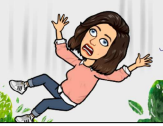
TOP 15
Childhood Apraxia of Speech
THERAPY PITFALLS
& how to avoid them

BJOREM SPEECH PUBLICATIONS



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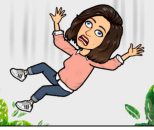
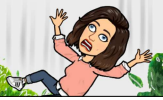
DISCLOSURES

Financial Disclosure: Jennie is the owner of Bjorem Speech Publications and receives pay from sales from her products, Boomlearning, her TPT store. Jennie is the owner of Children's Therapy Services and client videos were conducted at her place of business. Jennie was paid a fee for this presentation.



LEARNING OBJECTIVES

- ▶Describe why target selection is important and how it impacts the child's progress
- ▶Define prosody and describe how it impacts children with apraxia
- ▶Tell how to incorporate parents/caregivers into therapy and when it is appropriate to send homework



PITFALL #1

too many targets

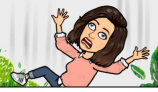
SIMPLIFY YOUR LIST

Choose 10 targets:

- Words
- Phrases
- Sentences

Targets will change based on how quickly the child acquires the motor plan.

AIM For Perfection!!!
100% accuracy



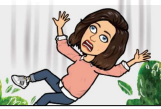
YOU NEED....

1. Current Sound Inventory
   - Consonants
   - Vowels
2. Syllable Shape - success and breakdown points
3. Acquired Words Word List
4. Power Word List

TARGET – 8-Point Scale
Scoring Rubric

8	7	6	5	4	3	2	1
Unable to produce target word	Child is able to produce word in **simultaneous production.** (able to show variation of prosody and connected sounds e.g., no segmenting)	Child is able to produce target correct in **direct imitation with multi-sensory cueing.**	Child is able to produce target in **direct imitation without cueing.** correct stress and prosody	Child is able to produce the target correctly in **delayed imitation** with multi-sensory cueing.	Child is able to produce the target in **delayed imitation without cueing.** correct stress and prosody.	Child is able to produce the target word **spontaneously with multi - sensory cueing.**	Child is able to correctly produce the target **spontaneously.**
8	7	6	5	4	3	2	1

Rubric based on using DTTC treatment approach.



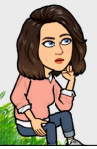
DIGGING OUT

1. Back up and simplify! Make that Target List of 10!
2. Get the family involved - create a list of power words!
3. Keep notes of errored words the child uses frequently
4. Focus on those targets.... A LOT!
5. 100% accuracy to establish a new motor plan!
6. Go take the DTTC training! You'll thank me!

PITFALL #2

using sound norms

BJOREM SPEECH PUBLICATIONS



TARGET SELECTION IS DIFFERENT

Childhood apraxia of speech is a motor planning speech disorder that impacts the planning and programming for speech **movements**.

Focus: on movements rather than sounds
Focus: on sounds the child has
Focus: on full words rather than sounds
Focus: on a smaller group of targets
Focus: on functional and meaningful
Focus: on 100% accuracy

DIGGING OUT

1. Get that sound inventory updated!
2. Make sure targets have sounds the child is able to say, this will create more success, more buy-in, and increased self-esteem.
3. Throw the sound norms out! Any sound is fair game! Be sure to use sounds they can say.
4. If the child is able to imitate it, use it!
5. Expand sound repertoire through play and practice if needed.

PITFALL #3

not asking why

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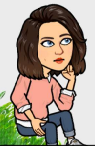
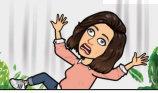


TARGET TYPES

1. High frequency words
2. Core word + target word
3. Common phrases
4. Negation
5. Ask yourself .. is it functional?

My TOP Apraxia Targets

VC	CV	CVC	CVCV
			mama
up	me	bed	mommy
oh	hi	hot	dada
in	bye	mine	daddy
off	see	feet	papa
out	go	bone	nana
eat	you	cup	bubu
ouch	bee	bus	baby
	shoe	mess	nono
	boo	sad	potty
	pee	hop	booboo
	poo	wet	nini
	two	cat	puppy
	no	dog	bunny
		bum	dino
		fun	happy
		cut	tummy
		yes	wanna
		nap	bubbo
			dunno

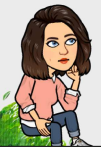


DIGGING OUT

1. Analyze your target list… can you answer why?
2. Will this target be used by this child in their everyday language?
3. Is this word important?
4. Educate families!

PITFALL #4

focusing on syllables



syl•la•ble jag

1. limited variation of syllable structures when choosing targets for children with childhood apraxia of speech

BJOREM SPEECH PUBLICATIONS

DIGGING OUT

1. Start at the syllable shape the child is breaking down at
2. Add a few simpler targets to the list so the child feels success… especially earlier in therapy
3. You can add a word they have mastered, so they feel that success immediately
4. Choose a variety of syllable shapes so we don't get stuck overgeneralizing to one syllable

PITFALL #5

not enough reps

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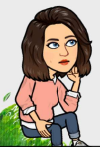


PRACTICE = POSITIVE OUTCOMES

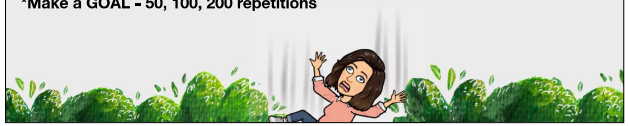
*Fewer targets leads to more practice which = acquisition of new motor plan

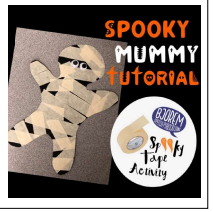
*We must practice a lot, correctly to establish a new motor plan

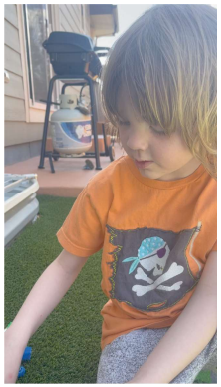
*You must be prepared in therapy to get a lot of repetitions

*The child must know what is expected

*Make a GOAL - 50, 100, 200 repetitions





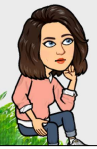


DIGGING OUT

1. GET ALL the tools…
2. Clickers, counters, mini objects, games with lots of pieces, magnets, cups, stickers, pom poms….
3. Teach the child your expectation.
4. Give the child a visual so they have an end in sight.
5. Talk them about why repetition works.
6. We will talk about material management in a bit…

PITFALL #6

segmenting



IT SEEMS INTUITIVE TO SEGMENT....

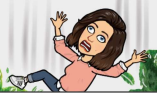
* Segmenting seems like it would be an easier way to teach a new word

BUT

Children with CAS already segment, which makes them sound unnatural and choppy

SO

Instead we need to work on co-articulation and focus on movement so that prosody sounds natural and fluid

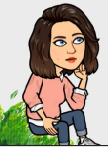


DIGGING OUT

1. Think movement and practice movement.
2. Slow down, but keep your sounds moving.
3. Try using backward or forward chaining.
4. Use visual cues so children can SEE the movement.
5. Educate families, or they WILL segment!

PITFALL #7

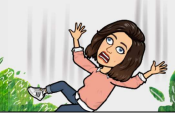
failing to consider co-articulation



WHAT IS CO-ARTICULATION?

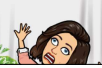
Coarticulation is when a sound is impacted by all the sounds that surround it! Sounds can change just because of the sound it is hanging out with!

Apraxia therapy IS a therapy of co-articulation not articulation! We are working on movement!



GIVE IT A TRY...

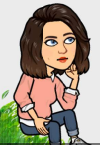
I want to	.....	**I wanna**
I don't know	.....	**I doe know**
I do it	.....	**I do wi**
water	.....	**wader**
stop	.....	**sdop**
skate	.....	**sgate**
meatball	.....	**mea_ball**
toys	.....	**toyz**



DIGGING OUT

1. Say your targets OUT LOUD… over and over and over!
2. Write the target phonetically!
3. Think about when we use a voiced sound in place of a voiceless due to coarticulation e.g., stop is really sdop
4. Get out your cues! Cueing helps kids understand the natural sounding movement!
5. Educate families, or they WILL TEACH IT WRONG!

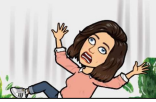
PITFALLS #8, 9, 10
not using PML



#8 PRE-PRACTICE

The child must have these skills in order to participate in motor-based practice:

1. **Attention to the task at hand**
2. **Make the task tied directly to something that is important to them**
3. **Imitation skills - the child must understand that we are asking them to imitate**
4. **Motivation - the motivation to work hard and learn new things**
5. **Understand and tolerate cueing**



#9 CONDITIONS OF PRACTICE

Number of Trials & Sessions

More trials & more sessions = better progress and higher retention
Less trials & less sessions = less progress and less retention

Distribution of Practice

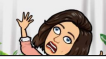
Mass Practice: practice together, more frequent = skill acquisitions
Distributed Practice: practice trials spread out over time = generalization

Variability of Practice

Constant: practicing movement of target in one context = skill acquisition
Varied: Practicing in different contexts = generalization

Schedule of Practice

Blocked: repetition of one target = skill acquisition
Random: practicing randomly with multiple targets = generalization



#10 CONDITIONS OF FEEDBACK

Types of Feedback

Knowledge of Performance (KP) = specific feedback= acquisition of skills
Knowledge of Results (KR) = feedback telling the child if the trial was correct or not = generalization

Frequency of Feedback

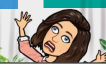
Frequent = acquisition of new skills
Less Frequent = generalization

Timing of Feedback

Immediate = skill acquisition
Delayed = generalization

Fading of Feedback

Fade frequency of KR so that the client can become more intrinsically engaged in the motor learning process = greater generalization

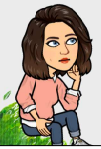


DIGGING OUT

1. Research more about PML
2. Video yourself during therapy, critique the session
3. Elicit larger numbers of trials to establish a new motor plan, be aware of the types of practice you are using.
4. Set yourself up with a visual to help remind you of the types of feedback, again critique yourself
5. Educate families, or they will not understand why you do what you do…. They need to understand there is a reason.

PITFALL #11

prosody, what's that?



WHAT IS PROSODY?

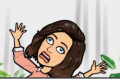
Prosody refers to stress, intonation, loudness, pitch, rhythm, and appropriate pausing. Our prosody changes by varying pitch, duration, and loudness. We also use stress to emphasize a word or phrase or change meaning.

Stress: **dé**sert and des**sért**
Stress: It's **MY** cat.
Pitch: rising and falling intonation
- Asking yes/no questions
- Answering yes/no questions

Pausing: …..

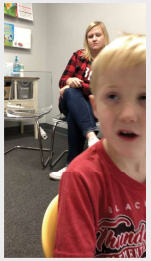
Let's eat, Mom.
Let's eat Mom.

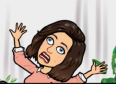
Correct pausing can save a person's life!



HOW PROSODY IS IMPACTED IN CAS

1. Child may sound robotic or monotone, difficulty with intonation and rhythm.
2. Child's sounds, syllables or words may sound segmented or disrupted.
3. Child may have inappropriate stress.
4. Using inappropriate intonation.
5. May have lack of variation or control in vocal pitch
6. Rate and volume may be impacted.





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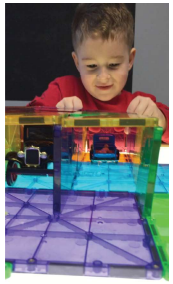
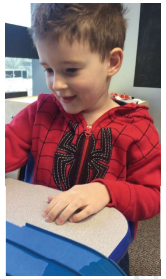
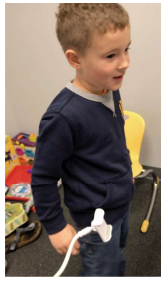
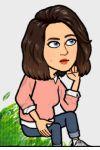
		

DIGGING OUT

1. Begin working on prosody **YESTERDAY**!!!
2. Model correct prosody, encourage the child to imitate.
3. Focus on prosody in play, make it meaningful.
4. In older children teach how prosody changes meaning.
5. Teach the child and the family what prosody means.
6. Research ReST - Rapid Syllable Transition Training
7. Checkout ESL sites!

PITFALL #12
sending targets home

BJOREM SPEECH PUBLICATIONS



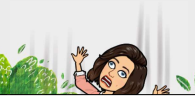
LET'S TALK ABOUT HOMEWORK

***You are trained to treat apraxia, parents are not.**

***If you send a list of words home without training the family, they will teach it wrong.**

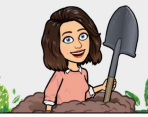
***Families want to help, and we want them to help, but you must train them and only send work home once they have been trained.**

***Targets should be sent home when the child is consistently successful with minimal cueing and the family has been trained on what to do and what NOT to do.**



DIGGING OUT

1. Incorporate families into your therapy sessions.
2. If family members cannot be present, get permission to video your session and share it with them.
3. Send training videos home for one target at a time.
4. Do not send a list of words!
5. Training is EVERYTHING.
6. Without family training, you will be spending a lot of time correcting motor plans that were incorrectly taught.



PITFALL #13
forgetting cues

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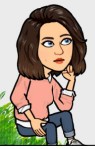
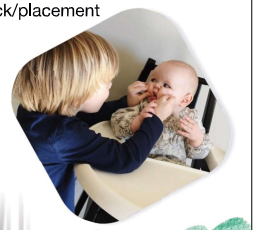


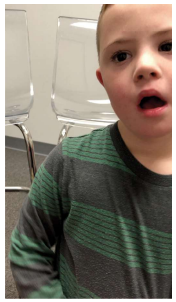
What are CUES?

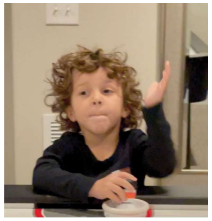
Cues can be anything to help the child understand what you want them to do. Cues are the bridge to a correct motor plan!

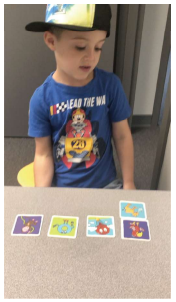
- Tactile touch cues - direct touch feedback/placement
- Sign cues - popcorn hands for /p/
- Visual cues - what movement looks like
- Modeling - direct & delayed imitation
- Miming - movement without
- Simultaneous Production
- Tapping Cues - cues for syllables
- Metaphor Cues - "mad cat sound"
- Placement Cues - "lips together"
- Parameter Cues - "tight vs. loose"



Cueing in ACTION!





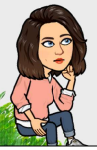


DIGGING OUT

1. Probe cues with your clients and document which ones work!
2. Make sure you practice, A LOT, to become familiar with all types of cues.
3. Teach your clients the cues.
4. Teach your families the cues, consistency works best.
5. Get creative, make-up your own cues.
6. Don't forget to fade cues so children do not become dependent on them.

PITFALL #14
therapy management

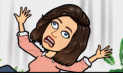
BJOREM SPEECH PUBLICATIONS



THERAPY MANAGEMENT
why is it so important?

Kids want guidelines. They may act like they don't, but they do, and it is up to you to guide.

Therapy management will mean the difference between a successful session and a session that feels frustrating and unproductive. YOU have the power to make things happen through understanding how YOUR WORDS MATTER!



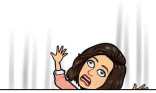
Don't Say Don't

Kids don't hear don't.

Don't dump out the toys ..... Dump out the toys
Don't hit your sister ..... Hit your sister
Don't play with the door ..... Play with the door

Instead tell the child what you want them to do. It is simple but hard to make the shift!

Take 3 toys out
Hands are for clapping, CLAP!
Close the door.



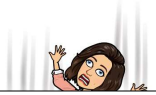
Tell, Don't Ask

If it isn't a choice don't ask.

Do you want to clean up? ..... NO!
Do you want to read a book? ..... NO!
Do you want to put your coat on? ..... NO!

Instead tell the child what you want them to do. It is simple but hard to make the shift! Follow-up with a choice to give the child a voice.

Time to clean up! Do you want to clean up the cars or the blocks
We are reading Brown Bear, Brown Bear.
Put your coat on.



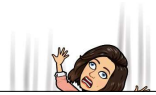
WHEN-THEN

When-Then assumes that the child is going to do what you say, IF-THEN is a bribe or threat.

If you don't work hard then we will not go to Disney tomorrow.
(yes this happened in my therapy room)

When-Then is a small shift that makes a HUGE difference. Again, you are telling the child what to expect.

When you clean-up, then we will play cars.
When we finish reading the book, we will go outside.
When you put your shoes on, then we will have snack.



TIP- Material Management

One of the most difficult tasks my graduate clinicians seem to have is material management. Practice material management, it will make your therapy sessions productive and successful.

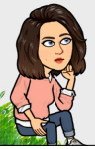
- Be Prepared
- Be in Control
- Use bins with lids
- Keep multiples of toys
  - Magnatiles
  - Blocks
  - Miniature animals
  - Pom Poms
  - Dixie cups
- Know what is in your room… remain in control of your stuff!

DIGGING OUT

1. Be prepared and in control of your materials.
2. Sort your materials in containers with lids.
3. Use waiting hands visual for quick to move kids.
4. Practice changing what you say and I mean A LOT! (practice on your pet)
5. Hang reminders around the room to help you change your words.
6. Remember, it is up to you!

PITFALL #15

good job!!!!



?? Are You a GOOD JOBBER ??

Good Job! NOOOOO! Use words that promote growth mindset!

Good Job! Good Job! Good Job! - What does that mean???

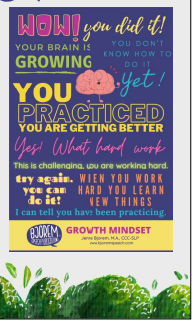
Use descriptions for children that help them understand what they did and what you want them to do. I challenge YOU!

Wow you worked hard on that tower.
What made you decide to make a volcano?
I like it, will you teach me?
You should be proud.

Words that promote growth mindset teach a child that hard work is worth it!

DIGGING OUT

1. Print the poster from my website and hang it up!
2. Practice using growth mindset phrases.
3. Video yourself in therapy and critique.
4. This can be hard because therapy is hard so be sure to validate feelings and never tell them it is okay, instead label their feeling.
4. Teach your families!!!



GO PRACTICE!

You've Got This

Thanks for having me!

www.bjoremspeech.com

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