

## Community Therapies Service – North Lincolnshire

### SPEECH AND LANGUAGE THERAPY CHECKLIST FOR 2 YEARS

This checklist has been adapted from the Bristol Surveillance of Children's Communication (BRISC) which was devised by Speech and Language Therapists as a screening package to help enable other health professionals/Early Years practitioners to identify children in need of referral.

Together with the child's parents /carers please tick **one** box in answer to each question.

Name of Child: \_\_\_\_\_ DOB: \_\_\_\_\_

Signature of parent/Carer: \_\_\_\_\_ Date: \_\_\_\_\_

1. Are you confident that your child is hearing well?

YES  NO  NOT SURE

2. Can your child sometimes drink from a normal cup or beaker?

YES  NO  NOT SURE

3. Has your child stopped using a bottle?

YES  NO

4. Does your child use a dummy?

YES  NO

If YES, how often? \_\_\_\_\_

5. Can your child play with one toy or game for a little while before wanting something else?

YES  NO  NOT SURE

6. Does your child join in pretend play such as tea parties, driving etc.?

YES  NO  NOT SURE

7. Does your child point to pictures of everyday things if asked?

YES  NO  NOT SURE

8. Can your child point to parts of his body when you ask him to?

YES  NO  NOT SURE

### CHECKLIST FOR 2 YEARS (CONTINUED)

9. Can your child do things like “get your shoes”, “put your coat on the chair” when asked?

YES

NO

NOT SURE

10. Does your child use lots of single words – at least 30?

YES

NO

NOT SURE

(These words do not have to be clearly produced to be counted as words)

11. Is your child beginning to link 2 words together? e.g. “want drink”  
“more biscuit”

YES

NO

NOT SURE

12. Does your child like to play and interact with you?

YES

NO

NOT SURE

13. Are you worried about your child’s talking?

YES

NO

NOT SURE

### ACTION GUIDE LINES

A Speech and Language Therapy referral may be appropriate if the following **Possible Causes for Concern** have arisen:

- Little pretend play
- Short attention span
- Little understanding of the names of everyday objects and actions
- Few or no words spoken
- Lack of interest in playing and interacting with others

**If making a referral, attach this checklist to the Referral Form and return to the Speech and Language Therapy Team.**