story was necessary to overcome the dampening effect of the room. Increasing the loudness of the communication teacher's voice was accomplished by using a portable cassette player with a hand held microphone. In addition to vocal amplification, the children were requested to sit in their assigned circle time places. This reduced the distance between the communication teacher and the children to within the recommended distance of three feet. Instructions for all activities were given at this distance or by standing next to a student and rephrasing the information.

The literature-based portion of the social language program was conducted using developmentally appropriate trade books on themes related to the acquisition of social language skills. The topic of social language skills was introduced using a whole language reading of When You Go to Kindergarten by James Howe (1994). This book looked at the activities, skills, and social situations every kindergarten student encounters at school. It discussed various social topics such as making friends, the importance of listening and remembering, getting along with others who are different, sharing information, taking turns, being polite and being truthful. The communication teacher discussed the situations presented in the story and graphed the student's ideas on a four column format using three possibilities and one idea that does not belong. (Example: "What can you do at school? " "You can play with blocks,

paint a picture, and read a book, but you can't sit on top of a table").

Theme of "friends" was explored in the books Willy and Hugh by Anthony Browne (1991) and Best Friends by Miriam Cohen (1989). The teachers talked about making a class book entitled Classroom Friends and gave each child a piece of paper to make a drawing of themselves. The book was compiled on the second visit. Each student was given a slip of paper and instructed to write their name on the blank line and glued under their drawing. When completed, the teachers read the book with the class: "Come with me to Mrs. _____'s class and meet my new friends! This is my friend _____, etc." The children enjoyed having a simple book they could "read."

During the next session the topic of listening and remembering was introduced using the book And Don't Forget the Bacon by Pat Hutchins. (1976). The teachers discussed with the students how listening and remembering are important for following directions. The students brainstormed ideas for a class book, And Don't Forget Your Backpack. A copy of the new book was given to each student. They were required to listen and follow directions to put the pages in order and to add an appropriate drawing on each page to illustrate the story. The completed story was read with the class and taken home to be shared with their families.

The communication teacher approached the topic of "differences" using the book, Arnie and the New Kid by Nancy Carlson (1990). The teachers discussed how to speak respectfully about people who seem to be different than themselves. The class explored basic differences such as hair color, eye color

and gender. Using a story frame, the teachers wrote as the students discussed the story by listing the characters, the setting, the problems and the ending of the story. The story frame was left in the classroom for the students to add illustrations and reread in the second session.

What Mary Jo Shared by Janice May Udry (1991) was used to acquaint the children with the subject of orally “sharing information.” The children were asked to predict what Mary Jo shared with her class and their answers were written down. After the story was read, their answers were analyzed to determine if anyone had guessed what Mary Jo brought for show and tell. In the second session the communication teacher asked each child to pick a wooden object shape from a mystery bag and tell two things about it. The class practiced circle time turn-taking skills, and speaking in complete sentences as they “guessed” what each child had picked from the bag and “shared” with the class.

The concepts of “turn-taking” and “sharing” were continued using the book Franklin is Bossy by Paulette Bourgeois (1993). The teachers debated on the problems Franklin had when he wouldn’t take turns and allow others to make choices during play time. The student’s brainstormed various ways they could take turns in the classroom and on the playground. Observation and modeling appropriate language usage in both situations by the teachers were used during the remainder of the practicum implementation.

The theme of “manners” was introduced with the book What’s Polite? by Harriet Ziefert (1995), and paired with Thanksgiving activities to prepare the students for using politeness markers and appropriate table manners during the

upcoming family activity. The teachers expanded on the story about going to a restaurant and the words used in that setting by pairing it with the manners the children would be expected to use at the family Thanksgiving feast. The class then planned a snack menu for the next session and practiced using their manners while ordering, serving and eating their snack.

The issue of being truthful was debated by using the book Franklin Fibs by Paulette Bourgeois (1991). The teachers and class explored the problem Franklin had when he told a lie to his friends. Possible problems were discussed about consequences that might occur if they told a fib at school or home. The children were observed during dramatic play activities to note generalization of language skills in context.

Since few parents were able to assist or observe in the kindergarten teacher's classrooms during the day, a parent inservice meeting to discuss the social language program and the purpose of the weekly communication newsletters was scheduled at the beginning of the school year for the first week in October. Unfortunately this meeting had to be canceled as the district scheduled "Meet Your Teacher Night" for the same time. Weekly newsletters were sent home weekly as a solution to increasing parent involvement. An introductory letter from the communication teacher about their purpose was sent home with each child. The newsletters were also shared with all of the teachers in the school. Many of the teachers reported that they had saved the newsletters to use with parents next year. The communication teacher was available for consultation during parent-teacher conference time to discuss any

concerns parents might have about the communication development of their children.

In the final phase of the practicum implementation, the communication teacher rescreened all at-risk students using the pretest instruments. Results were tabulated and compared to the initial screening results. Disciplinary data was obtained from the counselor and analyzed. The teachers met and discussed the pre and post observational notes and the classroom communication profile results. A final decision on which students to refer for a comprehensive communication evaluation was made and a list of these students was given to the principal and Director of Special Education. A letter notifying parents of at-risk children of the results of the second screening was sent home (see Appendix C). Parents of at-risk children were then called to discuss the results and the parent survey (see Appendix B) was completed. A thank you letter was sent to all parents for allowing their children to participate in the practicum.

Several additional difficulties were encountered during the implementation of the practicum. Maintaining discipline with a class of kindergarten students during each session was resolved by requesting the teacher sit next to the students. The communication teacher also had each teacher block out the weekly program time to reduce scheduling conflicts with other programs such as the librarian's story time. The greatest obstacle encountered in the delivery of the social language program involved unexpected assemblies, fire drills, class projects or parties. When these situations arose the classroom teacher was

asked to allow the children to complete the week's activity at another time.

Chapter V Results

Results

The problem to be solved in this practicum was to address the high percentage of kindergarten students who arrived at school without the communication skills needed to succeed in the academic setting and required referral for special services. The writer used developmentally appropriate, collaborative, and inclusive practices in combination with increased parental education and involvement as an effective delivery model to increase communication skills in kindergarten students.

This solution was implemented by providing a direct service, developmentally appropriate, social language program two times per week, for 12 weeks, in the kindergarten classroom. The writer used children's books to introduce each topic to the class, while hands-on activities and weekly parent newsletters augmented the oral presentations. A portable amplification system was used to increase the communication teacher's volume and intelligibility during lesson presentations. The program was targeted for one classroom but was implemented in five at the request of the kindergarten teachers and the principal. The goal of this practicum was to decrease the number of kindergarten students requiring intervention services by increasing their communication skills.

The following outcomes were projected for this practicum:

1. The results of the kindergarten post screening would reveal that 9 of 10 students could demonstrate appropriate communication skills in the

classroom and on the playground as measured by a FirstStep language domain score of 9 or above, and a Quick Screen of Phonology standard score of 85% or above.

This outcome was met.

During the fall screening of the elementary kindergarten class, 31 of 101 students were identified as at-risk due to communication difficulties. Two of these children moved before the post-screening was conducted. Both of these children had scored in the lower end of the at-risk scale on the FirstStep screen.

Total screening time per child averaged 10 minutes. No child refused to participate in the screening process and appeared to enjoy the activity. All of the children had been introduced to the writer by the classroom teacher and they had also observed the writer working with their peers, already enrolled in special education.

The results were calculated according to manual specifications for both screening instruments and sent to the parents in the fall. The writer received three phone calls from concerned parents asking what they could do to boost their child's communication skills. The children identified as potentially at-risk were rescreened in January with the results also sent home. No phone calls were received after these letters went out. Results were also reported to the kindergarten teachers, principal and director of special education, with a copy placed in each child's academic file.

Table 1

Results of the Language Screening: Domain Scores

<u>Student</u>	<u>Fall</u>	<u>Winter</u>	<u>Difference</u>	<u>Refer</u>
1	7	7	0	Yes
2	1	5	4	Yes
3	8	12	4	No
4	7	9	2	No
5	8	11	3	No
6	8	10	2	No
7	5	8	3	Yes
8	8	10	2	No
9	8	12	4	No
10	7	11	4	No
11	8	11	3	No
12	8	10	2	No
13	8	11	3	No
14	1	8	7	Yes
15	7	12	5	No
16	7	12	5	No
17	8	9	1	No
18	7	13	5	No
19	7	9	2	No
20	7	9	2	No
21	7	9	2	No
22	8	13	5	No

Of the 22 children who appeared to require a referral in the fall for poor language skills only 4 continued to demonstrate such a need. This can also be seen in a comparison of the mean scores from the fall (6.8) and winter (10.0) screening results. A small increase in scores was expected due to normal development.

Observations and interactions with these four students revealed poor social skills in various situations throughout the school day. Their classroom teachers commented that their behavior was similar to a "3 or 4 year old". Poor social skills were readily apparent during circle time activities. These children were frequently seen talking and touching peers, playing with shoelaces, rolling on the floor, singing and abruptly leaving the group in the middle of an activity.

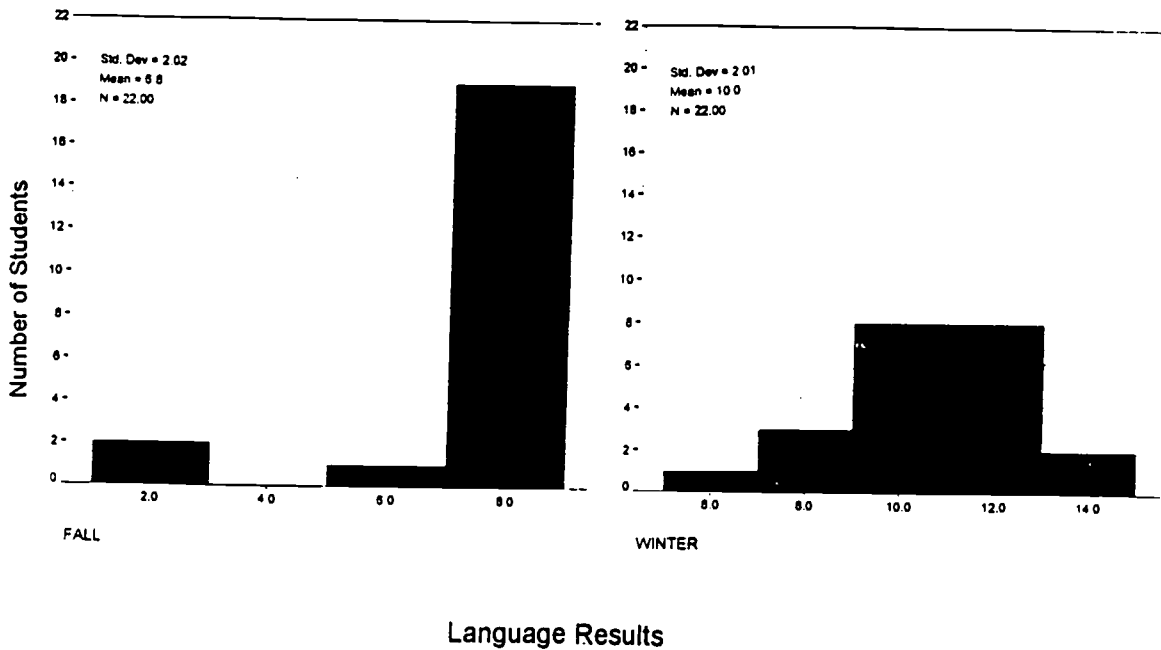


Figure 1.

Figure 2.

Table 2

Results of the Phonological Screening

<u>Student</u>	<u>Fall</u>	<u>Winter</u>	<u>Difference</u>	<u>Refer</u>
1	81	83	2	Yes
2	77	79	2	Yes
3	<65	<65	0	Yes
4	67	77	10	Yes
5	77	81	4	Yes
6	74	75	1	Yes
7	81	83	2	Yes
8	75	77	2	Yes
9	72	74	2	Yes
10	81	81	0	Yes
11	74	82	8	Yes
12	75	84	9	Yes
13	72	70	-2	Yes
14	<65	<65	0	Yes
15	<65	<65	0	Yes

All 15 students with articulatory deficits did not demonstrate enough progress during the three month social language program to score 85% or above. Neither exposure to children with normal articulation skills, teachers or direct language instruction increased production skills to within normal limits. Two of these children also exhibited continued language difficulties. However, referral for evaluation may not be necessary for those students who scored 80 to 85% in the winter screening and had demonstrated an increase in phonological skills. These scores were now in the borderline range, the students had shown improvement without intervention, and this increased ability would be expected to continue. Therefore, the author placed them on a list of students to be monitored in the fall of 1997 before requesting authorization to test.

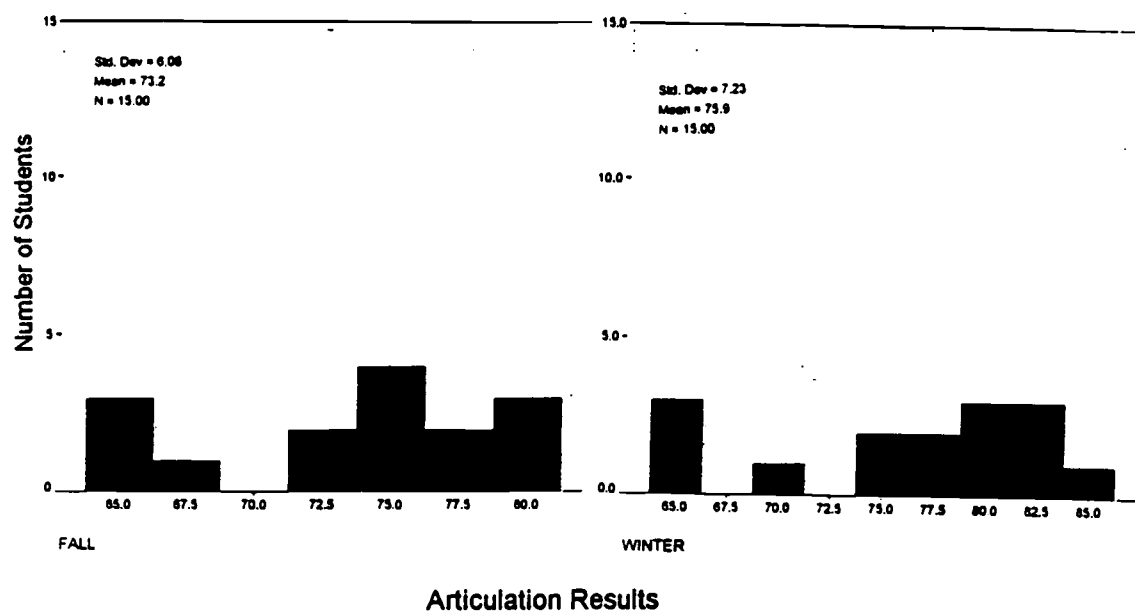


Figure 3.

Figure 4.

2. Playground and classroom observation by the communication teacher would reveal that 8 of 10 students could effectively use communication skills with peers and teachers as measured by observation and checklist.

This outcome was met.

The results of the winter screening indicated that all 29 children had made some progress in the development of their communication skills. However, only 4 of the 29 children with initial communication deficits now required referral for language difficulties and this increase was reflected in the mean score difference between the fall (42.9) and winter (50.6) screenings (see figures 5 & 6). Nine of the 29 children demonstrated a marked increase (10 points or more) by the winter observation. The total number of children to be referred for language deficits was smaller than expected by the writer.

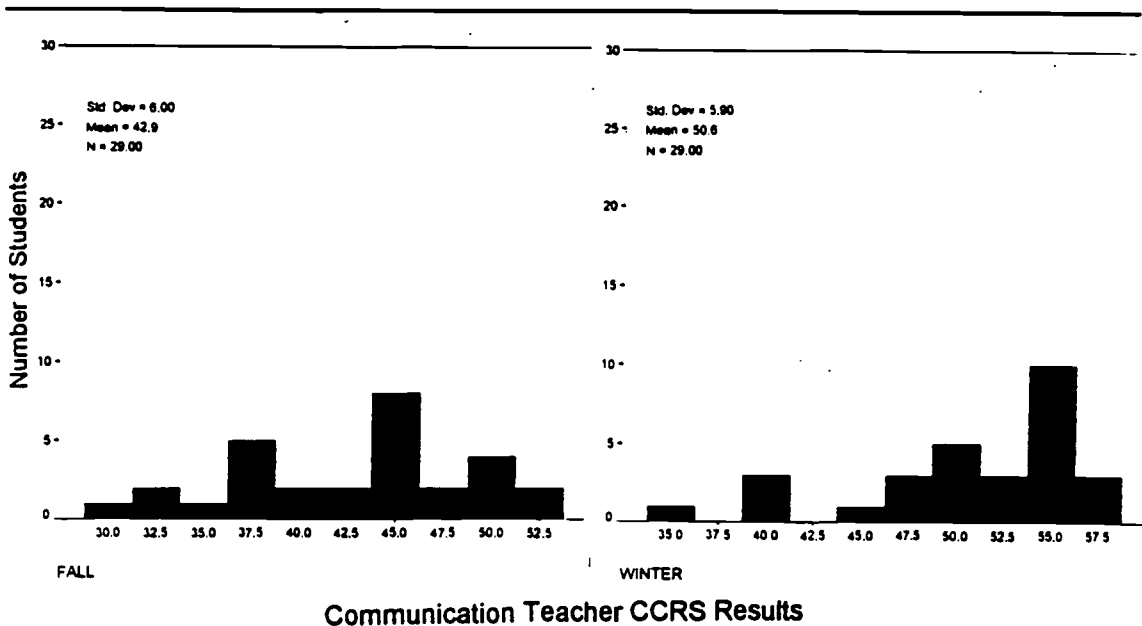


Figure 5.

Figure 6.

Table 3

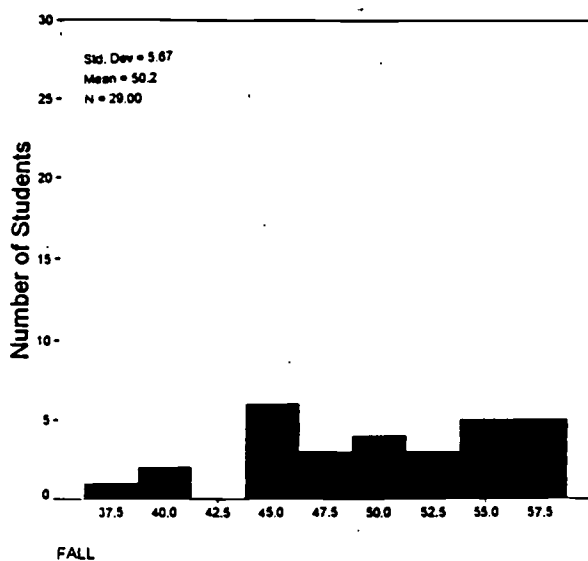
Results of the Communication Teacher Classroom Communication Rating

<u>Student</u>	<u>Fall</u>	<u>Winter</u>	<u>Difference</u>	<u>Referred</u>
1	42	47	5	Yes
2	44	53	9	Yes
3	38	40	2	Yes
4	33	36	3	Yes
5	38	51	13	No
6	36	49	13	No
7	37	54	17	No
8	44	54	10	No
9	48	56	8	No
10	33	40	7	Yes
11	47	58	11	No
12	39	49	10	No
13	44	54	10	Yes
14	45	56	11	Yes
15	46	54	9	No
16	49	54	5	No
17	42	49	7	No
18	31	39	8	No
19	53	55	2	Yes
20	45	49	4	Yes
21	46	46	0	Yes
22	37	47	10	Yes
23	51	57	6	Yes
24	49	57	8	Yes
25	50	53	3	No
26	52	56	4	Yes
27	38	47	9	No
28	46	53	7	No
29	41	54	13	Yes

3. Teachers would report that 9 of 10 students could demonstrate the ability to use effective communication skills in the classroom as measured by observation and checklist.

This outcome was not met.

Only 17 of 29 students were seen by the teachers as more effective in communication skills after the three month program implementation. The other 12 students were seen as having made no progress or negative gains on the communication profile rating. The increased ability of students initially at-risk and were now demonstrating functional communication skills was not recognized by the classroom teachers. This can also be seen in the mean score difference between the fall (50.2) and winter (51.8) observation ratings by the teachers (see figures 7 & 8).



Classroom Teacher CCRS Results
Figure 7.

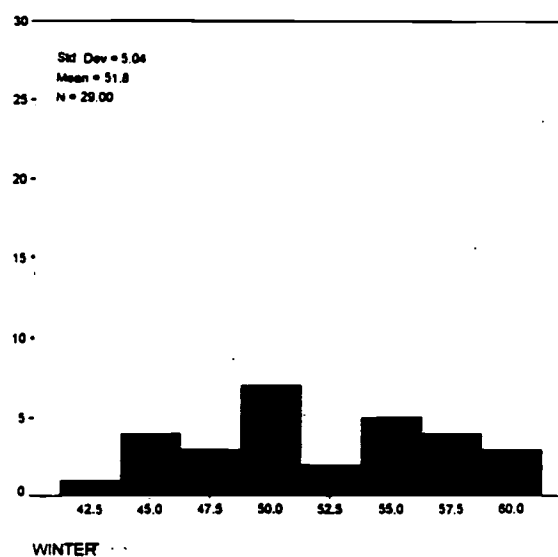


Figure 8.

Table 4

Results of the Classroom Teacher Communication Profile Rating

<u>Student</u>	<u>Fall</u>	<u>Winter</u>	<u>Difference</u>	<u>Refer</u>
1	46	49	3	Yes
2	56	52	-4	Yes
3	46	49	3	Yes
4	40	43	3	Yes
5	52	55	3	No
6	50	47	3	No
7	57	57	0	No
8	57	56	-1	No
9	48	46	-2	No
10	47	45	-2	Yes
11	55	55	0	No
12	55	54	-1	No
13	48	45	-3	Yes
14	46	52	6	Yes
15	49	51	2	No
16	56	59	3	No
17	40	45	5	No
18	58	58	0	No
19	45	47	2	Yes
20	38	47	9	Yes
21	57	57	0	Yes
22	57	61	4	Yes
23	55	57	2	Yes
24	45	50	5	Yes
25	52	59	7	No
26	50	49	-1	Yes
27	51	50	-1	No
28	53	55	2	No
29	46	51	5	Yes

4. The counselor would report a decrease in disciplinary actions for kindergarten students identified with poor or delayed communication skills to no more than 2 of 10 students as measured by disciplinary data analysis.

This outcome was met.

The counselor reported a marked decrease in the number of children requiring administrative intervention as compared to the previous year. Not only were fewer students sent for disciplinary action, but the teachers reported less need to ask for assistance with difficult situations. Therefore, fewer children needed disciplinary action beyond classroom consequences.

However, one of the two students identified in the fall screening and who moved before the winter screening, was a significant disciplinary problem. If this child had remained at the school further, daily action by the counselor would have been necessary. The continued presence of this child could have had a negative influence on the other students.

Specific data on the number of disciplinary actions for the kindergarten classroom during the 96-97 school year was not available to the communication teacher. In previous years this information had been filed by teacher name and was readily accessible. The writer's school district implemented a computerized data retrieval system with all disciplinary actions filed by student name. Access to this system was not permissible to the communication teacher under district guidelines.

5. Results of a parental survey of students identified as at-risk in the initial kindergarten screening would reveal an increased awareness of the importance of language skills and academic success for 8 of 10 parents.

This outcome was met.

Only 1 of 29 parents surveyed stated that they would not allow their child to be evaluated. The other 28 parents were aware of their child's communication problems and reported that they had been working on these skills at home. They all agreed that a workshop on how to work with speech and language skills over the summer would be appreciated.

The parents of 10 at-risk students with articulation difficulties spontaneously stated to the writer that their children had been slower to begin talking. The average age for this milestone to be reached was three years old. Half of these parents also reported they had been concerned about their child's speech and were ready to begin the process for referral, evaluation and placement. All of the parents thanked the writer for implementing the program.

Table 5

Results of the Kindergarten Classroom Communication Parent Survey

The rating scale is explained as follows:

4 = agree 3 = somewhat agree 2 = somewhat disagree 1 = disagree

Questions	Number of responses			
	4	3	2	1
1. The communication newsletters were interesting and helpful.	18	7	4	0
2. The home activities were fun and useful.	17	8	4	0
3. The newsletters helped me understand what my child was working on in class.	17	7	3	2
4. The information helped me understand communication skills children need for school.	19	10	0	0
5. I have noticed a change in my child's language skills.	16	3	8	0
6. I would like to receive more information during the school year.	19	5	5	0
7. A parent inservice would be helpful in understanding the language program.	19	6	2	2
8. My child reported enjoying the language activities in child.	16	7	4	2
9. I am able to understand my child's communication better now.	14	6	6	3
10. Please conduct a language and learning workshop.	19	9	0	1

Discussion

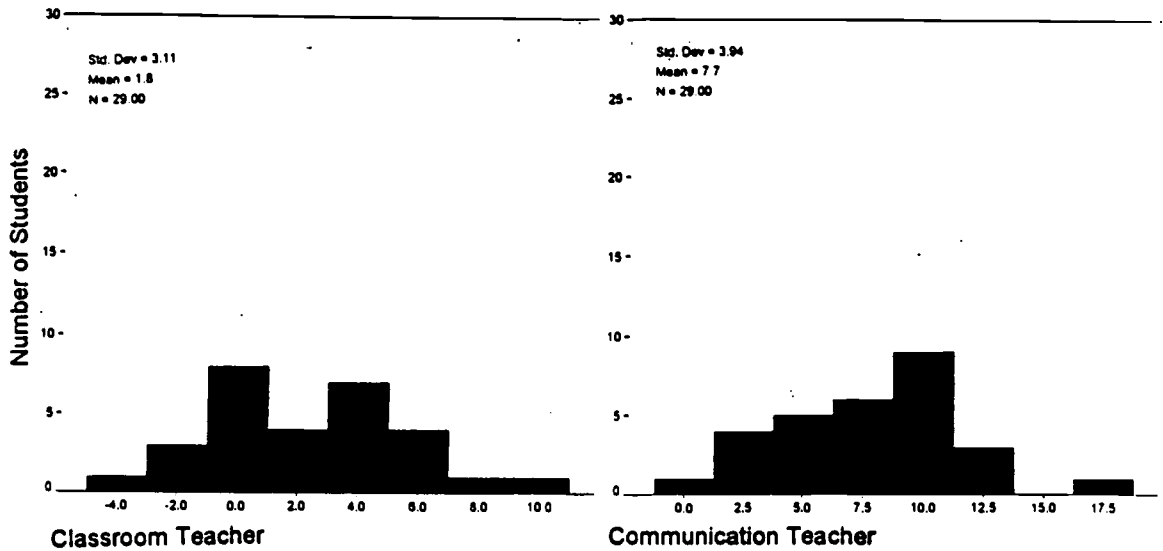
When children begin school in kindergarten they are expected to have attained a level of skills which will allow them to function in the academic institution. The longitudinal data from kindergarten children obtained over the past four years in the writer's district illustrates a disturbing trend in these readiness skills. Those necessary skills are steadily declining for a larger percentage of children, especially in communication. As the number of children at-risk for academic failure increases, the number of referrals for special education intervention also increases. However, many children with initial readiness deficits may not actually be candidates for referral due to environmental influences, lack of exposure to mainstream communication demands or simply being overwhelmed by the screening process itself. The writer's practicum was designed to address this dilemma and was successful in accomplishing its goal: to reduce the number of children needing referral for a communication disorder.

An unexpected outcome of the practicum was the increased interest by the staff in the kinds of communication disorders exhibited by students in the K-3 classrooms. This led to many lively discussions in the teacher's lounge on the speech and language skills used by children across the curriculum.

Additional collaboration was also a result of this increased interest. One first grade teacher requested the program to be implemented in her classroom in lieu of pull-out services. The program was modified to reflect the higher

developmental needs of this class and addressed the individualized educational plans of two speech or language impaired students in this classroom.

Although the writer was aware that regular teacher education programs do not provide enough training in language development, the differences in perspective between the communication teacher and the classroom teacher became readily apparent when the mean of the student's gain scores on the rating profile were compared (see figures 9 & 10). Whereas the classroom teacher attributed many children with no growth or negative growth (1.8) in communication skills, the communication teacher reported linear progress (7.7) for all students. This unexpected outcome highlighted the need for further teacher training at the writer's school.



Student Gain Comparisons

Figure 9.

Figure 10.

Another unexpected outcome was the increased recognition of the writer by the kindergarten students outside of the classroom, and a greater recognition of this teacher's role in the school. Many of these students would stop by the writer's room and say "hello" when visiting the multimedia building for the library, computer lab or reading resource room.

Unlike traditional screening and referral protocols used in the schools, the writer took into consideration the problem of children exhibiting borderline at-risk communication skills seen in the initial kindergarten screening. This was made possible by using the FirstStep screening language domain subtest (Miller, 1993) which provided a scale for at-risk and borderline at-risk skills. This allowed the speech-language pathologist to expand the screening protocol from simply pass-fail to: pass, borderline at-risk, or at-risk status. Monitoring the development of children in the borderline at-risk and at-risk categories provided needed information to include in a child's academic portfolio, and could be instrumental in academic or related service referrals.

Despite the large numbers of children arriving at school with poor or delayed communication skills the writer discovered that it was possible to address this problem with a simple, direct collaborative program. By going into the classroom, the author was able to maximize both time and effort to assist a large group of children with basic social language skill development. Working more closely with the classroom teachers created a learning environment in which every child was able to benefit. By providing increased information to the parents about the program and language development, a marked reduction in

negative or hostile reactions by parents of at-risk children needing referral was realized. Through this process, the writer was able to build a relationship with the parents and increase their awareness of the importance of communication skills on educational performance.

The greatest implication this practicum held for the writer was that the timing of needed services to children can make a great deal of difference in their lives. If communication training had been delayed until the children had been evaluated and placed in special education the negative impact of their deficit could have been compounded by early failure in the academic system. The dramatic decrease in the number of children requiring language services (as seen in the winter screening results) demonstrated the effectiveness of a simple direct program to meet the children's needs at a critical point in their development. This also highlights what early childhood teachers already know: early intervention works.

When discussing this program with colleagues, the writer was asked how to find and use books with kindergarten children. Information on this aspect of the program is not available in many speech-language training programs. An inservice package will be compiled and presented at the state fall conference to demonstrate the techniques used in the program delivery.

Using a norm-reference screening tool to note progress over time has become an invaluable tool to the district. Information about a child's language development can be plotted at intervals to support decisions for special program referrals.

The three month social-language practicum implemented by the writer was considered a success by the entire elementary school and will be continued in the next school year. Plans have been made by the principal and counselor to continue the monitoring portion of the program for students from kindergarten through third grade. This information will be used with parents at biannual parent-teacher meetings, retention meetings and referrals for special education. The effectiveness of this early, collaborative intervention program gives the district a greater insight into the need for a more concentrated effort in the initial academic development of it's students. Continued efforts in teacher training and parent involvement will increase the overall impact of this ongoing solution to the writer's elementary school.

Recommendations

The following strategies are recommended for furthering this solution:

1. Continue social language programs in all kindergarten classes to enhance the communication skills needed for academic success. Further evaluation of this program's effectiveness would be necessary to determine if it is appropriate and is adequately addressing the problem.
2. Add a phonological awareness component to the program to address the auditory perception aspect of language skills needed for reading and writing connections.
3. Add lessons on speech sound production with the introduction of each letter of the alphabet to increase visual, auditory and oral tactile awareness, and to aid children with articulatory difficulties when using invented spelling.

4. Continue training kindergarten teachers in classroom communication management techniques to ensure carryover of these skills to additional school situations (e.g. art, music, physical education, computer lab, guidance classes).
5. Monitor academic progress and referrals for the kindergarten class to determine the long term effectiveness of the program. Did the children originally identified as "at-risk" continue to develop the age appropriate communication skills needed for academic success?
6. Apply for and implement a developmental preschool to address this situation before the children enter kindergarten thereby further reducing the negative impact of poor or delayed communication skills on educational performance.

Dissemination

The implementation of this practicum was considered a success at the writer's school and continuation of the program was requested by the principal, teachers, and counselor. The data collected from this program was used to make determinations for academic referrals for testing as well as for the communication program. Further dissemination will be made by the author at local, state and national conferences for speech and language organizations, early childhood organizations, and special education organizations. The results of this program have been shared with the state subcommittee on public schools. This developmentally appropriate social language program will also be submitted for publication to several speech-language journals.

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APPENDIX A
KINDERGARTEN CLASSROOM COMMUNICATION
RATING SCALE

Kindergarten Classroom Communication Rating Scale

Name _____ Date _____
 Teacher _____ AM _____ PM _____

Please circle the rating that best applies to this student.

Circle Time Behaviors	never	occasionally	always
1. avoids interrupting teacher's lesson	1	2	3
2. waits for turn to talk	1	2	3
3. easily distracted by peers	1	2	3
4. distracts others	1	2	3
5. attends to lesson	1	2	3

Classroom Discussions

1. notices and responds to facial expressions	1	2	3
2. responds appropriately to tone of voice	1	2	3
3. looks in direction of speaker	1	2	3
4. participates in class discussions	1	2	3
5. stays on topic	1	2	3
6. asks appropriate questions	1	2	3

Classroom Communication Behaviors

1. speech is understandable	1	2	3
2. speaks inspite of difficulties	1	2	3
3. uses appropriate volume when talking	1	2	3
4. shouts across classroom	1	2	3
5. participates in show & tell	1	2	3
6. speaks in complete sentences	1	2	3

Play Behaviors

1. enters play situations easily	1	2	3
2. plays with others	1	2	3
3. accepts direction from others	1	2	3
4. resolves conflicts without assistance	1	2	3
5. cooperates with peers directions	1	2	3

Total Classroom Communication Rating: _____

APPENDIX B
KINDERGARTEN CLASSROOM COMMUNICATION
PARENT SURVEY

Kindergarten Classroom Communication Parent Survey

Name _____ Date _____
 Teacher _____ AM _____ PM _____

Please circle the answer that best applies.

Key: 1=disagree 2=somewhat disagree 3=somewhat agree 4=agree

1. The communication newsletters were interesting and helpful.
 1 2 3 4
2. The home activities were fun and useful.
 1 2 3 4
3. The newsletters helped me understand what my child was working on in class.
 1 2 3 4
4. The information helped me understand communication skills children need for school.
 1 2 3 4
5. I have noticed a change in my child's language skills.
 1 2 3 4
6. I would like to receive more information during the school year.
 1 2 3 4
7. The parent inservice was helpful in understanding the language program.
 1 2 3 4
8. My child reported enjoying the language activities in class.
 1 2 3 4
9. I am able to understand my child's communication better now.
 1 2 3 4
10. Please conduct a language and learning workshop.
 1 2 3 4

APPENDIX C
SCREENING REPORT LETTER

Date: _____

Dear Parents:

I have recently completed screening the speech and language skills of the kindergarten students according to Child Find regulations and the district guidelines.

Screening results of your child _____ indicate that he/she

- a. _____ is fine at this time
- b. _____ has some continued difficulty with: _____ speech _____ language
- c. _____ needs evaluation for speech/language problems

Children with difficulties will be referred for evaluation by team recommendation (teacher, speech-language pathologist, principal, and counselor).

Paperwork to initiate the process will be sent to you if a referral is recommended.

Evaluation will not be conducted without your prior approval in writing.

If you have any questions, then please do not hesitate to contact me at _____.

Carol A. Sanford, MS, CCC-SLP
Communication Teacher



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