

**UNIVERSITY OF MARYLAND  
HEARING AND SPEECH CLINIC**

College Park, MD 20742  
(301) 405-4218

**Initial Therapy Plan  
Spring 2014**

Name:	Date of Birth:
Parents:	Age:
Address:	Category: Articulation
Phone:	Graduate Clinician: Melissa D. Stockbridge, M.Sc.
Date of Report: March XX, 2014	Clinical Supervisor: Colleen Worthington, M.S., CCC-SLP

**Pertinent History**

XX is a X-year old girl who has been attending the University of Maryland Hearing and Speech Clinic since February 8, 2012. She was initially seen for difficulties with multiple speech sounds, particularly fricatives. However, her current goals center on fine-tuning the production of /r/ sounds and vowels to refine her intelligibility and support her transition out of the clinic.

XX is currently seen for one 1.5 hour session per week. She is continuing to work with a rating scale for her /r/ productions, from “1,” corresponding to her former /r/ production, to “3,” corresponding to her correct /r/ production.

**Semester Goals and Objectives**

*Goals for Articulation:*

**Goal I:** XX will demonstrate the use of correctly articulated /r/ in order to improve intelligibility during sentences and conversation.

Initial status: On February 10, 2014, XX produced /r/ sounds with an average rating of 1.8/3 in sentences she generated. 23% of /r/ sounds were judged as completely correct articulations (rating of 3).

- A. Following a brief warm-up to include targeted single word trials with feedback, XX will produce /r/ sounds in sentences she generates with a rating of “3” in 80% of all articulations.
- B. XX will produce /r/ sounds in sentences she generates with a rating of “3” in 90% of all articulations over two sessions.
- C. XX will produce /r/ sounds in brief conversations of no more than 5 minutes with fewer than 10 articulations receiving a rating below “3” over two sessions.

**Goal II:** XX will demonstrate the use of correctly articulated /r/-vowel combinations in conversation in order to improve intelligibility during sentences and conversation.

Initial status: On February 10, 2014, XX produced the following /r/ sounds with vowels in sentences she generated from target words:

	<u>Far</u>	<u>Fair</u>	<u>Fear</u>	<u>Fire</u>	<u>For</u>	<b>Total</b>
% of 3's	42%	79%	43%	29%	15%	42%
Average rating	2.3	2.8	2.1	2.1	1.6	2.3

- A. XX will produce /r/ + vowel combinations in single target words with a rating of “3” in 90% of articulations.
- B. XX will produce /r/ + vowel combinations in sentences she generates from target words with a rating of “3” in 90% articulations over two sessions.
- C. XX will produce /r/ + vowel combinations in brief conversations of no more than 5 minutes with fewer than 10 articulations receiving a rating below “3” over two sessions.

**Goal III:** XX will demonstrate the ability to self-monitor her /r/ productions in order to facilitate her transition to using intelligible speech during all communication activities, including those outside of the clinic.

Initial status: On February 17, 2014, XX rated her productions of /r/ sounds with 25% accuracy compared to the clinician ratings.

- A. XX will provide ratings for single productions of /r/ sounds with 80% congruency with clinician’s ratings.
- B. XX will provide ratings for single word productions of /r/ sounds with 80% congruency with clinician’s ratings over two sessions.
- C. XX will provide ratings for /r/ productions in sentences she generates with 80% congruency with clinician’s ratings over two sessions.
- D. XX will provide ratings for /r/ productions in conversation with 80% congruency with clinician’s ratings over two sessions.

*Goals for Phonology:*

Present status:

On February 10, 2014, XX produced 64 articulatory errors in conversation, not including those related to /r/ articulation. These included:

- Omission of final stop sounds (27)
  - /t/: “art” – “ar” (10)
  - /k/: “shark” – “shar” (2)
  - /d/: “named” – “name” (6)
- Omission of /l/ and final /r/ (9)
- Omission of final /n/ (4)
- Vowel lowering
  - /or/ to /ar/: “score” – “scar” (9)
  - /ə/ to /ɑ/: “some” – “psalm”
- Devoicing of /z/ in final position (3)
- Stopping (3)
  - /ð/ to /d/: “there” – “dare”
  - /z/ to /d

**Goal IV:** In order to improve speech intelligibility, XX will suppress final consonant deletion in words produced in sentences.

Initial status: On February 10, 2014, XX produced 64 errors in conversation, of which 40/64 (62%) were final consonant deletions.

- A. XX will produce word-final consonants in target words in sentences she generates with 90% accuracy over two sessions.
- B. XX will produce word-final consonants in conversation with 90% accuracy over two sessions.

**Goal V:** In order to improve speech intelligibility, XX will suppress vowel lowering in words produced in sentences.

Initial status: On February 10, 2014, XX produced 64 errors in conversation, of which 9/64 (14%) were vowel lowering errors.

- C. XX will produce accurate vowels in target words in sentences she generates with 90% accuracy over two sessions.
- D. XX will produce accurate vowels in conversation with 90% accuracy over two sessions.

### **Reinforcement**

XX appears to prefer social reinforcement interspersed in blocks between drilling activities. This schedule will be employed until goals are met at the conversational level. Conversational reinforcement will be intrinsic to social activities. Games she enjoys are competitive in nature and include card games and board games. For more challenging tasks, such as acquisition of the self-monitoring skill, a denser reinforcement schedule may be employed.

### **Parental Involvement**

Informal parent conferences will be held frequently to keep Mrs. XX involved in the progress made in the clinic. Additionally, Mrs. XX will be encouraged to observe therapy sessions and participate in activities in the clinic and at home to facilitate XX's transition toward terminating services. If available, Mrs. XX will be strongly encouraged to participate in each session for a set activity or period of time (e.g., 15 minutes).

### **Carryover Program**

As the semester progresses, XX will be expected to complete activities and report on her own articulatory progress outside of the clinic. This self-monitoring and continued articulatory performance outside of the clinic are imperative to her successful transition. Mrs. XX will be involved in facilitating work outside of the clinic.

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Melissa D. Stockbridge, M.Sc.  
Graduate Clinician

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