

# Audiology curriculum

Suzanne Williams, Sandra Barlow and Alice Minett, qualified Teachers of the Deaf, share details of their audiology curriculum, which they also presented at the University of Manchester – 100 years of deaf education conference 2019

When setting up a service-wide document to track the termly outcomes set by peripatetic Qualified Teachers of the Deaf (QToDs) in Leeds, we realised how varied the timings of specific interventions can be. There was a need to ensure that no matter which QToD a child was allocated to, or how old they were when diagnosed, they would receive a consistent program of study that allowed them to develop knowledge and awareness around their hearing loss. This would include those areas that need to be taught specifically outside of the school curriculum. We looked at a range of assessment tools currently in use and worked as a team to adapt and develop our own audiology curriculum, which covers knowledge of audiograms, hearing loss, how the ear works, assistive listening devices, self-advocacy etc. We have now trialled our curriculum for a year and use it widely for target setting and tracking progress.

We strongly believe that children and young people should have knowledge about their own hearing loss, to a degree that is appropriate to each individual and be able to talk about their own hearing with the correct knowledge and understanding. We were aware that peripatetic QToDs were working on audiological understanding but wanted the Leeds staff to have a curriculum document that

showed progression and development over time. This meant that the service was accountable and there was an equity of provision across our three teams. Long term progress would be easier to monitor, particularly when pupils transitioned to a new QToD. It would also give value and importance to those areas, outside of the curriculum and language acquisition, where QToDs can provide beneficial intervention.

After researching materials that were already available, we chose to base our curriculum on the IOWA version. We decided that our audiology curriculum would have 3 areas of learning;

- Knowledge of hearing loss
- Amplification management
- Environmental management.

Each of the areas would be broken down into 4 levels of competency which are basic, emerging, developing and secure. This allows us to track the CYPs progression over time as their understanding and knowledge develops. As a team, we met and discussed each area and the level of competency within that. Finally, we went to trial the document. The overall document provides the QToD with clear achievable outcomes.

## Audiology: Knowledge of hearing loss



Date of Visit		21 March 2019		Number		Upload	
Name:		PSS-ID:		TOD		Date of birth:	
NC Year 5		NatSIP: 038		Hearing loss: profound		Type of loss: Sensori-Neural	
School/Setting:							
basic	emerging	developing	secure				
I know that I have a hearing loss.	I know that my device/s help me to hear.	I know that I'm not the only person who has a hearing loss.	I can explain aided & unaided hearing loss.				
I demonstrate an awareness that sound starts and stops.	I can recognise the difference between loud & quiet and high & low frequency sounds.	I understand a basic audiogram.	I can explain my audiogram in terms of speech sounds.				
I know my type of hearing loss.	I know that there are different types of hearing loss.	I can explain my hearing loss.	I can explain the different types of hearing loss & the impact of this.				
I know my level of hearing loss.	I know there are different levels of hearing loss.	I can explain my level of hearing loss.	I can explain the different levels of hearing loss & the impact of this.				
I have a basic understanding of how the ear works.	I can name the main parts of the ear.	I can identify the parts of the ear and their function.	I understand the impact of sounds upon the ear.				
I can show a friend my hearing aids.	I can explain to a familiar adult or child that I have a hearing loss and how to make listening easier for me in class.	I can explain to an unfamiliar adult the nature of my hearing loss and how to make things easier for me in class.	I feel confident to explain the nature of my hearing loss and implications for daily life.				
Date of assessment	Easter 19	July 19					

### Audiology: Amplification management



basic	emerging	developing	secure
I accept and use my amplification device/s as directed by an adult.	I can ask an adult for help with my device/s.	I manage my device/s with minimal adult support.	I can manage my device/s independently.
I know that my amplification device/s has different parts.	I have some vocabulary to discuss my hearing device/s.	I know that some parts of the device can be replaced.	I can describe the range of amplification devices used by deaf people.
I can look after my device/s with adult support.	I can store my device/s correctly when not in use.	I can change/charge the battery when needed. I can remove moisture from the hearing aid and/or tube.	I can clean my ear moulds. I keep my device/s in good working order without adult support.
I indicate that I can't hear using facial expression or pointing.	I know and can indicate when amplification devices are not working.	I can ask for help with my device/s when needed.	I can troubleshoot minor issues with my device/s independently.
I indicate that I want to wear my device/s, I sit still when an adult puts my devices on.	I know how to turn my device/s on and off. I can remove my device and/or ear moulds.	I can put on my device/s and/or earmoulds.	I can manage all controls appropriately e.g. Programs, t-coil.
I wear amplification devices consistently.	I understand the advantages of wearing amplification devices in the classroom.	I can explain when amplification devices are not needed and why,	I can use device controls appropriately in various listening situations.
I understand that a radio aid can be used to support listening.	I can make sure that the speaker is using my radio aid transmitter.	I can connect my devices to a radio aid. Independently.	I can explain how a radio aid works and why it helps me.
Date of assessment	Easter 19	July 19	



### Audiology: Environmental management

basic	emerging	developing	secure
With adult support, I can sit in the best position in class	I can sit in the best position in class	I know the impact on my listening of sitting in the wrong place	I can explain where is best for me to sit. I can ask to move to a better position.
I know that different things make different sounds.	I can locate sounds in my classroom.	I know the impact that background noise has on my listening. I can ask for help to minimise background noise.	I can explain the impact of background noise on my ability to listen. I can ignore unwanted background noise.
I know when someone is speaking to me.	I recognise when I haven't heard. I recognise when I haven't understood.	I can ask for repetition. I can ask a speaker to look at me.	I can identify & explain barriers to communication. I am skilled at repairing communication breakdowns.
I know that some places are harder to listen in.	I know how the physical environment can affect listening.	I can identify a room with poor/good acoustics.	I can apply my understanding of room acoustics to best suit my listening.
I make good use of equipment with adult support.	I make good use of the equipment I have.	I know about other equipment available to meet my needs.	I know how to request the equipment I need. I know how to use all equipment effectively in different environments.
Date of assessment	Easter 19	July 19	

### The charts

In the autumn term of 2018, a profoundly Deaf student was assessed as a baseline using the Audiology curriculum. The student's first and home language is BSL and he is supported in school by a CSW with weekly visits from a QToD and a deaf instructor. The information was shared with relevant school staff, parents and with Audiology to ensure, as far as possible, a multi-disciplinary approach to the outcomes.

Much of the curriculum is personalised and requires teaching in 1-1 or small group sessions with other deaf peers. However, part of the content in the knowledge of hearing loss section lends itself to mainstream classroom teaching. Some initial pre teaching of language took place with this student, which then led to small group classroom based teaching linked to a science topic. This allowed the student to develop concepts, understanding and scientific language in line with his peers.

The grids on previous pages show where the outcomes and targets were identified and how progress over time was tracked. There was no particular timescale set for updating the assessment document, though targets were linked to those set on the child's EHCP.

The impact of this work was that staff, students and parents had a clearer overview of which areas of audiology needed specific work and could then devise targets which were more needs led. Consequently, students were more engaged and so made progress which was more relevant and meaningful to them as deaf learners.

Target setting could be directly linked to EHCPs with a bank of resources becoming more readily available as staff rolled out the curriculum. The curriculum has also been used to support ToDs in training become more comfortable with the functional aspects of audiology in conjunction with their clinical practice.

The audiology curriculum is now being used widely across the team to assess new children to caseload, to set termly targets and to provide a level of accountability and evidence that we didn't have before. It is neatly organised into three sheets of paper, so is a manageable document to track progress over a number of years. It has been used with students with a range of communication approaches and from ages 2-18.



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