



## History and Referral

**Elisa** was age 8:1 and in the third grade. She was a simultaneous language learner (English–Spanish). The school intervention team referred Elisa for an assessment of her language skills. Her teacher was concerned that Elisa was not advancing academically at the same rate as other students in her classroom. Primary concerns centered on Elisa’s expressive language skills and academic skills (reading comprehension and writing).

Elisa came from a bilingual home, but she spoke primarily English while her parents spoke both English and Spanish. Elisa’s maternal grandparents (who also spoke both Spanish and English) lived in the same household. Elisa attended a kindergarten program with an English-speaking teacher and a Spanish-speaking aide who translated for the students when needed. At the end of kindergarten, English as a Second Language (ESL) testing yielded scores in the advanced range, indicating near native proficiency in English in listening, speaking, reading, and writing. Consequently Elisa was dismissed from the ESL program. After that, all of her formal academic instruction was conducted in English, with no ESL support. Elisa’s parents reported that her Spanish language skills were very limited. They also stated that there were no concerns about Elisa’s speech and language skills until this academic year.

The ORS was previously completed by Elisa’s teacher and parents as part of the school’s RTI program. The parents reported that Elisa sometimes had difficulty recalling words, using a variety of vocabulary, understanding the meaning of words, and expressing her thoughts fluently in English or Spanish. They were also concerned about her grades in reading and writing in school. Her teacher reported similar vocabulary, reading comprehension, and writing difficulties. However, the teacher reported these difficulties as occurring more frequently than the parents did.

## Referral Questions

The student was referred for a full speech and language evaluation to determine the following:

1. Did the student manifest a language impairment or a language difference?
2. If a language impairment is present, what are the patterns of strengths and weaknesses?
3. What implications does the strengths and weaknesses profile have on the student’s ability to access her education?
4. What intervention recommendations can be derived from the student’s profile?



# Test Results

The following scores were obtained from administration of CELF-5.

## Case Study Overview of CELF-5 Scores for Elisa

Core Language and Index Score	Standard Score	Confidence Interval	Percentile Rank	Confidence Interval
Core Language Score	76	69–83	5	2–13
Receptive Language Index	78	71–85	7	3–16
Expressive Language Index	72	65–79	3	1–8
Language Content Index	74	67–81	4	1–10
Language Structure Index	76	69–83	5	2–13

Test Scores	Scaled Score	Confidence Interval	Percentile Rank	Confidence Interval
Sentence Comprehension	8	6–10	25	9–50
Linguistic Concepts	5	3–7	5	1–16
Word Structure	6	4–8	9	2–25
Word Classes	6	4–8	9	2–25
Following Directions	5	4–6	5	2–9
Formulated Sentences	5	3–7	5	1–16
Recalling Sentences	4	2–6	2	0.4–9
Understanding Spoken Paragraphs	7	4–10	16	2–50
Pragmatics Profile	6	5–7	9	5–16
Reading Comprehension	4	2–6	2	0.4–9
Structured Writing	7	4–10	16	2–50

Elisa's Core Language Score, 76 (confidence interval 69–83), indicates performance in the low range. The Receptive Language Index score of 78 (confidence interval 71–85) is in the below average range, and the Expressive Language Index score of 72 (confidence interval 65–79) is in the low range. The difference of 6 points between the Receptive Language Index and Expressive Language Index scores is not significant. The Language Content Index score of 74 (confidence interval 67–81) is in the low range, and so is the Language Structure Index score of 76 (confidence interval 69–83). The profile of the Index scores indicates a moderate language disorder that affects receptive and expressive modalities and linguistic content and structure.

The test scaled scores cover a range from 4 for Reading Comprehension and Recalling Sentences, to 8 for Sentence Comprehension, which represents a relative strength in the student's profile. The student's Reading Comprehension scaled score of 4 is in the very low range, indicating problems in understanding reading material. The Structured Writing scaled score of 7 indicates performance in the

below average range. The Reading Comprehension and Structured Writing scaled scores suggest that additional testing of reading and writing skills is necessary to determine weaknesses that may contribute to the literacy difficulties and cause academic underachievement.

The Pragmatics Profile was completed. The scaled score of 6 is in the below average range. The greatest concerns centered on problems with conversational skills (e.g., introducing and maintaining topics, making relevant contributions, and responding to introductions) and interpreting nonverbal cues (e.g., knowing how someone is feeling based on nonverbal cues).

Observations outside of class indicated that Elisa had many friends who speak English and Spanish and that she conversed fluently in English with friends. Occasionally, she exhibited instances of code switching (Spanish) at the word level. Sometimes she appeared to get frustrated when she could not understand what her friends were talking about. These difficulties suggest delays in the acquisition of

metalinguistic awareness and knowledge, and this should be explored further to determine specific strengths and weaknesses (e.g., making inferences, multiple meanings, figurative language).

Because Elisa has a history of enrollment in ESL and occasionally code switches at the word level, she was referred to a bilingual speech-language pathologist for an evaluation in Spanish. The bilingual speech-language pathologist obtained a Spanish language sample. When spoken to in Spanish, Elisa had trouble understanding simple questions. Her Spanish responses consisted of simple one- and two-word utterances (e.g., “papi”, “mi mama”, “no allá”). When she attempted longer, more complex sentences, she struggled to recall the words in Spanish, made numerous grammatical errors, and frequently switched to English to convey her message.

When spoken to in English, Elisa answered in English and used simple and expanded grammatical sentences. Occasionally, she used English grammatical forms influenced by Spanish (omission of possessive nouns and of –s and –ed verb forms). Elisa could not follow complex directions in English or Spanish.

Review of Elisa’s grades showed that she was passing mathematics. Assignments in her English, science, and social studies classes were often incomplete, but she performed well on fill-in-the-blank and multiple-choice tests. She also had difficulty answering questions that required making inferences from a written passage and integrating multiple sources of information.

## Recommendations and Follow-up

Data was obtained from standardized and non-standardized measures (norm-referenced test, language sample, observations, and parent interview) in English and Spanish. Test results indicated Elisa was primarily an English speaker. She showed deficits in expressive language, reading comprehension, and writing. Additional academic instructional support is recommended to address the reading and writing difficulties. Because of Elisa’s difficulties making inferences and integrating multiple sources of information, it is recommended that additional testing for metalinguistic abilities be conducted.

When Elisa was assessed in Spanish, she had difficulty understanding what was said to her and struggled to express herself in Spanish. If she had been able to communicate more fluently in Spanish (i.e., engage in a simple conversation, answer basic questions), additional testing in Spanish would have been necessary to identify skills she may have had in Spanish that she lacked in English. However, because Elisa’s Spanish language skills are limited, additional standardized testing (dynamic or norm-referenced assessment) in Spanish is not recommended.



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