

PAEDIATRIC SPEECH AND LANGUAGE THERAPY REFERRAL GUIDANCE

Who can refer?

We accept referrals from any professional who has obtained parental consent to make the referral.

Referrals will be accepted from parents/carers

Who should be referred?

- Children aged 0-19 who live in Hull or East Riding or have a Hull or East Riding GP
- Children who are rated red (with the exception of Attention and Listening) on the appropriate screening checklist
- Children who are rated amber (with the exception of Attention and Listening) on the appropriate screening checklist and have followed the recommendations for at least 4 months with no significant progress
- Children with a medical diagnosis that impacts on their speech, language and communication needs
- Children who appear to be stammering or are only comfortable to talk in certain situations

We are unable to accept referrals for

- Children who are rated green on the appropriate screening checklist
- Children who are rated amber on the appropriate screening checklist unless they have followed the recommendations for at least 4 months with no significant progress
- Children under 2:6 unless the child has been discussed with a Speech and Language Therapist (please name the therapist on the referral form)
- School age children with global (moderate) developmental delay whose language development is at a similar level
- Children who have already been referred to the Social Communication/Autism Panel unless they have speech, language and communication needs

What can you do to help?

Parents are often very concerned about their child's speech and language development. Completing the screening checklist may reassure them that there is nothing to be concerned about. The checklist also contains links to advice, strategies, activities and resources that may help the child.



Making a referral

Please complete a screening checklist appropriate to the child's age. This will enable you to determine if the child requires a referral to us.

If the child is rated

- **Red**
- **Amber** (after at least 4 months following recommendations with no significant improvement)

Please complete the appropriate referral form giving more detail in relation to the concerns found on the checklist and send it to:

Children's Speech and Language Therapy Service

**Walker Street Children's Centre,
70 Walker Street, Hull,
HU3 2HE.**

Tel: 01482 692929

Acceptance of referral

The referrer will receive an e-mail to inform them of the acceptance of the referral.

If the referral is not appropriate, it will be returned to the referrer.

If the referrer requires a hard copy rather than an e-mail, they can request this by phoning the Speech and Language Therapy Department on 01482 692929

Referral forms can also be returned by email to hnf-tr.sladmin@nhs.net

