MAGAZINE

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Early Years

BA

From your editor

There are so many possibilities for articles about the exciting developments in the field of early years provision that it was almost a relief when some authors did not get their articles to me on time! The idea of rejecting articles on the ground of 'no space' was filling me with dread! However I think we have a really interesting collection of information, ideas and developments - and maybe you have more to share with other Teachers of the Deaf. If you have, then send the article to <u>magazine@BATOD.org.uk</u> and I will expand the collection of articles on the website.

Although there will be little 'turn about time' I am seeking paragraphs describing activities and exercises used with dyslexic pupils (deaf or otherwise) to include in the November Magazine which will focus on dyslexia. All sorts of minor games and ideas will be welcomed - there is no collection of such resources readily available and many of you are seeking the ideas... so let's collect them - send them to me NOW whilst you are thinking about it.

The commissioning editor for the January Magazine 'Promoting Inclusion' is Liz Beadle - particularly, we are trying to consider the challenges of secondary level support and issues. How have you sorted out covering a wide range of subjects across a large secondary school either on a peripatetic basis or as a resource base? What are the views of mainstream teachers and the classroom support staff - can we help your SENCOs understand exactly what are the challenges for deaf children? Please contact Liz - <u>articles@BATOD.org.uk</u> and share your information with the readers of BATOD Magazine.

aaazine editor

Cover Picture Early communication? Two year-old Jodie 'reads' a story to six-month old Caitlen.

Need to contact BATOD? talk to BATOD Secretary Paul Simpson email: <u>secretary@BATOD.org.uk</u>

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CONTENTS

Change and opportunity	4
ESSAT, SE, JARs and the new proposals and Early Years $\$	6
Early intervention	8
Advising on audition	10
Complete access to spoken language	11
Paediatric impressions	13
Developing guidelines on informed choice	14
The role of a parent support co-ordinator	15
Joined-up working for European professionals	16
Hanen 'It takes two to talk' programme	17
Deafnessatbirth - what's new?	18
Video analysis the 'West Sussex Way'	19
Research into deafness and early years	22
Maximising auditory potential in a nursery curriculum	25
Cochlear implantation in children under one	27
Early Support for deafblind babies	29
The BAHA for those with Down Syndrome	39
Thinking out of boxes	41
Grandparents' view	42
Recipe for support pudding	45
Salford's Early Support	46
Regular items and general information	
Return to SENDA - CACDP conference	32
DCCAP Making your own books for deaf children	33
This and that	36
FEAPDA Congress 2005	44
Noticeboard	49
Abbreviations in this Magazine	50
ICT for teachers	52
Birmingham's new training resource	54
Obituaries	54
Deafax seminar	56
Compression without tension - Deafness and Literacy	56
Review - Let's sign Early Years	57
Review - Otikids booklets	57
Your candidates need you	58
Association Business	
thoughts from my potting shed	1
What went on at NEC 13 March 2005	2
BATOD UK	51
BATOD website	55
BATOD and RCSLT meeting	55
NEC Minutes from 11 June2004	59
Subscription rates 2005-6	63
I've moved notification form	63
Advertising rates	47
Calendar - Meetings and training to know about	64
Officers of Regions and Nations inside back	

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... thoughts from my potting shed

Carole Torrance, President

Revamping the BATOD Survey and bringing it into the 21st century has not been straightforward.

In some ways it would have been easier to start completely from scratch. However, over the years we have collated data on deaf children, their educational achievements and communication modes and so we have a rich source of data. This longitudinal data can show trends and changes. All involved in data collection agree that this type of survey is valuable and needs to continue.

Aaagh, I can hear you say, that's all very well for researchers but what value is this for the teachers, schools and services that fill in the data? The value lies in the information it provides for lobbying the DfES about training and recruitment of Teachers of the Deaf. It informs the STRB report that BATOD submits. It shows the educational provision for deaf pupils. It can also provide information on your local authority's statistical neighbours to see how your provision measures up. The BATOD survey information provides robust statistics as evidence to back all these submissions. Yes, it can be a hassle and some authorities now collect some information on deaf pupils but at this stage this is at a very basic level.

At the June Heads of Sensory Service Conference in Birmingham I spoke about the BATOD survey. I asked for continued support for the survey and I queried the best time for data collection. My suggestion was that the survey went out in September with a census date of the 1 November 2005. The return date will be 31 December 2005. This is a wide time-frame to allow teachers to complete surveys at a time that suits them best. Also, at this time of year, the results for the GCSE, A levels etc will be available.

BATOD has been involved with the Scottish Survey, Achievements of Deaf Pupils in Scotland (ADPS), and is looking at their more modern survey with a view to aligning both. <u>www.education.ed.ac.uk/adps</u>

That four-letter word - cash - comes into things and as usual it is a lack of cash funding that has affected our progress. However, BATOD has received a significant grant from the Burwood Park Foundation. This grant is specifically for the survey over the next two years. This funding will be instrumental in moving the process forward. Ernst Thoutenhoofd has been involved in the production of the database for ADPS and has been looking at ways of making the survey available online. This takes funding and interested people to set things up. At this point, Ernst changed language and continued in Martian - or so it seemed to me, as computers and some of their workings are a mystery to me. In everyday language, this is my understanding of the situation.

It is possible to have an on-line questionnaire for data collection. It will be possible - via the Internet to call up pupil files (only those you are entitled to access) and complete them at once or over a period of time.

There are 17 files that need developing to support the questionnaire. Currently three of these files have been 'fixed' and have been trialled and are fully functioning. This factor has greatly cheered everyone, it really does work. The remaining 14 'files' need funding in order to be fully developed. Those involved are hopeful that development will be complete within two years. Indeed ADPS are hoping for a roll-out in summer 2006.

So what does this mean for BATOD and that survey? Well, we will put out the survey (with tweaks) and this should provide continuity of our data collection. Some of the tweaked questions will enable the transfer to the on-line questionnaire to be smoother.

It allows us a two-year window to get things, including training, in place for the on-line service. It has seemed a very long haul, seeking the best way forward, the funding and the expertise. There will be more information in the Survey section of the BATOD website as it becomes available. Most of all I appreciate that we need the continued support of teachers to complete these questionnaires and sincerely, I hope that we can continue to count on your support.

We are very sad to report the death of Mary Brennan, Director of ADPS and Course Organiser of the ToD training course at Moray House. Mary died on 23 June 2005, after a period of illness. She will be remembered as a tireless champion of the human and linguistic rights of deaf people and as a deeply caring and generous person. Read the eulogies given at Mary's recent thanksgiving service at <u>www.education.ed.ac.uk/adps/who/</u>

Garole

What went on at NEC on 11 June 2005

A very full agenda led to a great deal of interesting discussion as committee members tackled a number of wide-ranging issues. The agenda was so full that time ran out before everything could be discussed and several points will be held over to the next meeting.

Carole welcomed everyone to the meeting, especially new member Emma Kelty who is to be congratulated for volunteering to join NEC. Carole also welcomed Robert Miller from the Midlands who had responded to the invitation for all Regional Treasurers to take part in this June gathering.

A review of action since the last meeting brought news that the situation regarding BATOD representation on JCQ had been clarified. There had been a misunderstanding between parties involved and the BATOD member involved in JCQ does not represent the views of BATOD.

There was further news from Miranda Pickersgill that the survey regarding Deaf Instructors and Communication Support Workers will be available on the Heads of Sensory Service electronic forum and via the ToD list.

A meeting for all NEC members interested in contributing to the discussion about charitable status will take place on 10 September at 1.00pm in the Paragon Hotel in Birmingham. Please let Paul Simpson know if you wish to attend in order to make arrangements for tea and coffee.

Representation on the GTC was discussed but one of the members of NEC, having investigated what is involved, had to decline. The time commitment is quite enormous and the work load demanding so the meeting agreed that the task was clearly impossible for a volunteer. Although no-one felt able to become involved in this round of elections, representation should again be considered at the next round.

There is currently a vacancy for the Commissioning Editor for the magazine. A volunteer has come forward who is willing to be involved with half of the editions produced. NEC would welcome another volunteer to fulfil the remaining half of the task. The role requires someone to contact potential contributors, to chase them up along the way and to write thank you letters when the task is completed. Please contact Ann or Paul if you would like to become involved with the magazine in this or any other way. The role of an Oral Communicator during examinations was discussed at length. It would appear that there is no consistent approach by examining boards. One school dealing with three different exam boards had encountered three different decisions, highlighting a variety of practice around the country. Clarification is clearly required and BATOD continues to work to address this inconsistency.

Examinations continued to be the centre of discussion as modified papers were considered. It is theoretically possible that from 2006 onwards all modified papers will become unnecessary. Papers could be modified at source with a Teacher of the Deaf present when papers are written. However this requires Teachers of the Deaf to become involved and to be trained to perform this role. This would require in the region of three days release a year and a day-release fee would be paid. There are no courses available at the moment to become a modifier but if there are sufficient volunteers it may be possible to set up a distance learning course using the current guidance materials. It can be seen as a CPD opportunity, set through Performance Management, so anyone interested please contact Paul Simpson for further details. Here is our chance to get it right for deaf children so please don't ignore the opportunity.

Deaf children need YOUR INPUT to BATOD!

A letter has been received from the RNID thanking BATOD for their support and apologising for the lack of acknowledgement in the current RNID Impact document.

Our President, Carole, was invited to the Heads of Service Conference in Birmingham to talk about the BATOD Survey. She was pleased to announce that in Scotland it is hoped that it will be possible to respond to the survey on line and that a substantial grant from the Burwood Foundation will allow BATOD's survey to continue over the next two years.

Carole proposed that the Survey would be modified to include a new focus on the outcomes and achievements of deaf learners. It is suggested that the best time for the Survey to be circulated would be in the first term when exam information is readily available. A specific census date might be 1 November 2005, with a return date of January 2006. The information provided is invaluable as

Moira Butcher

comparative national data, as information about the number of Teachers of the Deaf and about the future of the profession. When the Survey appears on your desk please don't put it to one side and ignore it. Please fill it in and return it. This really is important!

Congratulations were sent to Monica Tomlin who has received an MBE in the recent Honours List for her services to deaf children in Bangladesh.

Thanks were given to David Hartley and Paul Simpson who have written articles on deaf education for IQ Education and a supplement to the NUT's 'Teacher' magazine.

Paul Simpson asked for comments on an Inclusion policy which, if approved, would become the official policy of BATOD. It appears on the web site in the 'latest documents' section.

Next on the agenda was the new arrangement for Teaching and Learning Responsibilities (TLR). These will replace management allowances and the tool box for this restructuring has just been published on the Teachernet website. Heads must complete the restructuring process by December 2005, allocating TLRs where they feel it is appropriate. Go to the website to find out all the details. It is important to find how this restructuring will work in your authority especially for unattached teachers.

Some staff who have management allowances will not qualify for TLRs and management allowances have been protected only until December 2006. Ask about TLRs now...don't leave it too late!

Our Treasurer explained that he is worried about the future financial soundness of BATOD as we are losing many members through retirement. Membership subscriptions will not increase for the next year beyond the agreed teachers' pay rise and we must encourage as many new members as possible.

Regional issues were next on the agenda and a question from Northern Ireland about Inspection resulted in much discussion about the new Ofsted framework. The new contractors in England have just been appointed and the new framework will have a lighter touch, with less notice, fewer inspectors and less time in school. If the selfevaluation Form identifies a Unit or Resource Base as a strength then it is highly unlikely that 'the inspector will call'. HMI will lead one third of primary inspections and two thirds of secondary inspections. As only 24 HMI have an SEN background then it is likely that the team visiting you will not have an inspector with such a qualification. The situation in Scotland is different as all teams have greater knowledge of deaf education and have received deaf awareness training.

The officer team of BATOD North Region is somewhat depleted at the moment and unless some volunteers come forward the future of the region is at risk.

In Wales a new ToD course is being designed but currently BATOD has had no input. The committee in Wales continues to try to establish the necessary dialogue.

Members of NEC had represented the association at several meetings, including Deafax, the Royal College of Speech and Language Therapists, the GTC and NCPA. Carole thanked all those members of NEC for representing BATOD in the wider field.

The rest of the day was devoted to Committee time with feedback at the end of the day. Committees were asked to discuss the following points:

- How can national BATOD support the regions and nations?
- The role of the regions and nations in supporting the BATOD survey.
- What works well for local meetings?
- How do the regions and nations keep each other informed?
- What are the views of the regions and nations about the future of the national conference?

A variety of opinion resulted in a very lively discussion. Many people felt that the Conference should be in a major town where there would be other cultural attractions for delegates and their partners. We considered sharing the Conference with other special interest groups, attaching it to a regional conference and also continuing as we are. The need for a speaker bank was considered essential and any members who know of good speakers should let Paul know. All the varying opinions will be collated and discussed further. In the meantime planning for BATOD 2006 is well under way. It will be held in London at St Cecilia's School. Wandsworth which has state of the art conference facilities and is easily accessible from central London by underground. The theme will be Deaf Children with Additional Needs and it promises to be a great occasion. Put it in your diaries now.

The meeting closed with much left to say at the next meeting on 24 September 2005.

Change and opportunity - current developments for young deaf children and their families Elizabeth Andrews, Deputy Director, Early Support

This issue of the BATOD Magazine focuses on developments for very young deaf children and their families in the context set by earlier identification of deafness by newborn hearing screening and more choice for families associated with the use of digital hearing technology and cochlear implants. Events are unfolding quickly for this population during a period of unusual and exciting broader emphasis on early years and childcare services, underpinned by a Government ten-year strategy for early years and childcare, 'Choice for parents, the best start for children', which was published in 2004.

An early indication of Government intentions in this area was the linked publication in 2003 of two pieces of good practice guidance.

- Together from the Start practical guidance for professionals working with disabled children (birth to third birthday) and their families.
- Developing Early Intervention/Support Services for Deaf Children and their Families.

The Early Support programme supports local authorities, children's trusts and PCTs to implement Together from the Start.

The programme is unfolding in a dynamic context, alongside the development of Sure Start Children's Centres and as a component part of the ten-year strategy for early years and childcare. It is a Government programme involving the Department for Education and Skills, Sure Start and the Department of Health and the purpose is to improve the delivery of services to disabled children under three and their families across England. The target group of families and children for this pan-disability initiative is very diverse, as is the range of professionals from health, education and social services that is involved. However, the interests of deaf children and their families have been at the heart of things from the outset, because the introduction of newborn hearing screening was an important trigger to focus attention on early intervention and support services for all populations of young children with additional support needs or disabilities.

Early Support is a programme that has moved very quickly from pilot status to become a core delivery mechanism for Government policy. The programme is the identified means to achieve the 'co-ordinated, high quality child and family-centred services which are based on assessed needs, which promote social inclusion and, where possible, enable them and their families to live ordinary lives' required by the National Service Framework for Children. Guidance for local authorities to support the implementation of the ten-year strategy for childcare issued in March 2005 says:

'We strongly recommend that all local authorities, in consultation with local parents and partners, use the Early Support materials and approaches to jointly review and improve the services they provide for disabled children and their families.'

The programme has moved quickly mainly because it has been so well received by service users and has directly involved many families with young children, alongside the professionals who work with them, at every stage. For example, the Early Support Monitoring Protocol for Deaf Babies and Children, which is discussed later in this issue, was used by more than 120 families with deaf children under three who commented and made suggestions for improvements, as part of a two year process of development. This is a good moment to acknowledge with thanks the invaluable contribution of many readers of this magazine who have been instrumental in developing the programme and programme materials. However, it is the active engagement of so many service users (ie families) that is a distinctive feature of Early Support activity and it is a key factor in ensuring that programme materials are fit for purpose.

Requests for all the materials produced by the programme to date have far exceeded anticipated demand. Most elements, of what is a flexible portfolio of resources, are now on their second or third print run.

Information

One way that the programme is having impact that is particularly relevant to deaf children is by making available standard, national information that has been developed with families and reflects what they say it is useful to know. The information that has been produced over the last two years is of a number of different types and everything is available free of charge. The Background Information File in the Early Support Family Pack contains rich, generic information about how services operate, about the financial help that is available and about where to find out more. Alongside this material, a series of Information for Parents Booklets focuses on the needs of families when a particular factor or condition has been identified in a child. These titles

 outline the characteristic nature and impact of conditions like Autistic Spectrum Disorders, Down Syndrome, Visual Impairment and Cerebral Palsy

- pass on tips from families who 'have been there before'
- signpost other sources of information that may be particularly relevant.

The National Deaf Children's Society was commissioned by Early Support to develop a publication on deafness as part of this series in 2003/4. The material builds seamlessly on the series of leaflets families receive as they pass through the newborn hearing screening process and brings together in one place accessible, complete and balanced information that answers many of the questions families ask in the weeks and months following identification of deafness. This material can be used as a resource to support discussion by anyone working with families with very young deaf children, to help parents to make decisions based on full information as they move forward and to find out more about their child's situation over time.

But 'informed choice' means more than simply making information available - amongst other things, it involves professionals helping families to apply standard information to their own, very particular situation and to make decisions based on the best information available at a given time and in the context of the local services that are available. The article by Gwen Carr and Wendy McCracken (page 14) describes work that has been funded by Early Support in 2004/5 to explore these issues more closely and to develop practical guidance material.

Co-ordination

Another way in which the programme is making a difference is by providing materials that help with co-ordination and exchange of information when many different agencies are in contact with a family. The Early Support Family File in the Family Pack provides simple paper mechanisms to help. For example, 'Introducing ourselves' encourages families who wish to do so to write down everything they would like any new professional meeting their family to know about their child - this prevents them having to tell their story over and over again every time they meet someone new.

At the heart of the Family File is a Family Service Plan that encourages everyone in regular contact with the family to

- discuss with them jointly how things are going
- agree with one another what the priorities are for the next few months.

The article on page 46, about how Salford is using this material with families with children of pre-school age, explores these issues further.

Tracking progress and partnership working with families

The programme is also developing material that describes typical patterns of development, to be kept and used by families. It directly underpins and enriches partnership working between families and professionals, by supporting discussion with information about the child that is transparent, jointly owned and based on the observations of full-time carers. The Early Support Monitoring Protocol for Deaf Babies and Children has been available for use for a year now and is proving to be very popular - so much so that comparable material is being developed for children with visual impairments and children with Down syndrome. NHSP and Early Support have jointly organised and delivered a series of twelve one-day training events for Teachers of the Deaf, other professionals and parents across England over the last six months to raise awareness of these materials and build confidence about how to use them. The article by Sue Lewis (page 6) tells you more. As many readers will know, Sue led the development of this material for Early Support in 2003-2004 - an undertaking which involved many hundreds of people across the country, endless meetings and multiple revisions of emerging material.

Planning for change

Finally, the programme is helping by providing practical support for multi-agency groups planning for service improvement. The Early Support Service Audit Tool provides a structure and process through which to review service provision and a framework on which to plan for improvement. There is more information about this later, too.

Conclusion

Early Support is work in progress. A key element of current programme activity is listening to professionals and families (who are implementing Together from the Start, developing key worker services, extending professional development opportunities and using the programme materials), in order to learn from their experiences.

We are right slap-bang in the middle of 'interesting times'. This issue of the Magazine reflects and shares some of this dynamic activity. I hope you enjoy reading it and finding out about the many factors that are currently increasing choice for families and providing multi-agency services in innovative ways - for example, on the model of EaST17, in partnership with a new Sure Start Children's Centre (page 15).

If you would like to find out more about the Early Support programme, visit the website at

www.earlysupport.org.uk

All the materials mentioned in this article can be viewed and ordered there.

Alternatively, you can ring 0845 602 2260 to place an order.

The Early Support Service Audit Tool, self-evaluation, Joint Area Reviews and the new proposals for early years, childcare provision and inspection.

Sue Lewis, Mary Hare Training Services and Early Support

Self-evaluation and the changes to the inspection system; The Future of Inspections (FOI)

Almost all support services and certainly all special schools and units/resource bases for deaf children are working within a climate of self-evaluation to support planning for service improvement. Many will have explored the new self-evaluation forms (SEF) which have been piloted and now published as part of the new Framework for Inspections as part of the Future of Inspections initiative. All inspection activity within England is being reformed. This is partly to ensure services and schools are working effectively within the guidance and statutory obligations of newer government legislation and associated guidance. In particular new inspection frameworks will consider how the school, service, children's trust and local authority activity being inspected contribute to the outcomes identified for all children in Every Child Matters (ECM).

Early years and childcare provision: the early development and learning framework (EDLF)

Changes in the regulations and in the inspection arrangements related to early years and childcare provision are part of this review and new legislation will be introduced into Parliament from October 2005. This is likely to become law in spring 2006 if the Bill's passage is 'smooth'. The new regulations and proposals address both 0-3 and Foundation Stage and view these as a continuum, linking into the primary strategy. If proposals become law then, for the first time, provision of services for 0-3 years will be statutory and regulations will apply to all settings. An Early Development and Learning Framework is being devised by consultants, commissioned through Sure Start. This will bring together Birth to Three matters and the Foundation Stage and provide a quality framework of minimum standards provision for under 8s must meet and will support the Bill. The consultation process for this Framework begins in September, but it is likely that most of us will have the opportunity to comment from March 2006 onwards. It is important that all those who work with early years populations engage with the consultation process. As service providers for deaf children we will, I am sure, applaud the proposed changes in relation to provision of statutory services. We also have much to offer from our practical and organisational experience of

delivering services to babies at early stages of development to the elements of the EDLF.

Children's Services and Children's Trusts

All such developments, whether statutory or through guidance are taking place within the new era of Children's Services and Children's Trusts ie of provision of integrated services for all children and their families. 'Children's services' are all publicly funded provision for children and young people 0-19, including those for the most vulnerable children and young people. Many readers may be in the position in which their local authority has already moved towards such provision and the implications and mechanisms to support these are only just being put into place.

Implications for Support services and provision for deaf children

This is not the place to explore the implications for all aspects of services provided for deaf children, although the writer is happy to do so in other contexts. The new Inspection Framework for children's services and Joint Area Reviews (JARs) will cover all services directly managed and/or commissioned by the council, and health and justice services provided by other bodies. Early Years settings, like schools and colleges will be inspected every three years. Like all inspection work the focus will be on improved outcomes for children. A key element of inspection of services will be the leadership and management of services and, in particular, the way in which such services work together to improve outcomes. The focus of the new Bill and the EDLF is similarly on outcomes for families and children and how all work together to achieve this and the ECM outcomes.

Self-evaluation and The Early Support Service Audit Tool

In the context of the Green Paper 'Every Child Matters' and the drive to achieve integrated services for children, the service audit tool provides a means to link strategic thinking and planning to the daily experiences of service users. Self-evaluation using the material is a cornerstone of any joint inspection process for multiagency service provision for disabled children which develops as Children's Trusts move forward.

Early Support Professional Guidance 2004

One yardstick, recommended by central government for use in such self-evaluation and planning for improvement, is the Early Support Service Audit Tool or ESSAT. The earlier article by Elizabeth Andrews (page 4) positioned Early Support as being integral to mainstream government policy and initiatives in general. Many of you may have been involved in the consultations leading to the devising of ESSAT and may well be involved in trialling it as part of your local authority's Pathfinder status for Early Support. If so you will know that it is designed specifically to enable agencies to evaluate how well they are working together, with a clear focus on outcomes for families and children. Although designed to address issues and improve services in the Early Years, its standards, indicators and principles have much wider application.



In all of these initiatives, there is a move from inspection as being the external force for driving improvement to the recognition that authority and individual services and schools drive improvement from within; planning for improvement should be a continuous process driven by clear internal processes and a shared vision with partner services and agencies and stakeholders. The role of the external inspectors and processes then becomes one more of validation and audit than of detailed inspection. The questions that are asked are:

- do the Children's Trust/School/Service/ CHISWIG/Primary Care Trust and so on know how they are doing?
- how accurate is their judgment?
- what yardsticks are they using?
- where is the evidence that supports this judgement?

For the service providers these questions become:

- how well are we doing?
- how do we know?
- what do we need to do next in order to improve services and outcomes for families and children further?

These questions informed the development of ESSAT and the dual need for a vehicle for planning and improvement as well as accountability. ESSAT explores the effectiveness of integrated services for all disabled and vulnerable children 0-3 years. However many Pathfinders tell us they are using it to guide mainstream services since its principles and practices apply to all of their work. It does this in relation to four major elements or 'functional areas' of service delivery, identified in consultation as being pivotal by families, practitioners and strategic managers viz: leadership and management, referral identification and initial assessment, ongoing services and sharing and providing information. Standards under each of these areas indicate good practice. ESSAT devisers have also provided examples of indicators in relation to each standard to help in making judgments about how well services are doing and to help planning in practical terms towards service improvement. These are organised in relation to two main themes - how well do we work with families and how well do we work together?

Current Developments

Early Support Pathfinder sites are trialling ESSAT and, with the core team, some are also mapping ECM outcomes onto this. In addition we are adapting guidance so that everyone is clear as to how ESSAT fits into Joint Area Reviews and the new Early Years requirements. Training in relation to this has already begun and includes a cascade model which extends outside of Pathfinder sites.

Central government has indicated its commitment to high quality early years provision. ESSAT is essentially a tool for self-evaluation and improvement towards what some have said is 'gold' standard. We, as providers for deaf children, have always been committed to moving towards and delivering this.

Further details as to the Early Support Service Audit Tool and Training can be obtained via the Early Support web site: www.earlysupport.org.uk

Government consultation papers and information about new proposals can be obtained via DfES and Ofsted websites.



Early intervention:the new challenges when supporting families with babies identified through NHSP

Alison Holmans, Team Leader, Education Audiologist and Teacher of the Deaf Oxfordshire Hearing Support Service

Early identification through the Newborn Hearing Screening Programme is well recognised as a major breakthrough for families with babies and children with hearing impairment.

"Language development is positively and significantly affected by the age of identification of the hearing loss and age of initiation into intervention services." Yoshinaga-Itano (2003) "An infant with a significant hearing impairment who receives intervention by six months of age will perform significantly better in language development than the infant after six months of age."(Yoshinago-Itano et al, 1998, also Yoshinaga-Itano 2003; Moeller, 2000)

It was these studies in particular that strengthened the case for universal newborn hearing screening in this country.

The potential outcomes and possibilities are significant.

- Parents are informed early, bonding is uninterrupted.
- Hearing and listening can be stimulated early.
- Language input is accessible at an earlier age and thus age appropriate.
- A positive and 'natural' approach to interaction can more easily be maintained.

However there are significant challenges that can't be ignored.

The First Challenge: Breaking the News

How the diagnosis takes place can affect family relationships and bonding. The news of hearing impairment no matter how large or small is going to have a significant effect on the family. It is therefore important to have support systems in place as soon as is possible.

How those support systems are put into place

also makes a difference. Where and how the initial contact is made and what information is given is going to be significant. Services need to have clear protocols in place.

Initially new babies and their families need a lot of flexible support but, time spent early on makes things easier for everyone later. By anticipating the issues, being prepared and being flexible, the family will gain in confidence and understanding and will manage their child's needs for themselves. If they are relaxed, positive and well-informed their baby will do well.

Initial Visits

When planning initial visits, the service must consider, for example, where the families want to meet, who they want to be present, what information is made available and how soon a second meeting should take place. Each family is unique and support must be tailored to their needs. Any support must be family led. Essentially the same matters need to be addressed for all families.

- They must be able to enjoy their baby and celebrate the birth.
- There will be issues around expectations and aspirations, prior to the baby being diagnosed. Can these still be the same? They will want to know what the family can do now.
- They will need time to talk, to ask questions and to know what questions to ask.

Support visits may need to be more frequent following fitting and diagnosis. Evening visits will ensure that all family members and supportive relatives and friends are able to be present. (Services should be aware of the Health and Safety issues of out of hours visits and address these in terms of a risk assessment.) Additional visits to liaise with Health Visitors and other involved professionals may also be required.

The next main consideration for the family is that of hearing aid fitting. It is always a family decision if and when amplification is provided. The majority of parents have opted for this as soon as possible. By providing personalised guidance information, families will more easily respond to taking on the management and responsibility of the aids, as they feel that they own that knowledge. Essentially it puts parents in control and in the lead position. Such information might include:

- Early Support information on deafness;
- Management of hearing aids and the role of the Teacher of the Deaf;
- Support Service information leaflet;
- Service handout about enjoying your new baby and how to encourage positive communication with your baby and listening and attending skills;
- Service Family Pack (ESP Family Pack).

More ongoing challenges:

- management of the hearing aids;
- management of earmoulds;
- being supportive and empowering;
- enabling parents to use their natural skills with confidence;
- monitoring and assessing development.

Management of the amplification has to be unobtrusive in day-to-day baby management. It has to become a part of the everyday interactions between family, extended family and friends so as not to interfere with the communication process and must fit in with the baby's everyday activities changing, bathing, feeding and cuddling while minimising stress or anxiety and building up confidence in natural parenting skills.

The support agencies need to be mindful of the 'effect' that diagnosis might have on the family. They need to be 'together', supporting confidently and practically, but with empathy, in the realisation of the earliness of the diagnosis and the newness of the baby. To ensure that the fitting of amplification devices, monitoring and support are effective, the audiology department at the hospital and the hearing support service in the field need to work well together. This will ensure that hearing aids are fitted appropriately, adjusted and updated as more information comes in. Throughout, families need to be listened to and should feel in control of their baby's management.

There may well be siblings, who need help to understand the new baby's needs, yet also need to be included, involved and enjoyed as much as they were before. Supporting the 'whole family' is an important part of the role of all support agencies, which must 'intervene sensitively to maintain the family dynamics. A new baby will always bring change, a baby who brings visiting professionals, regular clinic visits and so much attention, can affect the confidence of siblings and relationships in a family. Siblings need to be involved and praised for their care and support but also acknowledged for their own achievements.

Having supported a number of families through these early processes, I have found that there are several essential points that come up each time:

- Listen to their questions and concerns and answer honestly and positively. If you don't know the answers, admit you don't and support the family to find out.
- Explain the hearing loss, the hearing aids and provide information on the Support Service.
- Encourage the family to handle the hearing aids and gain confidence in inserting them and checking them.

- Anticipate management issues. Provide written personalised guides for use of equipment.
- Take ear mould impressions weekly until growth rate allows for more time between.

Issues that need consideration

- Babies have soft floppy ears.
- Babies lie with their head on the side and can, from very early on, work an ear mould out with a roll of the head.
- Babies naturally reach up to their head and can work an ear mould out just through this action.
- Babies' ears are tiny with tiny ear canals, but they grow by the day.

For babies with a severe or profound loss, we would usually fit analogue bodyworn aids in the very early stages. I would, however, always be aiming to get the baby onto DSP post-aural aids that can be more effectively tuned to their needs as soon as it becomes possible to maintain appropriate levels of amplification without feedback.

Earmoulds

If earmoulds do not fit properly, the amplification will not be right and 'wearability' will be difficult.

In every case, babies' ears grow continuously in the first year. In the case of premature babies, this period of rapid growth could go on for longer. Ideally, mould impressions should be made at home on a weekly basis.

Checklist for baby earmould making

- Take impressions when baby is asleep. (I time my visits to fit in with routines.)
- Use tiny cotton tamps. Be sure of careful placement in canal. (See article on page 13.)
- Some baby ears are crinkled. Care should be taken to make an exact impression.
 Communicate with the mould company explaining how to 'read' your impression. Once you get it right, provide feedback to ensure that this always happens.
- Send from, and return directly to, home (fast track).
- Moulds should be back within a week (Turn around in two days is possible.)
- Always take another impression if you are not satisfied. Never send off a bad impression as it is the family who will suffer during the following week.

Regularity of impression taking, speed of delivery and building up skills in the technique are all issues that Health and Education services need to consider when deciding who would best fulfill this role. BATOD and MCHAS policies should be considered, especially with regard to training and insurance issues, to ensure that there is the expertise available to meet the need.

Advising on audition

A management issue: One Aid or Two?

Without a doubt two should be the aim for the baby with an equivalent hearing loss in both ears and where 'wearability' is possible in both ears.

Two aids provide directional sound and stimulate both cochleae. Always make sure that two aids are prescribed for a bilateral hearing loss.

However, while the baby has little head control, and when it is being fed on one side with one ear against clothing, it might be better to alternate hearing aids to the ear that is facing upper-most. It might be easier for the feeding adult to manage the milk and one hearing aid rather than two as s/he tries to hold baby, feed baby and keep hearing aids in as well as stop a covered aid 'feeding back'. There might be other situations when 'one aid management' also applies.

It is best not to make new parents anxious, especially when routines are only just being established. Choose option that is the easiest to manage.

So which are the best - DSP, post-aurals or bodyworn aids?

Your advice should be balanced - whichever can best deliver what the baby needs.

Points to remember

Management issues	Bodyworn: pros and cons	Post-aural: pros and cons
Making adjustments to frequency and output.	Can be fine-tuned with a screw driver. Change of earphone. Has a volume control, which can be adjusted in the home.	Needs audiological expertise and equipment to set. Can be more tailored to individual needs. Has little or no volume control. Feedback manager can be set, but not easy to set on a baby and would need resetting each time new moulds were taken.
Best place to wear hearing aid	When worn on chest baby gets a good signal of own voice.	On the ear is a natural placement and best.
	 With Parent wearing BW aid a good signal of adult voice is given. (Sticky-back Velcro is a good way to attach aid to clothing.) Worn on the baby's chest doesn't give directional sound. Susceptible to food, dribble, clothes rub. Leads need management (eg threading through clothing so baby can't use them to pull out moulds and so they don't get caught around baby). Adapted clothing and attractive harnesses can overcome cosmetic issues and 'wearability'. Directional sound can be gained from distance placement (attach to furniture with sticky-back Velcro) when baby is in cot, or on mat. 	Size of babies' ears mean they can't take larger post-aurals. There may be limitations on possible amplification, before feedback, due to proximity of mould and aid mic. Head movement can work aid out. Babies ears can't take huggies. Toupee tape may help.
Managing feedback	Distance from the mould helps. Parent to wear hearing aids or aids attached to furniture in each direction where baby is lying. Use KY jelly to fit. Take regular impressions (weekly). Note impression taking procedure and key impression points.	Manage post-aurals on the ear. Use KY jelly to fit. Take regular impressions (weekly). Follow key impression points.

Alison Holmans

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Paediatrics Vol 102 No 5

Cued Speech

Cued Speech uses eight handshapes in four different positions to clarify the lip patterns of normal speech. It can be used to complement oral/aural practices and can be used to make the English element of Sign Bilingualism fully accessible.

For more information contact: Cued Speech Association UK tel (voice and text): 01803 83 27 84 email: <u>info@cuedspeech.co.uk</u> <u>www.cuedspeech.co.uk</u>

Complete access to spoken language from the first months of life - a reality with Cued Speech

It's never too soon to start.

Research shows that deaf children brought up with Cued Speech develop language according to the same milestones as hearing peers.¹ How soon, though, can deaf children benefit from its use? Case studies and new Spanish research demonstrate that children can understand spoken language through Cued Speech from the first few months of life.

My own experience, as the parent of two profoundly deaf children brought up with Cued Speech, confirms this. Both our sons had early access to language through Cued Speech, the older from nine months and the younger from about six weeks. Their outcomes were similar; both said their first word at 13 months and, although their diction was poor in the early years, their use of language was age-appropriate or better. Communication with our younger son, however, was much easier and more natural in the early months. It was quite obvious that he understood single words and simple phrases well before his first birthday.

Preliminary research by the MOC (Complemented Oral Model) group in southern Spain (which supports very early intervention using oral methods complemented by Cued Speech) has found that babies of one year can access Spanish through Cued Speech after a minimum of three months of exposure. Profoundly deaf children in their programme later 'use oral and written language with the same precision as their hearing peers'.²

An optimum age?

Although children can benefit from Cued Speech at any age, research from Belgium indicates that children who have access to spoken language through Cued Speech before the age of three outperform those who have access to it later.³

Family use

Cued Speech is quick to learn. As one parent said recently: 'Within a month (of requesting information) we were trained and had started to cue everything we said. Instantly, we felt confident and in control again as parents.'

All this would indicate that probably the best help teachers can give in the early years is to provide accurate up-to-date information about Cued Speech and to support parents' choices to use it.

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The Starkey PRECISE3 Family, acknowledged for OUTSTANDING PERFORMANCE as The Leading Portfolio of Ear Impression Material.





those involved from Starkey Laboratories viz, Chester Pirzanski, John Rovang, Doug Link together with staff at development partners

Dreve Otoplastiks who blend and prepare the products under licence for Starkey.

Corporate Senior Vice President Keith Guggenberger encouraged all clinicians globally to adopt the PRECISE3 family as the Material of Choice for ALL Ear Impression Work.

He stated that PRECISE3 was the ideal partner for Starkey's cutting edge and pioneering work in shell and earmould fabrication known as Advanced Stereolythography Processing or 'SLA'. Stereolythography Processing or 'SLA'. This SLA process will allow Starkey to offer you earmould configurations and styles previously impossible via human hands.

The accuracy of a Digital Custom ITE or Earmould is inherent in the quality of the impression taken and with the availability of Digital Signal Processing hearing aids, it is even more important than ever.

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It was announced on Wednesday, 15th June 2005, that the PRECISE3 Polyvinylsiloxane Family of ear impression materials, **PRECISE3***SR Paediatric*, **PRECISE3** *Classic* and **PRECISE3***CR Canular* had been awarded a Gold Medal for Outstanding

Performance at the **Annual International Earmould Symposium** held in Minneapolis, USA.

Speaking on the award, International Vice President Dr Michael Nolan complimented

Paediatric impressions

The quality of fit of an earmould, and indeed an ITE hearing aid, is inherent in the quality of the impression from which it is built. It is, therefore, important that the most appropriate materials and techniques are used. Paediatric audiology poses a particular challenge in terms of size of both impression and finished mould (Nolan et al, 1986).

Addition reaction, or 1:1 mix, impression materials offer superior dimensional stability compared to their condensation reaction counterparts. Some modern addition reaction materials offer accelerated setting times and are, therefore, particularly suitable for paediatric applications, eg Precise 3SR Paediatric.

Otoscopic examination is essential before taking ear impressions and any contra-indications should be dealt with before proceeding.

Cotton blocks are recommended because these can be flattened, as opposed to foam blocks which take up more space in the meatus. There is more detailed guidance on baby canal lengths available from a study by Keefe, Bulen, Campbell and Burns (1994) in the Journal of the Acoustical Society of America, Vol 3, pages 23 - 31, entitled 'Pressure transfer functions and absorption cross section from the diffuse field to the human infant ear canal' and this is quoted in another article called 'An amplification protocol for Infants' by Kathy Beauchaine in the Phonak 'Sound Foundation through early amplifications 2001', conference proceedings publications, page 106. It is as follows:

Age of child	Canal Length
1 month	14.0 mm
2 months	16.5 mm
6 months	17.5 mm
12 months	20.0 mm
24 months	21.0 mm

The smallest cotton otoblock will take up 3mm and the aim is to get the impression to within 5mm of the tympanic membrane. The otolight should be appropriately marked to ensure that the insertion depth is adequate.

If the baby was premature then, of course, the canal length would have to be adjusted accordingly.

An appropriate small syringe is recommended (rather than the standard audiological ones) as these have nozzle diameters that are too wide -4mm to 5mm. Westone Best syringes with Heine small tips - 3.5mm external diameter - are suitable for most children. For babies under three months of age, or for any child with very narrow ear canals, a dental syringe with a curved disposable nozzle that can be cut to any diameter is recommended.

Henry Nmai, Starkey Laboratories Ltd

A lower viscosity material may have to be used in such an application as, otherwise, excessive force is required to extrude a higher viscosity material through a small nozzle.

Once the ear impression is taken, it needs to be packaged in a rigid box with distinctive labels and speedily dispatched to the earmould manufacturer.

The frequency of change of earmoulds in paediatrics, due to the rate of growth, cannot be overlooked. Recent studies (Tucker & Nolan, Private Communications, 2003/4) indicate that, for a baby under six months of age, a new mould every two weeks is appropriate if poor fit and feedback is to be avoided. From 6-12 months of age this period can be extended to four weeks.

Summary of Good Paediatric Practice

- Position the baby in an optimum posture to facilitate a safe and effective impression-taking process. For young babies, lay on the mother's lap with the ear facing upwards.
- Place a cotton otoblock sufficiently deep with the aid of a graduated light pen.
- Use moderate viscosity impression material.
- Use a fast setting addition curing silicone.
- With BTE instruments, place the hearing aid on the pinna before taking the impression.
- Do not pat impression material prior to setting.
- Take open jaw impressions in older children if there are recurring feedback problems.
- Dispatch impressions in rigid boxes.
- Speedy dispatch to manufacturer.
- Distinctive dispatch labels to identify impression as 'Paediatric' and 'Urgent'.
- Pre-paid First Class labels must be available.

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Developing Guidelines on Informed Choice

Gwen Carr (NDCS) and Wendy McCracken (University of Manchester)

As part of the DfES's Early Support Programme, NDCS and the University of Manchester are jointly undertaking a funded research project exploring 'Informed Choice' with both parents and professionals. The project will culminate in the production of two sets of guidelines: one for service providers to be included in the Early Support Professionals Toolkit, and one for parents as part of the Family Pack.

The project began in July 2004 and the products will be published in Spring/Summer 2006. The initiative has two inter-related strands: the first has been a detailed literature review which has considered the concepts of Informed Choice and Shared Decision-Making across a wide variety of disciplines. This has underpinned the development of the second strand of the project which focuses particularly on deafness and the early years, and Informed Choice issues for both families and services providers.

The NDCS/University of Manchester research team is working in partnership with professional and parent groups from three different areas across England, all with differing characteristics. One is a large metropolitan borough, one a shire county and one a region. The professionals involved in all areas are drawn from Health, Education and Social Care and represent a wide variety of roles. The parents involved also have diverse backgrounds and experiences.

The early stage of the project involved three professionals' and three parents' focus groups - one of each in each participating area: these explored theoretical concepts of Informed Choice and where and how these can be applied in practice. The groups further considered both barriers and drivers to achieving Informed Choice. All the discussions were taped, transcribed and analysed. From the data, it was possible to identify a number of underlying principles and themes, based on the opinions and real experiences of the participants.

One further meeting in each area was held to focus specifically on strategic issues, in relation to the identified underlying principles and themes. All the findings have informed the development of the initial draft of the guidelines.

During July 2005 the initial draft guidelines will be shared with joint professional/parent groups in the participating areas, in order to get detailed feedback on the development to date. This will help to shape both the format and the content of the full draft guidelines which will then be prepared for trialling in the Autumn.

A final consultation in early 2006 will incorporate the practical experiences gained in trialling, leading to the preparation of the completed guidelines.

A wide variety of issues has been explored with relation to Informed Choice within this project, from earmould provision to physical access to clinics; from training needs to sources of funding. Traditionally, professionals tend to think that 'Informed Choice' relates mainly to communication philosophies and methodologies, but the study has shown that issues for families and for professionals are much wider with more far-reaching implications.

The motivation for this piece of work has been the need to explore and clarify the concept of Informed Choice for both services users and service providers. The active participation of parents and professionals throughout the process is central to the work. The intention is to produce guidelines which offer real practical guidance for those involved in developing and delivering support for deaf children and families, together with checklists for parents to support them in seeking Informed Choice for themselves and their children. As the project continues, updates on progress will be available on the Early Support Website: www.espp.org.uk

Gwen Carr (NDCS) and Wendy McCracken (University of Manchester) on behalf of the Research team: G Carr, R Hunt, W McCracken, A Skipp, H Tattersall and A Young.



The role of a parent support co-ordinator working with pre-school deaf children

The role of a Parent Support Co-ordinator was created when it became apparent that one of the main issues in supporting a family with a newly diagnosed deaf child was lack of emotional support. It was felt that the best person to deliver this support would be another parent. This support could be provided in the home where the family would feel most comfortable. The Parent Support Co-ordinator would be led by the needs of the family, as to how often they would like the support and when and where it would be delivered, for instance weekly, monthly or as requested.

After a period of time, and when and if the family requested it, they could then be put in touch with other families in a similar situation to themselves. This could be done directly by the Parent Support Co-ordinator, or by encouraging the family to attend the many social activities held at the EaST 17 centre, where they would be able to meet other families.

I was appointed to this job in early 2003, after working within the local Paediatric Audiology Clinic for the previous ten years. I have a 16 year-old daughter, Elizabeth, who is profoundly deaf.

The main aspects to my role are as follows:

1 Emotional Support

Following confirmation of deafness, I would be introduced to the family and arrange to visit at home within the next few days. This can be done alone or as joint visits with the Teacher of the Deaf or with anyone else involved with that child. Most often I will be the initial visitor as emotional support is the primary need at this time.

2 Family Information

I am able to get the family any information they ask for, and also give them the Family Information Packs available from Early Support. I strive to give unbiased information. One question I am frequently asked is why I didn't choose a Cochlear Implant for my daughter. The need to be objective in this discussion is extremely important.

3 Key Worker

In the initial weeks or months following identification, I may act as the key worker for that child. This involves liaising with all members of the multi-agency team here at EaST 17. It is often easier for the families to talk to me at home away from the clinic situation.

Susan Cordwell, Parent Support Co-ordinator - EaST 17

4 Organising Social Activities

One of the most successful aspects of EaST 17 is being able to provide social occasions where all the families can meet and get to know one another. We have held Christmas Parties, Summer Picnics, Easter Fun Days etc. These activities are becoming extremely popular and rewarding for all involved. We always evaluate the activity to check we are supplying what the families want and need.

- 5 **Co-Leader of Parent Information Course** I participate in the course and also co-lead a parents' course in learning to make earmoulds. The earmould course is followed up at home to help parents gain necessary experience.
- 6 Building up a Parent Network This is done in various ways, for example,
 - a database of parents, willing to be put in touch with others, is kept at EaST 17.
 - a quarterly newsletter is produced and distributed both as a way of keeping all our families aware of all our services and activities, and also to feed back on previous events held. Any other information we feel can be of benefit or interest can also be put into the newsletter. Parents can also contribute.

Parent to parent support is a key part of our services at EaST 17. As this is a new position, it has to be developed and allowed to evolve in accordance with the parents' needs and wishes. Some of the most important qualities of the Parent Support Coordinator are the ability to be objective when talking to the families, being a good listener and knowing when to get other professionals involved.

This role is extremely rewarding. I feel that it is a very necessary part of multi-agency early intervention. Another parent is someone who has an immediate connection with any new family being introduced to this service. It can make the whole process seem less frightening and isolating, as in most cases this will be the first time these families have had to cope with having a child with a hearing impairment.

Some of the skills which appear necessary for this role include counselling skills, working within a multidisciplinary team and objectivity, to name but a few. However, being able to listen to the families is a good place to start. At present there is no specific training available for this role and until it becomes available, we shall continue to develop the role from our own initiatives.

Promoting joined-up working for Europe's professionals with deaf children and their families

The first ever multi-professional conference on the education of deaf children in Europe took place in London in May 2005. The conference had been organised by the Ear Foundation, the RNID and the NDCS.

A day and a half saw 18 contributions from a huge range of contributors including a member of the House of Lords, a European Commissioner, the Director of the Newborn hearing screening programme for England, a member of the European Parliament, the chair of an East European parents group, other parents from across Europe, including one working for the Early Support Programme, the Head of the Division of the European Court of Auditors, the Chief Executives of the RNID and NDCS, a university lecturer in deaf education, the Director of an institute of Biomedical Engineering, a psychologist working with deaf children, the head of an East European audiology rehabilitation department, a professor of Otology, consultant ENT surgeons including one interested in the philosophical aspects of conflict resolution. The contributors came from nine different countries. In addition to this array of live speakers, the participants saw a ten minute video of young people from across Europe eloquently giving their views on a number of subjects - including what has been their greatest challenge, what advice they would give to parents of deaf children, what advice they would give to professionals they had met and what were their hopes for the future. All delegates left with a copy of these comments on a CD.

Most of the contributions and information about the whole event, as well as the content of the CD, are available on the DHICE website (<u>www.dhice.org</u>)

As ever, in such a conference, the presentations were of differing quality but the whole event was stimulating, thought-provoking and enabled many contacts, which can be strengthened in the future, to take place. The whole conference was infused with certain key principles which should apply not only in the key areas of newborn screening and cochlear implantation but also across all aspects of the education of deaf children and young people.

These key principles were: to come together as professionals and other interested parties across Europe to share experiences, to look at and respect differing perspectives, to promote multi-professional working, to increase public awareness and to further Deaf and Hearing-Impaired Children in Europe 2005

the European Union's agenda of the promotion of educational and other opportunities for deaf children.

Many interesting facts and figures emerged from the conference. Members might be interested in the following selection:

- 10,000 children are born each year in Europe with bilateral permanent hearing loss
- more than 6,000 have a unilateral loss
- more than 1,100 children are screened in the UK every day
- 700,000 will have been screened by April 2005
- one child in 1000 has a bilateral hearing loss (=40dB)
- 0.6% of children have a unilateral hearing loss
- there are 250,000 deaf children in schools in Europe
- the European Social Fund from 2000 2006 contained €63 billion - priorities include social inclusion of those at disadvantage including disabilities
- 450,000 Dutch citizens have tested their own hearing on the Internet at a special website
- unemployment amongst young deaf people is three times higher than for young hearing people
- without preventative action, 12% of the world's population will have hearing loss by 2015
- in Belgium (Flanders) newborn hearing screening has advanced the timing of initial fitting of hearing aids by ten months
- 40,000 children throughout the world had a cochlear implant in 2004.

It would be impossible to do justice to the great range of contributions made during the conference and I would recommend that you visit the website to discover more about them.

This unique event certainly led many participants to leave keen to renew and strengthen their links with European colleagues.



The Hanen 'It Takes Two to Talk' Programme: a day for Teachers of the Deaf

Suzanne Harrigan Family Co-ordinator and Speech & Language Therapist, The Ear Foundation

In March 2005, The Ear Foundation hosted a oneday event for Teachers of the Deaf focussing on the work of the Hanen Centre and, in particular, the 'It Takes Two to Talk' programme, their widely acclaimed and popular approach to training parents of children with communication difficulties.

The venue was packed out, with over thirty Teachers of the Deaf and some learning support assistants attending. The course was led by Jo-Anne Gray, a speech-language pathologist and Hanen trainer from Canada, with experience of working with children with a range of disabilities, including Deafness.

The Hanen centre was established by Ayala Manolson at McGill University's School of Communication Disorders in Montreal back in 1977. The Hanen centre is a non-profit, charitable organisation, dedicated to developing effective programmes, workshops and resources to help parents and professionals to facilitate children's language development. However, the centre has never worked with, or researched the benefits of, its approach for families of young Deaf children and it has been left to local speech and language therapy services, and organisations like The Ear Foundation, to adapt the programmes to meet the special needs of this group. Recently, education services have become increasingly interested in the Hanen approach and teachers came along to the day searching for new and innovative ways of providing parents with the skills they need when getting to grips with communicating with a Deaf child.

During the course of the day Jo-Anne covered a range of topics.

- An introduction to the Hanen Programme and Principles
- The Hanen descriptions of children's
 developmental levels and communicative styles
- Parents' roles and styles when communicating with their children
- The Hanen strategies to promote interactions, such as letting your child lead the communication, following your child's lead and taking turns
- Adding language and information to help the child learn
- How Hanen approaches can be used in your day-to-day work.

Throughout the day, Jo-Anne used many different techniques and demonstrations to both get her message across and to allow delegates to experience some of the activities parents are asked to do on 'It Takes Two to Talk' courses. These quick, powerful and enjoyable exercises demonstrated the value of both learning about communication in a group and practising some of the strategies in a safe environment. At the end of the day the feedback from participants was extremely positive, with over 90% scores for both the course content and organisation. Comments included "informative and entertaining day" and "great ways to encourage communication with a variety of children". Several participants did mention, though, that it would have been good to have included more information on how Hanen can be used in sign-bilingual settings and that there was inappropriate use of intonation and telegrammatic speech by some of the parents on the videotapes.

The major area of dissatisfaction from the delegates, however, revolved around the inability of Teachers of the Deaf, or for that matter any teacher, to enrol on a Hanen programme in order to train parents themselves. At present, only Speech and Language Therapists are allowed to do so. A spokesperson from the Hanen Center was questioned on this issue and as yet we have received no response.

In these days of shared competencies, joined up working and seamless service delivery, it does seem a shame that professional groups can't be trained together to deliver a service to families rather than being dissuaded from doing so by artificial barriers. However the opportunities that Hanen provides for Speech and Language Therapists and Teachers of the Deaf to work together should not be underestimated. Experience has shown that, by providing joint training, powerful messages are being sent out to parents about our shared values. Teachers of the Deaf can learn a lot from Hanen's systematic and user-friendly approach to talking about language development, while Speech and Language Therapists can learn from Teachers of the Deaf about the complexities and issues surrounding Deaf education and meeting the needs of individual families. Let us hope that the UK can take the lead in this issue and show the Hanen Center in Canada just how effectively services can work together.

deafnessatbirth.org.uk

The Deafness @ birth website

<u>www.deafnessatbirth.org.uk</u> is no longer a newborn but - astonishingly - an active three-year-old. Launched in January 2002, Deafness@Birth was designed to fill a training and information gap. Newborn hearing screening was reducing the age at which deafness could be identified but professionals were not trained to work with young babies and their families.

There was an urgent need to provide resources until such time as formal training caught up with the new situation. The website's content thus covers key areas for professionals such as: supporting deaf babies and their families, language and communication, audiological management, professional practice, assessment and monitoring. It now comprises over 110 articles, many of them specially commissioned from leading authors in the field, together with dozens of links to other sources.

Putting families first

In the last year, our major thrust has been to develop family case studies. Professionals have much to learn from people on the receiving end of any service. We interviewed a selection of families, with different backgrounds and whose children have a range of difficulties, including additional disabilities. Their insights as to what helps or hinders them in supporting a deaf child can be seen in a new section created for the purpose called What families tell us. Further case studies are in the pipeline.

The website content was thoroughly re-structured to create additional sections, largely to make it easier to navigate. For example, a new section on 'understanding deafness' brings together the articles that explain the background, such as the prevalence of deafness, types of deafness and so on. A future aim, funding permitting, will be to refresh the design.

Other new content

Our ability to commission new material is now limited. (RNID has funded the project since our pump-priming grant from DfES ran out.) Nevertheless, we have added or commissioned several new articles. They cover a wide range of issues such as:

- mothers and their deaf babies
- social trends in family structure

- the role of the paediatrician in the care of deaf children
- multiply-disabled deaf babies
- multi-agency working and supporting families on decisions about language and communication.

Links have been strengthened to the Early Support Programme's marvellous resources on deafness, not least the Early Support Monitoring protocol for deaf babies and children. There are still gaps, for example how deaf babies and their families acquire sign language but we also welcome your feedback as to what the priorities should be for those of you in the front-line.

What can you tell other professionals?

We welcome short articles (less than the length of this one!) from professionals willing to reflect on professional practice (anonymous if preferred). It would be good to hear your views on working with small babies and their families. Is earlier diagnosis putting pressure on your services? Could you write a case study of your work with a particular family and the challenges/successes? Is early intervention really paying dividends?

You can email comments or send offers of articles to the Project Manager, Hilary Todd hilary@todd-bradley.fsnet.co.uk



'The West Sussex Way' developing a method of video analysis for use with early years

Kathy Owston, Advisory ToD, West Sussex

For many years professionals working with deaf early years children and their families have been keeping video records of their development. The RNID/NDCS Statement of Professional Competencies states that when monitoring progress, we should understand the importance of videotape analysis. How many of us have shelves of tapes we have recorded, but wonder what to do with them? With the ever-increasing demands of large caseloads experienced by most peripatetic teachers, what level of analysis is it reasonable to expect and how do we go about doing it? In my position of responsibility for Early Years in West Sussex, I have been looking into different methods of video analysis used to monitor the progress of deaf pre-school children.

I met with our Speech and Language Therapists to discuss what methods they were using. They use video analysis mainly to look at parent-child interaction. I researched other methods, including asking professionals, via the Becta website, which methods they used and would recommend. We felt that all the methods suggested were too detailed and time consuming, given the size of our caseloads and the number of early years children we support. The outcome has been the development of 'The West Sussex Way'. This is not a newly discovered path across the South Downs, as the name might suggest, but our own method of video analysis, which links in with the Early Support Monitoring protocol for deaf babies and children, developed for the DfES by Sue Lewis, as part of the Early Support Programme (ESP).

We asked ourselves: what do we want video analysis for?

To monitor progress and to assess the child's

- early communication skills
- reaction to sound
- speech production
- social skills
- play skills

And who, or what, is the video analysis for?

- for the parents, as a learning tool, so it should be in a format that is helpful and accessible to them.
- for us to monitor all of the above
- for sharing with other professionals
- for informing reports
- for use as a reference.

At the BATOD Annual Conference in March 2004, Dr Nicky Ereaut, from the Oxfordshire Service, gave a workshop on pre-school working in which she reported on the method of video analysis they were using. Every three to four months they look at a section of video with parents and have the ESP Monitoring Protocol in front of them. They look for evidence of the next stages emerging, and note these down as possible or definite responses in the five categories:

- communication,
- attending, listening and vocalisation,
- social-emotional,
- other developmental milestones,
- play.

They then ask for examples from parents' daily observations and these are noted on the ESP monitoring protocol in a different colour.

As we were already using the ESP in West Sussex, I thought that this method would be possible. We would become more familiar with the ESP monitoring tool and it would become easier to do, the more we used it. We would become better skilled and more knowledgeable about the levels of development in the early years. This method would be all one package. It is non-biased and is looking at the areas of development we should be considering. Thus, consulting with colleagues, the 'West Sussex Way' was born. It incorporates using the ESP monitoring tool with a 'video report'.

The West Sussex Way

We aim to record footage of the child at least twice a year. A section is then selected to analyse in detail. This could be of any length, depending on the clip(s) being chosen.

The Video Report is written up under five headings:

- 1 Purpose
- 2 Background information
- 3 Listening environment
- 4 What happened?
- 5 Evidence of new skills

The clip is looked at in stages and described bit by bit, according to the focus of attention and activities. Each section is annotated describing what is taking place. This becomes the main body of the video report under the heading 'What Happened?'.

Looking at the clips in detail hopefully provides evidence of new skills being used by the child. These can easily be entered onto the ESP monitoring protocol, using a different colour pen for skills seen on video from that used for those skills reported by the parents. This will then be referred to in the video report under 'Evidence of new skills'.

The other three headings cover:

- Purpose explain that you are looking for the development of new skills as outlined in the Early Support monitoring tool. Note here the length of video clip which was taken to look at these areas.
- Background information we would put a description of how the child was on the day. Was it typical? Comment on the consistency of hearing aid use, whether or not both aids were being worn in the clip and any additional information.
- Listening environment here you could comment on the acoustics of the room, background noise, and any distractions.

Example of a Video Report

Name: AlexDate of Birth: 17/11/01Age: 2 years 11 months

Hearing age: 1 year 5 months

Date of video clip: 18 October 2004 - VIDEO TWO Purpose

We are looking for the development of listening and vocalisation, communication, emotional and social development, play, and other developmental milestones, as monitored by the Early Support Programme monitoring tool. An eleven minute video clip was taken of Alex to look at these areas.

Background information

Alex wore his two Spirit hearing aids throughout the video clip. He wears his hearing aids all day without complaint. He has had his aids for one year and five months (hearing age).

Listening environment

The recording was made at home. The acoustics of the room are good for a hearing aid wearer. However baby brother Ryan started playing with a rather noisy toy half way through. This did not seem to affect Alex's listening or concentration.

What happened?

- Alex was sitting opposite Mum playing with the ball cascade run. Mum directed play, asking Alex to name the colours of the balls. Alex repeated "orange". When asked "what colour?", he spontaneously said "green", Mum: "No, it's orange". Alex imitated orange again. In response to Mum asking "Where's the pink ball?" Alex selected the correct ball and said "pink", Alex initiated the end of the game by saying "Bye-bye ball".
- Alex stopped his play activity. He stilled and listened. He had heard his baby brother Ryan crying upstairs. Alex said "Oh - crying!"
- Kathy joined Mum and Alex to play "What's in the box?" Alex said "bubbles" very clearly. Then he imitated "mummy". Mum says, "hold on, let mummy choose something" and Alex says "bubble?" Mum chooses the hairbrush. Alex said "Bubble" with emphatic intonation. He then gets agitated and repeats "bubble, bubble" and starts to scream at Mum to express his

disapproval. Alex takes the brush firmly from Mum and puts it down crossly as far away as he can. He says "No....No!"

- Daddy and Ryan come into the room. Dad says "I've got to go to work now". Alex is playing with the doll and doesn't seem to respond. After a minute he initiates "Work Daddy" "Daddy work". Kathy asks "What do you say to Daddy when he goes to work?" Alex responds "Bye-bye car!"
- Alex is asked "who's turn is it now? Is it Alex's turn?" "Yes!" Mum models "Alex's turn" They sing "What's in the box?" again and leave a space for whose turn it is. Mum and Kathy both say "Alex" and wait for him to imitate..... he says "ALEX!"

Evidence of new skills

Listening: Alex recognises a song. He carries out simple instructions. He understands a question in conversation. He hears the baby crying from upstairs and recognises what it is. He responds to different tones of voice. (Stage B9) Vocalisation: Alex imitates his name. He tries to repeat things that are said to him, some of them very clearly. He uses 22 different words in the video clip. He uses whole sentence-like phrases, although they are not clearly understood. He uses two-word clear phrases with meaning. He initiates conversation. He uses all of the sounds listed in Stage B9.

Communication: Alex understands familiar actions. He uses the preposition 'You'. He asks a simple question with intonation "bubbles?". He makes simple statements that provide information and comments on what has just been said. "oh...crying" and "work Daddy"(Stage B9)

Emotional/Social: Alex is at Stage B9/10. He shows knowledge of social scripts, being prompted to say "yes, please".

Play: Alex is at Stage B8/9. He is including other people, dolls and teddies in his pretend play, will play co-operatively with an adult, enjoys sharing books and likes to play "ready steady go" games. He loves jigsaw puzzles.

Other Developmental milestones: Alex is at Stage B9. This short clip of video does not show evidence of these skills.

Summary

We find that this method is user-friendly. It is easy for parents to follow what is being described, as it is in the sequential order of the video clip. It can be read by anyone independently of the video. They can get a feel of how the child is communicating, behaving and responding. It is not threatening to parents. It focuses on the child. It is quite easy to write up and to look back at with parents. It links in with the Early Support Programme.

Further information Kathy can be contacted by email at <u>Kathy.Owston@Westsussex.gov.uk</u>

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Research in deafness and early years: why it is important and where to find it

The introduction of the Newborn Hearing Screening Programme (NHSP) brings with it exciting possibilities for new developments in many areas such as early intervention with families with deaf children, early cochlear implantation, or the opportunity to introduce sign language into families shortly after the birth of their deaf baby. It is important that any innovations we make as a result of newborn hearing screening are based on evidence, which comes from research.

Deaf education seems to attract professionals with strong opinions. This has many benefits insofar as it can give rise to lively debate and exchange of views. Mention newborn hearing screening to a group of Teachers of the Deaf and it is likely that there will be a range of views expressed concerning whether it is a good idea to screen for deafness at birth and then what should follow from early identification. Much of this discussion will probably be based on personal opinion, formed from individuals' own experiences of deafness - in themselves, family members or friends, or from their work with deaf children and young people. Added to this there may be influence from other professionals, their training as Teachers of the Deaf or from what they have read in the press or other publications.

The introduction of newborn hearing screening, with all the attendant possibilities, is a landmark in deaf education in the UK. It is important that we allow our opinions to be informed by evidence. Research evidence can help us to reflect on our views and practice in the light of its findings and form new opinions that incorporate the latest insights.

Where to find research

Journal articles are usually the best source as they contain information that is recent. They are also 'peer reviewed' which means that other professionals in the field have read them and ensured that the research they present has been carried out rigorously, using appropriate methodology and that any conclusions drawn are justified by the results. Deafness and Education International (DEI) is the professional journal of the British Association of Teachers of the Deaf, and Teachers of the Deaf who are members of BATOD automatically receive a copy. At the beginning of 2005, DEI and the journal of the Australian Association of Teachers of the Deaf merged, so Linda Watson School of Education, University of Birmingham UK Editor Deafness and Education International

there are now two editors, myself in the UK and Margaret Brown in Australia. As editors we try to ensure that all papers in DEI are relevant and accessible to Teachers of the Deaf and we encourage you to see how the BATOD magazine and the journal complement each other, with DEI presenting some of the research that should underpin our thinking and decision-making.

The second issue of DEI this year (7.2) was a special one focusing on early years. In that issue are three papers - one on an investigation into the information that parents of deaf children would like to receive at diagnosis and two relating to early language development. These are all listed at the end of this article. A paper on the impact of NHSP on educational services for deaf children is due to be published in issue 7.4, which comes out in November, and we hope to publish more as the impact of NHSP begins to become apparent.

There are, of course, other journals of relevance to Teachers of the Deaf who are interested in early years. Some are journals that specialise in deafness, others are in related fields, such as medicine. Teachers of the Deaf in training will have online access to some of these journals, others are available at libraries. Some services for deaf pupils have a library and subscribe to several journals. You can obtain a copy of many papers by post from the RNID library.

Books often include summaries of research or references to research. This can be useful but, to ensure you get the full picture of the research findings, you need to access the primary source, ie the papers that the authors of the research published in peer reviewed journals. Exceptions are books that present research findings in more detail, usually with chapters written by the authors of the research. An example is Gallaway and Young (2003) Deafness and Education In the UK: Research Perspectives, published by Whurr, where you will find chapters on deaf adults in family intervention projects (chapter 1), conversations with young deaf children where English is an additional language (chapter 3) and examples of research into outcomes from paediatric cochlear implantation (chapter 7), all of which are relevant to Teachers of the Deaf interested in early intervention.

Another source is the internet. Some papers are available to download free of charge. If you use Google, or a similar search engine, and enter the author's name then you may find the paper is available. Charities such as NDCS and RNID sometimes commission research and then make the reports of this available via their website.

Current research in early years and deafness

There is a lot of research being carried out into the implementation of NHSP and its effects on deaf infants, families with deaf children and professionals working with them, including effects on services for deaf pupils. Three examples from the University of Manchester are:

The national evaluation of Early Support funded by DfES/DoH, which runs until March 2006 and is headed by Alys Young. It aims to answer the broad question: In which circumstances is Early Support effective, for whom, how and why? Details are available on the Early Support website (<u>www.earlysupport.org.uk</u>). If you have questions, then email

alys.young@manchester.ac.uk

Another project funded by DfES on the concept of informed choice is being carried out by NDCS and Manchester University. This is a two-year project that runs until April 2006. Details are available from

wendy.mccracken@manchester.ac.uk

 A project funded by the Big Lottery is due to start in September to investigate the outcomes of early confirmation of hearing loss by following a cohort of early-identified deaf children. NDCS, the Hearing Research Trust and UCL are partners with Manchester University. This will be headed by Prof John Bamford. (john.bamford@manchester.ac.uk)

There are other projects that are related to early years. I am currently researching early literacy in the homes of young deaf children, investigating what parents do to support reading and writing and what advice Teachers of the Deaf give them. This is in conjunction with Ruth Swanwick from the University of Leeds and is funded by the Economic and Social Research Council.

Early identification is likely to lead to early referral for cochlear implants. Paediatric cochlear implant centres are beginning to have sufficient numbers of children to compare the outcomes of those implanted very young with those implanted later, so research is commencing into this topic. A project is just starting at Nottingham Cochlear Implant Centre funded by NDCS. Details from Sue Archbold <u>sue@earfoundation.org.uk</u> We hope to publish papers on these and other topics related to early intervention in Deafness and Education International. There will be papers from the UK and other countries that have introduced newborn hearing screening, including a report on presentations at ICED (International Congress on Education of the Deaf) held in Maastricht in July 2005. Look out for these papers in future issues of Deafness and Education International.

In the meantime, here are some papers from various journals related to early years: Archbold SM, Nikolopoulos TP, Lutman ME and O'Donoghue GM (2002) *The educational settings*

of profoundly deaf children with cochlear implants compared with age-matched peers with hearing aids: implications for management International Journal of Audiology 41(3) 157-161

Carey-Sargeant CL and Brown PM (2005) *Reciprocal utterances during interactions between deaf toddlers and their hearing mothers* Deafness and Education International, 7,2,77-97

McCracken W et al (2005) *Impact of national newborn hearing screening programme on educational services in England* Deafness and Education International 7.4 (in press)

Nott P, Brown PM, Cowan R and Wigglesworth G (2005) *What's in a diary? Di-EL first words* Deafness and Education International, 7,2,98-116

Swanwick R and Watson L (2005) *Literacy in the homes of young deaf children: Common and distinct features of spoken language and sign bilingual environments* Journal of Early Childhood Literacy 5,1,53-78

Yoshinaga-Itano C (2003) *From screening to early identification and intervention: discovering predictors to successful outcomes for children with significant hearing loss* Journal of Deaf Studies and Deaf Education, 8(1) 1-30

Young A, Jones D, Starmer C and Sutherland H (2005) *Issues and dilemmas in the production of standard information for parents of young deaf children*

Deafness and Education International 7,2,63-76

Young A and Tattershall H (2005) *Parents' of deaf children evaluative account of the process and practice of universal newborn hearing screening* Journal of Deaf Studies and Deaf Education 10(2) 134-145



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Maximising auditory potential in a nursery curriculum Angela Harding, Director of Christopher Place

Tanya Smollan - Kaplan, Specialist Speech and Language Therapist

At Christopher Place, The Speech, Language and Hearing Centre, we offer an early intervention programme to babies and children who are deaf under the age of five. 17% of these children are cochlear implanted and of these 40% were implanted before they were $2^{\frac{1}{2}}$ years old.

Christopher Place offers both one-to-one therapy for newly diagnosed deaf babies and toddlers and a combination of one-to-one therapy and a group setting in our specialist nursery school.

The professional team at Christopher Place had seen the value of developing good attention and listening skills within a one-to-one setting. Clearly the children needed to interact with their peers and the challenge was for us to integrate these good attention and listening skills within a nursery curriculum. The MAP programme 'Maximising Auditory Potential' was therefore created to ensure that we maximised the children's audition within the nursery learning environment. All aspects of our MAP programme are delivered by Teachers of the Deaf, Paediatric Speech and Language Therapists, a Specialist Teacher and our Paediatric Occupational Therapist (where appropriate).

The main objective of MAP is:

- to help profoundly deaf children to develop spoken language through listening by providing a language enriched and inspiring environment where the focus is on integrating a nursery curriculum through listening;
 - as well as developing a respectful, supportive and informative partnership with parents to help them facilitate language learning through listening at home in all activities
 - and by focusing on the needs of the whole child using a child focused approach aimed at developing confidence and self esteem.

The principles that help us to achieve our objectives are:

- a belief that profoundly deaf children can develop spoken language through listening
- a belief that a child focused approach allows us to focus on the specific needs of each individual child
- a commitment to the best audiology and technical advances
- ensuring a good voice signal at all times within the learning environment;
 - by reducing background noise
 - by the adult sitting alongside and close to the child
- a language enriched and inspiring environment is created
 - by integrating audition and listening skills into the theme of the week

 by ensuring that there is enthusiasm
 a combination of small group and one-to-one setting, to develop turn taking, social interaction, sharing (during greeting, snack and play times) and the development of conversational and reciprocal language.

How we integrate our MAP programme

We integrate our MAP programme into all aspects of our nursery curriculum to include adapted Early Learning Goals as well as additional targets. (See the objective sheet overleaf.)

- Speech and Language Development (both receptive and expressive)
- Social Interaction and Communication
- Creative Skills (to including music and art)
- An Early Literacy Programme (to include story telling)
- An Early Numeracy Programme
- Motor Perception and Sensory Development (with guidance from the Paediatric Occupational Therapist)
- Social and Emotional Development (using our 'SAYF - Say How you Feel Programme') and our 'Parent Partnership Questionnaire'.

The 'How to'

The nursery has a 'theme of the week'. The purpose of this theme is to enthuse and excite the children, the parents and the nursery team so as to generate new ideas, new concepts and new vocabulary. The theme is integrated into all aspects of the child's nursery curriculum for that week. Careful planning and discussion takes place by all the relevant team members to set specific objectives for each child for each theme. (See objective sheet.) **Our parent partnership**

The Nursery Teacher/Speech Therapist meets with the parents at the beginning of each theme to share the objectives, hand out appropriate song sheets and give a list of the stories to be told during that time. Parents commit to attend at least one of the one-to-one sessions weekly where specific goals will be set and where parents can share progress and any concerns. This will be marked as evidence by the parents, and noted together with our team's evidence.

Scoring the Child's Progress

At the end of each theme, the team will identify the child's achievement in all the MAP goals and set new objectives and new targets for those areas that still require repetition and/or consolidation. This is shared with the parents and new targets are set for the next theme. These objective sheets are also shared with our professional colleagues who may be working with the children in settings other than Christopher Place. The key objective is that the MAP programme is integrated into all aspects of the child's listening and learning environment, both at school and within the home setting.

THE SPEECH, LANGUAGE AND HEARING CENTRE RECORD SHEET

Name of Child: Theme:

Discovering Minibeasts

Group: Date: May 2005

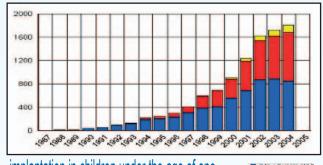
	eme:	Discovering Minibeasts Date: May 2005	
	STAFF	OBJECTIVES	OBSERVATIONS AND EXAMPLES
LANGJAGE DEVELOPEENT		Nouns/Labe/s Continue to discuss myself and family relating to photos from home and growth and change of plants in class. (caterpillar, worm, bee, ladybird, spider, fly, ants, snail wings, legs, hair) Body Parts Eyes, ears, nose, mouth, head, shoulders, knees, toes, arm, leg, hair, Verbs Eating, crawling, walking, jumping, sleeping, flying, creeping, wiggling Adjectives & Adverbs Hungry, tired, long, tiny, big, small, quiet, gentle, slowly, quietly Prepositions In, on, under, behind SAYF (Say How You Feel) - To be gentle: "look but don't touch" Activities - Looking and digging for minibeasts in soil tray - Continue watering plants - Using magnifying glass outside - Free play with ninibeast puppets - Sensory play with oily spaghetti to feel like worms. - Observe caterpillars on display and see how they change over time. - Show and tell with baby photos and family photos from home - Dressing and washing dolls	
S O C I A L		 To Join-in For Group Snack Time Waiting for a drink and snack Sitting at the table Being the helper; giving plates and cups to other children To be Aware of the Children in the Group Waiting for a turn Giving things to each other To learn the names of other children To recognise own name in print and the names of other children during greeting To Join in for a Short Circle Time listening and responding to a story singing songs with some actions or with props (see list below) greeting 	
C R E A T I V E		To Introduce New Songs: - Incy wincy spider - Wiggly worm - Mr Buzz the bumblebee - Little Peter Rabbit had a fly upon his nose. Use a Range of Creative Media - - Making spiders out of egg cartons - Ladybirds puppets - Seed collage - Drawing faces - Minibeasts with pipe cleaners and saltdough - Make a spider's web with spaghetti	
L T E R A C Y		To Listen and Look at a Variety of Fiction/Non-Fiction Books Related to the Theme - Where's the ladybird - Feely bugs - In Wibbly's garden - Creepy crawlies - 10 Ladybirds - The very busy spider Recognising own name and of other children in the group	
NUMBER		Ladybird game Gross motor action game with dice Sorting into more complex categories e.g. two properties big bee with two stripes, small ladybird with three spots	
M O T O R		Body and Spatial Awareness, Gross and Fine Motor Coordination - Balancing on different surfaces - 4-6 pc puzzles with support - Growing like a seed - Crawling in and out of tunnel - Filling and emptying containers and boxes - Putting shoes/socks/coat on and off - Rolling dice and actions (jumps, clap, hop) - Animal movements to music	
		ACTIVITIES FOR HOME Look for minibeasts at home in your garden and when out and about. Involve your child in gardening at home and look at different plants growing. Look for snails at night in your garden. Look for spider webs around the house and outside. Talk about and act out "animal actions"	FEEDBACK TO/FROM PARENTS



A major oneday conference, hosted by The Ear Foundation in Nottingham in March 2005, addressed the issues arising from the

increased implantation of deaf children in the first year of life. Following the implementation of UNHS and earlier identification and diagnosis of deafness, cochlear implantation in the first year of life has become a reality. This presents many challenges to all the professionals involved in the care of the young deaf infant and their families. Parents are being confronted with decisions that were not an option in the past, and are having to deal with them at a time when they are at their most vulnerable, and before they have any knowledge of the impact of deafness.

Most deaf babies are born to hearing parents and the concept of deafness in their family is completely new. Early implantation is a technical reality but is this the time to be making such a life-changing decision? We know the evidence is that early implantation clearly gives the best results, and this may lead parents to feel obliged to proceed at a time when they are not sufficiently prepared. Is it reasonable to make this decision early in a child's life, particularly without any prior knowledge of deafness and its impact on family and education? At such a vulnerable time, implantation may be seen as a quick 'fix' and soon after early identification may not be the best time to make the decision for this elective operation.



implantation in children under the age of one World-wide recipients under three, Jan 2005 N = 1,121

2 to < 3 years old 1 to < 2 years old under 1 year old

However, as can be seen from the figure, supplied by Cochlear Europe, implantation in children under the age of one is increasing - beginning in the year 2000. In the face of this reality, the conference brought together leading figures from a range of

Cochlear implantation in children under one - conference report

Sue Archbold, The Ear Foundation, Nottingham

professions from throughout Europe, together with parents, to debate these issues. Professor Adrian Davis and Dr Sally Hind began looking at the implications of the Newborn Hearing Screening Programme; the difference in the median hearing aid fitting before and after the implementation of NHSP is 120 weeks at the upper quartile - has this bought more time for parents to make informed choices? The importance of accurate diagnosis of hearing loss was highlighted by Dr Steve Mason and Dr Paul Govaerts, who introduced us to the Auditory Speech Sounds Evaluation (ASSE), which can be used to evaluate the discriminatory power of the cochlea in the very young. Prof Colletti from Verona gave a lively presentation on surgery in children under one year of age, concluding that it does not carry increased anaesthesia or surgical risks. Dr Rajput, of Gt Ormond Street, described the complex needs of many deaf children - up to 40% are likely to have another difficulty - and preached caution to those of her medical and surgical colleagues who rush forward without careful evaluation.

During the afternoon, the debate moved on to considering the issues from the family perspectives, and looking at the evidence of outcomes. Christina Clifton, mother of two implanted children; Toby at one year, and Jack at five; described movingly the reality of newborn hearing screening and early diagnosis for Toby. Although keen to move on with an implant for Toby as soon as possible, she valued the 'nine months blissful ignorance' she had with Jack before the diagnosis was made.

Margaret Tait, Sue Archbold, Leo de Raeve, Margaret Harris and Eulalia Juan talked about the exciting early outcomes being observed in children implanted early in terms of developing communication skills and language; from Spain, we had the example of bi-lingual development in Catalan and Castilian. However, all speakers emphasised that we do not have large numbers yet, and we need to monitor children over long periods of time before we know whether or not exciting early developments will be sustained in the long-term. A spirited debate led by Prof Gerry O'Donoghue concluded the day, with those keen to move ahead rapidly with early implantation being balanced by those preaching caution. Clearly the debate continues, and will be followed up as the information on these children continues to be collected.

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* The BTE speech processor passes International Standart IEC 60529, with a rating of IP57 and the Bodyworn with IP44, which indicates that the speech processor is protected against splashing water. Nucleus is a registered trademark of Cochlear Limited. Cochlear, the elliptical logo, Freedom, SmartSound, are trademarks of Cochlear Limited.

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During phase 1 of the ESPP work, SENSE was invited to provide training for a multi-professional group working on the project in Manchester. The group comprised speech and language therapists, health professionals from the NHSP, the audiology teams, orthoptist team, and teachers from both the hearing and visual impairment services.

The training from SENSE included deafblind awareness, understanding some of the specific issues that might be faced by parents of deafblind babies, and looking at some of the strategies that have been proved to be helpful in the support process for these families and babies. Following this training, members from the group decided to work together to draw up strategies that will help to ensure early identification of deafblind and multisensory impaired infants and children.

In particular the role of the Intervenor was explored. This is the term given to a person working in a very specialised way with a deafblind child. The aim of the Intervenor is to enable the child to learn compensatory means of accessing information from the environment that would normally be gained through hearing and vision. The Intervenor acts as a 'bridge' to the environment, taking the child to touch, bringing objects to the child to explore and experience the movement or sound through their whole body or developing tactile means of communication.

At an early stage of these regular meetings it was clear that it would be helpful to develop a 'process map' of all the relevant services and departments. The intention of this 'process map' was that it would clearly show the procedures for progress through the various medical assessments and referrals to other departments. It would show where and when to establish linkages with other organisations including education and social services. The pathways for Special Care Baby Unit (SCBU) babies and well babies should be easily tracked. In each case the linkages have been identified that show when and to whom a deaf baby should be referred if there are concerns regarding vision, or indeed any other additional disability.

The main aim of this part of the group's work was to ensure that after hearing loss is identified, any other aspect of a child's needs should be addressed at the earliest opportunity. In particular, for deafblind babies, it was recognised how important it is to Patricia Gibbons (Advisory Teacher for Deafblind/MSI)

ensure that this particular disability does not go unidentified, as happened so often in the past. All the professionals from each discipline have acknowledged the need for these babies to have early identification of their needs as a pre-requisite for the most suitable Early Support to be established. This 'map' will go a long way to ensuring that children are not missed or routed through ENT/Paediatrics and classified as a child with global developmental delay without a recognition of the extent to which sensory impairments may be likely to affect functioning.

Once the development of the 'process map' was under way, we turned to the other challenge. Government guidance, both with regard to education and social care for deafblind children, is that an Intervenor should be provided at the earliest opportunity to help the family, and later the school, to communicate and stimulate the baby with compensatory strategies. At the very beginning the main care-givers provide the Intervention but the role is so intensive that it is helpful to supplement and support them.

In recognition of the fact that this is a little known or understood role beyond deafblind circles, we decided to try to put together a list of possible reasons why an Intervenor would be necessary for a child. We considered that a reasonably simple but comprehensive document would be useful in supporting any request for the additional funding that might be needed.

What we have finally produced is a list of statements, divided into three learning areas:

- sensory development and integration;
- body awareness and mobility;
- communication.

There is space to indicate whether the child needs the particular support always, sometimes or whether it is not applicable for some reason, perhaps because the child is not yet at that stage of development, or has physical disability in addition to deafblindness. There is also a column for amplifying remarks. In addition, there is a list of terms that may be used in deafblind/msi education with explanations.

The following are a sample of the statements that might be selected for any child. In the sensory development and integration section there are eight statements including "the child requires a planned programme of stimulation to promote visual development"; "the child requires planned use of paired sensory stimuli to aid the development of listening and visual skills, for instance vibration and sound, vision and touch or vision and sound".

In the communication section there are seven statements including "the child needs compensatory strategies using the sense of touch, and planned action sequences to develop attachment and bonding behaviours with both primary carers and the wider circle of people beyond the family"; "communication requires planned and deliberate use of tactual access to objects to enable understanding of processes, activities and events".

In the body awareness, movement and mobility section are nine statements including

- 'the child needs planned activities to promote body awareness, including an understanding of the relationships between parts of the body';
- 'the child needs a physical programme to counteract self-stimulation, habitual or stereotypical behaviours';
- 'the child needs specific compensatory strategies to understand environmental features'.

The document is not supposed to stand alone. We would envisage that it would be completed on behalf of any child and submitted alongside a range of other assessments that may have been conducted. There would be probably be clinical assessments of hearing and vision and also functional assessments of the child's use of hearing and vision in different situations. There would be a functional communication assessment focusing on early preverbal communication behaviours and strategies. There may also be a need for physiotherapy advice alongside functional assessment of the impact of lack of vision on the process of learning body image and the co-ordination of movements.

The assessments undertaken should be collaborative, involving a range of different professionals. However for deafblind/msi children the qualified teacher for MSI would need to have a co-ordinating role in interpreting the observations and giving educational guidance. The matrix document should act as an aid to understanding about the reasons why additional support is being requested, and should also assist in the evaluation process when considering the benefits that Intervention might bring to a child.

Now that this part of our work is completed, we have decided that we should continue to meet to look at routes through service provision in all our services to identify and clarify where children might be referred from one to another. We are also planning to compile some leaflets which would provide key points to promote awareness of a deteriorating sensory condition and guidance about where to go for further advice.

Participants in the working group were G Attey, V Fathy, P Gibbons, P McKeogh, G Painter, L Reed, D Roberts, M Robinson and S Parsons.

For further information about the map through the medical assessment processes, please contact Doreen Roberts (Consultant Audiologist) doreen.roberts@centralpct.manchester.nwest.nhs.uk

For information about the document for Indicators of Need for Intervenor Support, please contact Patricia Gibbons (Advisory Teacher for Deafblind Children) <u>patricia.gibbons@mcvi.org.uk</u>

For further information about meeting the needs of deafblind children see the document 'Reaching Out, a toolkit for deafblind children's services' published by SENSE, 2004 <u>enquiries@sense.org.uk</u>





MUSIC AND COCHLEAR IMPLANTS CONFLICT OR COMPLEMENT?

Thursday 13 October 2005

A one-day conference jointly organised by The Ear Foundation, Nordoff-Robbins Music Therapy and Mary Hare School.

It is true that it is not possible to enjoy music with cochlear implants? Cochlear implant processing has traditionally focussed on speech processing - but there is a growing interest in music for deaf children with cochlear implants. This one-day meeting will look at the latest cochlear implant technologies and music, and explore how music can be used with children with implants.

Topics to include:

- New cochlear implant technologies and their implications for improving music reception and enjoyment.
- Recent research results.
- Strategies for using music with children and young people.
- The experiences of users of cochlear implants.
- Music therapy with young implants users.

Invited International Speakers include:

Mary Grasmeder (UK), Jasenka Horvat (UK), Mary Joe Osberger (USA), Geoff Plant (USA), Christine Rocca (UK), Bas van Dyke (Belgium)

Cost: £75 (including lunch and refreshments)

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Advancing Communication between Deaf and Hearing People

Advance Notice of a CACDP Conference

RETURN TO SENDA

Access to Examinations and Assessments for Deaf Students -What is Reasonable Adjustment in Schools and Further Education?

www.cacdp.org.uk.

Venue:

The British Library, London

Date:

3 November 2005

Price:

£115 (CACDP members)

£125 (Non-members)

£115 (Early bird discount for

bookings made before

1 Aug 2005)

The conference will aim to provide:

- information on recent work in this area; what regulators and awarding bodies are doing;
- illustrations of good practice;
- information from providers in institutions;
- an opportunity to share experiences.

educational institutions to develop their understanding of the assessment issues which arise from the particular needs of deaf students.

The conference will be of interest to:

CACDP is now planning a follow-up conference on 3 November 2005, also

at the British Library. The event is for Awarding Bodies, FE/HE institutions,

'reasonable adjustments' for assessment arrangements for deaf students.

Deaf students represent a major group affected by the SENDA provisions.

In October 2004 CACDP ran a successful sell-out conference at the British

Library. Supported by the Department for Education and Skills, the theme of the conference was 'The SENDA Agenda' which explored the implications of SENDA for HE and FE in making 'reasonable adjustments' for deaf students.

A report on the conference and the presentations are on our website:

schools and other interested parties, to consider the implications of

The conference provides an opportunity for awarding bodies and

- Awarding Bodies;
- FE Colleges and Universities;
- hearing impaired services in local authorities;
- teachers of the deaf;
- local authority education services;
- specialists working with deaf students;
- specialist schools and colleges.

For a booking form or further information please contact Leanne Clough, Marketing Officer: Tel: 0191 383 7911

Email: leannec@cacdp.org.uk

Address: CACDP, Durham University Science Park, Block 4, Stockton Road, Durham, DH1 3UZ.

This conference is supported by:



DCCAP Making your own books for deaf children Marian Nash

Two ToDs came to me and suggested that I should run a course on making books or at least write an article to give some ideas. So here is a taster...

Homemade books are a very good way of stimulating interest and language, especially if they revolve around the child. Very young deaf children are not looking for sophisticated skills from the staff. What they want more than anything is to recognise themselves or actively participate in the story. These ideas can be adapted and used in other Key Stages for other pupils, especially those with language delay.

The Home/School Book

This is the most important link for the very young deaf child and it is very easy for it just to become a diary between the parents and teachers. From my experience, putting the child's photograph on the front cover, which immediately identified it as belonging to them, meant that fewer books went missing than when we asked the child to cut out a pretty picture from a card. A quick, simple drawing of one of the day's activities helped them to remember what they had done during the day and so the book became meaningful to the child.

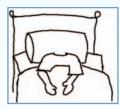


These stick figures were drawn with one main characteristic of the pupil, so the children could easily tell me the name of each one. It was a pleasure to see them sit down and 'read' the pictures.

The children used these books to communicate their thoughts.

One pupil hurt his thumb on the toy ironing board. About six weeks later another pupil got her book and found the picture, pointed at the ironing board and said, 'Remember?' Photographs of every day activities were stuck in regularly as well as those from educational visits.

Personalising copied sheets



At the beginning of every school year, I used to take photos of the children's faces. These were front view and profiles. They could be copied, so that each pupil had a good supply. They were then able to

cut them out, stick them on and colour the picture to turn the headless body into themselves. Other favourite story books, such as the Bear Hunt and Goldilocks, are excellent for providing the ideas, which can then be turned into a story personalised for each child. These books were not made and used in isolation but would be accompanied by appropriate Nursery activities.

For a group of older pupils, a story was made of them racing old cars before we visited the Brooklands Race Track in Weybridge. During the visit they enacted the race on a section of the track.

Using ICT to make electronic books

Now that there are so many software programmes available, more professional looking books can be created and published.

Clicker

Participating in books by having to choose an article of some description enables the pupils to enter into the story. Simply make a new file (named appropriately), then customise the Clicker grids so that you can design them exactly how you want to.



Here a character has been drawn in 'Paint' using a graphics tablet and inserted into a cell. The children are asked to choose which scarf they think Sally Snail will want to wear. By linking the correct choice of cell to the next grid, it will lead onto the next page in the story. For example, Sally may then want a new umbrella; a new hat; a new bag, etc.

Clicker Talking Books

There are many different formats of pages for the creator to choose from. Photographs, graphics and drawings can be imported to make it interesting. The text can be read aloud if appropriate. With Clicker 5 there is a good English voice on the speech engine or it is possible to record your own voice or sound effects. Here is a page from a book written about an alien. Clicking on the blue

loudspeaker icon will get the passage read to you. Clicking on the yellow arrows will move you onto another page. Another good use of this programme would be to put photographs of the activities carried out, so recording a day at school. You can print off a paper copy of this book for the child to take home.



PowerPoint

This is a very versatile tool to use in education.



Here each box has been animated using the custom animation tool so that, when the presentation is used, the words can be built up or disappear in syllables as desired. Photographs of

real farms or animals can be used. By printing each slide you can easily produce a paper copy of this book, but it will use quite a bit of ink. This is probably more interesting left on the computer!

Creating their own stories Kidspiration

This is not so much a book, but more a discussion base. Here a story outline can be produced with very little written text. This could be used as an outline for a class activity as well as 1:1.



The activity can then be extended, so that more able pupils could produce their own stories. At the other end of the spectrum a lesser able group might be able to create another story using different graphics. The middle group could use the mind map as an aide-memoire to reproduce the story. Kidspiration allows the picture format to be changed into the written structure which can be expanded. From my own research, I discovered that imagination appears to have little to do with ability, resulting in pupils with poor drawing and/or literacy skills often being unable to record their ideas, so this type of software is of great value to them.

Textease

This programme allows you to layer graphics and manipulate the text to produce very creative and



imaginative pages for a book. It is easy to import photos and graphics from other programmes.

There are still more software programmes that can be used to devise these simple,



personalised and effective books.

Communicate in Print2

CiP2 is the new version of Writing with Symbols and is more of a desk top publishing package. Widgit have expanded their collection of rebus symbols (worth a look to consider the teaching of concepts, prepositions etc) and the Let's Sign and Write graphics pack 'add-on' allows the production of BSL booklets using the clear graphics.



For more ideas please go to <u>www.dccap.org.uk</u> for an extended version of this article. It will suggest ideas on how you can make similar books as well as some for older children using Word, Storymaker, Vox proxy and Kar2ouche to name but a few.







The Ear Foundation

Binaural Hearing - are two ears always better than one?

Wednesday 26th October 2005

to be held at

The National College for School Leadership, Nottingham

Binaural hearing facilitates spatial awareness, enhances speech understanding in noise and gives sound localisation. These benefits are so readily achieved with normally hearing ears that they are easily taken for granted. Can advances in technology provide the same benefits for the hearing-impaired? What are the limitations of monaural hearing? This one-day conference will bring together international experts in the field to discuss the challenges this presents. Topics will include:

- Physiological basis of binaural hearing
- Plasticity and binaural hearing
- Limitations of monaural hearing
- Binaural processing
- Binaural amplification

- Bilateral cochlear implantation
- Fitting hearing aids and cochlear implants
- Listening in everyday environments: classroom acoustics
- Measuring binaural benefit
- Clinical experience across countries

International faculty

Cost: £99.75 including lunch and refreshments There is free car parking on site; easily accessible by car, train or air (Nottingham East Midlands Airport). For further information or to register on-line, go to <u>www.earfoundation.org.uk</u> The Ear Foundation, Marjorie Sherman House, 83 Sherwin Road, Lenton, Nottingham NG7 2FB tel: 0115 942 1985 fax: 0115 924 9054

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This and that...

New CACDP award in the history of BSL Bob Peckford

The Qualifications and Curriculum Authority (QCA) has now accredited a new CACDP award, the 'Level 2 Certificate in The Living History of BSL' (Accreditation number 100/4651/3). This award was developed with the co-operation of several schools for deaf children which currently teach deaf studies and the British Deaf History Society. The award has been designed with the needs of deaf children from Key Stage 4 in mind and will also be of interest to hearing students of BSL at Level 2.

The minimum recommended tuition time is 40 hours. The qualification is divided into two units, each of which can be achieved separately: Unit 1 - The History and Status of BSL Unit 2 - BSL in the Lives of Deaf People (Personal, Family, Work, Social, Community and Education)

The following information will be useful to those interested in offering the award at their school.

- The curriculum is now available from CACDP.
- Assessment will be available from January 2006.
- Those who achieve the Level 2 Certificate in BSL and the Level 2 Certificate in The Living History of BSL are eligible for the CACDP Intermediate Certificate in Deaf Studies.
- A tutor's resource pack has been developed and will be published later this year.
- The British Deaf History Society have published the book - 'A Beginner's Guide to Deaf History' to support the course. The book can be purchased from British Deaf History Society Publications at 52 Hillhouse Road, Streatham Common, London SW16 2AQ (fax 020 8769 9221), price £23.70 including postage.
- Five CACDP curriculum training days have been held around the country to introduce and explain the curriculum to potential tutors and similar events can be arranged on request for groups of tutors.
- Centre Registration for schools already registered with CACDP, the annual centre registration renewal forms will include the option to register for the Living History of BSL. Schools not registered as CACDP centres can find out how to register via the CACDP website <u>www.cacdp.org.uk</u> or by calling 0191 383 1155

For more information contact CACDP on <u>durham@cacdp.org.uk</u>

Letter to Paul Simpson from Dr John Low, Chief Executive RNID

RNID Impact Report

Thank you for your letter of 20th November. I am very pleased that you enjoyed reading about RNID's activities over the last year.

I am very sorry that BATOD was missed out of the long list of partners on pages 34 and 35. I am aware that yourself and BATOD play a huge part in the work of RNID's Education Team. Suzanne and her predecessor Liz Andrews speak very highly of the work that you do, and indeed much of RNID's education work could not be achieved without the support and expertise of BATOD.

I can therefore understand your disappointment at the regrettable omission of BATOD from the list of partners. I can assure you that this mistake will be rectified in next year's Impact Report and we will put in place steps to ensure that this does not happen again. Please accept my apologies for this oversight, which I hope will not affect our constructive and very successful working relationship.

With best wishes for 2005 and I hope that this year will bring more successful partnership working between BATOD and RNID.

Free Applications for Disclosure

As part of an ongoing commitment to quality communication services, RNID is delighted to be able to offer free, enhanced CRB checks. These will be available to CACDP registered BSL/English interpreters, registered Level 3 lipspeakers, registered deafblind interpreters, registered STTR's, and notetakers - both manual and electronic - that hold the CACDP Level 2 certificate. This offer is open until March 2006 and interested LSP's should contact Louise Murphy at RNID on 0207 296 8272

Info that recently came out from LSC

Elizabeth Mackinder

A letter has been sent from the Learning and Skills Council (LSC) to all college principals and heads of institutions which it funds relating to the funding allocation for next year.

Key points from this letter are:

- the budget for 16-18 year old funding has increased by 10.3% in line with government priorities for 16-18 learners
- the budget for 19+ funding has decreased by 3% with the priority being for first full level 2 and adult basic skills. This will result in pressure to reduce other adult provision or to increase fees

payable. For adult returners wishing to retrain this is a disincentive. The reductions in adult provision required are higher than anticipated

 the budget for additional learner support has increased by 2.6% with the expectation that the overall proportion of learners with learning difficulties and/or disabilities will be maintained.

For the future there is 'a significant degree of uncertainty' with funding arrangements for 2006-07 and beyond, with budgets being even tighter and tied into Government priorities.

Full details of the letter can be found at <u>http://readingroom.lsc.gov.uk/lsc/2005/funding/strea</u>ms/fe-funding-for-2005-06-academic-year.pdf

Correction

Education for deaf children in Somalia

The last issue of BATOD magazine included an item in which Fowsia Muhamud, who lives in Manchester, asked for help to set up a school which would give deaf youngsters the opportunity to understand and use the Somali language and English through Cued Speech.

The item erroneously stated that there were no schools for the deaf in Somalia. We are indebted to Doreen Woodford, of the Deaf Africa Fund who has informed us that this is not the case. She tells us that there are two schools run by dedicated teachers including one in Boroma, which was set up eight years ago, and one in Hargeisa.

Knowledge about these schools is clearly not widespread even in Somalia - our information that there was no support came from Somali people. The need for support for deaf children, however, is still acute and any help would be gratefully received. To help Fowsia, contact her through the Cued Speech Association UK at <u>info@cuedspeech.co.uk</u>

BATOD members awarded for good practice

Judith Marsden was recently awarded the South East SEN teaching award for her work as a teacher in charge of a resource for HI children in a mainstream primary school. Looking through the other regional winners we see that the Northern Ireland award had also been given to a Teacher of the Deaf - Mary McCartan. Two out of 13 awards for special needs is a high percentage for a low incidence disability. Check out the website www.teachingawards.co.uk and follow the link to the 2005 category winners. Last year Sandra Wylie, another BATOD member working at Mary Hare, won the SE SEN award and this year she is a judge.

More choices for you

DoH has recently worked with Sign to produce More Choices For You, a DVD in British Sign Language and subtitles, which sets out some of the progress that the NHS has made with the Building on the Best strategy (DoH, 2003), as well as how relatively small changes to working practices can make a big impact on service delivery. The DVD is principally for the deaf and hard of hearing community but is also suitable for wider audiences. You can place an order for the DVD by post, telephone, fax or email: Department of Health, PO Box 777, London SE1 6XH tel: 08701 555455 fax: 01623 724524

email: <u>doh@prolog.uk.com</u>

THRASS Africa

Following on from our great successes in South Africa, we have identified a school that we would like to help become a 'Centre of Excellence' for the teaching of English.

Our endeavours in this area are now available for all to read on the THRASS website in the NEWS MEDIA CENTRE and will be published in various newspapers, magazines and websites under the title, 'South Africa: Township 'Centre of Excellence' to be funded by British couple.' <u>www.thrass.co.uk</u>

On the website there are also audio and video versions of the story, for you to hear and/or view, and a broadcastable video is available through the site for TV and Production companies.

THRASS resources have been awarded 5/5 for Contents, Readability and Value in the Bulletin, The Official Magazine of The Royal College of Speech & Language Therapists.

Could hearing aids become as fashionable and desirable as glasses?

That's the aim of RNID as it launches the first ever display demonstrating how products for hearing could look in future. RNID has teamed up with Blueprint design magazine, creative agency Wolff Olins and fifteen contemporary UK product designers to re-think the future of hearing products. The results are on display at the Victoria and Albert Museum.

Called Hearwear: The Future of Hearing, the display features radical new designs for hearing products. Concepts range from desirable and elegant jewellery such as a sleek necklace, glasses incorporating a hearing aid, or bold in-the-ear aids, to completely new concepts including devices to boost your hearing in noisy bars and products which 'cancel' noise, enabling you to control your sound environment by blocking out unwelcome sounds.



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sound sense for a better life

The BAHA system: an option for treating hearing loss in those with Down Syndrome

Down Syndrome, trisomy 21, is the most common cause of developmental delay with an estimated incidence of about 600:1 in 900 live births per year. It was first described by John Langdon Down, an English physician, in 1866. Down Syndrome (DS) is associated with multiple anomalies, but one of the most common abnormalities is a predisposition to developing hearing loss.

It is well documented that 60-80% of children with DS have conductive hearing loss most commonly as a result of Otitis Media with Effusion (OME) commonly known as glue ear. The hearing loss is usually in the region of 35-50dB although a more severe loss is not uncommon¹ and 10% of the group have a sensory-neural loss.² Children with DS have a three times higher incidence of chronic ear disease and hearing loss than other children without learning disabilities.

There is also clear evidence that even a mild hearing loss is associated with delayed development of speech and language in normally developing children and it can be assumed that this may be more pronounced in children with Down syndrome.³ Recent articles highlight the benefit of early intervention in improving speech development in children.⁴

Children with Down syndrome should have regular audiological assessment from an early age and any treatment required should be prompt. It has recently been suggested that in this group there should not be a 'wait and see' period but treatment be commenced immediately the diagnosis is made.⁵ There may be difficulties with conventional hearing aid use because of the shape of the ear canals and a tendency to excess wax production. Grommets can also be difficult as they extrude more easily, requiring frequent re-insertion.

The BAHA (Bone Anchored Hearing Aid) from Entific Medical Systems is a new approach to the management of hearing loss in children with DS. The system works on the principle of bone conduction of sound and is not dissimilar from the conventional bone conductor.⁶

What is the BAHA system?

The technology was first introduced from implant dentistry and adapted to hearing aids in 1979. A small titanium fixture is implanted surgically into the bone of the skull behind the ear, where over a few Mr Patrick Sheehan, Booth Hall Children's Hospital

months it osseo-integrates with the living bone. A metal attachment called an abutment is attached to the fixture and the sound processor (the hearing aid) is clipped onto the abutment. The hearing aid can be worn at any time or taken off at any time. The BAHA transmits sound better than the Bone Conduction Hearing Aid (BCHA) because sound is transmitted from the hearing aid receiver directly to bone without inference from hair and skin. The BAHA system gives about 10-20dB better amplification than the BCHA. The sound quality is very close to a conventional air conduction hearing aid.

Can the BAHA be used from any age?

Young children's skull bones are thinner and the bone softer than older children or adults and therefore clinicians recommend that one waits for the BAHA fixture placement until the child is older and there is sufficient bone thickness to adequately hold the fixture. This is usually after the age of seven or eight. Often this is too late for the child with DS who experience hearing problems at a younger age. Entific Medical Systems have therefore introduced the BAHA Softband.⁷

What is the BAHA softband?

The BAHA Softband is an elastic soft band and similar to a sweat band used in sports. The BAHA sound processor clips onto the Softband via a connector disc sewn into the band. No surgery is required and the BAHA can be used from a very early age. It is used until the child is old enough to go through surgery for the fixture if they still need hearing aid amplification.

What does the BAHA system proper entail?

In the older child this system can be converted to the BAHA system proper. This involves a minor surgical procedure, under general anaesthesia, in order to place the fixture into the bone of the skull in the mastoid region. Sometimes the abutment is attached to the fixture during the same procedure and brought out through the skin during the same operation. More commonly in children, the fixture is inserted under the skin and a second operation is performed six months later to pierce the skin and attach the abutment to the fixture. The decision to do the procedure in one or two stages is made by the surgeon and is dependent on the age of the child and the thickness of the bone, among other factors considered. After the operation/operations the hearing aid is attached to the abutment. This

usually occurs six to eight months from the time the fixture is placed in the bone. The hearing aid is detachable and is taken off at night or when bathing. In all other aspects it is similar to a conventional hearing aid. There is minimal loss of sound quality and the device is comfortable to wear.⁸

Several centres in the UK have been offering BAHA devices as an option to children with DS. A recent survey of the UK experience of BAHA in children with DS {in press} has highlighted the benefit of this hearing aid system. Almost all parents and carers of children with DS were very satisfied with the system with all children wearing their hearing aid throughout the day. The survey did highlight some post-operative skin issues, but these were short term and were easily resolved.⁹

Can the BAHA be an alternative to chronic persistent glue ear? Indeed, Some parents may feel that an additional and unfamiliar operation is a undesirable, bearing in mind that many children will already have undergone a host of grommet insertions and possibly surgery for other ear conditions. On the other hand, the BAHA would certainly correct the conductive hearing loss. It's a once and final operation, the ear canal would be left open and, according to BAHA wearers, by conventional indications the degree of comfort is superior to that achieved by attempting to carry on with an AC aid.

Summary

Hearing is a vital part of the learning process for a child with DS and it is therefore extremely important to begin stimulation of the speech and linguistic development as early as possible. The BAHA system is an alternative method of amplification for those children with DS with hearing loss who are unable to wear conventional hearing aids and where grommet insertion is not a solution. The BAHA system is a safe, proven, and predictable solution for hearing amplification and its use in individuals with DS should be considered more often. It is another option in our treatment of hearing loss.

More information on the BAHA system can be obtained from Entific UK via their web site or the author at the contact details below.

A more detailed version of this article appears on the BATOD website - go to <u>www.BATOD.org.uk</u> and follow the links.

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Author

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Thinking out of boxes

Brian Barney, Educational Audiologist and Dr Hebbar, Paediatrician

At a recent training day for Early Support, the concept of providing training on the idea of 'thinking out of our boxes' was discussed at some length. Multi-agency working has been an important issue in many of the recent initiatives we have met during recent years. This has been an essential part of the concept of Children's Hearing Services Working Groups; the provision of digital technology within Modernising Children's Hearing Aid Services and now the implementation of Early Support. With the move to a culture of Children's Services, multiagency working is here to stay. The ability to see the child and family at the centre of our provision is key to this philosophy. To achieve this we need to be 'team players' and think beyond the boundaries or boxes of our particular professional role and contribute to the overall good of the team.

Multi-agency working has been at the heart of planning for Newborn Hearing Screening in North East Lincolnshire. This has been a vital development in meeting the needs of deaf children in our care. Early identification and intervention are wonderful ideals but meeting this reality has presented significant challenges and I am sure that many of our experiences will be similar to those in other areas.

The establishment of a 'multidisciplinary implementation team', including a number of stakeholders, was the starting point. The implementation group included paediatricians, ENT surgeons, Audiologists, Maternity Services, Speech and Language Therapists, the Primary Care Team, the Hearing Impaired Service and Social Services. The group set out to plan a hospitalbased programme with follow up within the Community. After much discussion and planning, Newborn Hearing Screening became a reality in NE Lincolnshire in December 2003 and since this date over three thousand babies have been screened. Since the introduction of screening we have identified eight babies with a permanent bilateral sensorineural hearing loss. All of these children have been aided and family-centred support put in place.

Empowering parents to have the confidence to meet the needs of their deaf children has been an important element. The parents involved in the screening process have been grateful for early identification of hearing loss and the opportunities this provides for their children. The involvement of the wider family has been an important aspect of the provision made. Grandparents in particular have expressed their appreciation for the early identification and support they have received. Early amplification is an essential element in the provision of support and we are aiming to make hearing aids available by six weeks, if this is the choice of the family. For families who wish to wait a little to come to terms with the implications of the hearing loss there is time to wait. There is also time to consider the issue of cochlear implants and communication methods for those children for whom these are considerations.

Educational provision within the area provides significant flexibility. Support is undertaken by the Educational Service for Hearing and Vision covering the three Local Authorities of Hull, East Riding and North East Lincolnshire under joint arrangements. The 'Joint Arrangements' also enable flexible provision of a high standard for those children and families who choose a Total Communication option. We are always very grateful for the unique skills provided by The Service Teacher for Total Communication and the Senior Deaf Instructor in supporting families of children for whom this is considered to be the best approach in meeting their needs during pre-school. Their contribution to the team is welcome in the provision of information to parents to empower them in the decision making process. For all children, the size of the Service allows for the provision of a fifty-two week a year support.

Children identified by the NHSP are included as part of the overall care for all children in the area. A system of multi-agency hearing aid reviews has been established including an Audiologist, Paediatrician, Educational Audiologist and the Teachers of the Deaf. Care is taken to try to ensure that communication systems and joint records are maintained to try to provide consistency of provision. All the children in our care, including those identified through the NHSP, are now using digital hearing aids under the MCHAS Programme. There are regular three-monthly appointments for babies, established users are seen yearly. As in most areas, earmoulds continue to provide a challenge for many of the babies. We recently resorted to using a body worn aid for one child to try to overcome the difficulties of feedback.

Not all families feel positively about early identification and one family expressed negative feelings about the amount of stress they had experienced. Their views were listened to carefully.and time taken to explain the reasons for testing as well as the results obtained. The family later expressed appreciation for the help and support they had received.

Joint training has been very valuable in helping to cement the team approach within the multi-agency clinic. At the other end of the scale, we have been involved in delivering joint training to a range of professionals. This has included input from NHSP screeners, parents and grandparents in addition to all the professionals involved directly with deaf children.

Involvement in a Children's Hearing Services Working Group (CHWSG) covering a wider area has been important and we have set up our own local CHSWG to monitor our own provision. Finding time to develop our own local group to meet our individual needs is an important issue which will be addressed in the coming weeks. Formal audit of the Newborn Hearing Screening Programme has been put in place. Audit of the Children's Hearing Services needs to be undertaken in the next few months.

We have begun the process of meeting the challenges of Newborn Hearing Screening and so the late diagnosis of deaf children is now, hopefully, history. We still have some way to go to achieve the quality service we would like to provide for all the children in our care. Gaining maximum benefit from the Early Support is the next objective. Working together with the 'child and family' at the centre is a fundamental element of future planning and review. The ability to 'think out of our professional boxes' is paramount to our philosophy.

Grandparents' View

Val Pesterfield

Lilly-ella (Lilly) is almost thirteen months old now. She is a wonderful little girl. She's funny, a bit cheeky and a huge tease. She will walk if and when she feels appropriate, knowing we will all 'oh' and 'ah' and give her a clap. Lilly and Grandad adore each other so Lilly will attempt anything to amuse him. If Lilly was asked what her favourite things are, the list would probably read: Grandad, choc, ice cream, the garden and 'the Kids' as she calls them. Her six cousins love her to bits and she takes full advantage of them. She will more than likely be the ringleader when mischief is concerned when she gets a bit older.

Lilly had her first hearing test at the Maternity Hospital on the day she was born. The results of the test led to her having two follow up tests and she was diagnosed as being moderately deaf. It is difficult to describe our feelings at this time. Initially I was sad for my youngest daughter because the first baby wasn't perfect - not for myself but for her. As it sank in, we went through the 'could be worse syndrome'. We'd already lost our precious grandson with a heart disease that couldn't be cured. I work with people with learning disabilities and challenging behaviour, so it could be worse. It was still such a worry. What was the future for her? Would she walk, talk and be able to join mainstream school? I work night shift and watch the programmes during the night which have a person signing. I have very little co-ordination to learn to sign (no chance of managing that).

Then Brian arrived on the scene bringing with him his laptop and endeavouring to explain Lilly's hearing problems. He told us that hearing aids would help her hear. Brian has continued to visit Lilly on a weekly basis. I must admit the amount of ongoing support we receive from him, Dr Hebbar and the team is wonderful and totally unexpected. Each of them is building a relationship with Lilly which will enable her to just see them as an extension of her life and normal to it, rather than as a scary hospital visit. Lilly has the best support of all in her very patient mummy, Lindsey who encourages her independence. She is determined that Lilly will be treated as a toddler, not a disabled toddler.

The only real problem we have encountered is being able to get Lill to wear her 'ears' as we call them. The first few months were a doddle. When her fingers became more inquisitive a packet of skips in each hand or a couple of chocolate buttons proved a useful form of distraction. When all else failed it was songs with actions. Now she has realised the true value of having removable ears. She will now use them to get immediate adult attention. She removes one, holding it out to show she's done it. She then legs it as fast as she is able via the furniture and enjoys the scramble to retrieve it. She gets it in her mouth, where five very sharp teeth are just waiting for prying fingers - good game.

One of our more moving moments was when Lilly placed her 'ear's box' on her Mummy's lap with an 'ear' request as if to tell her she wanted them on. She laughed happily when the request was met. With her 'ears' she can follow us. Without her 'ears' she will on occasions look from her Mum to me to determine which of us has spoken. This is becoming more apparent recently.

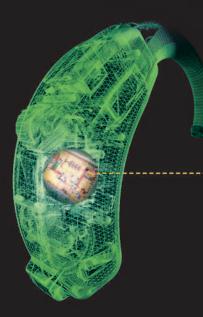
To conclude, I can only say that at this time the only difference between Lilly and my hearing grandchildren is that Lilly has appointments at the hearing clinic. We're really grateful that Lilly's hearing loss was picked up at birth.



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Education of deaf children from ethnic minorities

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Detailed information (keynote speakers, other contributors, accommodation) as well as how to book a place at the congress is available on the website: www.feapda-2005.com email: http://www.feapda-2005.com email: http://www.feapda-2005.com email: <a href="http://www.feapda

Congress location: Palais de l'ONU (United Nations Building) in Geneva

Social Programme

Friday evening	Official drinks provided by the local authority
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Saturday evening	Dinner in the restaurant at the Halles de l'Ile, in the centre of Geneva, on the
	Rhone, with orchestra (cost: 70 francs)
Sunday	Visit to the old city and other key sights; multicultural meal

Registration is possible via the website until 15 September 2005 www.feapda-2005.com

140 Euro (220 Francs) Registration until 30 June170 Euro (240 Francs) Registration after 30 June40 Euro (70 Francs) Saturday evening meal

English is the official language of the Congress. Simultaneous interpretation will be in German and in French. Each national organisation is responsible for its own sign language interpretation where necessary.

Interested in attending?

BATOD members who are interested in attending should contact their Region committee as there may be some financial support available.

Recipe for support pudding

Fiona Horan, Teacher of the Deaf, Sensory and Physical Team, IES, Nottingham

Take some Teachers of the Deaf, mix with some Speech and Language Therapists and Deaf Adults, season with Teaching Assistants and a good pinch of enthusiasm and leave to plan.

Meanwhile, gather together a bunch of keen parents and their deaf children.

Method

Find a suitable venue and ask the parents to come for a weekly or monthly serving of signing, music, stories and activities for their children, with added side orders of conversation, sharing of experiences and outside speakers for them.

This may all sound terribly simple, but of course the best recipes are tested, tried and re-tested. We now feel that we are offering three successful Parents' Groups that cover babies to toddlers and also take into account signing, cochlear implants and hearing aids.

We are staff from two neighbouring authorities, Nottingham City and Nottinghamshire, comprising Peripatetic Teachers of the Deaf, an Educational Audiologist, Speech and Language Therapists, Deaf Instructors and Teaching Assistants. We all recognise the importance of multi-agency working and we have a combination of experience and skills. It was felt that the parents of pre-school deaf children would appreciate a group designed to fit their specific needs and those of their children.

History of the groups

We already had an established group supporting the development of British Sign Language for children and families. This was called Busy Hands and was run on a weekly basis, based at the Ear Foundation in Nottingham. An evaluation of the Nottingham City and partners' ESPP projects (2002-3) identified the need for the establishment of a group of families wishing to support their deaf child in the development of spoken language. We received ESPP funding from 2003-4, which enabled Nottingham City and Nottinghamshire LEAs, working together with partners in health, social services and the voluntary sector, to develop a group for deaf children and their families. The primary aims of the group were:

- to improve effective communication between families and their deaf child
- to improve access to information regarding services available for deaf children and their families

• to improve use and management of hearing aids and cochlear implants.

This group, called 'Let's Listen', has been meeting weekly during term time since September 2004. It is based at the Ear Foundation. This venue was selected because feedback from parents attending other groups supported by the ESPP indicated that this was a convenient and comfortable location.

The weekly running of the group has been the responsibility of:

- © 2 Teachers of the Deaf (City and County LEA)
- 1 Speech and Language Therapist (Broxtowe & Hucknall PCT)
- I Speech and Language Therapy Assistant (Broxtowe & Hucknall PCT)
- ② 2 Teaching Assistants
- © 1 Deaf adult
- © 1 Educational Audiologist.

The group is available to all families of deaf babies and children in the Nottingham and Nottinghamshire area. Children are about 12 months of age on entry to the group. They are welcome to attend until Foundation Stage, or later, depending on the child's needs.

Our third group was established using ESPP funding for 2002. This was a support group for the families of newly diagnosed deaf children, called 'Early Days'. This is intended to support parents during the initial stages following diagnosis. Parents and children can then move on to the 'Let's Listen' group after six months to a year. The group is run on a monthly basis at the Ear Foundation by: © 2 Teachers of the Deaf (City and County LEA) © 2 Teaching Assistants.

What happens at the groups?

'Early Days' is very much about the parents and their needs. We invite some professional speakers, such as the Educational Audiologist, Speech and Language Therapist, and clinicians from the Children's Hearing Assessment Centre. There are also informal sessions when another parent from 'Let's Listen' may visit, or we share information that parents have found on the Internet. The latter led to us compiling a good list of relevant websites. Parents have brought books and toys that they have found useful. Most of all, they bring themselves and their experiences. They talk to each other about their children and the problems they have encountered along the way. They share useful tips on everything from bottle-feeding to how to get hearing aids to stay in. When they have questions, we are there to answer them, or to find someone who can. Meanwhile, the children are in the playroom with our Teaching Assistants. We know it's about time to finish when small escapees appear demanding lunch!

'Busy Hands' is a signing group for parents and children. While parents are with one of our deaf adults, the children are with Teaching Assistants doing planned activities based around the topics that their parents will be covering. These have included transport, food and home. There have also been trips out to a farm, a play area and other local attractions. Photographs of all this activity have been used to make books for children and parents to enjoy signing at home.

'Let's Listen' is probably our largest group at the moment, and two Teachers of the Deaf lead it. There is a joint session for parents and children, based around music, interaction games, listening activities and stories. We have used 'Music Space' for several sessions which have proved popular with everyone - especially those amongst us who cannot sing! What a relief to let a real musician take control!

There are also stories, activities and games based on these. We have quite a collection of story sacks and boxes with all the requisite props.

After the music or story, the children go off to have a snack and to play and the parents have a follow-up session on the morning's activities and the chance for a coffee and a chat. This group also have trips out and very good end of term parties!

Our parents are all 'regulars' and some have been known to attend all three groups at once! Firm friendships have grown out of these meetings and when the time comes for children to 'graduate' to the Foundation Stage there are a lot of sad faces children and adults alike. I began, for some reason, with a cooking metaphor, so I may as well finish on the same note.

We knew we had the right ingredients; the quantities and blending seemed to produce the desired result. The proof of the pudding is in the eating and our parents and children keep coming back for more.

BATOD - representing you

Find out where BATOD representatives have been speaking on behalf of members by visiting the BATOD website <u>www.BATOD.org.uk</u> in the Calendar and Coming Events section.

Salford's Early Support

Anne Sharpe, Salford

Salford's Hearing Impairment Team's involvement with the Early Support Pilot Project (now Early Support) was timely because we had been developing a Family Support Plan format to be used with families of babies and young children with hearing loss. The plan was written in the family's own words, giving a brief history and a summary of where the child was at now, as well as what the family felt was needed to support them and their child. It then agreed targets for support, some child related and some family related.

Writing the plan together with professionals was useful for parents. One parent commented, "Family Plans are good because they give you goals, something to aim for." The usefulness to the Teacher of the Deaf was also identified, "I felt I really knew what parents wanted and that made it easier to set meaningful, shared targets."

Inevitably, some of the priorities for parents involved other professionals, eg Audiology, Child Health, so the plan would be sent onto them. Although it was generally well received there was no agreement for such professionals to respond.

Early Support funded a project to develop multiagency Family Support Plans; getting the involvement of other professionals from the beginning, by agreeing the principles of family support plans, the content, how and by whom it would be written, and a commitment to respond appropriately, as part of a co-ordinated family friendly service. Representatives of health, social services, education, early years and voluntary bodies, as well as parents of deaf children in Salford, agreed to develop and use Family Support Plans.

A smaller working group, including parents, audiologists, paediatricians, portage (portage is a home-visiting educational service for pre-school children with additional support needs and their families.), speech and language therapists and social workers was formed to work on this. This multi-agency working group had some fruitful discussions about policies and procedures following diagnosis. The project and discussions were strongly influenced by the participation of parents who were able to give 'real-life' illustrations, which supported the need for a co-ordinated multi-agency support. Although the Family Support Plan was our project 'product', this multi-agency discussion and prioritising of family need, as decided by the families themselves, has become an equally important product. It has made a real difference in our work and is part of the ethos of Early Support.

Parents remain positive about the Family Support Plans, "I like the Family Plans because people know about you and what you want before they meet you", (parent of deaf girl, aged 2 years). Others liked the target setting and review process within the Family Support Plan. "The best thing about family plans is looking back at what we wanted her to do and realising she is doing this." (parent of deaf girl with additional difficulties, aged 3).

The Family Support Plans have been equally useful to professionals, as we can be clearer about how families see their child's needs and family priorities. This helps us work more appropriately and efficiently, eg making appointments at times and places that are convenient for families, thereby reducing missed appointments, or making joint appointments with other professionals, increasing the sharing of information.

One particular example is 'D', a 2 year-old with a rare syndrome leading to multiple needs, including those arising from a profound hearing loss and requiring multiple professional inputs. The Family Service Plan was written after joint discussions with the family and the portage worker, the physiotherapist and Teacher of the Deaf. It meant that we shared information. For example, I understood the impact of her physical needs on her ability to wear hearing aids, the portage worker saw the implications of her hearing loss on her ability to attend to activities. We began working more flexibly; the portage worker could monitor the day-to-day management of the aids, but I could add regular electro-acoustic testing with the hearing aid test box. The targets were agreed so Mum could use one activity that developed D's physical awareness and movement while developing her listening and attending through singing, rather than Mum having to carry out separate activities. The regular joint meetings and review of the Family Service Plan meant we could all celebrate D's progress.

The Family Plans have been equally useful where hearing loss is the main or only special need because it has documented how parents feel about issues such as communication or cochlear implants and targets can be about parents receiving information on these. The plans can be sent to relevant professionals, eg speech and language therapists, which means, as one parent put it, "they know about you and what you want before you go". Again this leads to better sharing of information, which helps us as professionals. Our original Salford Family Plans were incorporated into the Early Support Family Service Plan (which looks at who will do what and sets targets agreed with families) and the Family File (which gives more information about the child's history and family needs) now being used nationally. While some families may like to fill these in themselves, we have found it helpful to share this information together, so we can be sure of what families want, but it is vital that they are completed in the families' own words. Some of our families are not confident in their own literacy skills but they remain keen to know that their views are valued.

We are continuing to use the Family Service Plan in Salford as well as other Early Support products. We are finding the Monitoring Protocol for deaf babies and children particularly useful. It is feeding into the target setting and reviews of the plans, as well as giving parents the detailed information they want.

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Regional conferences contact your Region committee members for details

> BATOD Northern Ireland 8 October Conference and AGM Postgraduate Centre, Craigavon Hospital

BATOD Midland 8 October AGM & Conference ?peripherals to hearing aids?

?peripherals to hearing aids? RSD Derby (TBC)

BATOD Scotland 5 November Conference and AGM - 'Deafness and Literacy' Venue to be arranged

BATOD South 18 November Conference and AGM London

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With financial support from Cochlear Europe the cost of this long weekend is reduced to £345 for a 3 bedroom self-catering villa sleeping up to 6 people (Fri/Sat/Sun nights). A nominal charge will be made of £5 per adult and £3 per child for the conference which includes a buffet lunch and the children's supervised entertainment.

To book please send your family details with a £50 cheque (made payable to The Ear Foundation) to:

Brian Archbold

The Ear Foundation, 83 Sherwin Road, Lenton, Nottingham NG7 2FB



	Audiology and ICT Committee (BATOD NEC)
AA AB	Access Arrangements Awarding Bodies
ADPS	Achievements of Deaf Pupils in Scotland
AGM	Annual General Meeting
ASSE BACS	Auditory Speech Sounds Evaluation Bankers Automated Clearing System
BAEA	British Association of Education Audiologists
BAHA	Bone Anchored Hearing Aid
BATOD BCHA	British Association of Teachers of the Deaf Bone Conduction Hearing Aid
Becta	British Educational Communication Technology Agency
BETT BSL	British Education and Training Technology (UK exhibition)
BTE	British Sign Language Behind the Ear
BW	Body worn
CACDP CAP	Council for the Advancement of Communication with Deaf People Communication Aids Project
CD ROM	Compact Disk Read Only Memory (also CD)
	Children's Hearing Services Working Group
CI cm	Cochlear Implant centimetres
CPD	Continuing Professional Development
CRB CSW	Criminal Records Bureau Communication Support Worker
dB	decibel
DCCAP	Deaf Children's Communication Aids Provision
DEI DEI	Deafness and Education International Deaf Education Instructor
DENI	Department for Education in Northern Ireland
DfES	Department for Education and Skills
DHICE DoH	Deaf and Hearing-Impaired Children Europe Department of Health
dpi	dots per inch
DSP	Digital Signal Processor
DVD ECM	Digital Versatile Disk Every Child Matters
EDLF	Early Development and Learning Framework
EI(C) ENT	Education Issues Committee (BATOD NEC)
eps	Ear, Nose and Throat encapsulated post scrip
ESP	Early Support Programme
ESSAT ESPP	Early Support Service Audit Tool
ESSAT ESPP FE	Early Support Service Audit Tool Early Support Pilot Programme Further Education
ESPP FE FEAPDA	Early Support Pilot Programme Further Education European Federation of Associations of Teachers of the Deaf.
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NEC	National Executive Council (of BATOD)
NGfL	National Grid for Learning
NHSP	Newborn Hearing Screening Programme (internationally UNHS)
NI	Northern Ireland
NUT	National Union of Teachers
OCR	Oxford, Cambridge & RSA Examination Board
OME	Otitis Media with Effusion
P&P(C)	Publications and Publicity Committee (BATOD NEC)
PD(C)	Professional Development Committee (BATOD NEC)
pdf	portable document format (for Acrobat Reader)
pwk	per week
QCA	Qualifications and Curriculum Authority
QTOD	Qualified Teacher of the Deaf
RCSLT	Royal College of Speech and Language Therapists
ref	reference
RNID	Royal National Institute for Deaf people
SAYF	
SCBU	Say How you Feel Programme
	Special Care Baby Unit
SEF	Self-Evaluation Form
SEN	Special Educational Needs
SENDA	Special Educational Needs Disability Act
STTR	Speech To Text Reporter
STRB	School Teachers' Review Body
TA	Teaching Assistant
tbc	to be confirmed
	Teaching Handwriting, Reading and Spelling Skills
tif	Tagged Image File (file name extension)
TLR	Teaching and Learning Responsibilities
ToD	Teacher of the Deaf
MHTS	Mary Hare Training Services
TV	television
UCL	University College London
UK	United Kingdom
UKCoD	United Kingdom Council on Deafness
UNHS	Universal Newborn Hearing Screening
URL	Uniform Resource Locator (world wide web address)
v/f	voice/fax
VI	Visually Impaired
VRS	Video Řelay Services
WAI	Web Accessibility Initiative
www	world wide web
If you have	ve found an acronym in the Magazine that isn't explained in
	then use www.acronymfinder.com to help you work it out!

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BATOD UK

The summer meeting of the **BATOD Northern Ireland** region took place on Tuesday 24 May at Jordanstown Special Schools. The speaker was Sue Boyd from the Belfast Education and Library Board. Sue spoke to the group about the Linguistic Phonics Programme which the Board is currently using in specific schools in the Belfast area. It is an attempt to give a 'second chance' to pupils who may not have succeeded with other reading approaches.

At the end of the evening a presentation was made to Lilian Southwell from the Southern Education and Library Board. Lilian is retiring having served over twenty-five years in the Drumgor Unit. This unit is now closing. The evening was rounded off with a wine and cheese celebration during which speakers took the opportunity to thank Lilian for all her hard work and support for BATOD during this time.

The Annual General Meeting will take place on Saturday 8 October 2005, at the Postgraduate Centre, Craigavon Hospital. Carole Torrance, the BATOD National President will address the meeting.

Some units, both primary and secondary, have recently undergone an inspection/survey by the Department of Education, Northern Ireland (DENI). The Department seems to be considering how units are facilitating the inclusion of deaf pupils into mainstream. Reports are eagerly awaited.

Members of the Northern Ireland Region were saddened to learn of the death of Lilian Warnock. Lilian, a Teacher of the Deaf and an audiologist, had filled numerous teaching posts. Upon her recent retirement she had been Head of Service for the Peripatetic Service of the Belfast Education and Library Board and an audiologist working closely with the ENT Department staff in the Royal Victoria Hospital, Belfast. Lilian had been an active member of Batod NI filling many offices within the Regional Group. She will be greatly missed by us all. Margaret Nelson

The **BATOD Scotland** committee continues to be in contact with Sodexho regarding the Conference in November 2004. So far we have not had a reply to the letter detailing the concerns of delegates.

Margaret Highet responded on behalf of the committee to a consultation document on Code 56.

The BATOD Scotland website page was further discussed and it was agreed that a newsletter would

be produced and that members would be asked for suggestions and items for the site.

The launch of the Blue Skies project in Scotland highlighted the issue of providing and using ICT equipment with Deaf pupils. The committee discussed this and the possible involvement of the Scottish Executive.

Our May conference had to be cancelled as there was a clash of dates with a conference to be held in Glasgow.

The 2005 AGM has now been arranged - it is to be held on 6 November and will be in The Golden Lion hotel in Stirling. The focus of this conference will be literacy.

Moira Philip

The **BATOD South Region** Conference and AGM will be on 18 November at the Runnymede Centre, Chertsey. The subject will be 'Speech perception measures and assessment'.

An email has been received from Essex. The writer describes not being allowed to attend clinics or liaise with health professionals. It is thought to be a funding issue!

Congratulations to Angie Jenner as was, who is now Mrs Souter. Angie has served as a committee member for the South Region.

Recently reviewed in the BATOD Magazine, the sign picture cards for visual language learners created by Emma Kelty have resulted in further resources. A numeracy pack is available directly from Emma who now has a working and secure online shop at <u>www.entresources.co.uk</u> Please pass on to anyone who may be interested.

Officers, post-AGM: Angie Reese and Sheila Smith are resigning as Chair and Secretary. Cindy Paulding is to remain as Treasurer. Mary Ensor may take on role of Secretary.

Sheila Smith

The **BATOD North Region** Committee has not met, either face to face or even via a telephone conference call, since the AGM of October 2004. There will therefore be no major conference this autumn.

Sue Searle and Sue Frazer organised a 'local' minimeeting at Scalby School in Scarborough. The meeting was a morning session and about 30 delegates attended to hear Sue Lewis from Mary Hare explain about the ACE Test at Key Stage 2 and beyond and applying it to the assessment and monitoring of language development in deaf children.

There are now two vacancies on North Region Committee - Secretary (to replace Chris Payton) and Treasurer (to replace Laverne Smare). As yet we have had no offers to fill these vacancies. Bev McCracken is helping us out with the Treasurer post. Chris Payton

ICT for teachers



Welcome to this edition of the ICT Newspage. If you would like to contribute anything to this page, please contact Sharon Pointeer, the ICT Newspage Editor <u>ICTNewspage@BATOD.org.uk</u>

Are you being spied upon?

Spyware can range from relatively benign cookies, through those annoying pop-up adverts, to more serious problems such as premium rate diallers, system monitors and key loggers. I was particularly disturbed to read about a recent case in the UK which involved spyware downloading pornographic images on to a school computer bringing staff under suspicion. Making sure you have a firewall set up on your computer can help to protect you from such invasions.

Infant Internet

A Yahoo news story by Ben Feller reported that in the USA around one quarter of children in early years education are already using the Internet.

"Some 23% of children in nursery school - kids aged 3, 4 or 5 - have gone online, according to the Education Department. By kindergarten, 32% have used the Internet, typically under adult supervision.

The numbers underscore a trend in which the largest group of new users of the Internet are kids 2-5. At school and home, children are viewing web sites with interactive stories and animated lessons that teach letters, numbers and rhymes."

The article states that a favourite computer activity is writing an email to a grandparent! There is, however, also a note of caution from Mark Ginsberg, executive director of the National Association for the Education of Young Children, who says "*The potential danger is putting 3 and 4 year olds in front of a computer lesson that demands graphic skills or word-recognition knowledge for which they are not ready.*"

Resources

Curriculum guidance for the Foundation Stage suggests that children need to develop an awareness of the technology that is all around them at school, in their homes and in the local environment. There are lots of ways that this can be done which also give opportunities for language development. For example a trip to the supermarket takes in sensing and control with the automatic doors, input and output devices with bar code readers and electronic point of sale and use of credit/debit cards and pin numbers. There are now lots of interactive toys available, such as the awardwinning calculator cash register which comes complete with play money and activity guide, which encourage technological role play. Realistic batteryoperated microwaves, washing machines etc can also help to develop ICT awareness in young children. Toys like this only cost a few pounds and can be bought in shops such as the Early Learning Centre or online at <u>www.elc.co.uk</u> or <u>www.justchildsplay.co.uk</u>

Remote control and programmable toys can also be used very effectively. There are lots of these toys aimed at pre-school children. At the BETT exhibition I was very taken with a remote control car which was controlled by a steering wheel that the child uses, rather than the conventional hand-held controller with buttons for directions.

Years ago I remember a friend buying a teddy bear for her deaf baby. The idea was that it would encourage her baby to vocalise, as the creature was sound-activated and its eyes lit up when it 'heard' a sound. Nowadays there are many sound-activated toys which dance, sing and walk towards you when you call out to them. Another trip around Toys 'R Us, or a quick search on eBay, gives lots of ideas ranging from Winnie the Pooh to Gremlins.

If you are in the market for a new mouse, take a look at the KidzMouse. These delightful, easy to use, two button mice are small and comfortable for little hands. They come in a range of styles including a ladybird, a bee, Mickey Mouse and a 'design it yourself' version. They can be purchased from many of the main ICT suppliers such as REM, 2Simple, RM etc. List price is around £14.95, but a search on the Internet shows some suppliers selling them for as little as £10. More details of the range of KidzMouse products, which include keyboards and very snazzy headphones, can be found at <u>www.kidzmouse.com</u>

Robot Wars

In the May ICTNewspage I talked about Robosapien for teaching aspects of control programming. This remote-controlled toy can regularly be seen for sale, often at a good price, on eBay. However if you are thinking of buying one this way, you need to make sure that what you are bidding for is the genuine article. There are several cheaper copies available, which look identical, but which do not have the programming facility. These only take one instruction at a time and there is no facility to build up sequences of instructions and then execute them. Whilst they are amusing toys, they are of little value for developing ICT capability and sequencing skills. Models to avoid include Roboactor, Mini Robosapien and those described as Robosapien style.

Press Releases

Sherston's new infant Maths CD-ROM The Money Mice is designed for Key Stage 1 and aims to teach money-related learning objectives through ICT. Presented through colourful and engaging graphics, each of the six money-related activities on this CD-ROM are designed to help children to practise essential skills like coin recognition, spending, buying, selling, earning and saving money. Further information, including pricing, can be found at www2.sherston.com

All About Me

Childline have launched 'All About Me' - a new teaching resource which aims to enable children with Special Educational Needs (SEN) to achieve a better understanding of themselves and how they interact with the people in their lives. Using a range of music, art, multimedia and drama activities, All About Me aims to build children's self-esteem, help them to understand their feelings, improve their communication skills, and enable them to identify people whom they trust and would talk to if they were feeling unhappy or unsafe. The ready to use teaching materials, which can be photocopied for use in the classroom, make use of the Widgit Rebus symbol system. Full copies of the pack are being distributed to all SEN schools in the Greater London area, but a PDF version of 'All About Me' is available for schools across the UK to download at www.childline.org.uk

Web Sites worth a visit

Early ICT - this is a section of the Kent NGfL web site which contains guidance for teachers on a number of ICT-based activities for use with foundation stage pupils. There are sample lessons, downloadable worksheets and some online games for the pupils to play.

www.kented.org.uk/ngfl/earlyict/index.htm

Accessibility of web sites has become an important issue, especially in the light of the DDA. A number

of museums and libraries recently won awards for their web sites in the Jodi Mattes Accessibility Awards.

One of particular note for us was Milestones Museum which is run by Hampshire County Council. The first local authority website, and one of less than a handful of museum websites, to provide video clips with BSL and to allow BSL users to absorb the wealth of information available on the website.

www.milestones-museum.com

Tyne and Wear Museums - a website of a large museum, which demonstrates that visually attractive websites can meet exacting web accessibility standards. It is one of approximately 300 websites in the sector which meet WAI (Web Accessibility Initiative) guidelines Level AAA. This site also has BSL video clips.

www.imagine.org.uk

Early Years Exhibitions near you

30 September-02 October - Early Years London 23-24 September - Early Years Harrogate, Harrogate 18-19 November - Early Years Glasgow, SECC



<u>www.BATOD.org.uk</u>

BATOD Publications and Publicity Exhibitions co-ordinator

We are looking to expand our small P&P committee to share out some of the tasks that we carry out for the Executive Council.

BATOD attends about 4-6 events per year with the BATOD information boards, publications etc. We need someone, not to be on NEC but who wants to lend a hand/be involved in BATOD and who can negotiate the stand position, set up the exhibition and arrange staffing when the information about events arrives.

For the willing volunteer there is the opportunity to attend events at no cost to themselves - BATOD pays expenses - and to meet a wide range of professionals in education.

Please contact Andrea Baker (P&P chair) via <u>secretary@BATOD.org.uk</u> to find out more.

Birmingham's new training resource

Birmingham Specialist Support Service Team for Children with Hearing Impairment

The Birmingham Specialist Support Service, Team for Children with Hearing Impairment, has just completed a major project to produce a new DVD which incorporates accompanying resources for use as part of their training package to schools. We hope that Teachers of the Deaf, Teachers and Teaching Assistants in other areas will also find them helpful.

The whole process of developing the resources has put us on a huge learning curve involving interviewing video companies, writing scripts, organising filming, checking sources etc. We have had to work to tight deadlines and, when developing materials, writing and re-writing the text, it seemed as though we would never finish. I don't think any of those involved will ever view a video or written materials again without recalling the trials and tribulations of the process!

We are now very pleased with the finished article and feel confident that it will form a crucial part of our training provision.

The DVD includes video footage demonstrating strategies to support the inclusion of deaf children in both primary and secondary phases, and is available with subtitles and BSL. Included in the DVD are eleven audio clips which simulate hearing impairments, listening conditions and amplification. Items in the resource may be used to support staff in Early Years, Primary and Secondary phases. These include A4 posters, booklets to complete with the child's details to distribute to teachers and teaching assistants, and information sheets to support access to the curriculum, audiological support and transitions.

If you are interested in purchasing a copy, the DVD costs £47.00 (incl VAT). Also available as a package are the DVD and four posters at £57.00. One poster is about Glue Ear, and the other three are designed to raise awareness with staff and peers, one poster for each phase. Contact Joan Jones, Inclusion Officer. Inclusion Team Council House Extension, Margaret Street tel: 0121 303 2619 Birmingham fax: 0121 303 6664 email: joan jones@birmingham.gov.uk

Obituaries

Sadly before this magazine went to press I received several obituaries for BATOD members from the regional committees. Regretfully there is not space to print the text kindly supplied by colleagues and friends and we are giving consideration as to how such obituaries can be available, possibly via the BATOD website in the region section.

Wales

Susan Board, 1949 - 2004

Head of Hearing Impaired Service Bridgend County Borough Council, South Wales Sue died peacefully at home with her family on the 28 September 2004, after a brave and determined fight against her illness.

Northern Ireland

Josephine McCallion 1945 - 2004 Senior Teacher for Pre-school Special Needs

Service until her retirement in 2001. She died on 28 December 2004 after a short illness.

Anne Francis Ross 1935 -2005

Head of Educational Audiology Service in the North Eastern Education and Library Board. Anne died on 27 February 2005. Her approach to cancer was remarkable - she said it had enhanced her life - as she learned to appreciate every day and through it made many new friends.

Lilian Warnock, 1937 - 2005

Lilian was Head of Belfast Peripatetic Service, a great friend and confidante to all her staff. She died on 14 May after a long illness

Scotland

Mary Brennan, 2005

Director of ADPS and Course Organiser of the ToD training course at Moray House. Mary died on 23 June 2005, after a period of illness. She will be remembered as a tireless champion of the human and linguistic rights of deaf people and as a deeply caring and generous person.



BATOD website

Ann Underwood and Paul Simpson have become adept handlers of new information on the website and have created new folders, keeping the content up-to-date and the membership informed about many situations.

During the past few months the orange menu bar at the side of the page has been revamped to provide shortcuts to files that contain the most requested information by callers and email queries. The recent saga about reasonable adjustments and the examination boards has been catalogued for members to read almost as soon as the information has become available. Even the exam boards themselves are checking to see what we are posting!

The average number of visits each month is now approximately 10,000 - double the numbers that were visiting in the same period last year. Over 2,000 visits a month are made to our situations vacant page which is in regular use by those seeking Teachers of the Deaf.

In the last month over 1,120 visits have been made to the Training as a Teacher of the Deaf page and since we began keeping these records we have served over a quarter of a million pages.

The calendar entries are a popular resource offering a wide range of courses for continuing professional development. Shortly after the index for the Magazine 'Focus on Cochlear Implants' appeared there were requests from Prague for copies of the

Ann Underwood, Website Manager

magazine and subsequently the main set of articles about Cochlear Implants was placed in the on-line Magazine folder. There have been several emails expressing delight at this growing resource. It is hoped that some of the topic folders that are in lesser demand - such as working with deafblind youngsters - will become the place to publish articles and share information.

In the 'Association' section there is an area dedicated to the regions. This contains a webpage of the latest region reports to NEC. BATOD Wales put up their newsletter. Our webmaster Matthew Underwood is able to make a folder directly available to regions to put up their own information if they feel able to, but this will involve ensuring that the regions have someone who is able to follow the format. This would ensure that all parts of BATOD have the 'BATOD.org.uk' address - and there would be no costs involved as the BATOD website is able to host this. Regions should contact Ann Underwood if they wish to follow this up. Meanwhile items to be put directly in the region folder can be sent to <u>website@BATOD.org.uk</u>

The site search engine relies on keywords being identified in a special folder. All the pages on the website need to be dealt with and this is a slow task. Volunteers have undertaken to follow detailed instructions and work through allotted pages so that Ann and Paul can concentrate on other facets of the website. More volunteers would be welcomed to speed up the task and everyone doing the job is warmly thanked.

BATOD and **RCSLT** meeting

Meeting with the Deputy Chief Executive of the Royal College of Speech and Language Therapists, Anne Whateley, reported by Paul Simpson, Secretary BATOD. **Context**

Guidelines for cooperative working between ToDs and SALTs are over ten years old. We need to decide whether or how to update them, particularly in the context of Every Child Matters and increased multi-agency working.

Summary of the main points of the meeting

- It was agreed that liaison and cooperation between the two professions had greatly improved in most areas since 1993 when the original guidelines were drawn up.
- There had been no significant revision of them since this date.
- As circumstances had improved, the need for such guidelines had changed.
- It now makes more sense to draw up guidelines about the implications of such joint working for managers and commissioners, particularly during the development of the new Children's Services which are likely to be led by people unfamiliar with this field.
- Anne Whateley will consult the RCSLT's advisers, trustees and Professional Development board and then contact BATOD.

Recommendations/ discussion/ action points for BATOD

 If felt to be appropriate by both organisations, BATOD should contribute to a working party to review and rewrite the guidelines for a different audience as described above.

Deafax seminar at Reading University

In June 2005, Chris Payton attended a Deafax seminar at Reading University during the half-term holiday as a representative of the A & ICT Committee. The guest speaker was Professor Harold Johnson from Kent State University Ohio USA. The subject of his talk was using the Internet for enhancing professional development among deaf educators on an international scale. The initial collaboration is between the UK and the USA, specifically between Kent State and Reading Universities.

The three main aims of his project were to reduce isolation, recognise excellence and foster collaboration. His website address is www.deafed.net Harold mentioned a 30 day free trial using the 'Inspiration' program. His guiding principle is taken from Confucius: 'Tell me and I will forget. Show me and I will remember. Let me do it and I will understand.' He emphasised the overriding importance of education as a problemsolving activity related to real life experiences. This was in the context of the effective use of technology, communication and the application of new knowledge. He felt that schools currently did not approach education in this way and were not providing a true 21st century learning environment. Much more learner-centred, collaborative and active approaches were called for.

He wanted to develop the use of web-based videoconferencing in order to observe student progress and see so-called master teachers in action. He felt that this would help to reduce the isolation of ToDs especially in the USA. His aim was to develop a

Report by Chris Payton, A & ICT Committee

virtual professional development school exhibiting best practice and with excellent university/school links. Points about quality of images (eg frame drops, out of synch, etc) were mentioned but cheap web cams were a reasonable starting point for cash strapped organisations. The more expensive equipment would enhance this quality as would powerful connections. In the USA they had VRS (Video Relay Services) which is free to US schools. In the UK 'Messenger' is often used. Harold's pet project currently is a real-time, real-learning Science programme called 'Jason' which will involve linking with NASA in Autumn 2005.

Both Harold and Ken Carter from Deafax look forward to future links between their respective universities and Harold is to provide some funding for initial efforts in this direction. Ken will keep BATOD informed of any developments and is very keen to keep his links with us.

The afternoon session began with a live web link-up, using a web cam, with Harold's colleagues at Kent State University. This gave everyone present a clear impression of the possibilities for using this technology in the realm of deaf education.

The remainder of the afternoon was given over to short talks by colleagues from Deafax outlining their remits and giving information about their projects. These included DCCAP, Blue Skies, New Horizons and Deafchild UK, with a number of speakers taking part. The problem of an ad hoc approach to government funding of such projects was discussed and concerns were expressed about their continuity.

Compression without tension

Ana Hyde

A spark of inspiration on a hot day at Oxford Brookes University whose strongest feature doesn't seem to be the air conditioning! The organisers did everything to beat the heat for a fruitful event not just with an abundance of fruit, but also with contagious enthusiasm. Finishing my long day after the conference 'Deafness and Literacy', I thought 'What did I learn today?'

A rewarding feeling of enriched experience enveloped me. Instead of the usual headache after being showered with information, I felt refreshed and energised. Undoubtedly, all of us are aware of the importance of literacy for deaf children. However, it was interesting to follow the speaker's views for potential stretching of our teaching efficiency or a justification of the present strategies employed. Which of them is the key priority? No doubt - comprehension of reading.

How to improve this indispensable skill without tension is what the conference approached from different angles. All the presentations highlighted, more or less, the finer points of various language acquisition methods. Add to this the intensive discussions during the breaks and the picture of the benefits of attending the conference will be fuller.

At the end I realised: whatever the topic, I can draw a conclusion that comprehension of reading is the focus of our interaction with deaf children. More strategies - more smiling faces in the classroom. It was worth enduring the summer heat wasn't it?

Ed's Note There will be a full report in the November Magazine and details of a CD/DVDof the proceedings



Title of Book Publisher Distributer ISBN Publication date Price Reviewer Let's Sign Early Years Co-Sign Communications Forest Books 0-9542384-1-9 2003 £7.99 Ann Underwood

'Please sign with your child

- there is nothing to lose and everything to gain.' Sandra Teasdale closes her introduction to this collection of signs from Cath Smith's 'Let's Sign' collection. Early Sign includes over 300 signs which are suitable for young children at home, in nursery or other settings. The spiral bound book begins with some discussion about using BSL signs and moves on to explain the structure of the signs - basic handshapes, directional movement, classifier handshapes, verbs and inflections. Cath's drawings show clearly facial expressions which give more meaning to the drawings and the signs.

After several pages of signs in everyday use the book becomes a sign dictionary with each picture supported by a clear verbal explanation of how to make the sign.

The wide development of baby sign groups has made these materials popular with hearing groups. Many of the Sure Start Centres run classes which encourage this form of communication between mums and babies as well as encouraging good parenting behaviour. There is a debate amongst Speech and Language Therapists about whether baby signing is to be encouraged with hearing babies but some parents of deaf babies have commented that they don't feel so 'different' when they join. There are many action rhymes that are almost sign and most of those taking part feel that this is an extension of that activity. Everyone has great fun and the babies appear to enjoy the 'play' deaf or hearing.

Let's Sign Early Years is supported by A3 posters/ mats 1 & 2 and an A4 keepsake sheet. The laminated poster charts are 17" x 12.5" and have 48 of the most useful first signs for babies and young children. This set is £6.99. A recent development is a set of 48 laminated flash cards with a large image of the sign and word on one side and the word fingerspelt plus description on the reverse. (ISBN 0-9542384-5-1 price £9.99).

Cath's attractive characters make splendid pictures to illustrate the signs and if, as a result the undertwo year-olds can communicate their needs, preferences and desires clearly, then indeed *'there is everything to gain'*.

00000	Quality
$\odot \odot \odot \odot \odot \bigcirc$	Value for money
$\odot \odot \odot \odot \odot \bigcirc$	Educational usefulness
\odot	Overall

Title of Resource Published by Date of release Price

Reviewer

OtiKids booklets Oticon autumn 2004 free from Oticon also download from <u>www.oticon.com</u> recommended reading section Corinda M. Carnelley Peri ToD, Croydon

These booklets have recently been published by Oticon and endeavour to provide families and professionals with further information after the fitting of post aural hearing aids.

The titles include; Parents' Guide, Teacher's Guide, All about FM, and Family Notebook. They are printed in colour in an A5 format.

The 'Parents' Guide' is particularly informative; covering what causes hearing loss, the benefits of hearing aids, and helping your child to communicate. There are black and white photographs throughout, and clear diagrams. The explanation of the audiogram is extremely helpful.

The 'Teacher's Guide' is also well laid out and clear. Topics covered include helping children with a hearing loss, and how listener-friendly is your classroom?

'All About FM' not only covers products made by Oticon, but other systems are shown and discussed. This particular booklet talks about noise, distance, and reverberation in such a way as to be accessible even to the most techno-phobic mainstream teacher.

The 'Family Notebook' has lots of questions for a parent to consider such as "Have you noticed any changes in your child's speech now that hearing aids have been fitted?" and is a good supplement to the Parents' Guide.

These booklets do not give us any new information. They are extremely clear to read, however, and easy to follow. They are a good addition to the 'Information for Parents' file.

Image: Second systemQualitynot applicableValue for moneyImage: Second systemEducational usefulnessImage: Second systemOverall

Your candidates need you!

Jenny Baxter

Access arrangements (AAs) for all public exams are under review. Although a number of AAs will have to change in the near future, as yet BATOD cannot predict what will happen over language modified papers, but we have been told that Awarding Bodies (ABs) will have to find ways to allow greater modification at source so that the papers are available to candidates with all types of disability and also because e-assessment is on the way. (BATOD needs your comments on e-assessment for deaf students.)

BATOD has always promoted the advantages of modification at source, so why this appeal? At a recent meeting called by QCA, I was told by a person responsible for AAs for one AB that there was difficulty in finding people from the BATOD/NATED list of accredited modifiers who could be released from their professional commitments to attend meetings during working hours. (When working at source one usually has to commit to a two-day meeting and for certain subjects it may be necessary to attend a further meeting.) Since most of the panel of setters are practising teachers, they too have difficulty in getting out of their teaching and other responsibilities. As a consequence, some ABs try to arrange a number of meetings at weekends or during half term holidays. I have always been fortunate that my Head of Service recognises the importance of the work I do with ABs and has supported my involvement. I suspect that other managers may not have his vision or ToDs may be working in a situation from which they cannot be released. One's Service/employer is given money by the AB to pay for cover and may keep this money even if cover is not provided.

If you are already on the 'BATOD/NATED list' please try to offer your services for this important work. If you are interested in becoming an accredited modifier please contact me to request guidance materials, which set out the principles all modifiers should try to apply. You will be requested to undertake an assessment item, which gives one the opportunity to demonstrate how successfully one can apply the principles. Please consider putting yourself forward as each AB produces hundreds of papers across a range of levels of exams, from Entry Level and GCSE to A Levels and vocational exams for post 16 students. Contact details: Jenny Baxter, 64 Brunswick Street,

Contact details: Jenny Baxter, 64 Brunswick Street Sheffield S10 2FL tel: 0114 2216504 email: <u>exam-arrangements@BATOD.org.uk</u>

Reviewers wanted Looking for new materials? Run out of cash in the budget?

If you are willing to give some time to reviewing materials and writing a report - in the context of your work with deaf children - maybe you should consider becoming one of the team of reviewers for the BATOD Magazine.
You are given a format/structure to report on items and usually the publisher/supplier allows you to keep the materials.
BATOD members get to read your comments when the review is published.

Contact the Reviews editor - Corinda Carnelley email: <u>magreviews@BATOD.org.uk</u>

Not a BATOD member?

Membership fees help to provide this Magazine and support the work carried out on your behalf as a ToD. If you value this provision then join BATOD and ensure the work continues.

Don't delay - join BATOD today

Working with a deaf child? Need professional backup?

Learning Support Assistant Teaching Assistant Communication Support Worker Communicator Nursery Nurse Special Support Assistant Intervenor

you are welcome as an ASSOCIATE MEMBER Special Membership fee £20.00

joining is easy... membership forms can be downloaded from the BATOD website

www.BATOD.org.uk

and follow the Association/BATOD membership benefits include 5 Magazine per year regional meetings for training and networking

Minutes of a Meeting of the National Executive Council of the British Association of Teachers of the Deaf, held in Birmingham on 13 March 2005

Present: Carole Torrance (President); Alison Weaver (President Elect); Paul Simpson (Secretary); David Hartley (Past President); Bev McCracken (Treasurer); Ted Moore (Consultant); Gary Anderson (Assistant Secretary); Andrea Baker; Jenny Baxter; Moira Butcher; Steve Dart; Teresa Degnan; Tricia Gibbons; Lucy Leith; Elizabeth Mackinder; Margaret Nelson; Chris Owen; Chris Payton; John Shaw; Lys Thomson; Ann Underwood; Hilary Ward; Stuart Whyte.

The President welcomed everyone and new members to the meeting.

1 Apologies for Absence

Moira Philip, Sharon Pointeer, Fiona McKenzie, Helen Weston, Helen Donnellan.

2 Minutes of the Meeting of 4 December 2004

- 4.7 should read BATOD 'Language of Examinations' document.
- 5.5 Linda Watson will replace Clare Gallaway (not has).

Chris Owen proposed and David Hartley seconded that these were an accurate record.

Action: It was proposed and agreed that in future a hard copy of the previous minutes will be sent with the NEC pack by the Secretary.

3 Matters Arising from Action Sheet

- 1 (3.4) Gary Anderson is now Assistant Secretary.
- 2 (3.7) Chris Owen has completed a collation of feedback re Communication Modes & Structure of Services.

Action: Chris Owen to send to Secretary before Easter Holidays, who will email to NEC membership for comment.

3 (4.1)The Secretary has followed up with the JCQ. Lobbying has proved partially effective and details are on the website. Changes currently only apply to endorsed certificates. RNID has secured an Early Day Motion expressing concern about such unannounced changes.

The Secretary paid tribute to RNID and NDCS for their work on this matter.

There are a number of unresolved issues still to be followed up including the use of oral communicators.

A face to face meeting is planned with JCQ. It is hoped Jenny Baxter can attend. Jenny Baxter reminded the meeting of previous work carried out and proposed some wording for an endorsed certificate.

"The form of assessment was not appropriate to enable candidates to demonstrate knowledge, understanding and skills without the implementation of special arrangements."

4 (5.4) Steering Group discussed succession planning for the Magazine in the light of Ann Underwood's planned retirement in 2007. A small working group has been composed to look at future opportunities and met recently. Action : The next meeting will take place after the next Steering Group in April.

- 5 (6.4) Telford & Wrekin LEA has put in a funding bid for a European centre for inclusion. If successful there will be money to convene a meeting with colleagues from other countries to consider minimum Standards for Training of Teachers of the Deaf across Europe. There are several countries with less well established training compared to the UK. FEAPDA is named as a Partner.
- 6 (6.5) Wavemakers leaflets were distributed to Regional Committees to seek outstanding youngsters for the Award.
- 7 (8.1) Telephone conference call dates must be sent to the Treasurer who reminded the NEC about sending him an email re committee dates and those involved.
- 8 The Secretary has sent out details re three-way phone conversations.
- 9 (8.6) John Shaw will write to members in the South West region to encourage greater participation.
- 10 (9.2) BATOD CPD log will be discussed by PD committee.
- 11 (9.3) Ted Moore will write an article for the magazine (and website) re Pensions once STRB has reported on workforce reform and other issues.
- 12 (10.1) FEAPDA Conference 14 16 October in Geneva - Steve Dart hopes to go from Wales.
 Other regions are considering take-up of the £100 bursary.

4. Correspondence

The Secretary highlighted information received.

- 4.1 An email received from Miranda Pickersgill seeking BATOD's advice and support regarding a feasibility study looking at qualifications for educational support staff including Communication Support Workers and Deaf Educational Instructors in schools. CACDP has set up a small working group to investigate need and demand for :
 - i) generic qualifications for support staff working with deaf students and colleagues.
 - ii) professional qualifications for specialists known as CSWs and DEIs in schools and colleges.
 CACDP is seeking a range of information relating to numbers of staff, qualifications, roles, etc.

Action: The Secretary to reply to Miranda and Wendy Martin to refer to HOSS Forum for feedback and advice from Heads of Services and schools.

4.2 Steering group wrote to Burwood Trust regarding funding. Details of a bid for a particular project are required before further advice can be given. The Secretary suggested that the survey would be an area for consideration.

Action: The Secretary will contact Burwood Trust to find out if this project would be appropriate.

4.3 The Secretary received a letter from the special arrangements officer at the JCQ regarding exams. Concern was expressed that the member was also a member of BATOD and presumed to be promoting the Association's views.

Action: Paul to write back to explain that BATOD has guidelines for representation from the Association and clarifying BATOD's stance on this topic.

4.4 Miranda Pickersgill informed BATOD about the CACDP Conference on 3 November entitled 'Return to SENDA.'.

Action: BATOD to support this conference according to guidelines provided by P&PC.

4.5 Jean McIlroy wrote to thank NEC for the book token sent to her in recognition of her service on NEC.

5 President's Remarks

5.1 This year was the first year that BATOD used a Conference Coordinator. The success of this will be reviewed.

The event was well received by those who attended and evaluations were positive. Carole Torrance thanked Hilary Ward for coordinating the Conference. Unfortunately there was a smaller turn-out than usual and the conference made a loss overall.

- 5.2 The President thanked new members for coming forward and joining NEC.
- 5.3 Constitution Review A small working party will meet on Friday 10 June before the next NEC meeting. Ted Moore, Paul Simpson, Alison Weaver, Bev McCracken are leading this activity to review the constitution.
- 5.4 Committee representation at Steering Group -Steering Group proposed that committee chairs should be invited on a rotation basis to attend the Steering Group Meetings.
- 5.5 Charitable Status previous application was turned down. This is a larger issue that needs more time than committee meetings allow. It requires a meeting just to discuss this in relation to our aims which currently make the Association ineligible for charitable status. CPD/training does make BATOD potentially eligible.

Action: Steering group to confirm a September date and any member of NEC may attend. The meeting might include an outside speaker and will consider new information and a plan to take this forward as a viable proposition.

- 5.6 Survey BATOD is in negotiation with NDCS and Scottish Survey (ADPS). Unfortunately Mary Brennan is seriously ill. Marian Grimes will be taking ADPS forward.
- 5.6.1 The next BATOD survey was set for June/July 2005. This is now an unlikely timescale. It is important that there continues to be a survey to collect data etc, but the structure needs amending.

Action: Ted Moore/Paul Simpson to raise this at a forthcoming meeting with RNID/NDCS on Tuesday 15 March 2005.

6 Secretary's Remarks

6.1 A letter from OCR in response to Sharon Pointeer's correspondence regarding special requirements and claimed that Teachers of the Deaf wished that 'indications on certificates should be removed' as 'Deaf candidates have the right to fail and the right to a fully fledged qualification'. Alison Weaver attended a meeting in June 2003 in which the view was that there should be a fairness around the awarding of certificates.
Subsequent to this letter the QCA have intervened for this year's exam arrangements. The secretary invited NEC to look at the file he has kept regarding

website.
6.2 The Secretary highlighted 13 public appointment vacancies for GTC. Barry Carpenter is a current council member and sympathetic to issues relating to advisory and support teachers but it would obviously be helpful were other BATOD members to be involved. Attendance is a significant commitment.

all special arrangements. Details are on the BATOD

6.3 The Secretary reminded NEC about feedback from BATOD membership re the website. It is used significantly by job seekers. The South Region indicated it would be helpful to promote audiology. It is possible to keep members informed of events as they happen (eg reasonable adjustments issue). Parents use it. The number of visitor hits has increased.

7 Treasurer's Report

A written report was submitted. This does not show conference details, which will be reported at a future date.

BACS-TEL is the replacement for the old BACS scheme but does not affect current BACS arrangements.

8 Reports from Regions & Nations

8.1 BATOD South

- a) Examination arrangements concern was expressed about the removal of the use of oral communicators in exams and the Region welcomes ongoing lobbying by BATOD.
- b) Jenny Baxter explained system of modification of papers. Sometimes a ToD's recommendations are not accepted by exam boards. Accredited modifiers are not always used.
- c) Concern from a London LEA regarding the management of its Service being transferred to a local special school. Ted Moore's advice will be sought as consultant.
- d) John Shaw explained how his school provides professional support and advice to the SEN department of a Local Authority.

8.2 Northern Ireland

The Special Interest Group has changed from Cochlear Implants to Early Years. The sad death of Ann Ross was noted.

8.3 North Region

- a) Colin Peake took over as Chair at AGM. Chris Payton resigned as Secretary. Tricia Gibbons is now an elected member of NEC.
- b) Laverne Smare has resigned as Treasurer. A new treasurer will be sought.
- c) Discussion took place around the size of the North Region. There are two active groups in the west of the region around Manchester and Merseyside. Is it too big as a region?

This broadened out to discuss challenges around meetings and attendance at conferences across the Regions and Nations within/without BATOD.

Action: To be discussed further at the NEC meeting in June on Regional issues and in the context of the special September meeting.

8.4 Midlands Region

- a) No report tabled.
- b) The last meeting planned the twilight meeting in May and Annual Conference in October.

8.5 Wales Report to be sent

- a) Committee meeting took place last week.
- b) Recent meeting had to be cancelled.
- c) Training issues emerged and a new initiative within North Wales.

8.6 South West No report.

- 8.7 Scotland
 - No report.

9 Reports from standing Committees

- 9.1 Audiology & ICT Committee
 - a) Draft ear mould policy adopted and is now official policy.

Action: Secretary to adjust website to reflect this.

- b) Audiology refreshers will be available on CD.
 A draft policy on audiometric assessment is to be discussed.
- c) NDCS has published guidance on Radio Aids.
- d) Suggestion to link the home page of the website to Audiology section and to other external links eg for students in training.

Action: Website Manager to advise if this is a viable option.

- As a result of the committee's deliberations during the NEC meeting the following points were also made.
- National Committee for Professionals in Audiology (NCPA). David Hartley and Stuart Whyte to attend next meeting.
- David will take guidelines for Teachers of the Deaf working with CIs (ICTOD).
- Draft policy on Teachers of the Deaf and audiometric measures produced to ask NEC to adopt them.
 Stuart to approach BAEA and BSA for comments before going on website. This is with a view to ensuring safeguards for ToDs working in this area.

Action: Feedback to Stuart by email.

9.2 Educational Issues

- a) Articles about Communication modes and Types of Services for Deaf Pupils are ready for final scrutiny by NEC before publication on the website.
- b) Good links with secretary as rapid response to issues. The committee congratulated the Secretary.

Action: Chris Owen will send next draft guidelines on communication modes and models of services to NEC for further scrutiny before going on website.

- As a result of the committee's deliberations during the NEC meeting the following points were also made:
- Long discussion about examinations especially in relation to signed responses. Jenny Baxter's article about the history of signed responses to be added to website.
- Issues relating to Children's Services, Management, allowances, SEN point and conference ideas were discussed.

9.3 Membership & Finance

- a) Guidelines for regional treasurers when creating signatories for cheques will be available in time for the June meeting with Regions.
- b) An outline for AGM procedures will be also created and these guidelines will also be available for the June meeting.
- c) In the light of recent suggested changes in some ToD's status, an Action Brief on pensions was considered. However it was agreed that the subject of pensions should be addressed to each person's individual union and employer.
- d) The individual BATOD membership number will appear on the Magazine Mailing label for future reference.

As a result of the committee's deliberations during the NEC meeting the following points were also made.

Request for reviewing travelling expenses.
 Agreed Employees - 31p per mile/second class rail fare.

Meetings - stay same @ 25p per mile. Overnight rate - currently £70 to be increased to £80 for London. £60 elsewhere to stay same.

- Membership to be increased via publicity not by reducing membership fees for student teachers in training.
- Consultancy charges will be made when help is requested by another body. Travel and subsistence minimum charge expected.
- Agreed that five days a year @ £300 per day to release the President from employment for BATOD.
- It was confirmed that there would be no supply cover costs for FEAPDA Conferences.
- Secretary to investigate charges for secretarial services for small organisations offered by UKCoD.

9.4 **Professional Development**

- a) Conference has been main focus of work, which has taken considerable time by Chair.
- b) Concerns were expressed over the number of delegates applying for conference.

Action: PD committee will look at format and structure for next year's conference.

- As a result of the committee's deliberations during the NEC meeting the following points were also made.
- Review of Annual conference. Key issue was lack of delegates (46 attended). A number of factors were significant - location, topic, cost to delegates, proximity to other professional meetings including on Saturdays and saturation of training.
- Need to debrief with Jonathan Torode (Organiser).

Action: Ted Moore to contact Jonathan.

- Breakdown of costs of the event needed from Treasurer to Professional Development committee.
- A range of options for future events was considered.
 Venue confirmed as London in March 2006. Ted will
- review locations including British Library.It was felt that the topic should be classroom
- focused.

Action: Conference call to take place prior to June NEC Meeting.

Flyer to go out immediately in magazine mailing informing members of date and location of next year's AGM.

9.5 Publications & Publicity Committee The report was submitted verbally.

- a) Associate membership discussed to enable more TAs to become members. Treasurer pointed out that this facility does already exist but needs to be clarified.
- b) Proposed £20 associate membership to receive magazine but not DEI (Journal). This was agreed.
- c) Pauline Cobbold has resigned as Commissioning Editor. She was thanked for her work.

As a result of the committee's deliberations during the NEC meeting the following points were also made.

- Promote special associate membership with a flyer in the magazine to be passed on via ToDs.
- TAs would benefit from membership. Committee requested ideas as to what this category should be called - a range of titles for those working with deaf children who are not teachers.
- Intended subscription charge for bulk calendar entries on the website. The charge should enable someone to be paid for the time-consuming task of entering these on the website. This needs further consideration.

Action: P&PC make positive recommendations with reference to M&FC.

• Teachers' TV - report from Moira Butcher. Action: Moira to contact Teachers' TV with the DfES Access to achievement leaflet as a suggestion for a possible programme topic.

• Commissioning editor role discussed and a volunteer to replace Pauline Cobbold is sought. We need to

find a replacement although the time commitment will be rigorous and take approximately 20 days per year. Ann Underwood believes that the next two or three issues are reasonably well planned for and it will be the January 2006 issue that requires immediate attention.

Action: NEC members were asked to offer suggestions of articles/authors for the January 2006 Magazine issue - Focus: Promoting inclusion in secondary schools.

10 Reports from Meetings with other bodies

10.1 Meeting with NUT in London, February 2005 A report of this meeting will appear in the Magazine. It was the first of a series BATOD is hoping to arrange with teacher unions to discuss issues specific to Teachers of the Deaf.

10.2 Teachers TV: Working with Partners

Tabled report. (see May Magazine p 33) Moira Butcher felt it could be advantageous to BATOD eg a programme about what a TOD does. This could be an opportunity to promote the profession and recruitment of Teachers of the Deaf.

Action: To be considered by P&PC.

10.3 Deafness@Birth Project

Report tabled written by C Carnelley.

Action: Regions and nations to consider questions raised about NEC members working with parents who will write about experiences - especially BSL users.

10.4 Meeting at Bates, Wells & Braithwaite with Stephen Lloyd, Partner

Report tabled - attended by D Hartley, B McCracken, E Moore.

11 Vacancy on NEC

Emma Kelty, South Region has offered to join NEC. She will contact the Secretary.

12 Comic Relief

£43 raised. Thanks to Ann Underwood for arranging the fund-raising.

Date of next meeting:

11 June 2005, Paragon Hotel, Birmingham.

CPD Log

Many members no longer need or use the BATOD CPD log because their employer provides one which they are obliged to complete. However, some colleagues wish to continue to use them and consequently the CPD log replacement pages are now available for those that would like them on the BATOD website and are easily downloadable (follow Home - Articles - CPD).

There is also information about suitable CPD activities and our professional code of practice. We will not be printing any more hard copies.

Membership subscription rates 2005 - 2006



due 1 August Annual Quarterly Cheque Direct Debit **Direct Debit** Full members in employment £ 57.00 £ 15.00 £ 62.00 Associate members in employment £ 57.00 £ 15.00 £ 62.00 Full members taking a career break £ 28.50 £ 7.50 £ 31.00 Associate members - unwaged £ 28.50 £ 7.50 £ 31.00 £ 28.50 £ 7.50 **Retired members** £ 31.00

TAs, LSAs and other support staff in deaf education £20.00 single payment

This subscription can be claimed against income tax: for those who pay tax at 40% this means a saving of approximately £20.00 pa and for those members in the lower band a saving of some £10.00. You do not normally need a receipt for this; just put it on your income tax form. A list of previous subscription details can be found on the BATOD website: follow BATOD/BATOD membership/back-subscriptions information.

For those retired members who no longer wish to receive the Journal there is a concession to pay a reduced subscription. Associate members who are employed as Teaching Assistants or in similar roles and who pay the special single payment rate will receive only the Association Magazine and not the Journal.

Retired members who reach the age of 80 are entitled to free membership of the Association. Members who reach this milestone are invited to contact the Membership Secretary.

Full and associate members who are entitled to a reduced subscription should notify the Membership Secretary of their circumstances by 30 June for the following year's membership, to enable the necessary paperwork to be completed.

Members with a change in circumstances (eg changing to retired status) should inform the Membership Secretary as soon as possible. Cheque payers will be sent a reminder about payment in June. Direct Debits will be altered automatically for payments in August and beyond.

Members are reminded that membership of the Association is only open to individuals. There is no category for Service or School membership.

We are aware that some members have their subscription paid for them and that some have their mailing to their work address.

Only the named individual is the member and no other person at that address can claim any benefits of membership. Any enquiries should be made to:

> email: <u>membership@BATOD.org.uk</u> BATOD Membership Secretary 112 Deas Avenue Dingwall Ross-shire IV15 9RJ

All members are reminded that the Membership Secretary MUST be notified of any change of address to ensure that labels are changed and Magazines and Journals reach the new address.

Name	changed to:
Address	changed to:
Post code	Post code:
	Telephone:
	email:

Meetings and training to know about

Calendar

Date	Organisation	Meeting Topic	Venue
September			
6	Cued Speech Association	12 weeks course	Ormskirk
7	THRASS	Training course	Essex
13	Ear Foundation	LSAs: introduction to working with deaf children for new LSAs	Ear Foundation, Nottingham
21	Inclusive Technology	IT Information Day	Leicester
24	BATOD NEC	Association Business	Birmingham
26	MHTS with Burwood Centre	Understanding speech and language assessments	Newbury
26	DCCAP	ICT training courses for Teachers of the Deaf: 2005	Manchester
27	DCCAP	ICT training courses for Teachers of the Deaf: 2005	Newcastle
28	DCCAP	ICT training courses for Teachers of the Deaf: 2005	Lancaster
29	National Maritime Museum	Leadership lessons from Nelson:	National Maritime Museum,
		an interactive study day for deaf students	Greenwich
29	South of England CIC	Introduction to Cochlear Implants	Southampton University
October			
5	NDCS	Radio Aids Workshop	Birmingham
5	Healthy Deaf Minds	Topic to be announced 6.30 until 9.00 Entry fee is £4.00	Euston
6	Deafworks	What Makes a Good Manager?	Clerkenwell, London
3 - 7	Cued Speech Association UK	Foundation	Jersey
7	BATOD South pre-school group	Conference - Parents and professionals in partnership	Chertsey, Surrey
8	BATOD Midland	AGM & Conference ?peripherals to hearing aids?	RSD Derby (TBC)
8	BATOD Northern Ireland	Annual General Meeting and Conference	Craigavon Hospital
8	Deafworks	Linguistics of BSL	Clerkenwell, London
12	Inclusive Technology	IT Information Day	Middlesbrough
13	Ear Foundation	Music and Cochlear Implant: conflict or complement?	Ear Foundation, Nottingham
13	Deafworks	Deaf Awareness	Clerkenwell, London
14	Ear Foundation	Binaural hearing - are two ears always better than one?	University of Nottingham
14	BAEA	Evaluating Children's Progress in Education and Audiology	Birmingham Rep
14 - 16	FEAPDA	Congress - working with children from ethnic minorities	Geneva
18	DCCAP	ICT training courses for Teachers of the Deaf: 2005	Exeter
19	DCCAP	ICT training courses for Teachers of the Deaf: 2005	Bristol
20	Deafworks	NEW Regaining Your Positive energy	Clerkenwell, London
20	DCCAP	ICT training courses for Teachers of the Deaf: 2005	Brimingham
21 - 22	NASEN & TES	Special Education Show	Design Centre, London
21 - 22	Deafworks	How to teach Deaf Community and Culture	Clerkenwell, London
27	Deafworks	Issues relating to Arts Practice	Clerkenwell, London
31	MHTS with Ewing Foundation	Critical self-review and HI/sensory support services	Newbury
November		onitioal self review and mischisory support services	Newbury
3	Deafworks	Getting what you want - painlessly	Clerkenwell, London
3	CACDP	"Return to SENDA"!	British Library
2 - 4	City University	Assessing BSL Development: Production Test (Narrative Skills)	City University, London
5	Deafworks	Workshop - topic to be agreed	Clerkenwell, London
5	BATOD Scotland	Conference and AGM - 'Deafness and Literacy'	The Golden Lion Hotel, Stirlin
	BATOD South	Speech perception measures & assessment	Chertsey, Surrey
11	BAIOD South		
		Foundation Course 9.30 am - 4 pm	Barnstaple, N Devon
14 - 15	Cued Speech Association	Foundation Course 9.30 am - 4 pm IT Information Day	Barnstaple, N Devon Colchester
		IT Information Day	Colchester
14 - 15 16 21	Cued Speech Association Inclusive Technology Deafworks	IT Information Day Dealing with difficult people	Colchester Clerkenwell, London
14 - 15 16 21 22	Cued Speech Association Inclusive Technology Deafworks DCCAP	IT Information Day Dealing with difficult people ICT training courses for Teachers of the Deaf: 2005	Colchester Clerkenwell, London Cambridge
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If you know about, or are organising, an event that you think other Teachers of the Deaf may be interested in please email the details that can be added to the calendar to <u>magazine@BATOD.org.uk</u> (date, organiser, title, venue). Remember to decode the acronym so we know who is the organiser!

There are already entries on the website Calendar for 2006. The Calendar on the BATOD website is edited as soon as we know about meetings. Additional information about courses and registrations forms may also be linked to the calendar entries.

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