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South West
CCAC CASC

Community
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Centre

Centre d'accès
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communautaires
du Sud-Ouest

www.sw.ccac-ont.ca



Speech Therapy for School-Aged Children

Speech Therapists use a student-centered approach in the school setting, tailored to the needs of the student whose speech ability and performance may be affected by physical or developmental or motor abilities. The goal of speech therapy is to develop and maintain improved speech skills and prevent speech dysfunction. Therapists use activities, techniques to facilitate and maximize a student's participation and function at school.

Collaboration with the school staff, parents and other caregivers is essential in addressing the total needs of the student. Students are seen at school. Prior to the visit, the therapist will notify parents and the school of the planned visit date and time.

Different sources i.e. – parents, school personnel, and other team members can initiate referrals for speech therapy. Children who attend public/separate school will be assessed by the Speech Pathologist at their school and refer to the South West CCAC if appropriate. The Care Coordinator will obtain information from a variety of sources, i.e. – school records, medical records, and parent interviews to determine the eligibility of speech involvement. If the Care Coordinator feels that the referral is appropriate, the Care Coordinator will forward the referral to the Speech Therapist. The Speech Therapist will administer tests to assess the student's speech skills and abilities.

All students found eligible for speech services will be assessed on a priority basis. In this way, students with severe problems can be seen before children with less severe problems.

Types of problems that the South West CCAC has responsibility for:

- **Fluency Disorders** (dysfluency or Stuttering)
e.g. student repeats sounds, syllables, words, or gets stuck on a sound
- **Resonance Disorders** (hypernasal or hyponasal)
e.g. student sounds like they are congested or stuffed up when they talk

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or it sounds like they are talking through their nose

- **Voice Disorders** (abnormal pitch, loudness or quality) e.g. student's voice is weak, too high, hoarse or harsh
- **Phonological Disorders or Articulation Disorders** (how the words are pronounced) e.g. sounds are omitted, substituted or distorted (moderate to severe)
- **Non-Speech Communication** (inability or reduced ability to communicate through speech) e.g. student communicates with gestures, signing, communication aids as an alternative or to supplement speech

Based on information from the therapist, parents and school, the Care Coordinator will determine the need for further SHSS speech services. Information from several sources is considered. Goals are reviewed and revised as necessary. Results of therapy are documented and communicated to parents and the school. Barriers to therapy and progress are addressed. A conference may be suggested to review the student's progress. Students who no longer require speech therapy are discharged and follow-up recommendations are made.

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