



ELIGIBILITY FOR REFERRAL TO LANGUAGE DEVELOPMENT CENTRE/SCHOOL

To be eligible for referral to a LDC a child must:

- 1. Be entering Kindergarten, Pre-Primary or Year 1 the following year.
2. Have a significant primary language disorder in one or more language areas.
3. Demonstrate evidence of learning potential within the average range or above.
4. Demonstrate sound adaptive behavior skills, substantiated by descriptive evidence of the child's behaviour in their current educational placement, care setting or in their home.

REFERRAL REQUIREMENTS CHECKLIST

The person who is responsible for completing the documents also needs to ensure they arrive at the LDC.

KINDERGARTEN REFERRALS

SPEECH PATHOLOGIST TO COMPLETE:

- 2025 LDC Case History & Additional Services Form (essential)
2025 LDC Speech Pathology Referral Report KINDY and all associated assessments.
ASQ Ages and Stages Questionnaire (if available) please ensure it is fully scored and the raw data is included.
2025 LDC Parent-Carer Questionnaire KINDY completed by the child's parent/carer.
2025 LDC Parent-Carer Questionnaire KINDY if the child attends a daycare or ECEC, the child's educator is to complete a questionnaire as well.
2025 CALD Questionnaire completed by a speech pathologist and the child's parent/carer if the child has a culturally and linguistically diverse background.
Video (not compulsory) but highly recommended. A short video of one of the assessments will suffice.

PAEDIATRICIAN/MEDICAL OFFICER TO COMPLETE:

- A Developmental Assessment (is highly recommended, but not mandatory). A Griffith's Assessment administered by a paediatrician or medical officer is a suitable assessment.
\*Children being referred for kindergarten must have up-to-date immunisation records or be on an approved catch-up schedule or have a medical exemption.

PRE-PRIMARY AND YEAR ONE REFERRALS

SPEECH PATHOLOGIST TO COMPLETE:

- 2025 LDC Case History & Additional Services Form (essential)
2025 LDC Speech Pathology Referral Report and all associated assessments.
2025 LDC CALD Questionnaire completed by a speech pathologist and the child's parent/carer if the child has a culturally and linguistically diverse background.
Raw CELF Form and additional raw data.
Video (not compulsory) but highly recommended. A short video of one of the assessments will suffice.

PSYCHOLOGIST TO COMPLETE:

- A Current Cognitive Assessment (mandatory)
The use of a nonverbally administered cognitive assessment (UNIT 2; LEITER 3) with contemporary normative data is preferred.
2025 LDC Behaviour Checklist PP & Yr1 completed by a psychologist along with the classroom teacher and/or the child's parent/carer.
2025 LDC Teacher Questionnaire completed by the child's classroom teacher.
School Report (most recent)
Behaviour Management Plan (if applicable)
Individual Education Plan (if applicable)

## DUE DATES

**Referrals for Pre-primary and Year 1:** Friday 6<sup>th</sup> September 2024 (Term 3, Week 8)

**Referrals for Kindergarten:** Wednesday 18<sup>th</sup> September 2024 (Term 3, Week 10)

## REFERRAL INTAKE

All four LDCs (North East, West Coast, South-East, Fremantle) and Peel LDS accept applications for **Kindergarten, Pre-primary and Year 1**.

Please ensure that **each applicant applies for one year level only**.

If parents/carers and referring agents wish to request a child repeat a year level, a discussion with the LDC Principal must be arranged prior to completing the year-specific referral documentation.

Referrals for 2025 may be completed and submitted electronically via email to the relevant Centre. If using this option please use the PDF forms (including Speech Pathology Referral Reports, CALD Questionnaires, and Teacher/Carer Questionnaires) and attach them to an email along with additional attachments (e.g. score forms, Behaviour Questionnaires, etc.). Alternatively, a hard copy may be submitted through the post/delivery.

## CONTACT DETAILS

If you have any queries regarding the referral process, or you would like to discuss the referral of specific children, please contact your local LDC and speak with the Principal or LDC Speech Pathologists.

LDC	Principal/s	Speech Pathologist/s and email address to send e-referrals to	Phone
North East LDC	Sharlene May	Rebecca Balchin <a href="mailto:Northeastmetro ldc.referrals@education.wa.edu.au">Northeastmetro ldc.referrals@education.wa.edu.au</a>	9218 1600
West Coast LDC	Catherine Regan	Polly Prior, Julia Cronje & Sarah Morrey <a href="mailto:WestCoastLDC.Referrals@education.wa.edu.au">WestCoastLDC.Referrals@education.wa.edu.au</a>	9407 3050
South East LDC	Ronnie O'Neil	Helen Fahey <a href="mailto:SouthEast.LDC.Referrals@education.wa.edu.au">SouthEast.LDC.Referrals@education.wa.edu.au</a>	9473 9600
Fremantle LDC	Nichola Middlemiss	Megan Griffiths <a href="mailto:FremantleLDC.referrals@education.wa.edu.au">FremantleLDC.referrals@education.wa.edu.au</a>	9312 4850
Peel LDS	Fiona Forbes	Tanya Rose <a href="mailto:Peel.lids.referrals@education.wa.edu.au">Peel.lids.referrals@education.wa.edu.au</a>	9523 7830

## STUDENTS ON TEMPORARY RESIDENCE VISAS

To be eligible to enroll at a LDC the student must have *local enrolment entitlement*. Students who do not have Australian Citizenship, or are not permanent residents of Australia, may not be eligible for LDC enrolment. Before submitting an application for a student on a temporary residence visa, the referring agent is asked to refer to the [Enrolment of Students from Overseas Schedule](#) or contact TAFE International Western Australia (TIWA) by phoning 9218 2100.

## SPEECH PATHOLOGY REFERRAL REPORTS

There are three Speech Pathology Referral Reports for LDC placement.

- **Kindergarten** - to be used to refer children for placement into Kindergarten in 2025
- **Pre-primary** - to be used to refer current Kindergarten aged children for placement in Pre-primary in 2025
- **Year 1** – to be used to assess current Pre-primary children for placement into Year 1 in 2025

Please also provide information relating to families' transport requirements to get students to and from school, should the application be successful. This information helps inform school planning and appropriate site placement. This information is not binding and does not limit families' transport options. Upon enrolment, families wanting to make use of the school bus service will need to apply for this service. Please note that students accessing full time LDC placements (i.e. Pre-primary, Years One, Two and Three students) are prioritised for seats on the bus over those attending part-time (i.e. Kindergarten students).

## STANDARDISED ASSESSMENTS

**Kindergarten Assessment** CELF-P3  
**Pre-Primary and Year 1 assessment:** CELF-P3 (< 5:11 yrs) **OR** CELF-5 (> 5.0 yrs)

Administration of the following subtests is required to calculate the **Core Language, Receptive Language, and Expressive Language Scores**:

**CELF-P3:** Sentence Comprehension, Word Structure, Expressive Vocabulary, Following Directions, Recalling Sentences and Basic Concepts.

**CELF-5:** Sentence Comprehension, Following Directions, Word Structure, Word Classes, Formulated Sentences, Recalling Sentences.

The CELF-P3 and CELF-5 assessments may be loaned for the purpose of LDC referral depending on availability. There will be a fee charged to cover the cost of the test form/s that you require. Please contact your nearest LDC to negotiate the loan of the test/s. We ask that you return the assessment on the agreed date to enable other speech pathologists to access to the assessment/s at this busy time.

## OTHER LANGUAGE ASSESSMENTS

### **Renfrew Action Picture Test:**

Renfrew Action Picture Test (RAPT) remains essential for all referrals. Please provide the child's responses to the 10 stimulus pictures. You may attach the raw data instead of transcribing the child's responses onto the application form. Scoring of this assessment is optional.

### **Narrative Assessment:**

A Narrative Assessment remains essential for Pre-primary and Year 1 referrals. You may use the Bus Story or any other Narrative Assessment. Please write the child's utterances verbatim, you may attach the raw data instead of transcribing the child's utterances onto the application form. Scoring of this narrative assessment is optional.

Clinicians are required to complete and score the Blank Comprehension Questions related to the Bus Story. If you have completed and attached an alternative assessment please provide Narrative Comprehension Questions for that particular assessment instead.

## CULTURALLY AND LINGUISTICALLY DIVERSE

Children from culturally and linguistically diverse (CALD) backgrounds:

We acknowledge the collaboration between Dr. Cori Williams, LDC Speech Pathologists and Health Department Speech Pathologists for their work in devising the CALD Questionnaire in 2010. If a child speaks (or has been exposed to) language/s other than English, the CALD Questionnaire should be completed to provide evidence that a language disorder, rather than a language difference, exists.

Evidence for a language disorder may include:

- difficulties that are evident across multiple languages;
- siblings that display stronger language skills across languages (if applicable);
- younger siblings that show stronger language skills than the child with a language disorder/delay; and
- parental concern about their child's skills in the primary language.

Please attach the CALD Questionnaire to the back of the Speech Pathology Referral Report.

*If a family identifies as Aboriginal or Torres Strait Islander and speak English or Aboriginal English as their primary language this form does not need to be completed.*

## **PRAGMATIC AND ADDITIONAL INFORMATION**

Please find a checklist of skills at the end of the Speech Pathology Referral Report. This provides an opportunity to include information not always reflected in standardised language assessments. Please select *the relevant* descriptor based on your clinical judgments. Please add comments alongside, if necessary. When completing this checklist please reflect on the child's skills in relation to the performance you would expect of an age-matched child who displays a typical pattern and sequence of language development.

## **LANGUAGE SAMPLE**

In cases when a child's functional language performance is lower than their language indexes on the CELF P3 or 5 suggest, or when a child performs exceptionally low on the CELF P3/5, it is recommended that referring clinicians provide a representative language sample.

\* A video of the interaction may be submitted in lieu of a written transcription.

A sample of at least 25 of the child's utterances is recommended. Please include both sides of the conversation and describe the context of the interaction. Please make note of non-verbal communication, gestures and contextual support provided. If the child is unintelligible please make comments regarding their communicative intent. Clinicians may include a description of observations in place of a full transcription when completing a language sample.

If you have any other available data on the child's performance on standardised or informal language measures, or any past reports documenting the child's progress, please attach them to the back of the LDC Speech Pathology Referral Report. Reports from other professionals (e.g. occupational therapist) may also be attached.

## **ADDITIONAL COMMENTS**

Please provide your clinical impressions of the child you are referring. You do not need to reiterate information already provided in other areas of the referral.

You may wish to provide information about the child's functional language skills.