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| **Secondary Age Communication Supportive Environment Checklist** |
| *A Communication Supportive Environment Audit was completed with, by XXX and Language Therapist (SLT). Teacher:* *Please see below for a summary of what is working well and steps for development.**For further support and information, please liaise with the SLT and/or SENCO.* |
| **RAG Rating Key** | **Green:** strategy consistently & confidently used**Amber**: evidence of strategy use**Red:** no evidence of strategy at this time |
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| **Classroom Organisation** |
| ***Area*** | ***RAG*** | ***What’s working well…*** | ***Even Better If…*** |
| *Seating plan and desk arrangement reflects task and student needs* |  |  |  |
| *Desk arrangement gives space for staff and students to move freely* |  |  |  |
| *Displays are relevant, labelled, and uncluttered*  |  |  |  |
| **Use of Visuals** |
| ***Area*** | ***RAG*** | ***What’s working well…*** | ***Even Better If…*** |
| *Visual lesson plan is provided* |  |  |  |
| *Information is presented in a variety of ways* |  |  |  |
| *Language is visually presented* *e.g. instructions, vocab, target sentences* |  |  |  |
| *Planning frameworks and/or checklist are used* |  |  |  |
| *Classroom rules are displayed & referred to* |  |  |  |
| **Adult’s Use of Language** |
| ***Adult Language*** | ***RAG*** | ***What’s working well…*** | ***Even Better If…*** |
| *Staff delivery of information is suitable e.g. time, rate, facing class, complexity* |  |  |  |
| *Expected language and non-verbal communication skills are modelled* |  |  |  |
| *Topic and complex vocabulary are directly taught*  |  |  |  |
| *Staff promote self-help skills and checks for understanding* |  |  | *
 |
| *Staff give specific praise and accurate feedback*  |  |  |  |
| ***Peer Interactions*** |
| ***Peer interactions*** | ***RAG*** | ***What’s working well…*** | ***Even Better If…*** |
| *Group/paired work is well structured* |  |  |
| *Group work rules are displayed and referred to* |  |
| *Accurate sentence structures and grammar are regularly modelled* |  |
|  |
| **Further examples of good practise** | *
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| **Further comments and/or suggestions** | *
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| **Agreed Actions and Timeframe for Completion** |
| **Agreed Action** | **Person(s) Responsible** | **Completion Date** |
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| *The Communication Supportive Environment Audit will be reviewed by XXX XXX, Speech and Language Therapist (SLT) on XX/XX/XXXX.* |