



SPEECH & LANGUAGE PATHWAY

A step-by-step route for identifying, supporting and reviewing speech and language needs.

Screening can take place at ANY point where a speech or language concern is identified. You do not need to wait 4–6 weeks before screening.

STARTING SCHOOL

Reception transition information, home/nursery information and observation.

ALL children are screened for speech & language on entry and receive whole-class NELI.

A NEW CONCERN

A parent/carer or member of staff notices a possible speech or language difficulty at any point.

Complete/arrange speech & language screening where appropriate.

AN EXISTING NEED

A child joins us with SALT/CALS targets, a report or professional involvement.

Use this information immediately to plan and deliver the identified support.



IDENTIFY THE AREA OF NEED • We may refer to SALT for an assessment / Teacher observation + parent/professional information

UNDERSTANDING

(Receptive Language)

How well the child understands spoken language.

LOOK FOR: difficulty following instructions/questions; copying peers; needing repetition or extra processing time.

TALKING & FORMING IDEAS

(Expressive Language)

How the child uses words and sentences to express ideas.

LOOK FOR: short/unclear sentences; word-finding difficulty; difficulty explaining, sequencing or retelling.

VOCABULARY

How well the child learns, understands, remembers and uses words.

LOOK FOR: limited vocabulary; difficulty learning/retrieving new words; weak subject vocabulary.

SPEECH SOUNDS

How clearly the child produces the sounds needed for understandable speech.

LOOK FOR: speech that is hard to understand; persistent sound substitutions/omissions; speech affecting participation.

ATTENTION & LISTENING

How well the child attends to, listens to and takes in spoken information.

LOOK FOR: missing verbal information; difficulty sustaining listening; needing visual support or repeated prompts.



PLAN THE RIGHT SUPPORT FOR THE IDENTIFIED BARRIER

Use the Universal Offer and classroom strategies. Where screening identifies a specific need, put targeted speech & language support in place. If a SALT/CALS plan is issued, intervention staff will deliver the interventions/targets as specified.



IF THE CHILD HAS ACTIVE SALT TARGETS: DELIVER → ASSESS → GENERALISE

DELIVER

Frequent 1:1 and/or group speech & language intervention by trained staff, following the child's current programme and targets.

ASSESS EACH TARGET

Record each current target as:
EMERGING • DEVELOPING • SECURE
Use this to show progress and identify where teaching/practice needs adapting.

CHECK GENERALISATION

A target is not achieved only because it can be demonstrated in the intervention.
Look for the skill being used independently in class, wider school contexts and everyday communication. When it is achieved, make this clear on the SEND Review. Alert SEND Team when the child is ready for review.

If progress is limited, targets remain at an early stage, skills are not generalising, or the child's needs appear greater than the current plan → discuss/escalate to the SEND Team and/or CALS/SALT for review, adaptation, further assessment or specialist input.

NOTE: Some children are on the SEND register under the SALT only pathway, which means they have an active SALT plan which is their ONLY identified need. They do not have IPM's or SEND Reviews but SALT progress is shared.

WHAT DO I DO IN THE CLASSROOM?

Match the strategy to the barrier you have identified

IF UNDERSTANDING IS THE BARRIER Gain attention first Reduce spoken information Chunk instructions into smaller steps Allow processing time Repeat/rephrase when needed Use visuals, symbols, objects and examples Check understanding individually	IF EXPRESSIVE LANGUAGE IS THE BARRIER Give time to formulate an answer Allow oral rehearsal with a partner/adult Model and expand the child's language Use sentence starters/scaffolds Use visual sequencing Use Colourful Semantics where appropriate	IF VOCABULARY IS THE BARRIER Pre-teach key vocabulary Teach words explicitly in context Revisit and overlearn vocabulary Use individual word banks/prompts Link new words to visuals/examples Give repeated opportunities to use new words
IF SPEECH SOUNDS ARE THE BARRIER Follow the child's current SALT/CALS programme where one is in place Model words naturally rather than repeatedly correcting Give time to communicate Reduce pressure to repeat in front of others Seek screening/review where speech remains difficult to understand	IF ATTENTION & LISTENING IS THE BARRIER Reduce competing noise/distraction Consider seating carefully Use the child's name/gain attention first Keep verbal input short Pair spoken information with visuals Build in repetition and opportunities to rehearse	ACROSS ALL AREAS Keep language clear and purposeful Reduce unnecessary questioning/language load Notice strengths as well as barriers Use screening to understand the need Record what is working Look for transfer of skills beyond intervention into everyday classroom learning

SLCN OR EAL? EAL can overlap in presentation with SLCN. In EYFS, consider the child's communication in their home/first language where information is available and allow appropriate opportunity for English acquisition. From Year 1, where the picture is unclear, FlashAcademy screening can sit alongside observation, progress, parent information and the wider communication profile. A child may need EAL support, this pathway, or both.	WHEN DOES INTERNAL REFERRAL FIT? Screening and speech & language support do not have to wait for an Internal Referral. If wider SEND concerns remain, needs are more significant/complex, or progress is limited despite appropriate provision, complete the Internal Referral to the SEND Team with evidence of strengths, concerns, screening, support and impact. Where earlier SEND Team/specialist involvement is indicated, do not delay it simply to complete a fixed period first.
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OUR SPEECH & LANGUAGE OFFER

From universal support to commissioned and specialist provision

UNIVERSAL	TARGETED	COMMISSIONED CHATTERBUG OFFER
Language-rich curriculum and environment Explicit vocabulary teaching Purposeful talk/discussion Oral rehearsal and modelling Vocabulary revisited in context Visuals and dual coding Adults model and extend language	Targeted 1:1/group speech & language provision Intervention First in EYFS Additional NELI where identified Colourful Semantics where appropriate Pre-teaching and overlearning vocabulary Individual SALT/CALS programmes and targets Targeted provision is matched to the identified barrier and reviewed through evidence of progress AND generalisation.	CALS – weekly Screening/assessment; direct 1:1/group intervention; Intervention First; target support/review; liaison with staff/SEND Team; caseload support. SALT – fortnightly Specialist assessment/intervention; individual programmes/targets; EHCP oversight; specialist advice; staff training/modelling; collaborative caseload prioritisation.
RECEPTION ALL children screened on entry ALL children receive whole-class NELI Communication & language embedded throughout EYFS		

ACTIVE SPEECH & LANGUAGE PLAN: OUR REVIEW CYCLE

1 • DELIVER	2 • TARGET CHECKS	3 • GENERALISE	4 • RESPOND
Frequent intervention following current targets.	Each target recorded as Secure, Emerging or Developing.	Check whether the child uses the skill beyond the intervention.	Continue/adapt when progressing; escalate for review when progress/generalisation is limited.

FURTHER SPECIALIST SUPPORT

EAST AIP	SENIT	NHS SUPPORT
Further specialist advice/support One-off screen or assessment Input outside commissioned Chatterbug offer Advice around next steps	Further specialist advice where needs are complex or additional Local Authority input is required Support with planning next steps and wider services	Some children may also receive NHS Speech & Language Therapy where needs are more complex or diagnostic assessment is required. NHS input may run alongside or in place of commissioned provision.

Re-referral and diagnosis: Children can be referred or re-referred to Chatterbug at any point. Specialist assessment through Chatterbug, EAST AIP or the NHS may identify a diagnosis such as DLD or Speech Sound Disorder; this informs provision rather than replacing the pathway. See quick guides.