

History: (name has been changed)

Susie is a 6 year old little girl with Apraxia of Speech. Childhood Apraxia of Speech (CAS) is a neurological speech sound disorder where planning and production of speech movements are impaired resulting in errors with speech sounds, coordination, production, and prosody. Susie also demonstrates delay in receptive language (what she understands) as well as expressive language (what she uses to communicate). She has no other known diagnoses, but demonstrates global delays. Susie's mother reported that there were no complications during pregnancy. Susie has received services through the Idaho Infant Toddler Program as well as the school district for speech therapy, occupational therapy, and physical therapy. She currently receives services at Kaleidoscope Pediatric Therapy for concerns with gross motor, fine motor, and speech/language delay.

Challenges:

- Low receptive language skills
- Low expressive language skills
- Unintelligible speech
- Inconsistent speech sound productions
- Inconsistent method for functional communication

Situation:

Susie began receiving speech therapy at Kaleidoscope Pediatric Therapy when she was 3 years old. Her family wanted to encourage development of receptive language, purposeful expressive language, and speech sound production. At that time she could say 'mama', 'dada', and use the sign for 'help'. Susie had difficulty imitating actions/gestures such as clapping hands, patting, and identifying body parts. She had difficulty imitating simple sounds such as animal sounds, consonant and vowel sounds, and vocalizing on command. Susie also had difficulty imitating oral motor movements such as sticking out her tongue on command and puckering lips. She had a short attention span, difficulty transitioning tasks, and following adult directed tasks.

Intervention:

Initially, speech therapy focused on building attention span, participation in tasks, and the use of sign language to gain more purposeful communication. Focus was also placed on imitation of simple sounds, gestures, and oral motor movements to increase coordination and function. Picture schedules were used to encourage attention span, expectation, and transition. An app on an iPad for augmentative communication has been encouraged for more purposeful communication. Oral motor exercises that incorporate sensory stimulation have been utilized for more oral awareness and coordination, and Kaufman Speech Praxis products have been used for building skills sequentially and developmentally. Activities used for speech sound production are completed in conjunction with big motor tasks for generalization and carryover. Susie's family have been given home programs to assist in generalization and carryover.

Results:

Susie can now imitate several oral motor movements with simple verbal cues and modeling such as tongue protrusion, tongue lateralization, and lip protrusion. She imitates actions and gestures more fluidly and with less prompting. Susie can identify many body parts, understands simple pronouns like 'your' and 'my', and will identify pictures of objects, letters, numbers, and colors. Susie follows 2 step, unrelated directions accurately and is beginning to follow simple 3 step directions. She attends to tasks for several minutes and requires little prompting to transition to new tasks. Susie uses an app on her iPad for augmentative communication with simple verbal cues and is beginning to combine symbols to express more complete ideas. She can imitate several consonant sounds in isolation and is beginning to combine CV and CVCV combinations. Susie is beginning to approximate some simple words when prompted and approximate some simple phrases like 'I want more' and 'I'm all done' when given verbal cues. She continues to demonstrate difficulty with coordination of speech sounds, but demonstrates increased effort with all therapy tasks.