

Policy title	Speech and Language Therapy Service
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The Speech and Language Therapy Service strives to operate a highly effective service which offers both assessment and therapy to pupils with speech, language and communication needs. In addition, the Speech and Language Team provides advice, support and training to all academy staff to enable support for speech and language needs across all environments and elements of the curriculum.

Triage and Treatment Process

Due to the high volume of speech, language and communication needs within the academy and the ever-growing caseload, we operate a system which enables pupils to have some form of intervention, if required, prior to being fully referred to the service and coming onto the caseload. This enables us to intervene with pupils more rapidly to ensure accelerated progress.

At the start of reception, pupils are assessed using both the Renfrew Action Picture Test (RAPT) and the Language Link screen. These tools assess pupils' expressive and receptive language. Some pupils may also participate in a speech screen, where concerns regarding their speech production exist. The outcomes of these assessments are analysed and some pupils will then participate in group interventions such as NELI (Nuffield Early Language Intervention), colourful semantics etc.

Consent will be sought for inclusion in these groups by the Inclusion Coordinator but these pupils will not be formally on the Speech and Language Caseload.

The outcomes of these groups will be monitored against SMART targets and where concerns continue to exist, a full referral to the Speech and Language Team will be completed.

Children with speech sounds errors or low intelligibility complete sound screens. These screens are reviewed by the Speech and Language Therapist and these children receive input to help them resolve their speech sound errors. We work on this to help children communicate successfully with adults and their peers and to support their access to reading and phonics. Progress is monitored against SMART targets. Some children who are identified as having severe speech sound difficulties will be referred into the service for more intensive and bespoke support, either immediately after screening or following some triage and treatment support, depending on the nature of their speech sound errors.

Referral Process

To support the Speech and Language Therapist (SaLT) in prioritising the assessment process and also identifying which factors to assess, the process of referral is as follows. Prior to referral, the SENCO or another member of staff needs to complete the following:

Some form of assessment to support the referral, e.g.:-

- Some form of assessment to support the referral e.g. Speech Link
- Language Link (this should fall on 5th percentile or below to meet the service criteria for assessment for language needs, unless the child presents with other needs in regards to expressive language)
- Social Communication Screening (The SaLT will give SENCOs a master copy of this)
- Nursery Communication Checklist

Referral form including the following information:

- Basic Details about the pupil – date of birth, age etc.
- Levels of attainment

- Specific information about the pupil's needs and background e.g. diagnoses, cognitive difficulties, medical needs, EAL etc.
- Consent from parents or carers

Referral information needs to be completed fully for assessment to take place. Parent/carer consent prior to referral is essential and non-negotiable.

The Speech and Language team will only process ten referrals at one time. This allows for assessment that is more thorough as well as quicker timeframes between assessment and receiving therapy, meaning therapy goals are always relevant and up to date. This will also ensure a balance between the volume of referrals and assessments taking place and therapy delivered by the most qualified members of the team.

When receiving the referral, The SaLT will add the child to the waiting list in each academy and their assessment will be prioritised according to the level of need indicated on the referral form and through discussion with appropriate academy staff. All pupils will be assessed within four months and (if required) therapy will commence within two months after the initial assessment. Once all ten referrals have been assessed and management decisions made, the next ten can be received and processed by the SaLT team. The SENCO will be responsible for the triage and prioritising need according to overall SEN requirements of the Academy if more than ten referrals are received.

The below embedded document outlines the information that needs to be included and evidenced. It also includes additional forms that staff referring should complete. When a concern in a given area of Speech, Language and Communication Needs (e.g. attention and listening, social communication, understanding etc.) is highlighted, a description of this need must be provided in the box below. Once completed this should be signed by both the parent/carer and referrer and given to the academy's SENCO. This can then be logged in the SaLT referral folder and referral book within each school. Please ensure that the child name and date of referral are specified.

Referral form:



UoBAT SALT referral form 2019

Therapy and Assessment

Therapy and Assessment will now be provided throughout the academic year to allow for a greater flexibility and support for the changing needs in each academy and nursery provision. However, as only ten new referrals will be accepted at one time, it will mean that this remains manageable for the clinician in that academy and will ensure that therapy takes place throughout the year by the most skilled practitioners (thus increasing impact). This process will also involve greater communication and joint working with the SENCO as they will be able to make decisions about prioritisation of need via the method of selecting the ten children most in need of input. Therapists will timetable weekly slots for assessment until the service cap has been met or all children requiring SALT involvement have been assessed. The service should be capped at 33 children on the direct therapy caseload. If children are requiring Wave 2 support and monitoring they may be kept on the caseload but not be included as part of the 33 places. This is at the discretion of the therapist and will be decided on a case by case basis according to level of need and likelihood of ongoing difficulties. Children known to the service (who have

not been moved to a monitoring capacity, and therefore are not awaiting further assessment) should not exceed 50 children. In schools where the therapist is present for less than 3 days this should reduce to 40.

In the event of an application being made for an EHC plan, the SENCO would need to request an initial/review assessment through the SaLT and this will not be counted as one of the ten new referrals.

Therapy will be delivered by both the SaLT and the SaLTAs (Speech and Language Therapy Assistants). The provision for each pupil will be determined on a termly basis by the SaLT dependent on the level of need, progress made and the level of previous involvement from the service. This will be reviewed on a termly basis with team meetings. Unless in exceptional circumstances children will be either be allocated 1, 2 or 3 blocks of therapy support per year. SaLTAs will have therapy responsibility for approximately 12-15 children each, however this may vary in the event that groups or paired work is in place. In the event that numbers exceed 15, other forms of data collection/note writing will be in place to ensure this does place unnecessary admin strain on the SaLTA.

Drop-in Service: Advice and Support for SLCN

The SaLT team will operate a drop in service at an agreed time each fortnight where members of staff can come to discuss concerns or request support with creating a Total Communication Environment. This may be for requesting advice, support differentiating for need or discussing potential barriers to aspects of learning. This can also be a way requests can be made for resources or in-class support strategies within the academy.

Training

The training needs of each academy should be discussed at least three times per year between the SENCO/Academy Leadership. Training packages will require the SaLT to have time out of therapy and assessment to research, prepare and resource to ensure they are evidence based and following up to date information for maximum impact for pupils and staff.

Continued Professional Development within the SaLT team

The SaLT team receive termly CPD that is based on the changing needs of the caseload and upskilling less experienced staff. It is also an opportunity to share good practice and to have peer reflection and learning. This happens once per term. Other members of SEN teams across academies may also attend these sessions where appropriate. Therapists complete 30 hours CPD per year and this must be allocated within their timetabled work for the year.

