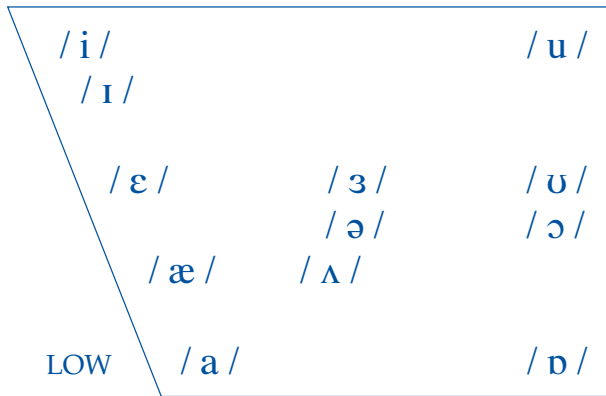


FRONT

HIGH

BACK



Patterns?

Backing

Fronting

Centring

Check diphthong inventory...by circling the diphthongs present in the client’s phonetic inventory, using the following list.

- **Diphthongs:** /aɪ eɪ əʊ oʊ ɔɪ / as in ‘buy, bay, cow, toe, toy’
- **Centring diphthongs:** /ɪə eə əʊ uə / as in ‘deer, bear, four, tour’
- **Centring triphthongs:** /aɪə oʊə aɪə əʊə / as in tyre, lower, layer, flower, foyer

(Note: Individual pronunciation varies across speakers for centring diphthongs and triphthongs. Complete inventory therefore, not necessary.)

(c) Syllable-word shape inventory

Inventory of word shapes	Range of possible word shapes across single words and conversational speech RANGE e.g., C ₀₋₂ V C ₀₋₂	Canonical (common) word shapes MAXIMUM e.g., CCVCC
Monosyllables	SW CS	SW CS
Disyllables	SW CS	SW CS
Polysyllables	SW CS	SW CS

- **Syllable word shape constraints** (*word-shapes client didn't produce, despite sufficient sampling*)

• **Syllable shapes not elicited:** _____

(d) Syllable-Stress inventory

Syllable-stress	Client example(s)
SS e.g., any spondee, cowboy, hotdog, big-bird	
SW e.g., water, carrot, apple	
WS e.g., guitar, giraffe, behind, before	
SWW / SWS e.g., kangaroo, elephant, hospital	
WSW e.g., spaghetti, umbrella, potato	
SWSW e.g., television, caterpillar, watermelon	
Other polysyllabic words e.g., hippopotamus	

(Note: Complete more in-depth syllable-stress assessment and analysis if a problem suspected.)

3. RELATIONAL ANALYSIS

Percent correct measures			Phonological processes		
Measure	Percent correct		Phonological process e.g., alveolar fronting	Percentage use	
	Single words	Conversational speech		Single words	Conversational speech
PCC					
PVC					
Plosives					
Nasals					
Fricatives					
Affricates					
Glides					
Liquids					
Initial and final clusters					

These measure were based on (e.g., *PROPH analysis*) _____

Comments: _____

4. ADDITIONAL FACTORS TO CONSIDER

1. Stimulability for sounds not in phonetic repertoire _____

2. Difference between imitation and spontaneous production?

3. Consistency / inconsistency of child's speech

4. Child's receptive language ability

5. Child's expressive language ability (including realisation of morphophonemes with and without clusters – plural: cats vs boys ; third person: jumps vs cries)

6. Child's response to communication failure and request for clarification (RQCL) (Note: Is child aware of problem?)

7. Parent's response to child's communication failure

8. Child's motivation

9. Parent's motivation / factors to consider for parent training

10. ESL issues to consider?

11. Oral musculature structure and function (WNL or brief comment)

(NOTE: If resonance problem is suspected, complete more in-depth assessment and analysis.)

12. Hearing? Positive / negative history of OME (“glue ear”)? Grommets?

5. TREATMENT TARGETS

Treatment targets in order of selection for intervention	Treatment targets to be monitored for phonological generalisation
e.g., initial /s/ cluster reduction	e.g., stopping of sibilants /s, z, ʃ, ʒ/, stopping of affricates /tʃ, dʒ/ and reduction of /s/ final clusters.

Intervention target selection order is most consistent with (tick one)
 Most knowledge approach Least knowledge approach

6. INTERVENTION APPROACH

- | | | |
|--|--|--|
| <input type="checkbox"/> Minimal pairs | <input type="checkbox"/> Cycles | <input type="checkbox"/> Nonlinear phonological intervention |
| <input type="checkbox"/> Maximal pairs | <input type="checkbox"/> PACT Therapy | <input type="checkbox"/> Natural Speech Intelligibility training |
| <input type="checkbox"/> Multiple oppositions | <input type="checkbox"/> Language-based intervention | <input type="checkbox"/> Phonotactic therapy |
| <input type="checkbox"/> Metaphon | <input type="checkbox"/> Imagery | <input type="checkbox"/> Mnemonics for treating polysyllables |
| <input type="checkbox"/> Metaphonological intervention | <input type="checkbox"/> Psycholinguistic intervention | <input type="checkbox"/> Core vocabulary |

Other: _____

7. PLAN FOR EVALUATING INTERVENTION

What to measure	Category and type of data	When?	Where?	Who?

Speech pathologist: _____ Date: _____