Speech Therapy in the Public Schools: Relating to the General Curriculum:

“Curriculum-based therapy or curriculum-relevant therapy has become more prevalent since the passage of the Individuals with Disabilities Education Act Amendments of 1997. Individualized Education Programs (IEPs) must be aligned with the state’s academic standards, which are derived from the state regulations. If a student qualifies for specially designed instruction, all his needs must be based on the general education curriculum. Therefore, and IEP that is linked to the general curriculum has to be designed. Because all therapy provided addresses the IEP, therapy also must be based on the general curriculum. According to Ehren (2002), ‘Curriculum-relevant therapy is an approach calling for SLPs to address curriculum in a unique way, making use of their special competencies in language and its disorders. It does not mean that SLPs will become responsible directly for mastery of subjects such as chemistry, American history, or algebra, but rather contribute to the acquisition of its content by teaching the language underpinnings, as applied directly to the content. (p.72)”" 

Survival Guide, p 272

Education takes place through the process of communication and since we are in the school setting, it is fitting to always “relate to the general curriculum”. The law (IDEA) emphasizes this point to the extent that it is mentioned 34 times! Also, with regard to the curriculum, “students must learn to listen, speak, read, and write in order to participate in the typical communication events that are appropriate for their respective age and grade levels. Students also use spoken and written language skills and strategies to learn in other subject areas like math, social studies, and science.” (Ehren, “Maintaining Therapeutic Focus)

The evaluation programming team determines the degree to which the communicative impairment affects the student’s ability to participate in the educational process. The school team considers how and to what degree a student’s speech/language disability affects academic, social, behavioral, medical, functional, developmental, vocational, and/or social areas of his educational performance. The reason for addressing underlying communicative weaknesses is to enable the student to improve performance within the educational environment. Therapy sessions are derived from the IEP, which is based on the general education curriculum. Student progress is measured by the achievement of the goals as related to the general education curriculum. It is a paramount concept for SLPs serving students in the public schools.

The relationship you have with the classroom teacher, the knowledge you have of therapeutic interventions, and the understanding you have of the curriculum plays a critical role in influencing the success of your student. In order to effectively integrate the curriculum into therapy, you must identify with school’s curriculum, understand the teaching methodologies used in your building, and collaborate with the teaching staff. Keep textbooks that the teachers are using in your room for easy access. Find out your student’s spelling list for the week and incorporate the words into therapy. Become familiar with subject matter, special units, class projects, and special events going on in the classroom.

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Session Opening:
Years ago the Arkansas Department of Education developed a training program designed to improve teaching skills. All teachers were required to receive “PET training” (Program for Effective Teaching). One of the components of PET is establishing a “set”. Let you students know their goal and activity for the day. I usually do this as we walk down the hall to the speech room.

CLINICIAN: Today we are going to practice saying /s/ sounds in words. What sound are we working on?
JOHNNY: /s/ sounds
CLINICIAN: Right. And today while we practice saying our /s/ sounds in words, we will play Kerplunk! Hey, Johnny, before it’s your turn to pull the stick, how many words do you want to say, 5 or 8?
JOHNNY: (if this is the “Johnny” I know, he’ll say “3!”)

Preparing for speech practice: You may elect to say, “TELL ME WHAT YOU ARE SUPPOSED TO REMEMBER ABOUT HOW TO SAY THIS SOUND (Model).” I usually say, “LET’S WARM UP OUR ‘SPEECHERS’” (“Speechers” is a word created by one of my former students.) I usually give each student a manipulative of some sort to aid in practice, relieve anxiety or help focus attention. Counters, blocks, beads, interlocking chips, small stress-relieving balls, poker chips, etc. are all good items to have on hand. My goal is to elicit as many responses as possible…even before “the game” begins!

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Record Keeping:
“Clinical documentation is among the most basic of our professional responsibilities – and is both an obligation and a privilege.” (Becky Sutherland Cornett, “Clinical Documentation In Speech Language Pathology: Essential Information for Successful Practice” The ASHA Leader September 5, 2006 Vol. 11 No.12, p.8)

Accountability has been a focal point in our field for some time and now it is a crucial issue in general education. Documentation is essential. It is the life-line of accountability. There are many methods of keeping records. Find a system that is comfortable for you and maintain consistent and accurate documentation. You will probably need to experiment often and you will probably have different types of record keeping for different clients.

“According to Paul & Hasselkus (2004), the purposes of documentation are to:
- Justify initiation and continuation of treatment
- Support diagnosis and treatment…
- Describe client progress
- Describe client response to interventions
- Justify discharge from care
- Support reimbursement
- Communicate with other practitioners
- Facilitate quality improvement
- Justify clinical decisions
- Document communication among involved parties…
- Protect legal interests of client, service provider, and facility
- Serve as evidence in a court of law
- Provide data for continuing education
- Provide data for research (i.e., efficacy)”

From “Clinical Documentation In Speech Language Pathology: Essential Information for Successful Practice”
By Becky Sutherland Cornett, The ASHA Leader September 5, 2006 Vol. 11 No.12, p.8)

One of my mentors, Wayne Secord, often says, “In God we trust. All others need data.”
Incorrect Productions: (ARTICULATION THERAPY)
Students need to be empowered to become their own “speech teacher” by learning to discriminate between correct and incorrect productions of sounds. Instead of saying, “Let’s try again.” It is suggested to comment in this manner: “THIS IS WHAT YOU ARE DOING. (Model.) THIS IS WHAT YOU SHOULD DO. (Model.) SEE THE DIFFERENCE? … TRY IT AGAIN.”

Sometimes the student is primed to see you make a slash mark on the data collection form. He learns quickly that the sound produced was incorrect. Your slight pause, raised eyebrows, or other expression may facilitate self-correction. The student will usually try to revise his production. Many times I provide “mixed signals”. For instance upon hearing a correct production, my face sometimes appears confused as if the child provided an incorrect production and I will ask, “Did you make that sound ‘the good way’?” The goal is to require the child to rely more on proprioceptive feedback.

Group Therapy:
“There is a definite distinction between ‘therapy in a group’ and ‘group therapy.’ Actual group therapy is harder to play and execute than individual therapy or therapy in a group. Most beginning clinicians start out doing therapy in a group, which boils down to providing individual therapy in a group setting.” Survival Guide, p 262

Group therapy can be provided in the classroom or in the therapy room. Speech-language pathologists can “team-teach” or “co-teach” with the classroom teacher or offer a traditional “pull-out” therapy service delivery. “In group therapy, most beginning clinicians think this type of interaction is possible only if the clients are working on identical goals. This is not necessarily so. The following dialogue portrays the idea of group therapy (Mentally role-play this scenario.)

| CLINICIAN: | (showing the client a picture) What's this? |
| JOHNNY:   | sun                                           |
| CLINICIAN: | Good sound! (looking at Billy) Use Johnny’s word in a sentence. |
| BILLY:    | The sun is yellow.                            |
| CLINICIAN: | Good job! What’s this? (looking at Johnny)   |
| JOHNNY:   | soap                                          |
| CLINICIAN: | Sounds good! Make a sentence (looking at Billy). |
| BILLY:    | I wash with soap.                             |
| CLINICIAN: | Nice!                                         |

In this example, interaction was obtained on the goals of the session. Billy’s responses were derived from Johnny’s responses and built on them.” Survival Guide, p 264

One of the most effective methods regarding group therapy is to create “centers” like in the regular classroom. Students are engaged in an activity for about 10 minutes before rotation. A center or “station” could involve spelling target words using magnetic letters, puzzles, using the language master, laying on the floor and practicing words, computer “games”, etc.
Best Practices in Articulation Therapy:
• Always attempt to get at least 150 responses/session! There are many ways to achieve this. A few suggestions: 1). Have students take their own data (manipulatives could be used); 2). Have students subvocalize or say the words with their “voices turned off” during the other students’ turns to increase the motor movements and number of repetitions; 3). Prior to the game/activity require at least 30 responses; 4). Before being dismissed at the close of the therapy session, require 8 -10 responses
• Incorporate self-monitoring – it is essential to progress.
• Research does not support “oral motor activities” for sound production.

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About Games & Articulation Therapy:
When asked, “What did you do in speech today?” most students will respond, “Oh nothing. We just played games.” That response is prevalent and it seems to either ruin our reputation or makes us the most popular teacher in school!

Games are commonly used in speech therapy. It’s a tradition. Almost any activity might be considered a “game”. Games are undoubtedly fun for students (and for me!), but they do have a purpose – to facilitate newly acquired communicative skills. Games are not just randomly selected and used to take up therapy time. They provide novel opportunities for drill and practice.

Remember, the emphasis is on practicing speech sounds or reinforcing a language-based concept, not on playing the game. Most games and activities are exciting and fun. But watch out! In jazzing up an idea, be careful to not downplay the goal you have for the student.

Helpful Hint: Remind the student each and every session of the primary focus of therapy. (It’s no secret!) Say something like, “YOU ARE WORKING HARD TO SAY THE /R/ SOUND THIS WAY (Model) INSTEAD OF THIS WAY (Model). TELL YOUR TEACHERS AND YOUR MOM AND DAD THAT YOU CAN NOW SAY “RED” THIS WAY (Model).”

Helpful Hint II: Use “worksheets” and word lists at least to elicit speech. If the student is proficient, send the work home at least once each week. If the student is not proficient, do not send work home! It will be a disaster to reinforce and practice incorrect speech or cause undue frustration!

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Auditory Bombardment:
Dr. Barbara Hodson introduced us to this term back in the 80’s. It simply means “auditory awareness”. Children with speech impairments seem to ignore auditory feedback; i.e., they do not hear how they sound! So, for years they apparently rely on their own inaccurate kinesthetic images. The use of slight auditory amplification has proven to be a powerful tool. It helps the child hear the target word correctly and allows the clinician to produce the word naturally without exaggerating productions. Think of it this way: Auditory Bombardment is to the ears as writing in bold print is for the eyes.
Instructions for Auditory Bombardment: This is a listening activity. Your child should not repeat the words or sentences. Have your child engage in a quiet activity such as drawing or coloring, playing with play dough or puzzles. Use the Amplified Listener* at a #1 or 3 or 3 volume setting (not too loud). Put headphones on your child. Say about 10 target (stimulus) words into the amplifier device in a slightly shower-than-normal pace; i.e., not too fast, not too slow. After saying the words in isolation, go back to the first word and use it in a short sentence: (e.g., “purse. The purse is blue.”) After repeating a sentence for each word, say the word in isolation again. This procedure should take about 2 minutes. In the “perfect world”, this activity would be carried out about 5 times a day. WARNING: This activity is not recommended if it becomes a major chore or causes stress or undue anxiety. Again, the volume setting should be around 2 or maybe 3 -- use only slight amplification.

*An Amplified Listener can be purchased at Radio Shack for about $25.

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Sound Discrimination Activities:
Listening to speech requires much more than knowing a sound is being made. It requires the child to hear the difference between hear and hair, ring and wing, free and free, etc. Hearing differences between similar words and sounds is called auditory discrimination or speech discrimination. Children with speech-language difficulties and especially children with central auditory processing disorder probably have problems hearing the subtle differences in words. Of course, this affects speech and causes a problem in spelling and other phonological awareness activities.

THUMBS UP/THUMBS DOWN
Initially, the SLP models the target sound correctly and incorrectly in the initial position of a word. The class determines the correct or incorrect production of each and gives the appropriate feedback (thumbs up for correct sound and thumbs down for incorrect). The, each student has a turn being the teacher, with the class continuing to practice discrimination and feedback.

“THE LISTENING GAME”
When learning “color words”; i.e., kindergarten sight words, have students to stand and jump “only when you hear the word green” (show the word and color). If a child jumps at an inappropriate time, he sits down. The list may begin something like this:

“greet  greek  green  green  grief  green  grease”

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Speech Practice Activities – THE CLASSICS!
COFFEE CAN
Decorate a coffee can and its plastic lid with contact paper. Punch holes in the lid. Thread pieces of yarn of different colors and different lengths through the holes, tying a knot at each end of each string. As the child pulls each string, he or she must sustain the target sound until the string stops at the other end.
THE BUBBLE BLOWER
Draw a chart with a little girl in the corner blowing bubbles of three different sizes. In each bubble write the target sound or syllable. Give the child an ice-cream-stick pointer. As the child points to each bubble, he or she says the sound, changing intensity with the size of each bubble.

FROGGY JUMP
Draw a bunch of lily pads on one piece of poster board and a frog on another. (It’s better if you use a rubber or plastic frog.) On each lily pad, write a syllable using the target sound and a vowel. The child moves the frog from lily pad to lily pad, saying the repeating or alternating syllables.

DURATION CARDS
Construct index cards with patterns of long and short lines. For instance, one row would have a line all the way across the card; the second would have a line half way across; the next would have two short lines and a long line; and so forth. The child repeats the sound in a pattern matching each line on the card. Begin with a simple one-pattern sequence, and build up to three- and four-pattern sequences.

WIGGLY WORM
Draw a chart with a worm that goes up and down. Divide the worm into sections. The child moves his finger up and down the worm. He increases the sound in loudness as he moves up and decreases it as he moves down.

FISHING FOR SOUNDS
Glue a string onto a large magnet and tie it to a pole or stick. Move the chairs away from the therapy table and pretend that water is everywhere. Sit on top of the table and “Be careful and don’t get wet” or “Don’t fall into the lake”. Attach a paper clip to each stimulus card and throw them on the floor within reach of the fishing pole. The student is required to use good speech as he/she catches each “fish”. Actually the students don’t seem to care that the stimulus card is not in the shape of a fish. The students simply love this activity. Some therapists get very creative and cut shapes of fish from construction paper and use a small inflatable pool in the therapy room. There are many variations to this old game…use your imagination!

WHAT’S MISSING?
Put 2 or 3 cards on the table. The student closes his eyes while the therapist takes one card away or turns one card over. The student guesses what card is missing.

FIND THE TARGET
Create 10 or 15 flashcards or pictures of objects whose names contain the target sound. First, the child is asked to name the objects shown. Then the clinician displays the cards. If the target were /s/, the clinician might say, “I’m going to pretend that this piece of paper [a blank card] is soap. You close your eyes. I’ll hide the soap under one of the other cards. You must guess which card the soap is under. Say, ‘Is the soap under the pencil?’” The child must ask the carrier question until he finds the soap. He looks under the cards himself. I have used pennies. When the penny is found, the student gets to keep it. There are many variations of this game; be creative!

LADDERBOARD
Draw a ladder with each rung numbered. The numbers indicate the number of times the player is required to say his or her target sound or word. If it is said correctly, the child can move to the
next rung. The object is to get to the top rung of the ladder. This is game has probably been in existence since the beginning of speech therapy! I think it’s fun to bring a real ladder into the therapy room. After the student response, you put their picture on the ladder rungs. (It would be more fun to actually have the child climb the ladder, but, accidents do happen, and you don’t want to be responsible!)

**FEED THE ANIMAL:**
Get a picture of an animal and cut a hole where the mouth is and attach to a box. Prepare target cards. (It’s a good idea to “feed the dog a bone”; i.e., the target pictures or words are on a bone-shaped card. Other examples are feed the elephant peanuts; the bird gets worms, mouse gets cheese, horse gets apples, etc.)

**PERSONALIZED ARTICULATION CARDS:**
This is the articulation “SPIN-OFF” FOR Kagan’s Color Coded Co-op Cards. The idea is to have students create their own stimulus cards to foster more interest in saying pictured words with good speech. The students draw one picture with their target sound per 3” x 5” card. The cards are hole punched in one corner and tied with a twisted pipe cleaner. These packs of cards can be hung on a bulletin board for easy availability to students. Cards can be used for picture stimulus for games and drill.

**SIX CARD TURNOVER:**
Each student is given six cards with their targeted sound included in words. Students place the cards face up in front of them in a line. When it is their turn, they speak the names of all the cards and then shake one dice. Counting from left to right, if they roll, for example, a 3, and then they say the name of the third card and or use it in a sentence and turn that card over. The turn then passes to the next student who does the same. The winner is the first student with all his or her cards turned over.

**MEMORY:**
Get two matching pictures with targeted sound. Shuffle them and turn over for the student to find the matching pair. Each card that is turned over is repeated.

**WHAT AM I?**
Attach a stimulus picture or word to the back of a student’s shirt. Allow other students to see the picture/word and give clues for identification. Design a point system. If the student correctly names the picture/word based on 1 clue, he or she gets 10 points; if the stimulus is identified after 2 clues, 5 points, etc.

**STICK MAN:**
This activity is a make believe man that grows as the student is able to say his or her sound in isolation or in words. Following each correct response, the student draws one body part.

**DRAWING/COLORING:**
Following each correct response, the student draws one line on a dot-to-dot sheet, or colors in a space on a coloring page. I always write an explanation regarding the activity on the top of the student’s paper. This way, parents and teachers know their child didn’t “just color in speech”.

**FLASHLIGHT:**
Put stimulus cards in different places around room. Turn lights off. Child finds cards with flashlight and names them.
PLAY-DOUGH FUN:
Everyone loves play-dough! Here’s the recipe:
- 4 cups flour
- ½ cup cream of tarter
- 1 cup salt
- 4 T. oil
- 4 cups water

Combine dry ingredients in non-stick pan. Combine water, oil, and food coloring. Pour into dry mixture. Cook and stir over low heat until play dough is completely formed and is no longer sticky. Allow to cool slightly before storing in an air-tight container or zip lock bag. Variation: To give the play dough a great smell, add one package unsweetened Kool-Aid.

COMMERCIAL GAMES:
Any board game can be used in therapy. Follow the rules of the game, but prior to the student’s turn, he or she says the target word/picture. Before playing the game, we “warm up our speechers” by saying the targeted sound in words or phrases or sentences at least 20 times! Variations are:
- Students can select the number of times they are to repeat the word or identify the picture.
- Everyone says 8 words before their turn. The next time 7 words are said, etc. all the way to one.
- The student to the right decides the number of times the one on the left says the word or names the pictures.
- If all 5 words are correct, the next turn is “free” (i.e., the stimulus words can be skipped).
- Roll the dice to determine the number words said prior to turn.

TOYS/OBJECTS:
I often use toys and every-day objects in therapy. Be creative and incorporate toys and common objects into therapy. NOVELTY IS THE KEY! Examples are:
- Use a suitcase or purse. Say the stimulus word and place picture or word into the suitcase.
- Arrange stimulus pictures/words on the floor and turn the lights out. Give the student a flashlight and have them spotlight the pictures as they are identified. Lazer pointers are good to use under close supervision.
- Prepare a stack of stimulus pictures and look through the lens of an old camera and “take a picture of ______”. Use binoculars, magnifying glass, toilet paper roll, sunglasses, etc.
- Place stimulus pictures/words on the table or floor in a row. Use toy cars or trucks and “drive over ________”.
- Play kitchen, using miniature toys and guiding the student to their targeted sound.
- Incorporate magnetic letters with stimulus pictures: “‘B’ on ______.” Or “Orange ‘P’ on ______.”
- Use pointers for eliciting speech: Tape a fake fingernail on student. Arrange a row of stimulus pictures and have student point to each as it is named. Other pointers are: spoons, fishing poles, etc. Have student to wear a glove during pointing/naming activity.
- Start a collection of toys and trinkets. Store in bags or boxes according to sound.
- Use your imagination!
PHYSICAL ACTIVITIES AND SPEECH THERAPY:
I believe in movement! “Neuroscientists are advocating the importance of movement and physical activity in the learning process. … Educators who understand how the brain works can better teach students.” (Jean Blaydes Madigan) Become familiar with the term, action-based learning, understand the neurological implication…and learn about it! Check out www.actionbasedlearning.com The following activities do not come from the actual Action-Based Learning program, but they do provide movement, which is key to learning! First, prepare appropriate target pictures or stimulus words. Then:

- Have students “Jump on _____”; “Sit on ____.” “Skip over ____.” “Run to ____.” “Run away from ____.” Using a rolling chair, “Roll over ____.”
- COLOR FUN RUN: Paste pictures of target words on different color paper. Place each of these on a different wall. Cut our pieces of the same colors and place them in a grab bag. A student picks a color from a bag and yells out the color. The other students run to the wall that has the same color paper on it and names the picture.
- CLOTHESPIN GAME: Attach two clothespins to the stimulus picture cards and set on floor. Using a small ball, go bowling. “I knocked over ____.”
- CHIP TOSS: Give students 10 same-colored chips. Arrange chairs in a row and place box or basket in the floor a few feet away. After each turn the student tosses the chip into the basket. If he or she “scores”, they get one free turn. The student with the most chips in the basket is the winner.
- POP THE BALLOON: Insert words into balloons and then tape them on the wall. The student pops the balloon and says the word.
- LIE ON THE FLOOR and say speech words/sentences…make “snow angles”
- WALK IN “LAZY EIGHT” while repeating words/sentences… or walk in lazy eight prior to therapy.

Remember that brain research indicates that movement in the learning process is vital! Speech therapy is linking learning and movement…it is a kinesthetic activity!

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Technology:
Keep track of the continuous influx of the latest technology and incorporate it in all aspects of therapy! “Look beyond the technology. In and of itself, technology is irrelevant. It is the use of technology that is important. Focus primarily on the most critical issues for your students – communication, interaction, and participation.”

The Survival Guide for School-Based SLPs, p.350

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Carry-Over Activities:
“Speech-language pathologists frequently comment that obtaining carryover (generalization) is problematic. Carry-over is the process in which the client exhibits newly learned techniques (e.g., correct production of a particular sound, use of present progressive tense) in all situations regardless of the environment or the people present. Many clinicians complain that the client simply does not use a technique outside of the environment in which it was initially performed. Carry-over or generalization is more likely to be attained when steps are taken to make the client more independent. A client is more likely to become involved and independent if the
clinician emphasizes monitoring and performing specific assignments as early as possible in the therapeutic program. In this way, the client becomes responsible for his own performance.”

“The key factor to address here is, however, the notion of relevance...we must look beyond isolated skills and bits of data taken out of context. We need to address the more powerful concern of the elements that make a difference in the lives of children as they interact with others in their families, in the lunchroom, and in their classrooms.”

**AROUND THE TOWN**
Create a board showing streets of your community with familiar stores and other buildings labeled. The child must tell a story about a trip to the bank, to the zoo, etc. – what he or she would do or buy at each place.

**PASSWORD**
Make a set of cards picturing objects whose names contain the target sound. Each player is given a few cards. The first player says a carrier phrase that is a clue to the “password” - “I'm thinking of something hot.” Other players guess the password; using full sentences such as “Are you thinking of the sun?” If the guess is wrong, the first player gives another clue. The player who guesses correctly gets the card and says a sentence using the password. The second player then gives a clue to his password. At the end of the session, the player with the most new cards wins.

**CAMPING TRIP**
Use a sheet to drape over a table in the therapy room. This can be the tent or cave. Bring snacks to eat around the campfire and flashlights to see in the dark. Guide the story telling to elicit target sounds.

**HOME ACTIVITIES**
- Call a friend and use target words.
- Ask family members to play catch. Each time the student throws a ball; he or she says the target word.
- Read aloud, paying close attention to target sounds in words.
- Find target sounds in words in magazines, books, newspapers, etc.
- List family members whose names have the target sound in them.
- Listen carefully to a TV program and try to catch target words.
- Instruct a parent to give the following instruction. “Before you go to sleep at night, shut your eyes and try to think of as many target sound words as you can. Remember the pictures and exercises from speech class. Picture them in your mind.”

**PROBLEM SOLVING**
Refer to books and magazines that offer lists of “sentence problems”. An excellent resource is “the HELP series” (published by LinguaSystems) which offers practical functional language exercise like wh-questions, auditory memory activities, categories, idioms, and much more. Examples:
- What would you do if you dropped your ring down the drain in the sink?
- What would you do if it was nighttime and the electricity in your home went off and you didn’t have any candles?
- What would you do if you saw an accident?
- If you were in a boat and it started to sink, what would you do?
Closing The Session:
Your therapy session needs closure. It is advisable to inform students that “speech class” will end “in 2 minutes”. Since many students do not understand the concept of time, provide a TimeTimer or some method of clearly indicating 2 minutes. Another idea is to tell the student how many more words he has to say before leaving…or how many more turns he will take before returning to the classroom.

It is important to assess a child’s understanding of each therapy session. Encourage the student to take an active role in this review. For example,

**Clinician:** “Today we practiced saying words that begin with /k/. What is the name of the /k/ sound?

**Johnny:** It’s a ‘tongue-scaper sound’.

**Clinician:** Right, and why do we call it the tongue-scaper sound?

**Johnny:** Because my tongue scrapes the back of my throat.

**Clinician:** So, what did we work on today?

**Johnny:** Making tongue-scaper sounds in words.

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The Bottom Line:
What an exciting time to be on the threshold of establishing a new career! After years of research and advances in technology the fields of science, medicine, and education are merging. School-based speech-language pathology is diverse, dynamic, and challenging. This is probably where you need to be!

Your formal training, of course, is a must. You will soon realize that there is no way that your university can prepare you for everything. You will be exposed to the basics…and through your experience and research, you will continue to grow and learn and become an awesome speech-language pathologist!

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Resources:


**The Survival Guide for School-Based Speech-Language Pathologists** By Ellen Pritchard Dodge, 2000, Singular Publishing Group


A Phonemic Approach to Remediation: Targeting Intelligible Speech
By Barbara Hodson and Elaine Paden, 1983.


Sourcebook of Articulation Learning Activities: Instructional Strategies and Methods By William Justin Worthely

Speech Fun With a Chalkboard By Peter A. Tingblad

**HIGHLY RECOMMENDED READING!!! A Must!!**

Some of My Favorite Quotes:
I enjoy reading and collecting quotes. Here are some of my favorite quotes as they relate to the field of speech-language therapy.

**It’s nice when your job is a privilege.**

MARK MAGUIRE  
First Baseman, Saint Louis Cardinals  
Larry King Live, 1998

I have found that one of the outstanding traits that characterize most clinicians, no matter where they work, is their continuing hunger for new information.

CHARLES VAN RIPER  
“GRANDFATHER OF SPEECH PATHOLOGY”

If you want to be successful, it’s just this simple:  
Know what you’re doing.  
Love what you’re doing.  
And believe in what you’re doing.

WILL ROGERS

What we need is more people who specialize in the impossible.

THEODORE ROETHKE

**Open up my head and let me out...**

DAVE MATHEW’S BAND

Serve wholeheartedly as if you were serving the Lord, not men.

EPHESIANS 6:7 NIV

**A grin is equivalent to a hundred repetitions.**

Try to elicit a few grins each session.

CHARLES VAN RIPER  
“GRANDFATHER OF SPEECH PATHOLOGY”

Goals are set in the present in response to something that happened in the past, to make a difference in the future.

CAROL WESTBY, Ph.D  
ASHA FELLOW
Repetition is the mother of memory.  
JULIE PYBURN

We help to make dreams a reality – one student at a time.  
NJERI NURU-HOLM, CCC-A

If you can’t do it with feeling, don’t.  
PATSY CLINE

Do what you love and love what you’re doing,  
and you’ll never work another day in your life.  
SOURCE UNKNOWN

An affirmation is a fancy name for a cheer that builds our confidence, self-esteem and helps us reach our full potential.  
JULIE PYBURN

All kids need a little help, a little hope, and someone who believes in them.  
ERWIN “Magic” JOHNSON

“Unless you are at peace with who you are, you will never be content with what you have.”  
DAVE RAMSEY

“God help me, I do love it so!”  
GEORGE C. SCOTT in PATTON  
General Patton’s reference to the battlefield

“I have to believe…that when things are bad…I can change them.”  
RUSSELL CROWE as Jim Braddock  
in CINDERELLA MAN

As for me, prizes mean nothing. My prize is my work.  
KATHERINE HEPBURN

A master in the art of living draws no sharp distinctions between his work and his play, his labor and his leisure, his mind and his body, his education and his recreation. He hardly knows which is which. He simply pursues his vision of excellence through whatever he is doing, and leaves others to determine whether he is working or playing. To himself, he always seems to be doing both.
I’m not anxious to die. I’m anxious to matter.

BEN AFFLECK as RAIF McCALULEY in PEARL HARBOR

Don’t give up on a life just because it’s banged up a little.

CHRIS COOPER as TOM SMITH in SEABUSCIT

If they don’t understand, how can they reach me?

Rap Artist, COOLIO in “Gansta Paradise”

Life is about progress, not perfection.

Judy Wood

It is normal to be different.

MEL LEVINE

One person can make a difference, and every person should try.

JOHN F. KENNEDY

Variations are to be expected, and are in no way to be considered a defect.

Hang tag from Madras shirt

Show your students success once and they will never return failure.

MARVA COLLINS

Learn your horse. Each one is an individual and once you penetrate his mind and heart, you can work wonders with an intractable beast.

TOM SMITH
Seabiscuit’s Trainer

Great teachers have high expectations for students but even higher expectations for themselves.

TODD WHITAKER
What Great Teachers Do Differently: 14 Things That Matter Most
My work, my life, must be in the spirit of a little child seeking only to know the truth and follow it.

GEORGE WASHINGTON CARVER

I never intended to become a run-of-the-mill person.

BARBARA JORDAN

God has given each of you some special abilities;
be sure to use them to help each other.

I PETER 4:10 (TLB)

Do it big, do it right and do it with style.

FRED ASTAIRE

Greetings! I am pleased to see that we are different. May we together become greater than the sum of us both.

The VULCAN’S SALUTATION- STAR TREK

Success consists of a series of little daily efforts.

MAMIE McCULLOUGH

Don’t be afraid to go out on a limb –
that is where the fruit is.

ANONYMOUS

You can’t do it all yourself. Don’t be afraid to rely on others to help you accomplish your goals.

OPRAH WINFREY

You never know when you’re making a memory.

RICKIE LEE JONES

I am differently able.

JERRY NEWPORT
AN ADULT WITH AUTISM
When we deal with speech,
we deal with the essence of man.

CHARLES VAN RIPER