

Making SEND Everyone's Business: Speech, Language and Communication Needs

What is meant by SLCN?

- SLCN is an umbrella term.
- Children and young people (CYP) with SLCN may have difficulty with many aspects of communication.
- These can include difficulties with fluency, forming sounds and words, formulating sentences, understanding what others say and using language socially.
- Speech, Language and Communication Needs (SLCN) are the highest % need on all school provision maps.

Percentile Scores

- Percentile (%ile) scores are used to identify cognitive profiles.
- They can only be given by specialist professionals, for example Educational Psychologists or the Speech and Language Team.
- A child or young person with 1%ile or below for any language score will automatically be diagnosed with a language disorder.

Reports tend to include scores on the following aspects of cognitive function:

Verbal comprehension: ability to understand written and spoken words.

Visual spatial: being able to tell where an object is. Includes self.

Fluid reasoning: the brain's ability to take in new information without practice or experience.

Working memory: the brain's ability to stay on track without losing focus.

Processing speed: the fluency with which the brain receives, understands and responds to information.

In addition, a range of SLCN needs can be identified in a such reports. These are broken down into sub-sections and must be considered together to identify the overall need.

Where no report has been undertaken, well trained professionals can recognise the area of need and adapt provision to meet it.

Expressive Language

Difficulty getting views across to others through speech.

What to Expect	How to adapt and support
Evidence of frustration – swearing, hitting out, etc.	Emotion coaching.
A child who needs a considerable period to form a sentence before speaking it.	Intensive interaction allows adults to identify when a child is becoming frustrated.
One- or two-word answers.	If given a one-word answer, wait for further verbal response.



Inability to put themselves in the role of another – role play, or diary entries will be almost impossible.	Warn a child of what you will ask them. Walk away, come back to them.
'I can't' / 'I am stupid' / f off	Script, space, repeat. Recognise this is still communication.
	Give them the option of replying on paper or using tech.

Receptive Language

Understanding the verbal messages from others.

What to Expect	How to adapt and support
Delayed processing speed.	Ask, wait, ask again. CYP with a RL need can need up to an hour to process the verbal message.
A CYP who appears to be completely ignoring you.	Keep instructions short and focussed on what you want. Instead of 'please don't run in the corridor' say 'walk.'
Inability to follow more complex instructions.	Tick lists / now and next.
Problems organising thoughts for writing.	Writing frames, tech, story boards.
Reduced vocab.	Teach key terms for the next lesson at the end of the last.
Difficulty asking for help.	

Phonological Disorders

A type of speech sound disorder which involves inability to correctly form the sounds of words.

What to Expect	How to adapt and support
Struggles with g, k or r sound, usually replaced with another sound. Wed for red. Pup for cup.	Model the correct pronunciation without asking them to repeat it: 'that's right, it is red.'
Adding sounds to words: pur-lease? Can I go and pur-lay?	Listen to the child read as often as possible.
Leaving sounds off words: go to the ark (park), go to the oilet (toilet)	Speak to parents, share the practice.
Distorted sounds in words: thith	Know the child's key sound weaknesses, listen for it, repeat it correctly.
Substituting tricky sounds for easier ones. Chin for chicken, for example.	Language rich.
Struggles with g, k or r sound, usually replaced with another sound. Wed for red. Pup for cup.	

Disfluency

Breaks or disruptions in the flow of speech, for example stammer or lisp.

What to Expect	How to adapt and support
Part-word repetition: I w-w-want to go outside.	You want to go outside? No problem.
One syllable word repetition: sit sit sit down.	Yes, please sit down.



Prolonged sounds: you are kiiaiiiiind.	Ah, thank you for saying I am kind. I think X is kind. Can you tell me another kind person?
Stuttering, stammering, lisping, hesitations.	Patience. Keep eye contact, do not speak on behalf of the child, do not try and say it for them.
A child who begins to refuse to speak.	Quieter space / 1:1 is likely to support the child through this phase.

Voice Disorders

A difficulty with the pitch, volume, tone and quality of the voice.

What to Expect	How to adapt and support
A quivering sound while speaking.	Avoid rushing them. Do not ask them to speak up – they probably can't.
Sound rough or hoarse.	Avoid telling a CYP with this type of disorder to be quiet – they probably can't do it.
Very high or low pitch, sometimes rapidly varying between the two.	Ignore, model, intervene if any pupil makes a comment on it.
The CYP may feel as if there is a lump in their throat, which may make speaking uncomfortable.	Rest breaks, alternative ways of communicating for example symbols, PECS or tech.

Echolalia

- Commonly associated with ASC.
- Repetition of a word or sentence the CYP has heard used by another.
- Can give a false impression of a child who understands what has been said.
- Can last weeks, can be a single word or a phrase.
- Often, the pronunciation / intonation of the echolalia reflects that used by the original speaker.
- Can be a form of expressed anxiety, so it needs to be noticed.

Principles for teaching CYP with SLCN:

You Should	You Should Avoid
If you have a TA with you, ask them to draw simple illustrations to help with new words. You could also ask a student to help with this	Introducing too many new words in a single lesson
Pre-teach the key words for the next lesson at the end of the last	Background noise and distractions when you are practicing new words
Do simple repetition of new words – item, item, item, you do it, then as individuals. Use clapping for syllables	Interrupting the student when they are speaking to you, even if you think you know what they are trying to say
Remember <u>how</u> and <u>why</u> questions are harder for students to answer – model examples on the board	Using non-literal language like 'it's raining cats and dogs'



Model the correct language when a student speaks incorrectly – e.g. ‘toilet I go’ / ‘I need to go to the toilet’ and ‘bag please’ / ‘please can I go and get my bag’ – repeat back in the first person	Correcting grammar – instead simply model the sentence the way it should be said
Always use a child’s name when you are speaking directly to them and wait for eye contact before you speak	Ignoring an individual comms plan – make sure it is out on the desk. Pause and check it if you need to. this models to students that it is a worthwhile document
Keep instructions short. Back them up with visual instructions and / or a list	Rush an explanation. Take your time. Speak slowly
Use real-life items wherever possible. If you are teaching money, use coins for example	Change the order of tasks mid-way through a lessons, without pausing and re-sharing expectations
Give opportunities for students to speak to you. Plan it into your lessons	Let them give up trying to tell you something. Tell them you don’t mind how long it takes
Ensure all resources have visual elements to them. E.g. if you are teaching about a microscope, put a picture or video up, or show them one	Rush a student onto the next task – allow them to consolidate what they are doing
Use now and next boards in your planning and teaching	Leave up an old now and next
Check understanding with an open-ended question – ‘you tell me what you need to do first’	Support your verbal instructions with a written prompt / tick list
If you only understand some of what a child says, repeat back the section you understand, and ask them to fill in the gaps. Repeat this until you have understood everything	Avoid the temptation to try and finish sentences for them