

The Role of the Speech and Language Therapist in Diagnosis

The Speech and Language Therapist will be involved in the multidisciplinary team who carry out diagnosis. The role of the Speech and Language Therapist is to consider the following areas:

- Early intervention
- History of communication
- Joint attention
- Attention to language
- Understanding
- Expression
- Use of communicative strategies
- Development of play skills and the range of a child's play interests

This may involve the therapist working directly with your child or observing others working with him/her and the interaction he/she has with you.

The Speech and Language Therapist as part of the Multi Disciplinary Team will be considering the range of your child's strengths and needs to arrive at a differential diagnosis and make recommendations for further input.

Speech and Language Therapy and Early Intervention

Research highlights the importance of early intervention, very often the Speech and Language Therapist will be involved with early intervention. This will sometimes involve direct work with your child and at times will involve working with you on strategies to support his/her communication. If your child attends nursery, the Therapist may work with nursery staff to consider strategies to support the child in the nursery.

Approaches, which may be introduced to this age group, may include:

- Picture Exchange Communication System (PECS)
- Non-directive Language Therapy (Special Times)
- Early group work
- Introduction of the TEACCH approach
- Structured language programmes
- Increasing predictability
- Emerging literacy

Speech and Language Therapy and Autism

"Understanding speech requires knowing how to process sounds...which first requires recognising sounds as things that can be processed and recognising order from chaos. No one guessed how much I understood, because I couldn't say what I knew.

And no one guessed the critical thing I didn't know, the one missing connection that so much else depended on: I didn't communicate by talking, not because I was incapable of learning how to use language, but because I didn't know that that was what talking was for. Learning how to talk follows from knowing why to talk and until I learned that words have meanings, there was no reason to go to the bother of learning to pronounce them as sounds. I had no idea that this could be a way to exchange meaning with other minds." (Jim Sinclair)

Speech and Language Therapy in children with autistic spectrum disorders aims to address the following areas:

- Social understanding and particularly the child's understanding of ways in which they can affect their environment
- Motivation to communicate
- Attention and listening
- Development of play skills
- Understanding of language
- Means of expression
- Use of expressive communication (spoke word, written word, symbols and signs)
- Social skills

Speech and Language Therapists will work closely with parents to ensure that the child is developing his/her communication both at school and at home and is able to generalise his/her skills.

Speech and Language Therapy in Education

Communication is fundamental to learning and progression' Working group of the DfEE, DoH and SEN Nov 2000. Speech and Language Therapy provision may vary considerably when a child enters school.

Children with Statements of Special Educational Needs will have Speech and Language Therapy included in either / both section 3 (educational need) or section 6 (a non-educational need). This will be related to the individual child's need and the arrangements for provision.

Many Speech and Language Therapy services are provided by Health Authorities.

Methods of Delivery may include the following:

- Individual
- Small group
- Class based delivery
- Classroom communication programmes incorporated into a child's Individual Education Plan
- Advice to classroom staff
- Monitoring

Most children require a minimum of a classroom based programme, which ensures that communication targets are part of the everyday experience and are carried out by all staff and participation in group / individual work. At this stage group work is considered vital in order for children to really understand the purpose of acquiring communication skills. Most Speech and Language Therapists will work with teaching staff to plan Individual Education Plans and to target particular areas of the National Curriculum.

Approaches may include the following:

- Early interaction
- Intensive interaction
- Non-directive communication Therapy (Special Times)
- Picture Exchange Communication System (PECS)
- Introduction to visual cues to support understanding of expression
- Use of Makaton signing
- Work within the TEACCH structure
- Social Stories
- Living Language
- Structured Language programmes
- Literacy skills

Reports will be produced for Annual Review and dependant on the school arrangements, summary reports of progress may be available each term.

Accessing Speech and Language Therapy

Schools and pre-school services will have links with the local Speech and Language Therapy service; however parents can refer their child directly to Speech and Language Therapy at their local community health centre or through the Child Development Centre.

The following can also provide information about services and produce lists of Speech and Language Therapists working in private practice.

The Royal College of Speech and Language Therapists, 2 White Hart Yard, London, SE1 1NX