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| **Childcare Provider name:** |  | **Childs Name:** |  |

*‘Children and young people with speech, language and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them, or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives.’ (SEND Code of Practice, 2014).*

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| **Speech and Language: Expressive Language**When young people have English as an additional language, they will only be considered to have Special Educational Needs if they demonstrate difficulties using their first language. |
| **Complex**Additional, enhanced, mild to moderate | **Complex/Severe**Enhanced, frequent | **Severe**Prolonged, profound, multiple, extensive, significant |
| The child struggles to articulate their needs and wants. The child’s speech is largely unclear because sounds are muddled or missed out.The child has communicative intent and tries to communicate with peers. The child is making slow progress with language acquisition. They will have been assessed using Wellcomm with a view to refer to Speech and Language Therapy Services (SALT).The child often relies on gestures, Makaton and other visual supports, alongside speech attempts. They may be echolalic, have a stammer or be reluctant to speak. | The child uses very few recognizable words or phrases and cannot express needs and wants using speech. Speech can be incomprehensible to unfamiliar listeners.The child has little communicative intent. (motivation to talk).The child is accessing regular Speech Therapy, individual and/or group therapy. The child depends upon vocalisations, gestures, Makaton and is learning how to use Picture Exchange Communication System (PECS), to communicate. | The child is nonverbal and is dependent on using PECS to communicate their wants and needs. The child has no communicative intent. The child has an individualised speech therapy programme and accesses specialist services. Any communication is via random vocalisations, body language and can lead to signs of distress. |

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| **Speech and Language: Receptive Language** |
| **Complex**Additional, enhanced, mild to moderate | **Complex/Severe**Enhanced, frequent | **Severe**Prolonged, profound, multiple, extensive, significant |
| The child needs clear and repeated instructions in context to follow everyday routines. They do not always respond to their name. The child tends to take things literally and has difficulty in understanding abstract concepts.  | The child has great difficulty processing verbal information and following simple instructions. They rarely respond to their name. The child has great difficulty with interpreting the meaning of some words/phrases and can have a literal understanding, which can cause them distress and confusion. | The child has severe difficulty in understanding and processing any simple instructions, relying on adult support to follow daily routines.The child appears to have no understanding of social communication, which impacts extensively on their wellbeing. |

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| **Social Communication and Interaction** |
| **Complex**Additional, enhanced, mild to moderate | **Complex/Severe**Enhanced, frequent | **Severe**Prolonged, profound, multiple, extensive, significant |
| The child uses limited/unusual eye contact and facial expressions and does not initiate interactions with their peers. The child is reluctant to participate in group activities but will play alongside other children following their interests. The child shows some rigidity which has an impact on them joining in with others play. The child’s ritualised behaviour often interferes with their social participation. The child has difficulty navigating most changes to routine and requires additional adult support and preparation. The child may not always understand what other people’s facial expressions or gestures mean. | The child presents as withdrawn from other people and finds it difficult to make eye contact. The child refuses to participate in a group and prefers to play away from other children. The child appears in their own world and needs to follow their own agenda. It is difficult for this child to engage in something not of their choosing. The child’s ritualised and obsessional behaviour frequently stops their social participation. The child’s reaction to transitions and change is significant which causes distress. Additional adult support throughout the day. requiring a consistent routine each day. The child has some difficulties reading non-verbal cues such as another person’s body language. | The child appears to have little to no awareness of other people. The child needs extensive adult support for any level of social interaction with others. The child’s rigid thinking and repetitive actions impact significantly on their ability to interact with peers. Obsessional and repetitive behaviours are all consuming for the child, having an extensive impact on all aspects of the child’s day. The child is highly distressed and anxious when encountering any change, requiring a predictable routine each day.Has significant difficulty reading non-verbal communication e.g., facial expression and other people’s body language. |