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Language Assessment in Early Childhood, Presented in Partnership with Pearson

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Language Assessment in Early Childhood

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Disclosures

 Dr. Scheller is an employee of Pearson (financial), publisher of the PLS-5 and CELF P: 2, both of which will be discussed in this presentation.

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Agenda

12:00 – 12:20 PM: Review of Best Practice Procedures

(PLS-5 Alignment with Best Practice)

12:20 – 12:37 PM: Uses and score analysis: PLS-5

12:37 - 12:55 PM: Uses and score analysis: CELF

Preschool-2

12:55 – 1:00 PM: Questions

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Learning Outcomes

- 1. Participants will be able to name at least one best practice procedure for evaluating a young child.
- 2. Participants will be able to describe at least one area where the PLS-5 aligns to best practice assessment for young children.
- 3. Participants will be able to describe at least one type of referral for which the PLS-5 can be used effectively to answer evaluation questions.
- 4. Participants will be able to describe at least one score on the CELF P: 2 and how it can be used to answer a specific referral question.

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Legal and Ethical Issues

- Federal Legislation affecting Preschool Assessment
 - IDEA
 - FERPA
- Ethical Issues
 - Test Validation
 - Informed Consent
 - Confidentiality

(ASHA, 2010; Demers & Fiorello, 1999; Wrightslaw, 2011)

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Assessment Procedures with Preschoolers

- Understanding the characteristics of Preschoolers
 - Variability
 - Reaction to testing demands
 - Motivation
 - Refusal versus cooperation

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Assessment Procedures with Preschoolers

- · Preparing for testing
- Testing session

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Assessment Procedures with Preschoolers

- Begin Testing
 - Interact with confidence
 - Begin testing when child is ready
 - Observe and record behavior
 - Be sensitive to the needs of the child
 - Give praise and reinforcement liberally, when indicated
 - Adjust speed of testing according to child's needs
 - Have a structure, but remain friendly
 - Based on child factors, determine length of testing session

(Romero, 1992)

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Guiding Developmental Concepts

- 1. Human development is shaped by a dynamic and continuous interaction between biology and experience.
- 2. Culture Influences every aspect of human development and is reflected in child-rearing beliefs and practices designed to promote healthy adaptation.
- 3. The growth of self-regulation is a cornerstone of early childhood development that cuts across all domains of behavior.
- 4. Children are active participants in their own development, reflecting the intrinsic human drive to explore and master one's own environment.
- 5. Human relationships and their dynamic interactions are the building blocks of healthy development.

National Research Council and Institute of Medicine (2000)

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Guiding Developmental Concepts

- 6. The broad range of individual differences among young children often makes it difficult to distinguish normal variations and maturational delays from transient disorders and persistent impairments.
- 7. The development of children unfolds along individual pathways whose trajectories are characterized by continuities and discontinuities, as well as by a series of significant transitions.
- 8. Human development is shaped by the ongoing interplay among sources of vulnerability and sources of resilience.
- 9. The timing of early experiences can matter, but more often than not the developing child remains vulnerable to risks and open to protective influences throughout the early years of life and into adulthood.
- 10. The course of development can be altered in early childhood by effective interventions that change the balance between risk and protection, thereby shifting the odds in favor of more adaptive outcomes.

National Research Council and Institute of Medicine (2000)

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Roles and Responsibilities of SLPs in Early Intervention

- www.asha.org/policy
- Four guiding principles
 - 1. Family-centered and culturally and linguistically responsive
 - 2. Developmentally supportive and promote participation in natural environments
 - 3. Comprehensive, coordinated, and team based
 - 4. Based on the highest quality evidence available

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1. Family-centered and culturally and linguistically responsive...

- · Caregiver participation in testing
- Caregiver-selected and caregiver-identified social routines and vocabulary tested for very young children
- Extensive bias review and widespread testing with a diverse sample has resulted in
 - Familiar home vocabulary and contexts
 - Dialectal, regional, and cultural variations to identify responses that are accepted as correct
- Home Communication Questionnaire

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2. Developmentally supportive and promote participation in natural environments...

- Observation of naturally-occurring behaviors for younger children
- Credit given for spontaneous productions in and outside the assessment room
- Developmentally appropriate skills assessed

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Developmentally Sensitive Methods of Assessment

- PLS-5 allows multiple assessment methods for giving credit (Birth – 2:11)
 - Caregiver Report
 - Observation
 - Elicitation
- Allows for observation of naturally occurring behaviors and spontaneous language in unstructured format.

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					А	uditory	Compr	ehensio	n									Ex	pressiv	е Сотп	nunicati	on			
	Atte	ntion					Semantic:	s		Lang Stru	uage cture						g		Sema	antics		Lang Stru	uage cture		
Age	Attention to Environment	Attention to People	Gesture	Play	Vecabulary/ Cennected Speech	Oualitative Concepts	Spatial Concepts	Quantitative Concepts	Time/ Sequence Concepts	Morphology	Syntax	Integrative Language Skills	Emergent Literacy Skills	Age	Vocal Development	Gesture	Social Communication	Vocabulary/ Connected Speech	Oualitative Concepts	Spatial Concepts	Time/ Sequence Concepts	Merphology	Syntax	Integrative Language Skills	Emergent Literacy Skills
0:0-0:2	3	1, 2												0:0-0:2	1, 2, 3										
0:3-0:5	4, 5	6		7										0:3-0:5	5		4								
0:6-0:8	10	9		8										0:6-0:8			6,7								
0:9-0:11		12	11											0:9-0:11	10,11		8, 9								
1:0-1:5		13		16, 17	14, 15									1:0-1:5	14, 15	16	12, 13	17							
1:6-1:11			19	18										1:6-1:11	18, 21		19, 22	20, 23							
2:0-2:5			22		20, 21, 22, 23, 24									2:0-2:5		24, 25	25	26							
2:6–2:11				26	25, 27, 28					27				26-2:11			28	27					29		
3:0-3:5				29	30, 31		32							3:0-3:5				30, 31, 32							
3:6-3:11								33		36		34, 35		3:6-3:11				36				34, 35	33		
4:0-4:5						37	39				38			4:0-4:5								39		37, 38	
4:6-4:11					40	42		41		40				4:6-4:11						42				40, 41	
5:0-5:5					44			45					43	5:0-5:5								43	45	44, 46	
5:6-5:11						48					46		47	5:6-5:11					47				49		48
6:0-6:5								50	52			49	51	6:0-6:5								52		50, 51	53, 54
6:6-6:11									54			56, 57, 58	53, 54, 55, 59	6:6-6:11									57	55	56
7:0-7:11										65	62	60, 61, 64	63	7:0-7:11						66	58, 59, 60, 67	63, 64	61, 64	62, 65	58, 59 60

Item Criteria for PLS-5 is Developmentally Sensitive

- Birth 11 months old
 - Items represent behaviors that are precursors to language
 - Caregiver involvement to maximize performance and caregiver reporting to ensure credit for skills.
- 1 2 years old
 - Use of manipulatives and play for more authentic assessment
 - Scoring of spontaneous interactions
- 3 4 years old
 - Engagement in interactive behaviors
 - Practice items level field for children w/o school or testing experience
- 5 7 years old
 - Integration of knowledge and language skills holistically
 - Evaluation of emergent literacy and academic skills

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3. Comprehensive, coordinated, and team-based...

Provides a survey of language skills in the areas
 of

- Social communication
 - Semantics
 - Morphology
 - Syntax
 - Articulation
- Useful for arena assessment; can be administered by professionals in child development teams

	Auditory Comprehension	Expressive Communicatio
Attention		
Attention to Environment Attention to People	•	
Play		
Gesture		•
Vocal Development		•
Social Communication		•
Semantics		
Vocabulary		•
Qualitative Concepts	•	•
Quantitative Concepts	•	•
Spatial Concepts	•	•
Time/Sequence Concepts	•	•
Language Structure		
Morphology	•	•
Syntax	•	•
Integrative Language Skills	•	•
Emergent Literacy Skills		

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4. Based on the highest quality evidence available...

- Current review of research for item development
- Expert review
- Current normative data

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PLS- 5 Standardization Research

- For the PLS-5, over 1800 children were tested for standardization and related reliability and validity studies from December 2009 through August 2010.
- The standardization data were collected by 189 clinicians in 42 states in the United States.

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PLS-5 Clinical Study: Developmental Language Delay

Scales and Total	N	Mean Dev. Lang. Delay	Mean Nonclinical Matched Sample	Diff.	t	Standard Difference
Auditory Comprehension	23	74.0	96.4	22.4	5.45**	1.70
Expressive Communication	23	79.3	97.9	18.6	4.37**	1.35
Total Language	23	75.3	97.0	21.7	4.98**	1.57

**p<.01

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PLS-5 Clinical Study: Receptive/Expressive Disorder

Scales and Total	N	Mean Rec./Exp. Disorder	Mean Nonclinical Matched Sample	Diff.	t	Standard Difference
Auditory Comprehension	66	74.8	101.0	26.2	11.52**	1.93
Expressive Communication	66	71.6	97.9	26.2	11.20**	1.91
Total Language	66	71.6	99.3	27.7	11.83**	2.03

**p<.01

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Diagnostic Accuracy and Clinical Use

- Sensitivity in classification of disorders, the cases in which a disorder is detected, when it is, in fact, present.*
- Specificity in classification of disorders, the cases for which a diagnosis of disorder is rejected when rejection is warranted.*

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Sensitivity/Specificity/ Predictive Power

	AC	EC	Total
Cut Score SD and Predictive Power	Matched Sample 50%	Matched Sample 50%	Matched Sample 50%
-1 SD			
PPP	.83	.86	.81
NPP	.77	.85	.83
-1.5 SD			
PPP	.93	.94	.92
NPP	.66	.75	.74
-2 SD			
PPP	.96	.95	.94
NPP	.60	.63	.63
1			

Note. PPP is Positive Predictive Power and NPP is Negative Predictive Power.

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^{*}Standards for Educational & Psychological Testing (1999)

PLS-5 Example:

-1.5 SD Cutoff (StS=78); Lang. Disorder (≈10% prevalence)

	Language Disorder (.92)	No Language Disorder (.74)	Total		
Positive Test Results	920	1,600	2,520		
Negative Test Results	80	7,400	7,480		
Total	1,000	9,000	10,000		

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Speech-language assessment is a complex process.

Assessing, describing, and interpreting an individual's communication ability requires the integration of a variety of information gathered in the evaluation process.

(ASHA, 2004)

ALWAYS LEARNING

PLS-5 can be used to...

- Ages birth to 7:11
- Determine presence of a language delay/disorder
 - Determine whether child has receptive or expressive language delay/disorder, or combination of both
- Determine eligibility for early intervention or speech/language services

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PLS-5 can be used to. . .

- Identify both receptive and expressive language skills in the areas of:
 - Attention, gesture, play, vocal development, social communication, vocabulary, concepts, language structure, integrative language, and emergent literacy.
- Identify a child's language strengths and weaknesses to develop appropriate interventions.

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Progress Monitoring

Track Progress

- Measure efficacy of S/L treatment and interventions
- Use GSV to track progress of child's skills on the same instrument
 - Can be given at each time child transitions to new developmental period

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Evaluating GSVs relative to Standard Scores Over Time

- · Changes in SS: indicate how the child is performing relative to same-age peers
- Changes in GSV: show gains the child has made since the previous assessment(s)

Qualifying a Child For Services

- You can qualify a child for services using standard scores and percentile ranks for each of these scores:
 - Auditory Comprehension
 - Expressive Communication
 - Total Language
- You should not use age equivalents to qualify a child for services.
 - Descriptive Statistic
 - Age equivalents do not provide information about "percent delay" or a child's relative rank or standing within a group of age peers.
 - Age equivalents do not provide the information you need to determine if a child has a language disorder.

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Evaluating AC/EC Score Differences

- It is intuitive to think that a child's comprehension skills should be higher than expressive skills.
- "The comprehension-production relationship is a dynamic one that changes with a child's developmental level and with each aspect of language. For example, it's different for syntax and phonology. In other words, the relationship between comprehension and production changes because of different rates of development and different linguistic demands." (Owens, 2008)

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Receptive/Expressive Differences in the PLS-5 Sample

• In the PLS-5 Sample

• No difference: 3.7%

• Higher AC score: 47.2%

• Higher EC score: 49.1%

• Point difference of at least one: 48%

• Point difference of at least five: 31%

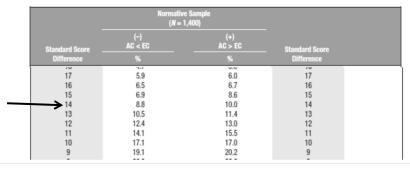
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Prevalence: Does the difference in AC/EC scores occur frequently in the normative population?

- 1. Look up the prevalence of the score difference in Table D.2
- 2. Differences between scores that occur in less than 10% of the population should be considered significant

Table 2.3 Cumulative Prevalence of Auditory Comprehension (AC) and Expressive Communication (EC) Standard Scores in the Normative Sample



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	Assessment Tool	Evidence Provided	Evidence Supports Normal Language Acquisition	Evidence Supports S&L Disability
a	Developmental History	Is there evidence of developmental delay across domains? Hospitalizations?	x	
Borderline	Parent interview	How does the child communicate at home? How do different members of the family communicate with the child? What are facilitating contexts?		x
are B	Home/Preschool Observations	What does the child do at home and at preschool to initiate and maintain communication?		х
cores	Developmental checklists	How does the child's skills look across a wide range of developmentally appropriate behaviors in a variety of contexts?	x	
PLS-5 S	Language Sampling	How does the child communicate in less formal, interactive contexts? What forms of communication (verbal and nonverbal) does the child use?		x
"		How do the child's language skills compare to age-level peers?	borderline	
	Dynamic Assessment	How easily does the child learn new skills?		x
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	Assessment Tool	Evidence Provided	Evidence Supports Normal Language Acquisition	Evidence Supports S&L Disability
_o	Developmental History	Is there evidence of developmental delay across domains? Hospitalizations?	x	
orderline	Parent interview	How does the child communicate at home? How do different members of the family communicate with the child? What are facilitating contexts?	x	
are B	Home/Preschool Observations	What does the child do at home and at preschool to initiate and maintain communication?		х
Scores	Developmental checklists	How does the child's skills look across a wide range of developmentally appropriate behaviors in a variety of contexts?	x	
PLS-5 S	Language Sampling	How does the child communicate in less formal, interactive contexts? What forms of communication (verbal and nonverbal) does the child use?		x
ן "		How do the child's language skills compare to age-level peers?	borderline	
	Dynamic Assessment	How easily does the child learn new skills?	x	



Preschool – SECOND EDITION

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CELF Preschool-2 Assessment at Each Level

- 1. Identify whether or not there is a language disorder.
- 2. Describe the nature of the disorder.
- **3.** Evaluate early classroom and literacy fundamentals.
- 4. Evaluate language and communication in context.

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Summary of CELF Preschool-2 Assessment Process

Referral Question

Is there a language disorder?

Derive This Score

- Core Language Score
 - Sentence Structure
 - Word Structure
 - Expressive Vocabulary

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Summary continued

Referral Question

What is the nature of the disorder?

- Receptive and Expressive Skills (modalities)
- Language Strengths and Weaknesses
- Syntax (structure),Morphology, Semantics

Derive These Scores

- Receptive Language Index
- Expressive Language Index
- Language Structure Index
- Language Content Index
- Language Memory Index

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Index Scores

- Receptive Language Index (RLI)
 - A measure of listening and auditory comprehension skills
 - Derived by summing the scaled scores of three receptive subtests
- Expressive Language Index (ELI)
 - A measure of overall expressive language skills
 - Derived by summing the scaled scores of three expressive subtests

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Index Scores (cont.)

- Language Content Index (LCI)
 - A measure of semantic development
 - Vocabulary
 - Concept development
 - Comprehension of word associations and relationships
 - Comprehension of simple and complex sentences
- Language Structure Index (LSI)
 - An overall measure of the ability to interpret and produce word and sentence structure

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Summary continued

Referral Question

 How are early classroom and literacy fundamentals?

Derive these Scores

- Basic Concepts
 Criterion Score (Ages 5–
- Recalling Sentences in Story Context Percentile Range
- Phonological Awareness Criterion Score
- Pre-Literacy Rating Scale Criterion Score

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Summary continued

Referral Question

 How is communication in context?

Derive this Score

 Descriptive Pragmatics Profile Criterion Score

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CELF-P:2 **Clinical Use of Sensitivity and Specificity**

- Clinical sensitivity is the proportion of cases that are identified as disordered when, in fact, they are disordered. CELF Preschool-2 sensitivity is
 - 85% at -1.0 SD
- Clinical specificity is the proportion of cases identified as having normal language—when, indeed, they do. CELF Preschool-2 specificity is
 - 82% at -1.0 *SD*

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Standard Score Summary

		Core Language		ptive uage	Expressive Language		juage itent	Language Structure
Subtest Scaled Score		3-6	3-4	5-6	3-6	3-4	5-6	3-6
Sentence Structure	SS	5		5				5
Word Structure	ws	1			1			1
Expressive Vocabulary	EV	9			9		9	
Concepts & Following Directions	C&FD			3			3	
Recalling Sentences	RS				2			2
Basic Concepts	BC							
Word Classes–Receptive	WC-R			11				
Word Classes–Total	WC-T						8	
Core Language Score and Index	ces	\rangle	\rangle		\rangle	\rangle		brace
Sum of Subtest So	aled Scores	15		19	/2		20	8
Star	ndard Score®	7/		77	65		79	<i>5</i> 7
Standard Score	Points +/-	7		7	7		7	7
Confidence Interval (10 % Level)	64 to 78	to	70 to 84	58 to 72	to	72 to 86	50 to 64
Per	centile Rank	3		6	1		8	0.2
Percentile Rank Confid	ence Interval	/ to 7	to	2 to 14	O.3 to 3	to	3 to 18	∠0./to /
		Core Language		ptive uage	Expressive Language		guage ntent	Language Structure

Discrepancy Comparisons

- 1. Determine if difference between two index scores is statistically significant.
- 2. If statistically significant, evaluate how rare the score difference is in the standardization sample.

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Discrepancy Comparisons continued

Compare

- Receptive and Expressive Language Index scores
- Language Content and Language Structure
 Index scores

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Discrepancy Comparisons continued

 If the difference is <u>></u> the critical value, the difference is considered to be a true difference rather than due to measurement error or random fluctuation.

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Critical Values

TABLE 3.5 Critical Vaues for Discrepancy Comparisons Between Index Scores

Age	Level	Critical Values for Composite Pairs					
•	of Significance	RLI-ELI	LCI-LSI				
Overall	.05	12	12				
	.15	9	9				
3:0–3:5	.05	11	11				
	.15	9	9				
3:6–3:11	.05	11	11				
	.15	9	9				
4:0-4:5	.05	10	10				
	.15	8	8				
4:6–4:11	.05	11	11				
	.15	9	9				
5:0-5:5	.05	11	11				
	.15	9	8				
5:6–5:11	.05	11	11				
	.15	9	8				
6:0-6:5	.05	12	12				
	.15	9	9				
6:6–6:11	.05	14	14				
	.15	10	10				

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Discrepancy Comparisons continued

Level of Significance

- .15: broader indicator of differences between index scores.
 - Easier to find significant differences
 - More error
- .05: narrower indicator and is therefore more stringent.
 - Harder to find significant differences
 - Less error

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Discrepancy Comparisons continued

- 1. Determine if difference between two index scores is statistically significant.
- 2. If statistically significant, evaluate how **rare** the score difference is in the standardization sample (clinical significance).

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Prevalence of Difference Between Index Scores in the Standardization Sample

TABLE 3.6 Cumulative Prevalence (Percentage) of Differences Between Index Scores in the Standardization Sample

Standard	RLI–ELI (pe	rcentage)	LCI–LSI (pe	rcentage)	Standard
Score	RLI < ELI	RLI > ELI	LCI < LSI	LCI > LSI	Score
Difference	(-)	(+)	(-)	(+)	Difference
25	1.5	1.0	0.8	0.4	25
24	1.6	1.3	0.8	0.6	24
23	2.1	1.5	1.4	1.1	23
22	2.9	1.9	1.6	1.5	22
21	3.4	2.3	2.3	2.4	21
20	3.6	2.6	2.3	2.4	20
19	4.1	3.4	2.9	2.9	19
18	5.4	4.1	3.3	3.3	18
17	6.4	4.9	3.9	4.0	17
16	7.1	5.8	4.4	4.8	16
15	8.3	7.0	5.5	5.6	15
→ 14	9.5	8.0	5.6	6.6	14
13	10.6	10.8	7.5	8.4	13
12	12.0	12.8	8.3	9.9	12
11	13.8	16.4	11.5	11.6	11

Discrepancy Comparisons continued

Discrepancy Comparisons	Score 1	Score 2	Difference	Critical Value	Significant Difference (Y or N)	Prevalence in Standardization Sample	Statistically Significant Level
Receptive-Expressive Language Index*	77	65	/2	/2	Y	12.8%	.15,63
Language Content- Structure Index*	79	57	22	/2	Y	1.5%	.15/63

^{*}See Tables 3.5-3.6.

Are score differences meaningful?

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Criterion Score Chart				
Subtests	Raw Score	Criterion Score	Criterion	
Basic Concepts (BC; Ages 5–6)	17	≥/7	■ Meets □ Does Not Meet	
Phonological Awareness (PA; Ages 4–6)	15	≥19	Meets Does Not Meet	
Checklists	Raw Score	Criterion Score	Criterion	
Pre-Literacy Rating Scale (PLRS)	83	≥86	Meets Does Not Meet	
Descriptive Pragmatics Profile (DPP)	93	≥ 72	Meets Does Not Meet	
Percentile Range Chart				
Subtest	Raw Score	Percentil	e Range	
Recalling Sentences in Context (RSC)	4	to</td <td>4</td>	4	

What test should I choose?



PLS-5 Correlations: CELF Preschool-2/PLS-5

PLS-5									
	Auditory Comprehension			Expressive Communication		Total Language		CELF Preschool-2	
CELF Preschool-2	r	Adj <i>r</i> ^a	r	Adj r ^a	r	Adj r ^a	Mean	SD	
Core Language	.65	.74	.70	.78	.71	.79	103.1	11.9	
Expressive Language	.67	.75	.74	.82	.75	.82	102.0	11.6	
Receptive Language	.64	.70	.66	.74	.69	.76	103.4	11.8	
PLS-5 Mean	105.3		10	105.0		105.5			
PLS–5 SD	12.5		1	12.2		12.6			

Note. Adj = adjusted. All scores are based on age norms; units are standard scores.

a All correlations were corrected for the variability of the norm group, based on the standard deviation obtained on the first administration, using the variability correction of Cohen et al. (2003, p. 58).



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So what is the difference between PLS-5 and CELF:P-2?



- Overview of developmental language skills in many areas
- · Ages birth through 7:11
- Can assess preverbal children and children with low language ability
- Can assess children functioning in supported classroom environments (such as Early Childhood and classrooms for children with pervasive developmental delays such as autism)



- In-depth assessment of semantics, morphology, syntax
- Ages 3:0 through 6:11
- Assess children who speak in complete sentences
- Assess children functioning in mainstream classrooms

Both assessments target language skills; both point to intervention goals

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