

SLP-chosen for you, from the Nicespeechlady.com library SPEECH PATHOLOGY PATIENT: _____

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____

_____ DATE: _____



Concise Nicespeechlady.com EXPRESSIVE LANGUAGE ASSESSMENTS - Caregiver/Patient Perception -- Versions 1,2

Caregiver and patient-perspective nicespeechlady.com assessments are available in this resource – to detail EXPRESSIVE LANGUAGE INFORMATION.

Assessments Listed include:

- **Concise Nicespeechlady.com Caregiver Perception Assessment: Expressive Language, Version 1 (C-NCPA: Expressive Language1)**
- **Concise Nicespeechlady.com Caregiver Perception Assessment: Expressive Language, Version 2 (C-NCPA: Expressive Language2)**
- **Concise Nicespeechlady.com Self-Perception Assessment: Expressive Language, Version 1 (C-NSPA: ExpressiveLanguage1)**
- **Concise Nicespeechlady.com Self-Perception Assessment: Expressive Language, Version 2 (C-NSPA: ExpressiveLanguage2)**

The “Verbal/Pointing Choices Sheet for Nicespeechlady.com Ranking/Perception Assessments” is attached to this resource and can be utilized with these tools.

Clinicians can choose to print each section individually through setting preferences if only one is required, as this resource includes both sections in totality.

SLP-chosen for you, from the Nicespeechlady.com library SPEECH PATHOLOGY PATIENT: _____

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____

_____ DATE: _____



Concise Nicespeechlady.com Caregiver-Perception Assessment: Expressive Language, Version 1
(C-NCPA: ExpressiveLanguage1)

Instructions: Caregivers, please answer the questions below:

DEFINITIONS:

Basic communication = speaking in single words or few words at a time.

Moderately-advanced communication = speaking in sentences, mostly about simple ideas.

Complex communication = long sentences, uncommon words.

About Expressive Language:

1. If others have patience, the patient can effectively communicate wants and needs.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
2. The patient can say what is needed at the end of the day the same as the start of the day.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
3. The patient can say what the patient wants, if only basic communication is needed -- without help from others.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
4. The patient can say what the patient wants, if moderately-advanced communication is needed -- without help from others.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
5. The patient can say what the patient wants, if complex communication is needed -- without help from others.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
6. If someone doesn't know how the patient communicates, the patient can adjust.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
7. The patient practices their speech pathology home program 5 days out of every week or more.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

SLP-chosen for you, from the Nicespeechlady.com library SPEECH PATHOLOGY PATIENT: _____

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____

_____ DATE: _____



- 8. The patient tries to use expressive language strategies to communicate.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
- 9. The patient’s expressive language skills are functional, so they would not be a barrier to social interactions.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
- 10. The patient appears to be moving in the right direction in improving expressive speaking skills.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

SCORE = ____/50

New discussion items _____

Level of Assistance Provided (reading items, caregiver input, etc.):

Scoring Projection Data — Patient’s Expressive Language Skill Level per Caregiver-Perception is projected as:

10	—	17	=	profound involvement/total assistance required	
18	—	25	=	severe involvement/maximum assistance required	
26	—	32	=	moderate involvement/moderate cues required	
33	—	37	=	mild involvement/minimum cues required	
38	—	44	=	WFLs with independent use of strategies	=
45	—	50	=	WNLs with independent use of strategies	

NOTE TO THE SLP: This perspective-ranking measures describe the patient’s strengths and possible areas to address in treatment. These are not norm-referenced measures (levels are rough estimates of functioning by reporting, only, and are more descriptive in nature than evaluative). These measures should always accompany direct observational evaluation measures and testing tool administration by the clinician (norm-referenced, if possible), and should not stand alone as evaluative.

SLP-chosen for you, from the Nicespeechlady.com library SPEECH PATHOLOGY PATIENT: _____

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____

_____ DATE: _____



Concise Nicespeechlady.com Caregiver-Perception Assessment: Expressive Language, Version 2
(C-NCPA: Expressive Language2)

Instructions: Caregivers, please answer the questions below:

DEFINITIONS:

Basic communication = speaking in single words or few words at a time.

Moderately-advanced communication = speaking in sentences, mostly about simple ideas.

Complex communication = long sentences, uncommon words.

About Expressive Language:

1. If communication partners have patience, the patient can effectively communicate wants and needs.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
2. The patient can say what is needed to others just the same at the end of the day like the start of the day.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
3. If only basic communication is needed, the patient can say what is needed, without others helping.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
4. If only moderate-advanced communication is needed, the patient can say what is needed, without others helping.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
5. If complex communication is needed, the patient can say what is needed, without others helping.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
6. The patient can modify when not understood by others.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
7. The patient performs their speech pathology home program at least 10 days out of every two-week period.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
8. The patient tries to use expressive language techniques to communicate.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

SLP-chosen for you, from the Nicespeechlady.com library SPEECH PATHOLOGY PATIENT: _____

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____

_____ DATE: _____



9. The patient’s expressive language skills are functional, so they would not be a barrier to social interactions.

NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

10. The patient is moving forward in expressing him or herself.

NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

SCORE = ____/50

New discussion items _____

Level of Assistance Provided (reading items, caregiver input, etc.):

Scoring Projection Data — Patient’s Expressive Language Skill Level per Caregiver-Perception is projected as:

10	—	17	=	profound involvement/total assistance required	
18	—	25	=	severe involvement/maximum assistance required	
26	—	32	=	moderate involvement/moderate cues required	
33	—	37	=	mild involvement/minimum cues required	
38	—	44	=	WFLs with independent use of strategies	=
45	—	50	=	WNLs with independent use of strategies	

NOTE TO THE SLP: This perspective-ranking measures describe the patient’s strengths and possible areas to address in treatment. These are not norm-referenced measures (levels are rough estimates of functioning by reporting, only, and are more descriptive in nature than evaluative). These measures should always accompany direct observational evaluation measures and testing tool administration by the clinician (norm-referenced, if possible), and should not stand alone as evaluative.

SLP-chosen for you, from the Nicespeechlady.com library SPEECH PATHOLOGY PATIENT: _____

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____

_____ DATE: _____



Concise Nicespeechlady.com Self-Perception Assessment: Expressive Language, Version 1
(C-NSPA: Expressive Language1)

Instructions: Patient, please answer the questions below:

DEFINITIONS:

Basic communication = speaking in single words or few words at a time.

Moderately-advanced communication = speaking in sentences, mostly about simple ideas.

Complex communication = long sentences, uncommon words

About Expressive Language:

1. If others have patience with me, I can effectively communicate wants and needs with them.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
2. I say what I need at the end of the day the same as the start of the day.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
3. I can say what I need if only basic communication is needed, without help.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
4. I can say what I need if only moderately-advanced communication is needed, without help.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
5. I can say what I need if complex communication is needed, without help.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
6. If someone doesn't understand how I communicate, I can adjust.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
7. I practice my speech pathology home program 5 days out of every week or more.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
8. I try to use expressive language strategies to communicate.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
9. My expressive language skills are functional, so they would not be a barrier to social interactions.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

SLP-chosen for you, from the Nicespeechlady.com library SPEECH PATHOLOGY PATIENT: _____

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____

_____ DATE: _____



10. I am moving in the right direction in improving my expressive speaking skills.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

SCORE = ____/50

New discussion items _____

Level of Assistance Provided (reading items, caregiver input, etc.):

Scoring Projection Data — Patient’s Expressive Language Skill Level Self-Perception is projected as:

10	—	17	=	profound involvement/total assistance required	
18	—	25	=	severe involvement/maximum assistance required	
26	—	32	=	moderate involvement/moderate cues required	
33	—	37	=	mild involvement/minimum cues required	
38	—	44	=	WFLs with independent use of strategies	=
45	—	50	=	WNLs with independent use of strategies	

NOTE TO THE SLP: This perspective-ranking measures describe the patient’s strengths and possible areas to address in treatment. These are not norm-referenced measures (levels are rough estimates of functioning by reporting, only, and are more descriptive in nature than evaluative). These measures should always accompany direct observational evaluation measures and testing tool administration by the clinician (norm-referenced, if possible), and should not stand alone as evaluative.

SLP-chosen for you, from the Nicespeechlady.com library SPEECH PATHOLOGY PATIENT: _____

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____



DATE: _____

Concise Nicespeechlady.com Self-Perception Assessment: Expressive Language, Version 2
(C-NSPA: Expressive Language2)

Instructions: Please answer questions below:

DEFINITIONS:

Basic communication = speaking in single words or few words at a time.

Moderately-advanced communication = speaking in sentences, mostly about simple ideas.

Complex communication = long sentences, uncommon words.

About Expressive Language:

1. I can communicate my thoughts effectively if the listener takes the time.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
2. I feel I can say what I need to others just the same at the end of the day like the start of the day.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
3. If only basic communication is needed, I can say what I need, without others helping.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
4. If moderately-advanced communication is needed, I can say what I need, without others helping.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
5. If complex communication is needed, I can say what I need, without others helping.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
6. I can modify when the person doesn't understand how I communicate.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
7. I perform my speech pathology home program at least 10 days out of every two-week period.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
8. I try to use expressive language techniques to communicate.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
9. My expressive language skills are functional, so they would not be a barrier to social interactions.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

SLP-chosen for you, from the Nicespeechlady.com library SPEECH PATHOLOGY PATIENT: _____

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____

_____ DATE: _____



10. I am moving forward in expressing my wants and needs.

NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

SCORE = ____/50

New discussion items _____

Level of Assistance Provided (reading items, caregiver input, etc.):

Scoring Projection Data — Patient's Expressive Language Skill Level Self-Perception is projected as:

10	—	17	=	profound involvement/total assistance required
18	—	25	=	severe involvement/maximum assistance required
26	—	32	=	moderate involvement/moderate cues required
33	—	37	=	mild involvement/minimum cues required
38	—	44	=	WFLs with independent use of strategies
45	—	50	=	WNLs with independent use of strategies

NOTE TO THE SLP: This perspective-ranking measures describe the patient's strengths and possible areas to address in treatment. These are not norm-referenced measures (levels are rough estimates of functioning by reporting, only, and are more descriptive in nature than evaluative). These measures should always accompany direct observational evaluation measures and testing tool administration by the clinician (norm-referenced, if possible), and should not stand alone as evaluative.

SLP-chosen for you, from the Nicespeechlady.com library SPEECH PATHOLOGY PATIENT: _____

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____

_____ DATE: _____



Verbal/Pointing Choices Sheet for Nicespeechlady.com Ranking/Perception Assessments

NEVER (1)

OCCASIONALLY (2) – 1% to 33%

SOMETIMES (3) – 34%-66%

MOSTLY (4) – 67-99%

ALWAYS (5) – 100%