REFERRAL ELIGIBILITY
A referral eligibility criterion is relevant for appropriate placement within a Language Development Centre. The following criteria need to be considered when making a referral:

1. The child must have a significant primary language disability in one or more language areas.

2. The child needs to demonstrate evidence of non-verbal learning potential within the average or above average range

   - PP-1 referrals:
     - A current cognitive assessment is essential for Pre-Primary to Year 1 referrals for placement in 2017 by a School Psychologist or Private Psychologist.

   - Kindergarten referrals:
     - A developmental assessment is highly recommended for referrals into Kindergarten. However, it is not mandatory (for example, if services are not available). A Griffith’s assessment administered by a Paediatrician or Medical Officer is a suitable assessment. If the assessment has not been conducted in full, please enclose all available information and completed subtests. If possible, a report is to be attached. Some information about the cognitive abilities / learning potential of the children would be useful to the placement committee.
     - If an ASQ (Ages and Stages Questionnaire) has been completed with the parent/s please include this information.

3. The child needs to demonstrate sound adaptive behaviour skills, substantiated by observed descriptive evidence of the child’s behaviour in his/her current educational placement or in his/her home.

   - For Kindergarten applicants the Parent / Carer questionnaires should be completed by the Speech Pathologist and parent/s together to gain a true picture of the child. If the child attends a Child Care Centre, a Child Care Worker is to complete this questionnaire in addition to the parent’s copy.
   - For Pre-Primary to Year 1 applicants the child’s classroom teacher should complete the relevant questionnaire to provide information about the child’s independence skills, social-emotional development, attention, sensory-motor skills, oral language and readiness & conceptual/academic skills in the classroom.

TIMELINES

Referrals into Pre-Primary and Year 1: due date – Friday 9th September 2016 (Term 3, Week 8)
Referrals into Kindergarten: due date – Wednesday 21st September 2016 (Term 3, Week 10)

NO LATE REFERRALS WILL BE ACCEPTED
REFERRAL INTAKE

All five Language Development Centres (North East, West Coast, South-East, Fremantle and PEEL) accept Kindergarten to Year 1 referrals.

Please also ensure that each applicant only applies for one year level. If parents and referring agents are requesting a repeat this needs to be discussed with the LDC Principal prior to completing the year-specific referral documentation.

If you have any queries regarding the referral process or you would like to discuss the referral of specific children please feel free to contact your local Language Development Centre and speak with the Principal or Speech Pathologists.

2017 referrals may be completed & submitted electronically via email to the relevant centre. If using this option please use the PDF forms (including Speech Pathology Referral Reports, CALD questionnaires and teacher/carer questionnaires) and attach them to an email along with additional attachments (e.g. score forms, behaviour questionnaires etc.). Alternatively a hard copy may be submitted through the post/delivery.

CONTACT DETAILS:

<table>
<thead>
<tr>
<th>LDC</th>
<th>Principal/s</th>
<th>Speech Pathologist/s &amp; email address to send e-referrals to</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>North East LDC</td>
<td>Rosemary Simpson</td>
<td>Anna Taylor (<a href="mailto:Northeastmetro.lcd.referrals@education.wa.edu.au">Northeastmetro.lcd.referrals@education.wa.edu.au</a>)</td>
<td>9275 5511</td>
</tr>
<tr>
<td>West Coast LDC</td>
<td>Shelley Blakers</td>
<td>Julia Cronje / Polly Prior (<a href="mailto:WestCoastLDC.Referrals@education.wa.edu.au">WestCoastLDC.Referrals@education.wa.edu.au</a>)</td>
<td>9304 4274</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>9401 5433</td>
</tr>
<tr>
<td>South East LDC</td>
<td>Ronnie O'Neil</td>
<td>Cecile Ferreira (<a href="mailto:Janine.Carson@education.wa.edu.au">Janine.Carson@education.wa.edu.au</a>)</td>
<td>9277 3200</td>
</tr>
<tr>
<td>Fremantle LDC</td>
<td>Wendy Strang</td>
<td>Rachael Bongiascia (<a href="mailto:Penelope.Newton@education.wa.edu.au">Penelope.Newton@education.wa.edu.au</a>)</td>
<td>9331 8602</td>
</tr>
<tr>
<td>Peel LDS</td>
<td>Fiona Forbes &amp; Shelley Collins</td>
<td>Kristen Aird &amp; Tanya Rose (<a href="mailto:peel.lds.referrals@education.wa.edu.au">peel.lds.referrals@education.wa.edu.au</a>)</td>
<td>9593 9030</td>
</tr>
</tbody>
</table>

RESPONSIBILITIES

Speech Pathologist:
- Completion of the appropriate Speech Pathology LDC Referral Report Form and associated assessment.
- Completion of the Parent/Carer questionnaire together with the parents for Kindergarten applications.

School Psychologist:
- Psychometric assessment
- Behaviour checklist
- Ensure that teacher has completed the teacher questionnaire and forward that information with the assessments for PP-1 applications.

LDCs:
- Distribute updated referral forms to referring Speech Pathologists in their catchment areas.
- Answer queries from referring Speech Pathologists regarding the LDC referral process.
- Inform referring Speech Pathologists of which children have been offered a place in the LDC as soon as possible.

LDC Referral Guideline Document – Applications for 2017
THE SPEECH PATHOLOGY REFERRAL REPORTS

There are three Speech Pathology Referral Reports for Language Development Centre Placement:

- **Kindergarten** - to be used to refer children for placement into Kindergarten in 2017
- **Pre Primary** - to be used to refer current Kindergarten aged children for placement in Pre-Primary in 2017
- **Year 1** – to be used to assess current Pre-Primary children for placement into Year 1 in 2017.

PLEASE DO NOT USE OUT OF DATE FORMS FOR REFERRAL AS THESE HAVE CHANGED. CURRENT REFERRAL FORMS HAVE BEEN CLEARLY MARKED WITH 2017 LDC APPLICATION

SPEECH PATHOLOGY REFERRAL REPORT FORMAT

*The data sheet is now the first page of each Speech Pathology Referral Report.*

This includes student’s demographic details and information regarding the referees.

**Please provide details of other agencies involved with the child (if known) and a case summary.**

The summary is helpful to the placement committee as it presents an overall picture of the child. It may include:

- Whether the child’s language difficulties are within the receptive and/or expressive domain and whether they present with additional speech and/or fluency difficulties.
- The severity of the child’s language and/or speech impairment. For example severe/moderate/mild/age-appropriate.
- Any specific information regarding the child’s strengths and weaknesses in different language areas (e.g. comprehension, semantics, syntax, narrative, phonological awareness or pragmatics).
- The impact of the child’s language difficulties in the home or educational environment (e.g. peer interactions, ability to access the curriculum)
- It is at this point that any information that would show that a placement in a Language Development Centre would be the best management option available to the child should be included.

**Please also provide information relating to families’ transport requirements to get students to and from school if they are successful applicants.**

This information helps inform school planning and appropriate site placement if students are successful applicants. This information is not binding and does not limit families’ transport options. Upon enrolment if successful, families wanting to make use of the school bus service will need to apply for this service.

**Standardised Assessments:**

**Kindergarten/Pre-Primary Assessment:**

- the CELF- Preschool-2

**Year 1 Assessment:**

- the CELF-Preschool-2 (if the child is < 6.0 yrs)
- OR
- the CELF-4 (if the child is > 6.0 yrs)

Administration of the following subtests is required to calculate the **Core Language Score, Receptive Language Score and Expressive Language Score** –

**CELF-P2:** Sentence Structure, Word Structure, Expressive Vocabulary, Concepts & Following Directions, Recalling Sentences and Basic Concepts. *Children 5 years and older complete Word Classes - Receptive & Expressive instead of Basic Concepts.*

**CELF-4:** Concepts & Following Directions, Word Structure, Recalling Sentences, Formulating Sentences, Sentence Structure and Word Classes Receptive & Expressive.
Speech Pathologists please do not hesitate to contact the Language Development Centre Speech Pathologists if you need to borrow the CELF-P2 or CELF-4 assessments for the purpose of LDC referral. There will be a fee charged to cover the cost of the test form/s that you require. Please contact your nearest LDC to negotiate loan of the test/s. We ask that you return the assessment on the date negotiated to enable other Speech Pathologists access to the assessment/s at this busy time.

**Renfrew Action Picture Test:**
Renfrew Action Picture Test (RAPT) remains **essential for all referrals**. Please provide the child’s responses to the 10 stimulus pictures. Scoring of this assessment is optional.

**Bus Story:**
The Bus Story also remains **essential for Pre-Primary and Year 1 referrals**. Please write the child’s utterances verbatim. Scoring of this narrative assessment is optional. Clinicians are still required to score the Blank Questions related to the Bus Story (for Pre-Primary and Year 1 referrals).

**Information on children from culturally and linguistically diverse backgrounds:**
We acknowledge the collaboration between Dr Cori Williams, LDC Speech Pathologists and Health Department Speech Pathologists who devised this Appendix in 2010. The CALD form should be completed to provide evidence that a language disorder/delay exists, rather than a language difference, for children who speak or have been exposed to language/s other than English. If relevant, please attach this questionnaire regarding children from culturally and linguistically diverse backgrounds (2 pages) to the back of the Speech Pathology Referral Report.

For example, evidence for a language disorder/delay may include:
- difficulties that are evident across multiple languages
- siblings that display stronger language skills across languages (if applicable)
- younger siblings that show stronger language skills than the child with a language disorder/delay (if applicable)
- parental concern about the child’s skills in their primary language
Extra Optional Information:
Please find a checklist of skills at the end of the Speech Pathology referral report. This provides an opportunity to include information not always reflected in standardised language assessments. Please select yes / variable / no or another descriptor as stated, based on your clinical judgments and please don’t hesitate to comment alongside if necessary. When completing this checklist please reflect on the child’s skills in relation to the performance you would expect of an age matched child who displays a ‘normal’ pattern and sequence of language development.

In cases when a child’s functional language performance is lower than what their language indexes on the CELF-P2 or CELF-4 suggest, or when a child performs exceptionally low on the CELF, it is recommended that referring clinicians provide a representative language sample.

A sample of at least 25 of the child’s utterances is recommended. Please include both sides of the conversation and describe the context of the interaction. Please make note of any non-verbals e.g. gestures and any contextual support provided. If the child is unintelligible please make comments regarding their communicative intent.

Clinicians may include a description of observations in place of a full transcription when completing a language sample.

If you have any other available data on the child’s performance on standardised or informal language measures or any past reports documenting the child’s progress please attach this to the back of the LDC Speech Pathology Referral Report / scan in and attach when emailing the Speech Pathology Referral Report & CALD questionnaire (if applicable). Reports from other professionals (e.g. occupational therapist, audiologist etc.) may also be attached.

PARENT / CARER QUESTIONNAIRE FOR KINDERGARTEN & TEACHER QUESTIONNAIRES FOR PP & YEAR 1

The content of these documents remains the same as in previous years. The only addition is a sensory processing component in recognition of the child’s needs in this area along with information about gross and fine motor skills.

Thank you for taking the time to read this document.