



## Stapolin Educate Together National School

**School Address: Belmayne Avenue, Belmayne, Dublin 13, D13 KT2N**

**School Roll Number: 20519G**

**School Patron: Educate Together**

### Referral and Consent Form for Senior Specific Speech and Language Disorder (SSLD) Class.

The Referral Agent (Speech & Language Therapist or Psychologist) should complete the following form and submit it with the documentation outlined below to:

**Clodagh Farrell, Principal,  
Stapolin ETNS, Belmayne Avenue, Dublin 13, D13 KT2N.**

Opening date for applications is 1<sup>st</sup> February 2023 and the closing Date for Applications for 2023 is : **Wednesday 8<sup>th</sup> March 2023**

**Child's Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Name of Parent(s)/Guardian(s):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Tel:** \_\_\_\_\_

**e-mail :** \_\_\_\_\_

**Referred by:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Tel:** \_\_\_\_\_

\_\_\_\_\_

**e-mail :** \_\_\_\_\_

***NB: Five copies of the following documents are needed:- (Please tick each box)***

	Referral and consent form, completed and signed (including SEB Rating form) <b>X 5</b>
	School or Preschool Report form (including SEB Rating form) <b>X 5</b>

	Current SLT Report <b>X 5</b>
	Recent Psychological Assessment Report <b>X 5</b>
	Any other reports: eg. OT; Audiology; CAMHS; etc. <b>X 5</b> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul>

**Parental Consent for Child’s Referral to Language Class**

I understand that my child has a Developmental Language Disorder and I give consent for the referral of my child to the SSLD / Specific Speech and Language Disorder Class.	
I give permission to members of the Admissions Advisory Committee* to read my child’s referral reports and to contact other professionals involved in the referral either by telephone or in writing.	
I have read the information leaflet and I understand that I will have an important role to play should my child be offered a place in the SSLD Class. The SLT has completed the SEB Rating scale with me (pp 4-5 of this form)	
In the event that my child is eligible for a place in Stapolin ETNS SSLD Class but is not offered a place due to lack of places, I consent to my child being considered for a place in St. Marnock’s Language Class if a place is available.	

\* The composition and role of the Admissions Advisory Committee are set out in the school’s SSLD Class Policy.

**Signed:** \_\_\_\_\_ (Parent / Guardian) \_\_\_\_\_ (Parent / Guardian)

**Date:** \_\_\_\_\_

**Referrer’s signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Speech & Language Therapy History**

Currently attending speech and language therapy at: \_\_\_\_\_

Name of SLT: \_\_\_\_\_

He/she attended for most recent assessment on: \_\_\_\_\_

Has he/she attended for therapy? Yes / No

He/she has received \_\_\_\_\_ blocks of therapy from \_\_\_\_\_ to \_\_\_\_\_.

He/she has had a total of \_\_\_\_\_ sessions to date. Individual: \_\_\_\_\_ Group: \_\_\_\_\_

He/she has significant difficulty with:

<b>Receptive Language</b>		<b>Speech</b>	
<b>Expressive Language</b>		<b>Pragmatic Lang / Social Communication</b>	

Language (s) spoken at home: \_\_\_\_\_

**Current educational placement and recent psychological assessment**

Name of current teacher & class level: \_\_\_\_\_

Name & Tel. number of current school:

\_\_\_\_\_

Most recent psychological assessment (date): \_\_\_\_\_

Psychologist's name & contact details: \_\_\_\_\_

**Other professionals involved** e.g. OT, ENT Consultant, Audiologist, CAMHS

Name and contact details of other professionals involved:

\_\_\_\_\_

\_\_\_\_\_

**Other Relevant Referral Information not contained in reports:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Social, Emotional and Behavioural Rating Scale

(To be completed by the speech and language therapist and parent together)

Child's name: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Age \_\_\_\_\_

Completed by: \_\_\_\_\_ (Parent) \_\_\_\_\_ (SLT) Date: \_\_\_\_\_

For each statement below please circle the one which, in your experience, applies **most** appropriately to the child: generally the case, sometimes the case or rarely the case.

### Circle one response only per statement.

#### Social

1. The child is included by peers in interactions, e.g. games, invited to parties etc.

**Generally**                                      **Sometimes**                                      **Rarely**

2. The child initiates appropriate verbal interactions with familiar listeners, e.g. conversations, telling news, recounting stories.

**Generally**                                      **Sometimes**                                      **Rarely**

3. The child is able to join in and play with peers to an age-appropriate level.

**Generally**                                      **Sometimes**                                      **Rarely**

4. The child withdraws from interactions with peers.

**Generally**                                      **Sometimes**                                      **Rarely**

#### Emotional

1. The child presents as confident in familiar settings.

**Generally**                                      **Sometimes**                                      **Rarely**

2. The child can resolve conflicts and negotiate with peers to an age-appropriate level.

**Generally**                                      **Sometimes**                                      **Rarely**

3. The child's initial reaction when set a task is to 'opt out' or give up, e.g. saying "it's too hard for me"

**Generally**                                      **Sometimes**                                      **Rarely**

4. The child gets frustrated or anxious when he cannot get his message across.

**Generally**                                      **Sometimes**                                      **Rarely**

## Behavioural

1. The child uses strategies to get his message across, e.g. gesture, actions or “saying it another way”.

**Generally**

**Sometimes**

**Rarely**

2. When the child can't fully understand what is being said, her/she can let you know by asking you to explain again or repeat ...“huh/what?”

**Generally**

**Sometimes**

**Rarely**

3. The child demonstrates age appropriate pragmatic language skills, e.g. eye contact, vocal volume, turn taking, using language forms that are appropriate to the situation and people involved.

**Generally**

**Sometimes**

**Rarely**

4. The child can react in any of the following ways when he has difficulty understanding what is being said or has difficulty expressing himself: becoming embarrassed, becoming withdrawn, acting out, behaving aggressively, having tantrums.

**Generally**

**Sometimes**

**Rarely**

5. The child shows signs of discomfort in speaking situations e.g. muscles tensing, tearfulness, throat clearing, blanching/blushing.

**Generally**

**Sometimes**

**Rarely**

**Thank you for completing this form.**

**Closing Date for Applications is Wednesday 8<sup>th</sup> March 2023**

A copy of this form will be retained on the child's HSE SLT file.