

SPEECH AND LANGUAGE THERAPY SERVICE – GUIDELINES FOR REFERRERS

- ✦ We operate an open referral policy. This means that anybody can refer to us except that an ENT referral is needed for all voice problems and a referral from a GP, Consultant, Health Visitor or other relevant health professional within the multidisciplinary team, e.g. Dietician, is needed for all feeding difficulties.
- ✦ Pre-school children with possible speech, language and/or communication difficulties should be signposted to attend a Drop In Screening Assessment session, where these are running. (Please see 'News' section on our website <http://www.hertschs.nhs.uk> pages for dates and venues of Drop Ins.)
- ✦ Parental consent plus signature must be obtained. In addition, for school aged children a signature must also be obtained from the school's designated SLT with whom you have discussed the referral.
- ✦ We are able to see children between the ages of 0-18 years.
- ✦ We see children who are registered with a GP within Hertfordshire and West Essex. We also accept referrals for children if they live in or attend a school in Hertfordshire or West Essex but have a GP outside of Hertfordshire and West Essex.
- ✦ When referrals are received, they are reviewed by a Specialist Speech and Language Therapist and will only be accepted when all necessary information is received (e.g. reports from paediatrician, audiology, EAL service, Educational psychologist, Outreach Team). Please provide a detailed description of difficulties with examples whenever possible.
- ✦ Once a referral has been accepted, a mutually convenient time is agreed for the initial assessment. This may take place either at the child's school/pre-school/Children's Centre or at the local clinic. If a child has feeding difficulties this assessment is likely to take place at home.

Completed referral forms and attachments should be sent to:

For West Herts:

Children's Speech and Language Therapy Service
Peace Children Centre, Peace Prospect, Watford, WD17 3EW. (01923 470640)

For East and North Herts:

Children's Speech and Language Therapy Service,
Sele Lodge, Hertford County Hospital, North Rd, Hertford. SG14 1LP (01992 823084)

For West Essex:

Children's Speech and Language Therapy Service,
St Margaret's Hospital, The Plain, Essex, CM16 6TN. (01279 827620)

HERTFORDSHIRE/W.ESSEX SPEECH AND LANGUAGE THERAPY SERVICE REFERRAL GUIDELINES

AGE	UNDERSTANDING LANGUAGE	SPOKEN LANGUAGE	SPEECH SOUNDS	SOCIAL INTERACTION/ COMMUNICATION	REFER/SPEAK TO A THERAPIST IF:
12 months - 18 months	<ul style="list-style-type: none"> ▪ responds to name ▪ responds to sounds ▪ turn takes ▪ enjoys peek-a-boo 	<ul style="list-style-type: none"> ▪ laughs and coos ▪ babbles e.g. makes repetitive noises (da, da, da, da) 		<ul style="list-style-type: none"> ▪ Responds to affection and initiates signs of affection ▪ Responds differently to strangers compared to familiar adults ▪ Shows an interest in other children 	<ul style="list-style-type: none"> ▪ not making any sounds ▪ not babbling ▪ not enjoying communication through eye contact, peek-a-boo, response to sound (may need to check again at 12-15 months)
18 months – 2 years	<ul style="list-style-type: none"> ▪ points to many common objects when asked ▪ understands 2 key words in a sentence e.g. 'give the <u>ball</u> to <u>teddy</u>' 	<ul style="list-style-type: none"> ▪ can name approx 20 familiar objects when asked 'what's this?' ▪ will be imitating parents' words 	<p>Uses: m – n – p – b – t – d Normal processes:</p> <ol style="list-style-type: none"> 1. reduplication (making syllables in one word the same e.g. 'bobo' for 'bottle') 2. final consonant deletion e.g. 'boa' for 'boat', 'ta' for 'tap' 3. consonant harmony (making sounds the same e.g. 'gog' for 'dog') 	<ul style="list-style-type: none"> ▪ Gives affection through hugging and kissing ▪ Turns for help when in trouble ▪ Enjoys playing near other children but not with them yet ▪ Enjoys simple pretend play e.g. cooking or talking on the telephone 	<ul style="list-style-type: none"> ▪ not understanding simple words or selecting objects if asked ▪ using < 8 real words at 27 months ▪ limited pretend play ▪ not using the listed range of sounds
2 – 3 years	<ul style="list-style-type: none"> ▪ understands simple instructions including words like 'big / little' ▪ understands functions of objects 	<ul style="list-style-type: none"> ▪ combines 2+ words to form simple sentences e.g. 'want juice; go shop' ▪ begins to ask questions e.g. 'what's that?' ▪ participates in rhymes and songs ▪ a normal period of whole word / phrase repetition 	<p>Uses: m – n – p – b – t – d – w – y – h Normal processes:</p> <ol style="list-style-type: none"> 1. consonant clusters reduced e.g. 'poon' for 'spoon' 2. long sounds still stopped e.g. 'dun' for 'sun' 3. fronting 't/d' replacing 'k/g' e.g. 'tar' for 'car' 	<ul style="list-style-type: none"> ▪ Shows lots of emotions and can have temper tantrums ▪ Demonstrates joint attention with familiar adults ▪ Likes using imagination with small figures and dressing up clothes 	<ul style="list-style-type: none"> ▪ not following simple instructions ▪ not understanding functions of objects ▪ echoing speech with little understanding ▪ not putting 2-3 words together ▪ initial and final sounds omitted ▪ not responding to their name ▪ not showing joint attention ▪ lack of pretend play and repetitiveness in play or behaviours

AGE	UNDERSTANDING LANGUAGE	SPOKEN LANGUAGE	SPEECH SOUNDS		REFER IF:
3-4 years	<ul style="list-style-type: none"> ▪ follows longer instructions containing different types of words and more than one part e.g. 'Give mummy the dirty cup'. 	<ul style="list-style-type: none"> ▪ uses longer sentences e.g. 'daddy gone work now'. ▪ May use some small words such as 'a' and 'the'. ▪ word endings e.g. 'ing' ▪ can hold a number of turns in a two way conversation. 	<p>May uses: m – n – p – b – t – d – k – g – f – s – w – l – y – h</p> <p>Normal processes:</p> <ol style="list-style-type: none"> 1. consonant clusters are still reduced e.g. 'nake' for 'snake' 2. may still be fronting k, g. e.g. 'gog' for 'dog' 3. may still be stopping long sounds e.g. 'tea' for 'sea' 	<ul style="list-style-type: none"> ▪ Beginning to share and take turns with peers, though can be possessive of favourite toys ▪ Trying to learn how to deal with different emotions ▪ Uses imagination to create stories though pretend play 	<ul style="list-style-type: none"> ▪ unable to follow longer instructions e.g. with two parts ▪ not using 3 word sentences ▪ speech is difficult to understand ▪ lack of interest in playing with peers ▪ child shows a lack of imagination
4 – 5 years	<ul style="list-style-type: none"> ▪ understands more questions words e.g. 'why?' etc. ▪ understand prepositions 'behind / in front' etc. ▪ follows more complex instructions e.g. 'put the red book under the bed' 	<ul style="list-style-type: none"> ▪ can hold a longer conversation with adults and peers. ▪ some use of irregular nouns and verbs e.g. 'mice, men, drank, fell' ▪ can explain the meanings of simple words ▪ can talk about a past experience. 	<p>Normal processes:</p> <ol style="list-style-type: none"> 1. s-clusters are developing l / r clusters may still be reduced 2. 'th' is substituted by 'f' e.g. 'fank you' 3. 'r' is substituted by 'w' e.g. 'rabbit' becomes 'wabbit' 	<ul style="list-style-type: none"> ▪ Ability to empathise is developing ▪ Starting to understand danger ▪ Starting to show a sense of humour ▪ Uses imagination a lot and can be creative ▪ Becoming more independent and adventurous ▪ Starting to label feelings/ emotions 	<ul style="list-style-type: none"> ▪ Unable to follow more complex instructions ▪ not understanding harder concept words e.g. bigger, more ▪ has limited vocabulary ▪ only using simple sentences ▪ speech is difficult to understand
5+	Any concerns for a school aged child should be discussed with the school's link Speech and Language Therapist.				

WHEN TO REFER FOR STAMMERING

Age	When to refer
2;06+ years	Any/all of: <ul style="list-style-type: none"> • Presence of on going or periodic dysfluency • Significant parental anxiety • Awareness of dysfluency (repetition of sounds and words) by child • Family history of stammering • Associated body movements (Twitch, tension, flaps hands, eye blinking) • Stops talking or holds breath

WHEN TO REFER FOR VOICE DIFFICULTIES

Age	When to refer
At any age	Persistent husky voice or Frequent loss of voice NB Child should also be referred to ENT

WHEN TO REFER FOR FEEDING DIFFICULTIES

When to refer	Example
Feeding and/or swallowing difficulties at birth as a result of specific medical problems	Prematurity, Syndromes, Cerebral Palsy
Suspected aspiration (food/fluids entering airway)	Coughing/choking/respiratory distress during or after feeds Recurrent unexplained chest infections or wheeze
Faltering growth in association with suspected feeding difficulties (where reflux has been ruled out or managed)	
Significant oral motor difficulties associated with eating and chewing	Inability to chew Significant delay in texture progression Tongue thrusting
Ongoing gagging on solid foods (where normal Health Visitor advice has not alleviated difficulty)	Detail discussion with parents is essential to rule out behavioral feeding.