

# Welcome the Children Project Language and Assessment Survey for Speech/Language Pathologists

The Welcome the Children project is seeking information from professionals who assess children for developmental delays on their current methods of assessing Spanish speaking children for speech/language delays. (Some information is also being collected on other languages.) This survey information will be used to determine current assessment practices, identify promising practices and to develop new training for child care providers and early childhood educators on observation and pre-referral methods they can use to facilitate appropriate referrals for services.

Welcome the Children is funded by the Department of Human Services, Division of Child Care and Early Childhood Education and is administrated by UAMS Partners for Inclusive Communities. We appreciate your help in obtaining this vital information. Please feel free to share this survey form with other speech/language professionals.

**Contact Information** We ask that you provide your contact information in case we have any questions, but your survey information will only be shared in a combined (aggregate) format. Your contact information will not be shared with anyone else without your permission.

Name \_\_\_\_\_ Title/Certification \_\_\_\_\_

Name of Employer \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Please add my name to an e-mail distribution list to receive information on upcoming training opportunities and resources related to serving children who speak Spanish.

## **Children Served and Languages Spoken**

1. How many children from birth to age three do you currently serve? \_\_\_\_\_  
How many of them speak (or are from families who speak): English only \_\_\_\_\_  
Spanish only \_\_\_\_\_ Spanish/Limited English \_\_\_\_\_ Spanish/English (fluent in both) \_\_\_\_\_
2. How many children age three to age five do you currently serve? \_\_\_\_\_  
How many of them speak: English only \_\_\_\_\_ Spanish only \_\_\_\_\_  
Spanish/Limited English \_\_\_\_\_ Spanish/English (fluent in both) \_\_\_\_\_
3. How many children over age five do you currently serve? \_\_\_\_\_  
How many speak: English only \_\_\_\_\_ Spanish only \_\_\_\_\_  
Spanish/Limited English \_\_\_\_\_ Spanish/English (fluent in both) \_\_\_\_\_

4. Which languages are spoken by **children that have been referred to you** for assessment or services? (Check all that apply.)

- |                                      |                                      |                                   |
|--------------------------------------|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> English     | <input type="checkbox"/> Marshallese | <input type="checkbox"/> Korean   |
| <input type="checkbox"/> Spanish     | <input type="checkbox"/> Chinese     | <input type="checkbox"/> Arabic   |
| <input type="checkbox"/> French      | <input type="checkbox"/> Japanese    | <input type="checkbox"/> Romanian |
| <input type="checkbox"/> German      | <input type="checkbox"/> Laotian     | <input type="checkbox"/> Gujarati |
| <input type="checkbox"/> Vietnamese  | <input type="checkbox"/> Hmong       |                                   |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |                                   |

### **Language and Training**

5. What is your native language? \_\_\_\_\_

6. In which language(s) are **you** proficient? (Check all that apply.)

- |                                      |                                      |                                   |
|--------------------------------------|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> English     | <input type="checkbox"/> Marshallese | <input type="checkbox"/> Korean   |
| <input type="checkbox"/> Spanish     | <input type="checkbox"/> Chinese     | <input type="checkbox"/> Arabic   |
| <input type="checkbox"/> French      | <input type="checkbox"/> Japanese    | <input type="checkbox"/> Romanian |
| <input type="checkbox"/> German      | <input type="checkbox"/> Laotian     | <input type="checkbox"/> Gujarati |
| <input type="checkbox"/> Vietnamese  | <input type="checkbox"/> Hmong       |                                   |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |                                   |

7. Have you received previous training related to English as a Second Language (ESL), Latin American culture, Spanish language, or working with Spanish speaking children?

Yes  No If yes, please describe the amount and type of training received:

**Insert text field here.**

### **Services Provided**

8. From where have you received referrals of children for developmental assessment and services? (Check all that apply.)

- Privately funded child care centers
- Church operated child care centers
- Arkansas Better Chance (ABC) programs
- Even Start programs
- Migrant programs
- Head Start centers
- Early Head Start centers
- School Districts
- Parents/Individuals
- Doctors / Nurses
- Other speech/language therapists
- Physical therapists
- Occupational therapists

- Other \_\_\_\_\_
9. How do you conduct assessments of Spanish speaking children for potential language or other developmental delays? (Check all that apply.)
- I provide bilingual services myself.
  - Separate assessments are conducted in English and Spanish by native speakers of each language.
  - I work with a bilingual or Spanish speaking assessment professional to assess the child. (Please explain.)
- 
- No adaptations are made. Assessments are conducted in English only.
  - Assessments are conducted using interpreters.
  - I meet with the parents to determine how the child speaks in his/her home language in familiar surroundings.
  - I do not provide any formal observations or assessments of Spanish speaking children.
  - Other \_\_\_\_\_

10. If you use the services of an interpreter, please provide information on how you obtain interpreters and the average cost?

**(Insert text field here.)**

11. What type instruments or procedures do you use, or have you used in the past, to conduct assessments of Spanish speaking children? **Please check all that apply and rate the effectiveness of each one you have used from 1 to 10 with 1 being the worst and 10 being the best.**

**Rating**

- \_\_\_\_\_ Bilingual Vocabulary Assessment Measure
- \_\_\_\_\_ Bracken Basic Concept Scale
- \_\_\_\_\_ Brigance
- \_\_\_\_\_ Developmental Rating Scale
- \_\_\_\_\_ Expressive One-Word Picture Vocabulary Test
- \_\_\_\_\_ Idea Proficiency Test
- \_\_\_\_\_ Language Proficiency Measure
- \_\_\_\_\_ Peabody Picture Vocabulary Test
- \_\_\_\_\_ Pre-Language Assessment Scale (Pre-LAS)
- \_\_\_\_\_ Preschool Language Scale-4 (Spanish Edition)
- \_\_\_\_\_ SOLOM (Student Oral Language Observation Matrix)
- \_\_\_\_\_ SOL (Student Oral Language)
- \_\_\_\_\_ Spanish Articulation Measures
- \_\_\_\_\_ Woodcock-Munoz Language Scale
- \_\_\_\_\_ Informal observation of children in natural settings (i.e. at play and interacting with family and peers).
- \_\_\_\_\_ Other \_\_\_\_\_
- \_\_\_\_\_ Other \_\_\_\_\_
- \_\_\_\_\_ Other \_\_\_\_\_
- \_\_\_\_\_ Other \_\_\_\_\_

12. How frequently do you generally conduct formal assessments of a child?

- At least weekly
- At least monthly
- At least every six months
- At least yearly
- Upon entering and leaving child care or a school grade
- It varies with the needs of the child.
- I do not have a standard timeline for conducting formal assessments.

13. In what geographical areas do you provide services? (Please check all that apply.)

- Outside Arkansas
- Statewide in Arkansas
- Only in these counties in Arkansas (Please list.) \_\_\_\_\_
- Only in these cities or local areas in Arkansas (Please list.) \_\_\_\_\_

14. We are putting together a list of disability service providers that provide bilingual services. Where would you refer a child for additional services if he/she speaks Spanish and has a developmental disability? \_\_\_\_\_

\_\_\_\_\_ Do they provide bilingual services?  Yes  No

Explain:

Insert text field here.

15. What type of additional training do you need to better serve Spanish speaking children?

- Cultural and language differences
- Second language development
- Observation and assessment methods
- Adapting assessment instruments for Spanish speaking children
- Classroom adaptations for children who speak Spanish
- Other \_\_\_\_\_

16. Thank you for taking the time to share your information with us! Please provide any additional comments or questions below.

Insert text field here.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Electronic submission will constitute signature. If printing form, please return to the address below.

Please return this completed form to: UAMS Partners for Inclusive Communities, Welcome the Children Project, 2001 Pershing Circle, Suite 300, North Little Rock, AR 72114. For questions regarding this survey, please contact Brenda Reynolds, 501-922-1880; 1-800-342-2923 (Message number); E-mail: [reynoldsbrendak@uams.edu](mailto:reynoldsbrendak@uams.edu)