

Speech and Language Screening Checklist

This form is for tracking the speech and language screening process. Children should be screened within the first forty-five days of enrollment. (The forty-five day deadline is recorded on the Teacher Checklist) The screening results information is to be recorded on this sheet. The Speech and Language Checklist is to be attached to the Teacher Checklist and submitted as part of the Monthly Report. The information is then entered in the computer on the ChildPlus program
Note: **THIS FORM WILL REPLACE THE PLAN FOR RESCREEN FORM.**

The form will be completed as follows:

1. Enter Name. (Alphabetically, Last name, first name. Ex. Smith, Andy)
2. A. Enter date of screening for speech.
B. Enter result using codes listed under result codes.
C. Enter S.C./Screeener codes these codes are also listed on the bottom right.
3. Results recorded as F, N, or U need additional action as follows:
F requires a referral, enter date under referral column.
N indicates a rescreen.*
U indicates a rescreen.*

A. Write date of planned rescreen.
B. Record date of actual Screening
C. Record results using Result Code
4. Follow steps one and two for Language.
Rescreen results for language can be taken from the LAP-D Report, All Scores Report.
Any score above -1.5 is considered passing.
If the first LAP-D score is below -1.5 enter the letter F.
Proceed to the Referral Column and start the referral process.

* Rescreen efforts will be made no later than two weeks after the initial attempt, unless a therapist has given you a specific time frame. That date (two weeks or the therapist date) is entered on the date line. If the therapist has given a specific time, it is the **TEACHER'S** responsibility to remind the therapist and to screen the child if the therapist is unable to complete the screen within **THE FORTY-FIVE DAY TIME FRAME.**