

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

SPEECH PATHOLOGIST: _____

SPECIAL INSTRUCTIONS: _____

_____ DATE: _____



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

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

Assessments Listed include:

- **Concise Nicespeechlady.com Caregiver Perception Assessment: Receptive Language, Version 1 (C-NCPA: ReceptiveLanguageAssessment1)**
- **Concise Nicespeechlady.com Caregiver Perception Assessment: Receptive Language, Version 2 (C-NCPA: ReceptiveLanguage2)**

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.

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

1. The patient lets others know if the patient can't understand others (if not applicable because the patient always understands others, indicate "always").
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
2. The patient can understand others who use basic communication.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
3. The patient can understand others who use moderately-advanced communication.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
4. The patient can understand others who use complex communication.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
5. The patient practices their speech pathology home program at least 5 days out of every week.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
6. The patient answers yes and no questions accurately.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
7. The patient follows the directions others give to them.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
8. The patient follows what others say to them.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

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9. The patient’s skills in understanding others’ communications 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 understanding what others say to them.

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 Receptive Language Skills (through Caregiver Perception) are Projected to be Rated 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.

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

1. When the patient can't understand others, the patient lets the speaker know (if not applicable because the patient always understands others, indicate "always").
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
2. Basic communication is understood by the patient.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
3. Moderately-advanced communication is understood by the patient.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
4. Complex communication is understood by the patient.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
5. Speech pathology home program practice is conducted at least 10 days out of every two-week period.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
6. When others ask yes and no questions, the patient answers correctly.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
7. When others communicate directions to the patient, the patient follows them.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)
8. The patient understands what others say to them.
NEVER (1) OCCASIONALLY (2) SOMETIMES (3) MOSTLY (4) ALWAYS (5)

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9. The patient's skills in understanding others' communications 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 understanding and following the communications of others.

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 Receptive Language Skills (through Caregiver Perception) are Projected to be Rated as:

10	—	17	=	profound involvement/total assistance required
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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.

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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%