

OET Case Notes

Speech Pathology · Beginner · Transfer letter · to School-Based Speech Pathologist

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Speech Pathology — Transfer to School-Based SLP for a Child with Language Delay

THE CASE NOTES

Patient: Master Thomas Brennan, 5 years old; entering school next month; developmental language disorder (DLD)

Language profile: Expressive language: approximately 12 months below age level (CELF-P2: Core Language Score 74); uses 3–4 word phrases; vocabulary limited; sentence grammar immature (omits articles, prepositions); Receptive: approximately 6 months below age level; follows 2-step instructions reliably; struggles with complex embedded clauses and WH-questions

Speech sounds: Speech intelligibility to unfamiliar listeners approximately 80%; /th/ and /r/ not yet emerging (within age expectations); no other phonological errors; speech is not a primary therapy target

Current therapy programme: Weekly 45-minute community SLP sessions for 6 months; focus: vocabulary expansion (semantic mapping), sentence combining, narrative structure (beginning/middle/end); parent involved in home practice (15-minute structured play sessions 3 times per week)

Progress: CLS improved from 68 to 74 over 6 months; 3–4 word phrases established (was 2-word at referral); parental report: Thomas is communicating more in structured contexts but still struggles in noisy or busy environments

Goals for school-based SLP: Continue sentence combining (target: 5-word phrases); introduce story grammar (narrative structure); support classroom participation — Thomas benefits from: pre-teaching vocabulary before lessons, visual supports, repeated instruction, small group rather than whole-class for oral language tasks

Task: Write a transfer letter to the school-based SLP, Ms Emma Walsh, providing the language profile and the classroom support recommendations.

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WHAT TO INCLUDE

+ **Language profile: CLS 74 (from 68 over 6 months), 3–4 word phrases, receptive 6 months below age level — follows 2-step instructions, struggles with complex clauses**

The school-based SLP needs the current level and the trajectory — the score plus the progress. CLS 74 with a 6-point improvement over 6 months tells them more than the score alone.

+ **The classroom support recommendations: pre-teaching vocabulary, visual supports, repeated instruction, small group for oral language tasks**

These are the SLP's most direct contribution to the educational team. The school-based SLP takes this profile to the teacher and the SENCO — these four adaptations are the practical classroom bridge between therapy and the classroom.

+ **That parents are engaged in home practice (structured play sessions 3 times per week)**

Carer involvement in DLD intervention is a significant prognostic factor. The school-based SLP needs to know to continue the parent programme and not start from scratch with the family.

WHAT TO LEAVE OUT

– **The CELF-P2 subtest breakdown**

State the CLS and the functional interpretation. 'Full CELF-P2 report attached' covers the subtest detail. Reproducing all subtests in the transfer letter overloads it with data the school SLP can access from the report.

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– The speech sounds profile beyond one sentence

'Speech intelligibility 80% to unfamiliar listeners; /th/ and /r/ not yet emerging within age expectations; speech is not a current therapy target.' This is the complete speech sounds section for this case.

CRITERION IN FOCUS · ORGANISATION & LAYOUT

A paediatric SLP transfer letter organises naturally into: (1) the language profile, (2) the therapy programme and progress, (3) the goals for the school-based SLP, (4) the classroom support recommendations. Mixing the classroom recommendations into the therapy progress section, or placing the goals before the profile, requires the receiving SLP to re-read to extract the treatment agenda. The structure should mirror the school-based SLP's workflow: know who the child is, know where they are, know what to do next.

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