



Parent sheet, phonological training: Rapdys, Phonopidow

DDMR Study, 19-HPNCL-02

- Regularly remind your child why he or she needs to do the exercises.
 - The speech therapist will tell you which exercises are appropriate for your child's age and difficulties. All you have to do is follow this progression.
- Remember that regular practice guarantees effectiveness. So don't replace 2 days (15 min each) with 1 day (30 minutes).***

1. Rapdys / Blending: 15 min per day



What for? When we perceive sounds better, we analyze them better and therefore read and write better.



When? For one month, 5 days a week for 15 minutes:

- 10 minutes of RapDys training with headphones.
- 5 minutes of phoneme blending.

NB: In Rapdys, the child must complete full sessions with a 70% score to move on to the next level. At the end of the session, a message appears: "Send data to the server."



Phoneme blending training is done orally with an adult:

- The child combines the phonemes of 10 words.
- Reads the 10 words (3 times).
- Writes the 10 words (delayed copy or dictation).



Follow-up calendar:

- Mark with an X when training is done.
- Write 0 if the training has not been done.

	Day 1	Day 2	Day 3	Day 4	Day 5
Week 1					
Week 2					
Week 3					
Week 4					

2. Phonopidow / Segmentation: 15 min/day



What for? When we remember the sounds better, we analyze them better and therefore read and write better.



When? For one month, **5 days/week** for 15 minutes:

- 10 minutes of training with Phonopidow.
- 5 minutes of word segmentation.

NB: The progression and type of exercise will be specified by your speech therapist.



Phoneme segmentation training is done orally with an adult:

- The child divides 10 words into phonemes.
- Reads the 10 words (3 times).
- Writes the 10 words (delayed copy or dictation).



Follow-up calendar:

- Mark with an X when training is done.
- Write 0 if the training has not been done.

	Day 1	Day 2	Day 3	Day 4	Day 5
Week 1					
Week 2					
Week 3					
Week 4					

At the end of the training (2 months), bring the completed card back to your speech therapist.



Comments:

- Did your child willingly complete the exercises: yes, no
- What exercises did he or she like?
- What exercises did he or she dislike?
- What problems did you encounter and with what software?
- Other remarks:

First Name :

Name :

Date :