|  |  |
| --- | --- |
| Child’s name: | DOB: |
| Date of completion: | Completed by: |

**0 = always (significantly)**

**1 = always (moderately)**

**2 = almost always**

**3 = sometimes**

**4 = almost never**

**5 = never**

Please choose the most appropriate answer

from the rating scale and circle

Your child’s talking:

|  |  |  |
| --- | --- | --- |
| 1.  | In general my child has difficulty talking | 0 1 2 3 4 5 |
| 2. | My child’s speech is difficult for me to understand | 0 1 2 3 4 5 |
| 3.  | Adults who see my child less often find his / her speech difficult to understand | 0 1 2 3 4 5 |
| 4. | People ask my child to repeat what he / she has said | 0 1 2 3 4 5 |
| 5. | People find my child’s speech difficult to understand over the phone | 0 1 2 3 4 5 |
| Total |  leave blank /5 | Score: |

Effects of your child’s speech difficulties:

|  |  |  |
| --- | --- | --- |
| 1. | People ask me to interpret for my child | 0 1 2 3 4 5 |
| 2. | Other children comment on my child’s speech | 0 1 2 3 4 5 |
| 3. | The way my child sounds restricts their educational activities | 0 1 2 3 4 5 |
| 4. | The way my child sounds restricts their social activities | 0 1 2 3 4 5 |
| 5. | My child is less outgoing or confident because of the way they sound when they speak | 0 1 2 3 4 5 |
| 6. | Other people seem frustrated or irritated by the way my child sounds when they talk | 0 1 2 3 4 5 |
| Total |  leave blank /6 | Score: |

Please choose the most appropriate answer

**0 = always (significantly)**

**1 = always (moderately)**

**2 = almost always**

**3 = sometimes**

**4 = almost never**

**5 = never**

from the rating scale and circle

Feelings about your child’s talking:

|  |  |  |
| --- | --- | --- |
| 1. | I am worried about the way my child sounds when they talk | 0 1 2 3 4 5 |
| 2. | My child dislikes talking | 0 1 2 3 4 5 |
| 3. | My child gets frustrated or angry when they are not understood | 0 1 2 3 4 5 |
| 4. | My child gets upset or embarrassed by the way they sound when they speak | 0 1 2 3 4 5 |
| 5. | My child is bullied or teased because of the way they sound when they speak | 0 1 2 3 4 5 |
| Total |  leave blank /5 | Score: |

Has your child’s speech improved in the past 3 – 6 months?

|  |
| --- |
|  |

Is there anything else you would like to tell us about your child’s speech?

|  |
| --- |
|  |

Thank you for completing this questionnaire.