

# Consortium for Research in Deaf Education

# 2024 report for Wales

# Education provision for deaf children in Wales in 2023/24

#### Introduction

In 2024, we carried out the 14<sup>th</sup> Consortium for Research in Deaf Education (CRIDE) annual survey on educational staffing and service provision for deaf children. This report sets out the results of the survey for Wales and is intended for heads of services, policy makers and anyone with an interest in deaf education.

The survey alternates from year to year between a standard survey and a survey with a mix of core and thematic questions. The 2024 survey was the version with a mix of core and thematic questions, covering the 2023/24 academic year. The analysis in this report is based on responses from 14 services in Wales, covering 22 authority areas and giving a response rate of 100%.

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<sup>&</sup>lt;sup>1</sup> Reports from previous years can be found on the National Deaf Children's Society website at <a href="https://www.ndcs.org.uk/cride">www.ndcs.org.uk/cride</a> or on the BATOD website at <a href="https://www.batod.org.uk/information/cride-reports/">https://www.batod.org.uk/information/cride-reports/</a>.

## Interpreting the results

Services were asked to give figures for the position as of 31st January 2024.

In the survey, we acknowledge that services and children do not always fit into the boxes or options provided. Services were able to leave comments or clarify where needed throughout the survey. This report notes particular issues that emerged in some areas.

As we see later, it is clear that some services still experience difficulties in extracting data about deaf children in their area and there remain inconsistencies in how different questions are completed throughout the survey. The response rates to individual questions may sometimes vary and anomalies occasionally appear. We make every effort to investigate any inconsistencies that appear particularly strange. However, services do not always respond to such queries. **Therefore, the results should continue to be used with caution.** Caution is also needed due to differences in response rates to individual questions and potential mistakes in data provision between surveys.

Please note that percentages in this report have been rounded up or down to the nearest whole number.

# Summary of key findings

#### Deaf children in Wales

• There were 2,227 deaf children. This figure of 2,227 is a reported decrease of 33 (1%) from 2,260 in 2023.

## Teachers of Deaf Children and other specialist staff

- There were at least 64.8 fte Teachers of Deaf Children and Young People (TOD) posts, of which 2 fte (3%) were vacant.
- Of the 62.8 fte working as TODs, 97% held the mandatory qualification, whilst 2% were in training and 2% were qualified teachers without the mandatory qualification and not in training.
- The number of qualified TODs in employment working in a peripatetic role or, in a resource provision and/or in a special school or college not specifically for deaf children has increased by 2% since 2023 and decreased by 15% since we started the survey in 2011.
- There were 29.34 fte specialist support staff posts (other than TODs) directly employed by services, of which 0.64 fte (2%) are vacant posts.

#### Resource provisions

There are a reported 19 resource provisions, which is the same as reported in 2022 and 2023. Looking at
the spread of resource provisions across Wales, on average, there is one resource provision for every 117
deaf children.

## Support following identification of deafness

- Services stated they had received 564 referrals during the 2023 calendar year, an increase from 449 in 2022
- 7% of referrals to services came from the newborn hearing screening programme in 2023. Of these, 51% were contacted by a TOD within two working days.
- 15% of referrals to services came from outside the newborn hearing screening programme and before a child had started statutory education. Of these, 55% were contacted by a TOD within five working days.
- 78% of referrals to services came from outside the newborn hearing screening programme and after a child had started statutory education. Of these, 42% were contacted by a TOD within five working days.
- Regardless of how the referral was made, 36% of families were offered a visit (either face to face or virtual) within ten working days of the referral.

#### Thematic questions: Early identification and early intervention pathways

- 11 services (79%) reported that all children identified as deaf were referred to the service.
- All 14 services (100%) reported that all referrals for children identified as deaf were accepted.
- Eight services (57%) reported that there was a school entry hearing screening programme across the whole area covered by their service.

## PART 1: Deaf children in Wales

## How many deaf children are there?2

Based on the responses from all 14 services, there were 2,227 deaf children. This figure of 2,227 is a reported decrease of 33 (1%) from 2,260 in 2023.

The smallest service reported 34 deaf children living within their boundaries. The largest reported 476 deaf children (this was a service covering five local authority areas). The average number of deaf children living in each service area was 159.

The following table compares the total number of deaf children living in Wales with figures from previous years. As set out in the introduction, comparisons with earlier reports should be made with caution due to differences in the quality of the responses and response rates between the surveys.

Table 1: Number of deaf children reported, over successive years

	Number of children reported
CRIDE 2024	2,227
CRIDE 2023 (adjusted total)	2,260
CRIDE 2022 (adjusted total)	2,329
CRIDE 2021 (adjusted total)	2,324
CRIDE 2020*	1,384
CRIDE 2019 (adjusted total)	2,486
CRIDE 2018	2,625
CRIDE 2017 (adjusted total)	2,642
CRIDE 2016	2,374
CRIDE 2015 (adjusted total)	3,288
CRIDE 2014	2,880
CRIDE 2013 (adjusted total)	2,904
CRIDE 2012 (adjusted total)	2,743
CRIDE 2011 (adjusted total)	2,755

<sup>\*</sup> In 2020, there were 11 responses to this question.

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<sup>&</sup>lt;sup>2</sup> Services were asked to include children and young people with a permanent deafness under the age of 20, including as much as possible: all children who have a unilateral or bilateral sensori-neural or permanent conductive deafness, at all levels from mild to profound, using BSA/BATOD descriptors; all deaf children, regardless of whether they receive support from the service; children who attend education provision outside of the area but who normally live in the area. Please also note that we use the term 'permanent deafness' to include those children with a syndrome known to include permanent conductive deafness, microtia/atresia, middle ear malformation, or those who have had middle ear surgery such as mastoidectomy. It also includes those children with glue ear who are not expected to 'grow out' of the condition before the age of 12 years, such as those born with a cleft palate, Down's syndrome, cystic fibrosis, or primary ciliary dyskinesia. Under temporary conductive deafness, we include those children with glue ear who may have been fitted with hearing aids as an alternative to grommet surgery but who are expected to 'grow out' of the condition before the age of 12 years. Please note that for the purpose of these questions we used the term 'children' to include children and young people under the age of 20 (unless otherwise specified).

#### Issues or gaps in the data

Ten services (71%) indicated there were known issues or gaps in the data they provided for the number of children and young people. These included:

- services only having figures for children who are receiving support from the service (64% of all services)
- services not holding figures for children who have left school (43%)
- services not able to split out figures for children with permanent or temporary deafness (7%)
- other issues reported by services include not having figures for some children without hearing aids (i.e. very mild glue ear).

Four services (29%) reported that there were no known issues or gaps in the figure provided for children with permanent deafness living in the area.

The extent of these issues and gaps is a reminder that the figures generated from the CRIDE survey need to be used with caution. The data in this report are only as good as the data held and provided to us, by local authorities, and the above section raises questions about how we can improve the data collected on deaf children. At the same time, we believe that data generated through the CRIDE reports remain among the best sources of data available.

We asked services how many children were known to be eligible for free school meals. Five services provided a figure in answer to this question, reporting a total of 130 children and young people. This amounts to 34% of the total number of deaf children identified in these five areas. However, two of the five services also commented that the data they provided was not necessarily accurate. If we include only the data provided by three services that did not indicate the data may not be accurate, 84 children were reported to be known to be eligible for free school meals, 45% of the total for these areas.

#### Number of deaf children on the service's caseload

By caseload, we mean children who receive some form of support at least once a year. Examples of support include direct teaching, visits to the family or school, liaison with the family, school and teachers, providing hearing aid checks, etc. We asked services to include children they supported but who do not live in the geographical area covered by their service. Children with temporary deafness could be included in the response to this question if they were on service's caseloads.

Responses from 12 services indicate that there were at least 3,038 deaf children with permanent or temporary deafness were on caseload.<sup>3</sup> This is a reported 6% decrease from 2023 when all 14 services reported that 3,224 deaf children were on their caseloads.

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<sup>&</sup>lt;sup>3</sup> Two services did not provide a figure.

Table 2: Number of deaf children on caseloads reported, over successive years

Year	Number of children on	Definition of caseload	Number of
	caseload		services
2024	3,038	Some form of support at least once a year	12
2023	3,224	Some form of support at least once a year	14 <sup>4</sup>
2022	3,178	Some form of support at least once a year	15
2021	3,430	Some form of support at least once a year	15
2020	1,639 <sup>5</sup>	Some form of support more than once a year	11
2019	3,265	Some form of support more than once a year	14
2018	4,258	Some form of support more than once a year	15
2017	3,968	Some form of support more than once a year	15
2016	3,722	Some form of support at least once a year	15
2015	3,022	Some form of support more than once a year	15
2014	2,345	Some form of support more than once a year	15
2013	2,530	Some form of support more than once a year	17 <sup>6</sup>
2012	2,905	Some form of support more than once a year	21
2011	2,638	Clear definition not provided	16

We also asked services to split out how many children on their caseloads had a temporary conductive hearing loss; 13 services reported 1,220 children.<sup>7</sup>

If there are 2,227 permanently deaf children living in Wales and 1,8188 on services' caseloads with permanent deafness, there are at least 409 deaf children (18% of the total) who are not being supported by the service at least once a year. It does not automatically follow that 18% of permanently deaf children are not receiving any support at all; many may be receiving support less than once a year from a service, or elsewhere from, for example, resource provisions not managed by the service. It may also be a reflection on the incomplete data provided by some services.

<sup>&</sup>lt;sup>4</sup> The change in the number of services between 2022 and 2023 reflects that one service joined a consortium service.

<sup>&</sup>lt;sup>5</sup> In 2020 there were 11 responses to this question.

<sup>&</sup>lt;sup>6</sup> The change in the number of services reflects that some services merged after 2013.

<sup>&</sup>lt;sup>7</sup> The two services that did not provide overall figures for the number of children with permanent or temporary deafness on their caseloads did separately provide figures for the number of children with temporary deafness on their caseloads.

<sup>&</sup>lt;sup>8</sup> The total of 1,818 children with permanent deafness on services' caseloads is calculated by subtracting the number of children with temporary deafness on services' caseloads (1,220) from the number of children with permanent or temporary deafness on services' caseloads (3,038). It should be noted that this year two services did not provide a caseload figure for the number of children with permanent or temporary deafness but did report a figure for children with temporary deafness on the caseload.

# PART 2: Teachers of Deaf Children and Young People and other specialist staff

We asked how many TODs are working in different settings, including those in a peripatetic role, working in resource provisions<sup>9</sup> and/or working in a special school or college not specifically for deaf children or young people. We found that:

- overall, there are at least 62.8 fte teachers working as TODs in Wales
- 97% of these posts are occupied by fully qualified TODs, 2% are occupied by teachers in training for the mandatory qualification and 2% are occupied by qualified teachers without the mandatory qualification and not in training
- at the time the survey was completed, there were 2 fte vacant posts reported
- if the vacant posts are added to the total number of TODs in employment, this would indicate there are at least 64.8 fte TOD posts, of which 3% were vacant.

The following table provides a breakdown by type of setting.

<sup>&</sup>lt;sup>9</sup> In the CRIDE survey, we use the term 'resource provision' to include all schools with a resource provision, base or unit specifically for deaf children, regardless of whether staff in the resource provision are employed by the local authority or by the school.

Table 3: Number of ToD posts overall<sup>10</sup>

	Working mainly as a peripatetic TODs (total and percentage)	resource provision (total and percentage)	special school or college not	Working flexibly as a peripatetic TOD, in a resource provision and/or in a special school or college not specifically for deaf children or young people (total and percentage)	overall (total and percentage)
TODs with the	33.7	23.7	2	1.4	60.8
mandatory qualification	(97%)	(96%)	(100%)	(100%)	(97%)
Teachers in training	1	0	0	0	1
for the mandatory qualification within 3 years	(3%)	(0%)	(0%)	(0%)	(2%)
Qualified teachers	0	1	0	0	1
without the mandatory qualification and not in training	(0%)	(4%)	(0%)	(0%)	(2%)
Total - in	34.7	24.7	2	1.4	62.8
employment	(100%)	(100%)	(100%)	(100%)	(100%)
Vacant posts	1 (3%)	1 (4%)	0 (0%)	0 (0%)	2 (3%)
Total – posts	35.7 (100%)	25.7 (100%)	2 (100%)		64.8 (100%)

The following table summarises the above by just showing the numbers of TODs in employment by their role only.

Table 4: Number of TODs in employment overall by role

	Total TODs in post	Percentage
Working mainly as a peripatetic TODs	34.7	55%
Working mainly in a resource provision	24.7	39%
Working mainly in a special school or college not specifically for deaf children	2	3%
or young people		
Working flexibly as a peripatetic TOD, in a resource provision and/or in a	1.4	2%
special school or college not specifically for deaf children or young people		
Total of figures given	62.8	100%

<sup>10</sup> Percentages for TODs with the mandatory qualification, Teachers in training for the mandatory qualification within 3 years, and Qualified teachers without the mandatory qualification and not in training are out of the total in post. Percentages for vacant posts are out of all posts.

Figures for TODs in cochlear implant programmes across Wales were collected in a separate survey. A response was received from the South Wales Paediatric Cochlear Implant Programme. There were at least 1.6 fte fully qualified TODs reported in post, and no vacancies reported.

## **Changes in numbers of TODs**

The following table looks at changes in the number of qualified TODs in employment and posts over successive years.

As set out earlier, when making year on year comparisons, anomalies can sometimes appear in the responses. We make every effort to investigate anomalies that appear particularly strange; however, services do not always respond to such queries.

Table 5: Changes in numbers of TODs from year to year<sup>11</sup>

	TODs with the mandatory qualification in employment	TODs with the mandatory qualification in employment or in training	Number of teachers working as TODs in employment	Number of vacant posts	Number of TOD posts (including vacancies)
2024	60.8	61.8	62.8	2.0	64.8
2023	59.7	64.3	64.3	1.6	65.9
2022	57.8	62.8	62.8	2.4	65.2
2021	54.4	58.8	60.0	2.4	62.4
2019	57.0	66.0	66.0	0	66.0
2018	56.425	61.825	61.825	1	62.825
2017	57.63	60.33	60.73	3.9	64.63
2016	65.45	69.25	69.25	1	70.25
2015	69.86	73.66	74.26	0.8	75.06
2014	67	69.2	70.2	0.6	70.8
2013	66.5	71.5	71.5	3	74.5
2012	91.75	100.55	100.55	0	100.55
2011	71.95	73.95	75.95	0	75.95

(2020 data not included because of lower response rate to survey)

<sup>&</sup>lt;sup>11</sup> In 2017, we began to ask about TODs in special schools or colleges not specifically for deaf children or young people. Figures from before/after are therefore not directly comparable. However, it is worth noting that the inclusion of these figures did not lead to a noticeable increase in the number of TODs.

Table 6: Percentage change in numbers of TODs

	Percentage change over past 13 years (between 2011 and 2024)	Percentage change over past year (between 2023 and 2024)
TODs with the mandatory qualification in employment	-15%	2%
TODs with the mandatory qualification in employment <b>or</b> in training	-16%	-4%
Number of teachers working as TODs in employment	-17%	-2%
Number of TOD posts (including vacancies)	-15%	-2%

In terms of any changes of TODs in post in specific roles:

- the total of 34.7 fte peripatetic TODs is down 1.1 fte from 35.8 in 2023, or a 3% decrease. Since 2011, there has been a 17% decrease from 42 peripatetic TODs.
- the total of 24.7 fte TODs in resource provisions is a slight increase from 24.5 in 2023. This amounts to a 1% increase. Since 2011, when there were 34 TODs in post in resource provisions, we have seen a 27% decrease.
- there were 2 fte TODs with the mandatory qualification reported as working mainly in a special school or college not specifically for deaf children or young people. This is the same as reported in 2023.
- there were 1.4 fte TODs with the mandatory qualification reported as working flexibly between different roles/settings. This is down from 2 fte TODs reported as working in this way in 2023.

We found that 7% of services had seen an increase in the number of TODs in employment between 2023 and 2024, 71% of services had seen no change while 21% of services had seen a decrease.

In terms of any difficulties in recruiting TODs or supply cover over the past 12 months:

- one service (7%) reported difficulties in recruiting for a permanent post
- two (14%) reported no difficulties
- three services (21%) reported difficulties in recruiting for supply cover
- two services (14%) reported no difficulties

Combining the figures, three services (21%) reported difficulties in recruiting to either permanent or supply posts. Comments from services around this included:

- difficulty securing a supply qualified TOD to cover long term sickness absence
- difficulty securing maternity cover from a qualified TOD
- no qualified TOD supply cover available.

## Other specialist staff

We found that there were 28.7 fte specialist support staff, other than TODs, employed by services, supporting deaf children. There were 0.64 fte vacant posts reported. This means there were 29.34 specialist support staff posts, of which 2% were vacant.

Table 7: Number of specialist support staff, by role

	Number workin	g in this role	Vacant posts		Total
	Number of staff (full time equivalent)	services with staff in relevant	Number of staff (full time equivalent)	services with staff in relevant	
Teaching assistants/ Classroom support	19.73 (98%)	<b>category</b> 9	0.44 (2%)	category 1	20.17 (100%)
assistants/Learning support assistants etc					
Communication support workers/ Communicators etc	5.5 (100%)	2	0 (0%)	0	5.5 (100%)
NRCPD registered BSL/English interpreters	0 (0%)	0	0 (0%)	0	0 (0%)
Deaf instructors/Deaf role models/Sign language instructors etc	0.77 (100%)	1	0 (0%)	0	0.77 (100%)
Educational audiologists/Audiologists in Education who do not also hold a qualification as a TOD	0 (0%)	0	0 (0%)	0	0 (0%)
Technicians et al.	1.5 (100%)	2	0 (0%)	0	1.5 (100%)
Speech and language therapists	0.2 (50%)	1	0.2 (50%)	0	0.4 (100%)
Family support workers/Liaison officers	0 (0%)	0	0 (0%)	0	0 (0%)
Social workers/Social workers for deaf children	0 (0%)	0	0 (0%)	0	0 (0%)
Other	1 (100%)	1	0 (0%)	0	1 (100%)
Total of figures given	28.7 (98%)		0.64 (2%)		29.34 (100%)

Other roles included a peripatetic higher level teaching assistant.

The number of posts is down from 44.5 fte in 2023. This is largely down to a reported drop of 14 staff in one service. 12 We did not receive a response to our requests to clarify this.

<sup>12</sup> Cardiff.

# **PART 3: Support provided**

All 14 services (100%) stated that the service was based in the local authority (as opposed to being based in a school or another body).

#### **Heads of services**

We asked if peripatetic TODs in the service were managed by someone who is a qualified TOD or in training for the mandatory qualification. Six services (43%) stated that they were, and eight services (57%) stated that they were not.

Where services were not managed by a qualified TOD or TOD in training, we asked for the role of the person who was managing the service. Answers included:

- ALN Resource Base and Specialist Teacher Manager
- Support for Learning Manager
- Master of Special Education
- Qualified/Specialist Teacher of Pupils with Vision Impairment
- Senior Sensory Teacher physical medical teacher.

#### **Number of resource provisions**

In the CRIDE survey, we use the term 'resource provision' to include all schools (mainstream or special) with a resource provision, base or unit specifically for deaf children, regardless of whether staff in the resource provision are employed by the local authority or by the school.

Table 8: Number of resource provisions

	Managed by the local authority	Managed by the schools	Total
Resource provisions for primary-aged children	3	6	9
Resource provisions for secondary-aged children	4	6	10
Total	7	12	19

#### We found that:

- nine services (64%) had at least one resource provision for primary-aged children in their area
- nine services (64%) had at least one resource provision for secondary-aged children in their area.

17 of the 19 resource provisions (89%) were managed by a qualified TOD.

The total of 19 resource provisions across Wales remains the same as in 2022 and 2023.

Table 9: Number of resource provisions over time<sup>13</sup>

Year	Number of resource provisions
2024	19
2023	19
2022	19
2021	20
2019	24
2018	25
2017	25
2016	24

We also looked at the number of resource provisions against the number of deaf children. This is intended to indicate the spread of resource provisions across Wales, relative to the overall population of deaf children. We found that, on average, there is one resource provision for every 117 deaf children. This is down from 2023 when there was one resource provision for every 119 deaf children.

This is **not** a measure of the number of places available in or individual deaf children enrolled at each resource provision; figures for places or deaf children enrolled will vary from provision to provision.

The annex provides figures on the spread of resource provisions against the local population of deaf children in each local authority.

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 $<sup>^{13}</sup>$  2020 data not included because of lower response rate to the survey

# **PART 4: Support following identification of deafness**

We asked services how many referrals they received over the calendar year of 2023.

Table 10: Referrals

	Number and percentage of referrals	Number of services <sup>14</sup>
For children identified as deaf through the newborn hearing	41	9
screening programme	(7%)	
For children identified as deaf outside of the newborn hearing	85	12
programme and <b>before</b> they had started statutory education	(15%)	
For children identified as deaf outside of the newborn hearing	438	14
programme and after they had started statutory education	(78%)	
Total of figures given	564 <sup>15</sup>	
	(100%)	

In terms of changes in referrals received between the calendar years of 2022 and 2023, the proportions of referrals:

- through the newborn hearing screening programme has fallen from 8% to 7%
- outside newborn hearing screening and before statutory education has decreased from 24% to 15%
- outside newborn hearing screening and after statutory education has increased from 68% to 78%
- the total number of referrals over the calendar year has increased from 449 to 564.

We then asked how soon families were contacted and visited following the initial referral. These questions were drafted with reference to the <u>NatSIP Quality Standards for Sensory Support Services in England (2016)</u> – in particular, standards A1ii and A1iii.

We recognise there may be a range of reasons why initial contact or the first visit cannot take place within the timescales outlined by the quality standards (e.g. the family is not able to meet). It should also be noted that some services were not able to provide data for the questions on timescales for contacting families and offering visits to families. <sup>16</sup> Therefore the percentages for contact and visit timescales should not be assumed to apply to all services. It should also be noted that the extent of gaps in data varied between years, and across the four nations of the UK. For these reasons this data is not directly comparable to last year or between the countries of the UK. However, we hope that these questions will help to build a national picture of how these quality standards are being met.

In response to these questions, we found that:

• of the referrals for children identified through the newborn hearing screening programme, 21 of the families were contacted<sup>17</sup> by a TOD within two working days. This amounts to 51% of the 41 children referred via this route. The corresponding figure was 85% in 2023

<sup>&</sup>lt;sup>14</sup> This is the number of services that provided a figure over 0.

<sup>&</sup>lt;sup>15</sup> 564 was the sum of the figures given. The sum of the totals given by services was 563.

<sup>&</sup>lt;sup>16</sup> The following services did not provide full data, or provided comments that indicated their data did not directly relate to the questions: Cardiff, Gwynedd and Anglesey, and South East Wales.

<sup>&</sup>lt;sup>17</sup> For these questions on contact we mean actual or attempted contact.

- of the referrals for children identified as deaf outside of the newborn hearing screening programme and before they had started statutory education, 47 of the families were contacted by a TOD within five working days. This amounts to 55% of the 85 children referred via this route. The corresponding figure was 62% in 2023<sup>18</sup>
- of the referrals for children identified as deaf outside of the newborn hearing screening programme and after they had started statutory education, 183 of the families were contacted by a TOD within five working days. This amounts to 42% of the 438 children referred via this route<sup>19</sup>. The corresponding figure was 41% in 2023
- 203 families were offered a visit (either face-to-face or virtually) from a TOD within ten working days of any referral. This amounts to 36% of the 564 children referred either through or outside the newborn hearing screening programme. The corresponding figure was 32% in 2023.

#### Comments from services on this included:

- some families were unable to have visits within the specified time scales due to family circumstances (e.g. holidays, illness, family bereavement etc.) or parental preferences
- 'face-to-face' included access to a qualified TOD at a sensory playgroup, home visits, and visits to educational settings
- if in education, children are usually visited in schools
- audiological technician visiting families before qualified TODs
- children's hearing having normal levels when they returned to audiology to be fitted with amplification
- children being fitted with grommets soon after initial phone call was made
- there can be delays in referrals reaching the service from out of county hospitals
- given caseload pressures and increases in referrals, service prioritises visits according to need.

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<sup>&</sup>lt;sup>18</sup> Data from one service was not recorded for the question on the number of families contacted within two days, as they reported more families were contacted within two days than the number of children referred to the service via this route.

<sup>&</sup>lt;sup>19</sup> One service did not answer this question.

# PART 5: Thematic questions: Early identification and early intervention pathways

This year's CRIDE survey included some thematic questions about referrals into and accepted by education services. We asked these questions as we know that, across the UK, not all deaf children are referred into education services. We were keen to better understand if this is because the referrals are not made by audiology services or because they are not accepted by education (because of any eligibility criteria or policy in place).

When asked if there were any groups of deaf children routinely not referred into the service by audiology services (such as, children with unilateral, mild, moderate or temporary deafness, and children without a hearing aid):

- 11 services (79%) reported that all children identified as deaf were referred
- where services reported other groups of children not routinely referred, comments included:
  - audiology will refer children without hearing aids if they feel additional support from the service is required
  - o children without a hearing aid and without concerns/difficulties with accessing language, are not routinely referred.
- one service reported that they could not answer this question as they do not have access to audiology's data regarding children and young people not referred to the service.

When asked if there were any groups of deaf children where a referral to the service (if made) would not routinely be accepted, all 14 services (100%) reported that all referrals for children identified as deaf were accepted.

We asked services if there was a school entry hearing screening programme in place in the areas they covered:

- eight services (57%) reported that there was, across the whole area covered by their service
- one service (7%) reported there was, but not across the whole area covered by their service
- three services (21%) reported there was not
- two services (14%) reported that they did not know.

Services were then given an opportunity to share any insight or anecdotal views on several topics.

On how well or not referral pathways were working in their area:

- some services reported no concerns
- where services commented on what was working well:
  - o some services reported good contact/communication and liaison with audiology services, and clear, relevant and full information being provided by audiology
  - o receiving referrals centrally directly from the health department
  - o when audiology consent to share, and the child or young person's Individual Management Plan are received together

- schools with concerns about a child or young person's hearing have knowledge of how to refer them to the GP for a hearing assessment
- o termly caseload meetings with audiology and speech and language therapy
- even where children may not receive ongoing input from a service, they can be referred for advice or short-term support to families/schools.
- where services reported things working less well:
  - o some children and young people arriving at school with hearing aid(s) but not having been referred to the service by audiology, particularly so with cross-border services.

On whether there had been any difference in the number or type of referrals that have been made into services since 2020, services commented on:

- general increases in referrals
- an increase in referrals for glue ear, and more specifically an increase in the number of referrals of children with conductive deafness with temporary hearing aids or a bone conduction aid while awaiting intervention by ENT
- an increase in preschool referrals
- referrals where schools have been concerned about children's speech to see if it is linked and schools can use the service as a way into the speech and language pathway directly.

On any good or encouraging practice in terms of early identification and early intervention pathways, services commented on:

- good links and communication with audiology departments in particular, and also paediatrics
- information being shared immediately between audiology following hearing assessments/referrals
- attending regular sessions, and attending first hearing aid fitting
- foundation children with a hearing loss added to the teaching caseload so that any gaps in their vocabulary can be addressed
- early intervention with the early years team where the team leader attends all early years panels with health and setting sharing information and consent to work together in planning for transition to early years settings and schools
- children identified as deaf through the newborn hearing screening programme or children identified with a significant deafness being referred directly from audiology as soon as the family leave the appointment, usually enabling contact on the same day
- audiology being supportive of children newly identified as deaf learning BSL.

On other issues or challenges that have had a significant impact on the support services are able to provide, services commented on:

- an increase in the number of families moving into the country with no diagnosis and no access to hearing technology or signed communication
- long audiology waiting lists meaning a delay in offering provision
- NHS waiting times for ENT
- an increase in referrals since 2020, many having been diagnosed later than pre-pandemic times due to children not being diagnosed at preschool age and children not attending preschool settings

- delay in making contact with families where English is a second language due to the time it can take to secure an interpreter for a home visit
- difficulties in recruiting qualified TOD.

# PART 6: Background and methodology

CRIDE is a consortium bringing together a range of organisations and individuals with a common interest in using research to improve the educational outcomes achieved by deaf children. At the time the survey was sent out, representatives included: British Association of Teachers of Deaf Children and Young People, British Association of Teachers of Deaf Children and Young People Cymru, Frank Barnes School for Deaf Children, Longwill School for the Deaf, National Deaf Children's Society, Royal School for the Deaf Derby, UCL, University of Edinburgh, former heads of services or consultants with expertise in deafness, and specialist education services for deaf children in Cambridgeshire, Camden, Kent, and Leeds.

The survey alternates from year to year between a standard survey and a survey with a mix of core and thematic questions. The 2024 survey was the version with a mix of core and thematic questions.

The survey was disseminated to services in Wales in February 2024 by National Deaf Children's Society staff on behalf of CRIDE. Where there was no response by 15 March, members of CRIDE contacted services by email and/or telephone. Usually where services do not respond after this date, freedom of information requests are sent, however all 14 services had submitted their responses. The table below sets out the response rate at each stage.

Table 11: Response rate by services to the CRIDE survey

	Number of responses	Cumulative total
First deadline – 15 March 2024	12	12
Second deadline following contact from the	2	14
CRIDE steering group		

Services were able to respond by completing an online survey. If they were not able to do this they could complete a Word document of the survey. Analysis of the results using Excel and drafting of this report was largely completed by the National Deaf Children's Society, with guidance and clearance from members of CRIDE.

CRIDE would like to thank the services for taking the time to complete this survey. The results from this survey will be used for research purposes, to influence government policy and to campaign to protect funding and services for deaf children.

If you have any feedback or questions on the results, please contact <a href="mailto:cride@ndcs.org.uk">cride@ndcs.org.uk</a>.

## Annex: Information by local authority

The table that follows sets out some individual data from services. Local authorities were asked to provide figures as of 31 January 2024.

Figures for TODs include TODs with the mandatory qualification (MQ) and TODs in training for the MQ or intending to train within three years.

Figures for the average population of deaf children covered by each resource provision are intended to show the spread of resource provisions across each area. It is calculated by dividing the number of children living in the area covered by a service and number of resource provisions in a service area. Where there is no resource provision in the area, this is indicated by a ratio of the population in the area to 0. Care should be used in interpreting these figures. In some cases, the ratio may be influenced by the presence of special schools in the area or other resource provisions in neighbouring areas. It should be noted that this is **not** a measure of the number of places available in or individual deaf children enrolled at each resource provision; figures for places or deaf children enrolled will vary from provision to provision.

In some cases, the number of children on the caseload with a temporary deafness is less than five. Where this happens, we have replaced the figure with a '<5' and suppressed the figure to zero in any calculations on the total caseload figure. This is indicated by an asterisk against the caseload figure.

Table 12: Data by local authority

	Number of permanently deaf children living in the geographical area covered by the service	Number of children with permanent or temporary deafness on the caseload for the service	Number of children with temporary deafness on the caseload for the service	TODs in the specialist peripatetic service		TODs mainly in a special school or college not specifically for deaf children and young people	_	Average population of deaf children covered by each resource provision
Bridgend	160	206	46	1	1	0	1	80:1
Cardiff	307	No data	49	4.8	5	0	0	154:1
Carmarthenshire	156	225	69	2.2	3	0	0	78:1
Ceredigion	50	71	21	0.8	1	0	0	50:1
Gwynedd and Anglesey	125	166	41	2.6	No resource provisions	0	0	125:0
Merthyr Tydfil	34	No data	<5	0.8	No resource provisions	None reported	None reported	34:0
Neath Port Talbot	104	222	118	2	3	0	0	52:1
North East Wales (Flintshire, Denbighshire, Wrexham, Conwy)	314	344	50	4.8	2	0	0.4	105:1
Pembrokeshire	70	113	42	1	No resource provisions	0	0	70:0
Powys	97	122	28	2.6	No resource provisions	None reported	None reported	97:0
Rhondda Cynon Taf	125	125	No data	3.2	1	2	None reported	125:1
South East Wales (Blaenau Gwent, Caerphilly, Monmouthshire, Torfaen								
and Newport)	476	1,096	615	5.9	4.2	O _	0	238:1
Swansea City	129	236	107	2		0	0	65:1
Vale of Glamorgan	80	112	32	1	2	0	0	40:1