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[Home](#) [Professional Assessments](#) [Digital Solutions](#) [Telepractice](#) [Telepractice and the PLS-5 and PLS-5 Spanish](#)

Telepractice and the PLS-5 and PLS-5 Spanish

Preschool Language Scales, Fifth Edition (PLS-5)

[See pricing options](#)

PLS-5 and PLS-5 Spanish are now available in a digital format on Q-global. If you are considering administering PLS-5 or PLS-5 Spanish via telepractice, please consult with your professional organizations, licensing boards, professional liability insurance providers, and state laws and regulations to evaluate its suitability for your particular purpose.

The Pearson research team is in the process of developing a more detailed information that

Preschool Language Scales, Fifth Edition Spanish (PLS-5 Spanish)

[See pricing options](#)

1. lists considerations for using PLS-5 and PLS-5 Spanish components in remote test administrations and
2. describes the types of qualitative/descriptive information you can obtain for children at different developmental ages.

The information will be posted online in the coming weeks. In the meantime, the following information is provided:

[Download a print-ready version of this telepractice information. \(PDF | 113.44 KB\)](#)

[Considerations before conducting an assessment via telepractice](#)

[Obtaining Informed Consent](#)

[Obtaining comprehensive assessment information in conjunction with qualitative information from PLS-5 in a telepractice setting](#)

Considerations before conducting an assessment via telepractice

When you do not have the option of testing in-person, keep in mind that there are important considerations for assessing a young child via telepractice. Until additional guidance is available, first consider if the timing is appropriate for engaging the child and/or family members in assessment and is conducive to obtaining valid test results. It is important to consider the current physical health and mental and emotional-wellness of the family as well as other factors that support a calm, quiet test environment before planning a PLS-5 assessment:

Physical/health status of family: Are family members healthy or is anyone requiring special care?

Mental and emotional wellness of family: Are family members coping well with life concerns and able to provide information about the child and participate in the assessment?

Financial/employment stability of family: Is the family coping with unexpected changes in financial or employment status?

Ability to maintain family routines and schedules: Has the family's usual routine been significantly disrupted and has the child been able to cope well with the changes?

Private/quiet space available for assessment: Is there a quiet room away from the rest of the family where testing can be conducted without interruption?

Access to technology (e.g., internet access, access to appropriate devices such as an external webcam or smartphone camera) for the family to participate in the telepractice evaluation.

If you are planning to administer the PLS-5 Spanish, you need to have native or near-native proficiency in Spanish, or you will need to arrange to have an interpreter or other testing professional with native or near native proficiency in Spanish available at the remote site. The facilitator assisting you at the remote site will need to have received training on standardized administration procedures before the test session.

Obtaining Informed Consent

You must obtain consent from the family to conduct an evaluation via telepractice. Ensure that the family understands the differences and advantages/disadvantages of a telepractice evaluation vs. an in-person evaluation. Be sure to explain to the parents / caregivers that they have the option to choose an in-person evaluation when it is available and answer their questions. Discuss with the family their comfort level with participating in an interview or while being observed in their home during everyday routines (at mealtimes, playtime), or while the child interacts with one or more family members.

Obtaining comprehensive assessment information in conjunction with qualitative information from PLS-5 in a telepractice setting

You may interact with and observe the child via telepractice to obtain qualitative information about communication skills (e.g., attends to the clinician on camera or the parent, shifts attention when name is called, babbles, produces single or multiword utterances, answers who and what questions, tells a story with a beginning, middle, and end). Review the PLS-5 items at the age-appropriate start point to identify developmentally appropriate skills. Qualitative information can be obtained through observation or caregiver questions; however, items involving specific manipulatives

cannot be administered remotely. Information and procedures for obtaining additional qualitative information to inform your clinical opinion about the child's language skills include:

Family history

Medical information

Prior assessment and intervention results

Preschool and K-Grade 2 educational information if available

Language sample and description of the child's communication skills observed during family time or parent/child interactions

Developmental milestones checklists

Parent interview, with descriptions about how the child communicates during home routines

Assessments that are available in a parent interview format, with manuals available on Q-global are listed below.

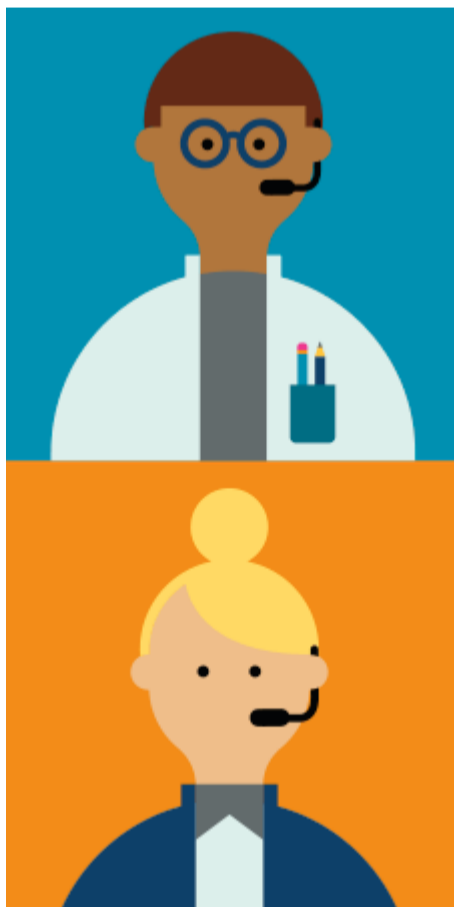
[PLS-5 Home Communication Questionnaire \(Ages birth to 2:11\)](#)

PLS-5 Language Sample Checklist

[Children's Communication Checklist-2 \(CCC-2\), Ages 4-16](#)

[PEDI-CAT Social/Cognitive domain includes some social communication skills, Ages Birth to 20:11](#)

[Vineland Adaptive Behavior Scales-3 \(Ages Birth to 90\)](#)



A customer reflects on using Q-global digital stimulus books and manuals:

Q-Global has been a great solution for us. Managing testing materials between a variety of sites and districts could be very tricky. The online testing materials have completely resolved any access challenges we faced. Observing and recording the client's response through telepractice continues to require a good deal of coordination- particularly for pointing activities. However, the clinician being able to directly manage test stimuli and present them to the client through screen share technology makes that process much less cumbersome.

Thank you for being so proactive with making your tools accessible to telepractitioners!

Nate Cornish, MS, CCC-SLP
Clinical Director
VocoVision

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