



<u>Language + Communication - Early Identification Screening</u>

Child's name:	DOB:				
Date of screening:	Age:				
Languages spoken:	Strongest language:				
Complete in the ch	ild's strongest language.				
STEP 1 – General interaction screen:					
Is the child easily able to (please tick):					
 □ Respond to their name □ Enjoy interacting with a familiar adult □ Make eye contact □ Point (from a distance) □ Respond to things adults say a lot (e.g. 'bye bye' 'do you want milk?') 					
Total number of ticks:					
If 4 or 5 ticks, please go to STEP 2					
If 0,1, 2 or 3 ticks, please go to STEP 3.					

STEP 2 – Language level screen: Please tick <u>1 box.</u>

	B: What is their talking like most of the time?					
A - \A/h - 4 i - 4h h i d? -	Less than	20+	Single words	2 words together	3 word phrases with	Sentences with 4 + words
A: What is the child's age?	20 single words	single words	+ some little phrases	with action words	action words	
	Examples:					
	'juice'	'juice'	' <u>red</u> car'	'baby sleeping'	' <u>little</u> baby <u>sleeping</u> '	'car driving faster and
	'teddy'	'teddy'	'it's mine'	' <u>drinking</u> milk'	' <u>teddy</u> fall down'	faster'
•	'more'	'more'	' <u>peppa</u> pig'	'teddy jumping'	'monkey eating	' <u>its</u> hiding in the <u>bus'</u>
					banana'	' <u>the</u> big monkey's eating'
Age: 1;6 – 1;11 (Months 18 – 23)	amber	amber	green	green	green	green
Age: 2;0 - 2;5 (Months 24 - 29)	amber	amber	amber	green	green	green
Age: 2;6 - 2;11 (Months: 30 - 35)	red	amber	amber	amber	green	green
Age: 3;0 - 3;5 (Months: 36 - 41)	red	red	red	amber	green	green
Age: 3;6 - 3;11 (Months: 42 - 47)	red	red	red	amber	amber	green
Age: 4;0 - 4;5 (Months: 48 - 53)	red	red	red	red	amber	green
Age: 4;6 – 4;11 (Months: 54 – 59)	red	red	red	red	amber	green

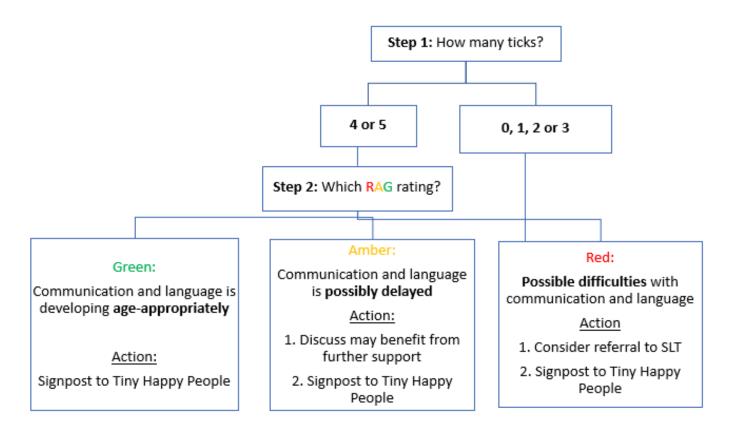
Developed by: Terri Freeman - Speech and Language Therapist (terri.freeman1@nhs.net)

This is being trialled March - July 2023 - Please contact Terri for updated version after this





STEP 3 – Next steps:



Step 4 - Consent

Parent / Carer details:

Name	:	Relationship to child:
Email	:	Phone:
<u>Ambe</u>	<u>r</u>	
	Parent consented to be added to Waitin	g List for Language Enhancement groups
	Parent has consented to share informati Language Therapist	ion with our Northumberland Park NHS Speech and
	Advice sheet provided	
Red		
	Parent consented to be referred to NHS old)	Speech and Language Therapy Service (if 2 years
	Advice sheet provided	

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