



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

Rannóg Teiripe Urlabhra agus Teanga,  
Ionad Cúram Priomhúil Chrois Thamhlachta,  
Foirgneamh an Ruiséalaigh,  
Crois Thamhlachta Thiar, Baile Áthar Cliath 24.

Primary Care Speech and Language Therapy, Dublin South West,  
4<sup>th</sup> Floor Russell Building,  
Tallaght Cross Primary Care Centre,  
Tallaght,  
Dublin 24.

Phone: (01) 7957563

## Dublin South West Primary Care Paediatric Speech and Language Therapy Service Guidelines for making a referral to Speech and Language Therapy

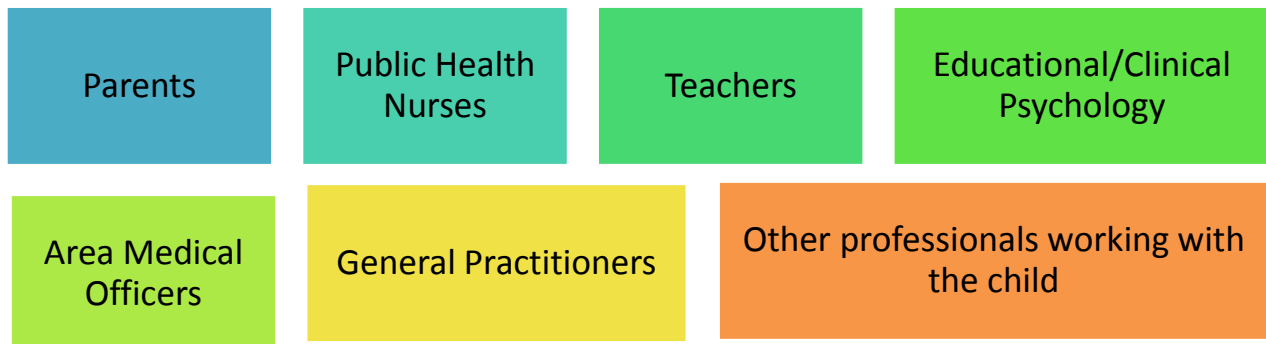
The role of the Speech and Language Therapist is to provide assessment, diagnosis and therapy for children with a wide range of communication difficulties.

### Referral Criteria:

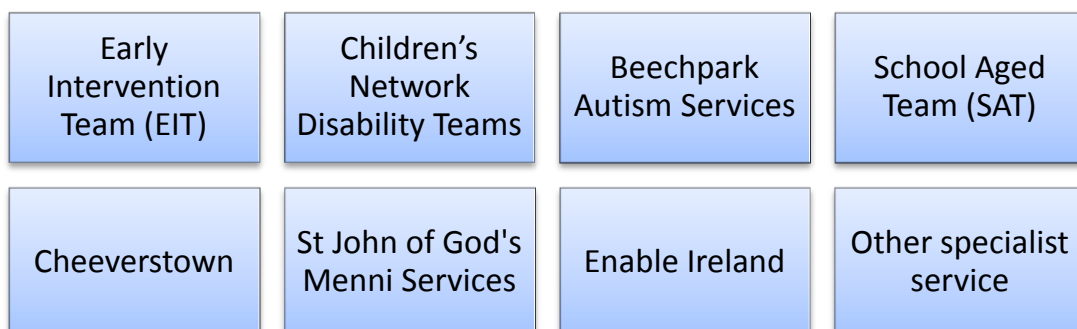
- ✓ Children referred before their 18<sup>th</sup> birthday.
- ✓ Living in HSE Dublin South West (Dublin 24, Dublin 12 and parts of Dublin 6W)
- ✓ Children who have a **primary need in speech/language and/or communication**. These children do not need the support of a multi-disciplinary team.

### Referral Procedure:

We have an **open referral system** and accept referrals from:



Referrals are **not accepted** for children who are **attending** or **on the waiting list** for:



**Please note:** If a recommendation for Primary Care SLT is made following assessment and/or intervention with another HSE service/ Voluntary body, we will backdate the referral within our service.

Referrals are **not accepted** for children who have **additional needs**, for example:

- Children with significant emotional and/or behavioural needs.
- Children with complex physical difficulties e.g. Cerebral Palsy.
- Children with moderate / severe / profound learning disabilities as assessed and diagnosed by a psychologist.

Please refer to Primary Care SLT:	Please consider a team/AON referral:
If a child's <b>primary need</b> is in speech / language and/or communication including:	If there are <b>additional significant concerns</b> for the child including:
<ul style="list-style-type: none"> <li>▪ Understanding language</li> <li>▪ Naming items</li> <li>▪ Making sentences</li> <li>▪ Pronouncing words clearly</li> <li>▪ Having conversations</li> <li>▪ Speaking fluently</li> <li>▪ Voice difficulties</li> </ul>	<ul style="list-style-type: none"> <li>▪ Behavioural needs</li> <li>▪ Play needs</li> <li>▪ Sensory needs</li> <li>▪ Emotional needs</li> <li>▪ Physical difficulties</li> <li>▪ Social interaction difficulties</li> </ul>



**Please contact us**, if you have any questions, **before making a referral** to discuss the child's needs and the **best care pathway** for this child.

### When making a referral please:

- **Discuss the referral** to Speech and Language Therapy with the child's parent(s) /guardian(s).
- Please **explain why** you are making the referral and that **acceptance is not guaranteed** until after we screen the referral.
- **Obtain written consent** for the referral to be made.
- **Complete** a Speech and Language Therapy **referral form** with the parent(s)/guardian(s).
- If there is **insufficient information** we will not accept the referral. We will return the referral for further information.

### What happens next?

- If we **do not accept** the referral, we will **notify the referrer**. The referrer will support the child's parent(s)/guardian(s) in completing other referrals needed.
- If we **accept the referral**, the child's caregiver(s) will need to **attend a workshop** followed by an **assessment**. Following acceptance to the service, we will contact the child's caregiver(s) about the workshops.
- **Younger children:** parent(s)/guardian(s) will be invited to a **workshop** and given strategies for home practise, followed by an **assessment** after they turn **2 years 6 months**. **Older children** will be waitlisted for assessment following attendance and the workshop.

