**Specialist Children’s Services**

**SPEECH AND LANGUAGE THERAPY REFERRAL GUIDANCE FORM**

Reception – 19 years old

(for preschool children please attend a drop-in clinic)

**Reception Age Class**

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| **Should be able to:** | **Tick all areas of difficulty** | **✓** | **Next steps** |
| **Attention**Able to concentrate for up to 15 minutes on chosen activity. Able to transfer between activities and return to original activity. Beginning to be able to listen and do at the same time (two channelled attention). Please refer to ‘Attention Levels and Strategies’ guidance. | Is not able to concentrate for up to 10 minutes on chosen activity,  |  | If concerned put in place early intervention within school. For example,* Specific listening activities (see Letters and Sounds phase 1)
* Teaching Children to Listen, Jackie Woodcock and Liz Spooner
* Active Listening for Active Learning, Maggie Johnson
* Simple social interaction games eg ready ,steady,….and pause for the child to be able to complete.
* Use wind up toys to keep attention and encourage joining in
* Use bubbles to encourage requesting “more” and keeping joint attention.
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| Cannot tolerate transfer to another activity (other than TV) or ‘interference’, and then transfer attention back |  |
| **Understanding spoken language**Responding to instructions containing 4 key wordsBeginning to understand more complex grammar e.g. past & future verb tensesBeginning to be able to infer information from pictures and situations | Does not understand 4 key word sentences. E.g. "Put the spoon and fork on the plate". |  | If concerned about one or more of these areas refer to Speech and language Therapy by completing referral form. Recommended universal provision* Using visual support alongside verbal instructions,
* Simplify language
* Pause and give the child time to respond
* Reduce adult rate of speech by half which will double child’s ability to attend.
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| Does not know the difference between “We went to the beach’ and “We will go to the beach” |  |
| Can not answer some why/because questions. |  |
| **Using spoken language**Using longer and complex sentences containing more adult grammar. Beginning to use sentences containing “and” “because”. | Is not using 5-6 word sentences |  | If concerned about one or more of these areas refer to Speech and language Therapy by completing referral form. Recommended early intervention* Supporting vocabulary learning in the classroom using Word Aware (Brannigan and Parsons)
* Include child in Narrative therapy group (Black Sheep Press)
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| Is not using early grammar e.g. plurals, simple past tenses. |  |

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| **Speech Sounds**Refer to ‘Normal Speech Sound Development’ guidance. | Is not secure with sounds expected for 90% of children at their age (please refer to ‘Normal Speech Sound Development’ guidance.Speech screening tool is provided to guide you with your referral. |  | If the child is not within the suggested age norms (90% of children) please refer to SLT.Recommended universal provision* Ensure child is looking and listening when you model speech,
* Increase opportunities to develop attention and listening skills,
* Increase listening to the sounds in phonics sessions,
* Don’t correct the child’s speech but model the correction production of the word for them to hear.
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| **Social Skills**Devising and negotiating rules of games in play with others.Showing development of humour and joke telling.Taking turns in groupsIncreasing range and maintenance of interactionsUsing intonation to fit listener and situation – developing awareness of social conventionsBeginning to learn when to join in conversations but may assume listener knows story background | Is not able to play simple games with others and demonstrate some imaginative play. |  | If concerned about one or more of these areas refer to Speech and language Therapy by completing referral form. Recommended universal provision* Observe play in social context with other children, and record observations.
* Include in small group work
* Simply language
* Model simple turn taking games

Recommended early intervention* Time to Talk
* Nurture groups
* Lego Therapy
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| Cannot take turns with other children during play |  |
| Is not engaging verbally and non-verbally in appropriate interactions with familiar people |  |
| Demonstrates ritualised or repetitive behaviour or language (e.g. using phrases or words heard from TV or film scripts etc) |  |
| Is not able to understand *simple* humour and non-literal language |  |
| StammeringConnected speech should be fluent with natural pauses | Is not speaking fluently e.g. m, m, m, m, m, mama or b, b, b, b, b, ball (repetition) or mmmama or bbball (prolongation) in a word or phrase.  |  | If concerned about one or more of these areas refer to Speech and language Therapy by completing referral form. Recommended universal provision* Reduce demand to talk
* slow interactions down,
* reducing questions
* give the child lots of time to think and talk.
* Build general confidence
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| This is accompanied by blinking or breath disruption or facial tension or foot tapping (typical signs of struggle/tension)? |  |

**PLEASE ATTACH THIS COMPLETED FORM WITH THE REFERRAL FORM**

**Referrals received without this form will be returned**

Please describe in further detail if appropriate: