

BATOD and NDCS Joint Survey 2021**Summary of BATOD members' views on how Coronavirus has impacted on children and young people, their families, educational staff and wider society****Executive summary and recommended next steps:**

Following on from the survey BATOD carried out with members in January 2021 which was reported here: <https://www.batod.org.uk/resource/batod-member-survey-summary-jan-2021/>, in June 2021 BATOD and National Deaf Children's Society jointly surveyed members to find out views on how deaf children and young people's education has been affected by coronavirus. We asked about the impact on children and young people, their families, educational staff and wider society. The survey was open between 25 May 2021 and 23 June 2021.

This summary captures the results of the joint BATOD/NDCS survey and reflects on findings from BATOD January 2021 and May 2020 surveys. Some of the responses highlighted post lockdown and localised lockdown impact on regulations, practice and experiences. We revisited a range of questions about the impact of deaf children and young people, the amount of support they had had, service delivery and the use of assistive listening. We also asked about transitions, recovery/catch-up support, barriers experienced by QToDs, and non-staffing costs. We asked respondents to share their thoughts about the biggest challenge for their school or service at the time, in relation to support for deaf children and young people. As a result of this further survey and our ongoing conversations and consultations we will prioritise the following next steps:

Outcomes - BATOD is currently engaging with research partners and charities to look at the impact of the pandemic on deaf children, young people and families particularly in relation to social and emotional issues, access to education in settings and home-based.

Support for the profession - BATOD will continue to address the implications of the increased workload through continued meetings with the unions across the UK, the Department for Education and other nations' government education bodies, and in our response to the latest STRB (School Teacher's Review Body) report. BATOD will continue to work with partners across the UK on the revision of the mandatory qualification competencies for Teachers of the Deaf, apprenticeship route and where applicable to the General Teaching Council registration for specialist teachers.

Multi-agency working - BATOD is actively representing the QToDs in a range of working groups. A new working group comprising a wide range of stakeholders has been set up to look at audiology provision across England, in particular partnership working and quality of provision across Health, Education and Social Care.

Technology - BATOD continues to work closely with groups such as ALTWG (Assistive Listening Technology Working Group) to highlight concerns raised by members across the UK, changes in product ranges, training needs etc.

Positive developments - A number of developments highlighted in the last report will be retained once the pandemic is over. These include: engaging families and other professionals more effectively via digital platforms and hybrid arrangements, greater proficiency in the use of technology and improved support from employers.

Results from the survey:

Comments in italics are directly taken from the survey responses

In June 2021 BATOD and NDCS surveyed members to find out views on how deaf children and young people’s education has been affected by coronavirus. We asked about the impact on children and young people, their families, educational staff and wider society. The survey was open between 25 May 2021 and 23 June 2021.

257 people responded. The majority worked in sensory support services followed by mainstream schools, special schools, resourced provision, independent schools and auditory implant services. The respondents held a variety of roles:

	Number	Percentage
Head of a sensory service	19	9%
Peripatetic Teacher of the Deaf	100	49%
Teacher of the Deaf in a special school	13	6%
Teacher of the Deaf in a resource provision/base	48	24%
Teacher of the Deaf in an auditory implant centre	8	4%
Educational audiologist	5	2%
Other (eg QTMSI, Headteacher, Lecturer)	10	5%
Total	203	

Table 1: Roles of those who responded to the survey

The geographical representation:

	Number	Percentage
England	174	86%
Northern Ireland	6	3%
Scotland	12	6%
Wales	11	5%
Total	203	

Table 2: Location of those who responded to the survey

The first part of the survey invited free text responses from members on the following headings:

1. Are families with pre-school deaf children currently receiving face-to-face support from peripatetic Teachers of the Deaf at home?
2. What barriers, if any, are there to the provision of face-to-face peripatetic support to families in the home? (e.g. at family request, not permitted by the local authority, etc.)
3. Which of the below best sums up how coronavirus has impacted on the identification of permanent hearing loss in your area over the past year?
4. Which of the below best sums up how coronavirus has impacted on the identification of temporary hearing loss in your area?
5. Are there any deaf children and young people that you know of who have not yet returned to school?

6. As far as you can tell, has there been any change in the number of families choosing elective home education for their deaf child?
7. Are deaf children and young people in your area currently receiving face-to-face support in schools from peripatetic Teachers of the Deaf?
8. What barriers, if any, are there to the provision of face-to-face peripatetic support in schools?
9. What barriers, if any, are there to being able to provide remote support in any of the above cases?
10. Please use this comment box if you'd like to add any information about support to deaf young people with post-school or post-college transitions and any challenges in this area.
11. In an ideal world, what would you say needs to happen to make sure that deaf children and young people 'recover' or 'catch-up' from any challenges they've experienced over the past year?
12. Thinking about support for deaf children and young people more generally, what would you see as the biggest challenge for your school or service at this time?
13. In terms of non-staffing costs, please outline below what has changed.

The following is a summary of the responses, including key themes. The final section of this document outlines some of the key actions BATOD is taking as a result of this survey.

BATOD and the National Deaf Children's Society would like to thank everyone for responding and sharing their experiences.

Key themes

Impact on Deaf Children and Young People

Deaf children and young people's well-being and mental health remains a primary concern. As highlighted in BATOD's January and March survey reports many respondents expressed concern about the vulnerability of deaf children and young people across all age ranges.

Mental health and emotional wellbeing

27% of respondents felt that the mental health and emotional wellbeing of the deaf children and young people they work with was worse than it was before the pandemic. 69% felt it was mixed – some worse, some better.

Isolation from peers, particularly for sign language users, within school, outside of school and familiar support systems, and barriers to communication due to inaccessible face coverings were all cited as having a significant bearing. However, it was also commented by some respondents that "Pupils/students have become more resilient and more confident from the experience of the lockdown because - they had built a closer friendship with peers whose parents were key workers. - they adapted to technology and see the real benefits. It removed many of the communication barriers - regular remote chats were effective because they were relaxed at home and were more comfortable to talk about things."

Some respondents reflected on how they as professionals worked in "*overcoming hurdles and developing a new way of working to fit in with the children and young people needs, so that they*

could continue to make progress and be successful.” They found “Having parents at home allowed systems to work and many children have benefitted from the increased, focused parental input.”

The report asked if respondents knew of deaf children and young people who had not yet returned to school

	Number	Percentage
Yes	41	22%
No	146	78%
Not sure/Question not applicable to me	11	
Total excluding Not sure/Question not applicable to me	187	
Total answers	198	

Table 3: Knowledge of deaf children who have not yet returned to school

The reasons why they have not yet returned to school were most due to family’s medical needs, elected home education and communication anxiety.

The report sought details about any change in the number of families choosing elective home education for their deaf child.

	Number	Percentage
Yes – more families are choosing this option than would normally be the case	17	15%
Yes – fewer families are choosing this option than would normally be the case	0	0%
No change	95	85%
Not sure/Question not applicable to me	49	
Total excluding Not sure/Question not applicable to me	112	
Total answers	161	

Table 4: Elective home education

Early years

In relation to Early Years, the report suggested a mixed picture of families with pre-school deaf children currently receiving face-to-face support from peripatetic Teachers of the Deaf at home.

	Number	Percentage
In nearly all cases where it would normally be provided	49	37%
In most cases (more than half)	31	24%
In some cases (less than half)	19	15%
No	32	24%
Not sure/Question not applicable to me	71	
Total excluding Not sure/Question not applicable to me	131	
Total answers	202	

Table 5: Provision of face-to-face support in the early years

The most common barriers to the provision of face-to-face peripatetic support to families in the home included restrictions set by Local authority/Education authority, family request, alternative meeting locations (children centres, parks, garden, shielding (family member, staff member), staff capacity and staff concerns.

In relation to the impact in provision, it was reported “*some young ones have continued to thrive with little direct QToD contact built on already well-established support link (only regular family calls what’s app glimpses)*”. However, it was also recognised that “those babies with more complex needs have struggled to establish hearing aid use... Longer term effects will be interesting to see ... will progress for all be delayed by school entry because of overall reduction in social interaction for carers and babes e.g. toddler groups music singing groups.”

School aged

The March report highlighted a significant amount of remote work as cases of Covid increased but from March more QToDs were back in schools and visiting at homes or arranging visits at our offices where they “*could control the environment more.*” For the respondents who had not yet established normal visits, the two most commonly cited reasons for not carrying out home visits were either not being permitted by the local authority or due to a family request not to visit. Most common reasons around not being able to do school visits were related to schools not allowing classroom visits or restrictions on the number of visits they were able to do.

This survey highlighted respondents found bubble management, parental engagement and the lack of clarity about the ‘covid recovery programme’ difficult. Whilst it was noted by some “That there was more flexibility on how schools spend the money” this report had a recurring theme from the previous report and that have been raised at meetings with Unions. “*We cannot use tutors as we need staff that can sign.*”. “*Pupils can’t cope with additional hours as they reach cognitive overload.*”

“Best it’s staff that know pupils and the gaps”. “We should be allowed to spend the money on well-being and mental health.”

Respondents reported a mixture of experiences for deaf children and young people:

Resource provision responses suggested that was provision for children and young people was quite good. “Our children received comprehensive support in line with their full EHCP whilst learning at home. All pupils had full access to learning and their peers from the resource base throughout. Since returning, all pupils have settled in quickly and the pandemic has not affected their progress or emotional wellbeing. *“Some highlighted the challenge of “Maintaining the progress tracking (achieved in pandemic)”*”.

A peri perspective of school-based provision reflected “It depends on the child and the school”. One respondent said *“I have found students at the same school had a difference in remote learning experience. We monitored and emailed the school to make the necessary adjustments when there were issues. The majority of schools and teachers complied. Many preferred remote learning as they could hear the teacher better and questions were typed in the comments box which they found better. For the children who struggled, some schools have put catch up in place already or we the QToD have given advice on work to do.”* A positive outcome noted was *“Children who were in school for lockdowns have really benefitted from smaller classes.”*

The report suggested the nearly 60% of deaf children and young people currently were receiving near normal face-to-face support in schools from peripatetic Teachers of the Deaf. Others reported their services was just commencing one school visit/day. One member shared a concern that *“There has been a distinct lack of guidance from Welsh Government about how peripatetic services should operate during the pandemic.”*

	Number	Percentage
In nearly all cases where it would normally be provided	79	59%
In most cases (more than half)	36	27%
In some cases (less than half)	16	12%
No	3	2%
Not sure/Question not applicable to me	26	
Total excluding Not sure/Question not applicable to me	134	
Total answers	160	

Table 6: Provision of face-to-face support in schools

The barriers to the provision of face-to-face peripatetic support in schools included restrictions set by the setting, restrictions set by Government/local authority restrictions, bubble closures/self-isolation and space availability.

There were gaps in specialist peripatetic support to families and schools. Throughout the pandemic BATOD and National Deaf Children’s Society have emphasised that no blanket policies should be in place which would prevent face-to-face support, regardless of the individual needs of the child or family.

Where it was not possible to provide face-to-face support, many Qualified Teachers of the Deaf indicated that remote support was been provided instead.

	To families (number and percentage)	To mainstream teachers (number and percentage)	To other staff within schools (number and percentage)	To deaf children and young people (number and percentage)
In nearly all cases	71 (62%)	66 (58%)	50 (45%)	52 (45%)
In most cases (more than half)	23 (20%)	19 (17%)	23 (21%)	25 (22%)
In some cases (less than half)	15 (13%)	16 (14%)	21 (19%)	26 (23%)
Mostly not	5 (4%)	12 (11%)	17 (15%)	12 (10%)
Question not applicable to me	40	41	41	41
Total excluding Question not applicable to me	114	113	111	115
Total answers	154	154	152	156

Table 7: Provision of remote support

Transitions

The survey reported nearly 50% of deaf young people were receiving the same level of support with post-school or post-college transitions, compared to before the pandemic.

	Number	Percentage
In nearly all cases where it would normally be provided	56	47%
In most cases (more than half)	31	26%
In some cases (less than half)	25	21%
No	7	6%
Not sure/Question not applicable to me	42	
Total excluding Not sure/Question not applicable to me	119	
Total answers	161	

Table 8: Support to deaf young people with post-support or post-college transitions

In relation to information about support to deaf young people with post-school or post-college transitions and any challenges in this area, the survey suggests 27% felt that deaf young people were receiving the same level of support with post-school or college transitions in some cases only or not at all. Comments indicated that any such visits were likely to be virtual visits only.

One respondent captured the challenge of engaging true pupil voice “*We are writing transition 'hearing passports' with pupils' input where possible but otherwise 'doing it to them' rather than 'doing it with them' to get through the numbers and the catch-up visits before the end of term or leaving dates*”. Another noted a “*significantly reduced transition offer for college*”. Therefore this “*remains an area where young people can remain unsure about what their support looks like when they transition to college*”.

Concerns that are also echoed in wider BATOD/NDCS are that there are “*Not enough QToDs in the FE sector to support young people and adults into FE/HE*” and the reliance placed on colleges from agencies/providers as a result of “*Ceasing of CSW/NT*”

Recovery/Catch-up support

The survey indicates that 25% felt that schools/colleges were not taking steps to ensure that any catch-up programmes or tuition took into account the needs of deaf children and young people and were accessible and appropriate to them. 31% reported this was happening in some cases only.

	Number	Percentage
In nearly all cases	15	19%
In most cases (more than half)	22	26%
In some cases (less than half)	26	31%
No	21	25%
Not sure/Question not applicable to me	77	
Total excluding Not sure/Question not applicable to me	84	
Total answers	161	

Table 10: Recovery/Catch-up support – steps taken to ensure needs of deaf children and young people taken into account

These findings are concerning – suggesting that deaf children and young people are not yet benefiting from catch-up programmes or tuition introduced across the UK, despite the disadvantages that many will have faced during the pandemic.

Qualified Teachers of the Deaf wanted to see a greater focus on social and emotional needs. They also wanted to see more support targeted towards deaf children and young people and/or increased visits from Qualified Teachers of the Deaf.

In relation to support for deaf children and young people more generally, respondents identified a range of challenge for their school or service. The main reasons included funding, staffing and staff capacity, visits limitations, supporting

social needs, mental health support, equipment/radio aids and deaf awareness and accessibility.

Non-staffing costs

In relation to any change observed in the non-staffing costs that your service or school incurs, 50% noted non-staffing costs had increased with nearly 40% reporting no change.

	Number	Percentage
Non-staffing costs have increased	40	50%
No change	30	38%
Non-staffing costs have decreased	10	13%
Not sure/Question not applicable to me	81	
Total excluding Not sure/Question not applicable to me	80	
Total answers	161	

Table 10: Non-staffing costs

Beyond the cleaning related costs, other reasons for increased costs included Radio aids/Assistive Listening Devices costs, remote working, technology and equipment costs and early years resources. Whilst increased staff budget was reported, service cuts was also raised.

Radio aid usage

The survey asked about any changes in the proportion of deaf children and young people using radio aids in classrooms, compared to before the pandemic. 73% respondents indicated no change.

	Number	Percentage
More deaf children and young people are using radio aids	31	22%
Fewer deaf children and young people are using radio aids	7	5%
No change	104	73%
Not sure/Question not applicable to me	19	
Total excluding Not sure/Question not applicable to me	142	
Total answers	161	

Table 11: Radio aid usage in the classrooms

In relation to home use, and any changes in the proportion of deaf children and young people compared to before the pandemic, 36% reported more deaf children and young people are using radio aids. 22% thought the same in relation to the use of radio aids in classrooms.

	Number	Percentage
More deaf children and young people are using radio aids	44	36%
Fewer deaf children and young people are using radio aids	3	2%
No change	75	61%
Not sure/Question not applicable to me	39	
Total excluding Not sure/Question not applicable to me	122	
Total answers	161	

Table 12: Radio aid usage at home

A recurring theme in all BATOD’s surveys is how the “*service had delivered and adapted our role to ensure all our children and their parents are well supported.*” For example, in all surveys some respondents had engaged doorstep sessions to get the equipment working. However, in each survey some respondents noted “*The most challenging part was the hospital appointments.*”

External services

Some respondents indicated it was business as usual with health service provisions. Others reflected they were still experiencing delays in cochlear implant pathways, ear mould provision, grommet operations and hearing aid appointments. A recurring theme was the management of the backlog generated from the previous lockdown periods.

In some areas it was reported “*Newborn Hearing Screening has continued as normal*” noting “*It is difficult to assess whether late diagnosis has been affected*”. “*Preparing for an influx of late diagnosed in some areas*”.

The impact of the coronavirus on the identification of permanent hearing loss over the past year

	Number	Percentage
We have had fewer referrals than we would expect	35	30%
We have had the usual number of referrals	68	59%
We have had more referrals than we would expect	13	11%
Not sure/Question not applicable to me	84	
Total excluding Not sure/Question not applicable to me	116	
Total answers	200	

Table 12: Identification of permanent hearing loss

The impact of the coronavirus has impacted on the identification of temporary hearing loss in the area

	Number	Percentage
We have had fewer referrals than we would expect	55	60%
We have had the usual number of referrals	30	33%
We have had more referrals than we would expect	7	8%
Not sure/Question not applicable to me	108	
Total excluding Not sure/Question not applicable to me	92	
Total answers	200	

Table 13: Identification of temporary hearing loss

These findings point to a need for increased vigilance and awareness of the signs of hearing loss among education settings during autumn term.

Some respondents highlighted

“Group most affected by the pandemic are deaf children who are moderately or mildly deaf. We need to monitor their attainment very carefully at a national level, particularly reading scores. It is often hard for local authority services to get this information from the management database used by their authority.”

“Grommet ops delays so hearing aids given when mild loss so some requests for support. Unilateral & mild loss given information and contact numbers . Cross county referrals as transition time into schools.”

This report “identification of hearing loss in children with complex learning difficulties is reduced- the use of virtual clinics means that advice is based on parental report, which is of varied accuracy.”

“Year school hearing screen has reduced the number of temporary hearing loss referrals”

For the CI service, the lack of information from local professionals because they've been prevented from seeing the children. CI rehab team has taken a more proactive approach and assuming some of the local support role too.

In one location it was observed that in relation to speech and language therapy there has been a *“large reduction in the amount of one-to-one sessions with SLT and some health boards never getting online. Others are doing support online, but much reduced hours.”*

The respondents highlighted a range of other challenges e.g. referrals delayed, referrals reduced, school screening and referral issues, appointment limits or delays, grommet operations delayed, new referral visit difficulties, identification of hearing loss in children with complex needs reduced, support criteria in local authority, a

need for better referral pathways, progressive hearing loss identification reduced, virtual clinic difficulties and staff shielding.

This survey report, as with the previous reports, highlighted how roles engaged with multi-agency working with deaf children and young people and their families. Some respondents reported “*However, we need to use personal devices for Zoom or WhatsApp video calls if that was the parents’ preference.*”

The Qualified Teacher of the Deaf (QToD) role

Change in remit

As QToDs, through the pandemic, we have ended up taking on a wider role, supporting families of Deaf children. This is due to other services being stretched. Referrals to other professionals are taking even longer than usual, especially OT, ASD, CAMHS etc.

Staff morale/exhaustion

Respondents raised “*Very concerning 'push' from new ALN code for the needs of Deaf children to be met via Universal Learning Provision NOT considered Additional Learning Provision (ALP) - significant implications of access to provision from specialist staff with knowledge and understanding of Deafness.*”

“It would be good to be able to use our judgement as peripatetic teachers to carry out physical visits rather than having to make a case to the head of service about whether the visit is essential. I am concerned that going forward our ability to physically visit schools will be reduced to essential visits only. Regular visits to students are needed to maintain the relationships and therefore make our support meaningful and 'SMART!'”

“The Deaf Bases have kept open throughout all Lockdowns. The Peripatetic team increased contact with families and school staff during Lockdowns and are now frantically trying to visit all children and young people and do assessments etc. Keeping staff positive and valued and not losing them to easier jobs at this time of year. Also recruiting new staff is going to be a challenge as admin is not as efficient and timescales are much tighter.”

“I feel that under the circumstances we have all rallied, but at an organisational level there is still insufficient understanding of the importance of our roles.”

“We have been given excessive reporting which means we spend one week every term or half term now just collating all our visit reports and any targets into more documentation in case an Ofsted inspector should visit”

“Since the pandemic this is now the worst job ever. I've seen 3 children in over one year. The Risk assessment is completely ridiculous I'm not allowed to do anything to actually support the children. I think we will have no jobs soon because everyone will wonder what is our purpose.”

“All I do is online meetings with adults- Given that the government has stated that peripatetic specialist teachers must see disabled children as a priority it's very frustrating that the Local Authorities are making this very difficult.”

Listening environments

“Managing listening environments, schools feeling have no money for basic access needs. Reduced number of specific staff linked to a class means pupils with behaviour or high physical needs always prioritized. Hard to get direct input for communication SLT needs so QToD expected to provide slot when hearing may not be main cause of need.”

Face masks/coverings

We asked what reasonable adjustments were being made by teachers where face masks or coverings were being worn in the classroom: Nearly all, 71%, reported removing the mask or covering when talking to a deaf child, with 31% wearing a clear face shield or visor.

Reflections

The survey asked Qualified Teachers of the Deaf if there were any changes from the past year that they would like to retain.

A common answer was the option to continue remote working with families and with professionals. Whilst BATOD and National Deaf Children's Society would not support the introduction of any blanket moves towards remote support, without any kind of regard for the individual needs of deaf children and young people or their families, we feel these findings suggest they can be a positive part of the package of support provided by Qualified Teachers of the Deaf.

Other respondents referred to improved communication with families, the greater use of smaller groups and quieter listening spaces where schools were allowed visitors, and improved engagement of multi-agencies with the virtual meeting options.

The impact of poverty on people's lives and the pandemic has added a lot of extra pressure to many families. An area to monitor is education, health and social care's services plans for resume normal provision and the reconnection with families who couldn't/didn't engage during the pandemic, particularly those vulnerable to inequalities.

What has National Deaf Children's Society done throughout the pandemic?

In response to what deaf young people, families and professionals have told us about the impact of Covid-19, the National Deaf Children's Society have done a range of things since this pandemic started. They said:

“We have worked closely with our partners, in particular BATOD and NatSIP, and with ongoing support and advice from a range of different professionals – for which we are extremely grateful. Some of the steps we’ve taken include:

- published a series of live blogs, regularly updated with the latest changes to government guidance and setting out implications for deaf children*
- working with BATOD and NatSIP, produced guidance for education settings, with example of the reasonable adjustments that we would expect them to take to ensure deaf children are not significantly disadvantaged by Covid-19 restrictions*
- separately, we have also published advice on accessible remote and online learning. We also provided support and advice to Oak National Academy and BBC Bitesize as they expanded their online offering*
- worked with others to raise issues and concerns with government departments, suggesting changes to government guidance on key areas of concern. For example, guidance on face coverings across the UK now highlights the needs of deaf children. In England, we initiated legal action to help ensure that guidance was strengthened*
- supported deaf young people to campaign on key barriers and challenges for them, including support them to represent their views before MPs in Select Committees*
- participated in relevant government advisory groups, including on accessible communications and on transparent face coverings*
- developed a new series of online information events for families providing practical help and advice on a range of different topics. Our Helpline also continues to provide support*
- collected evidence through a series of surveys and through Children’s Hearing Services Working Groups. Key findings have been shared with government officials.”*

What is BATOD doing to support the profession and the needs of deaf children, young people and their families?

	BATOD
Pupil voice	
Mental health and well-being	Links with NDCS/Sign Health
Face covering	https://www.batod.org.uk/resource/face-covering-guidance-and-tips/ https://www.batod.org.uk/march-2021-batod-update-about-face-coverings-in-education-settings/ Updates from governments on BATOD blog and social media

Social times with other deaf peers outside of school	Signposting on BATOD blog and social media
Access to deaf signing peers	Signposting on BATOD blog and social media
Home based access	
Home based IT access – availability of devices WiFi signal.	Signposting on BATOD blog and social media – government, charity links
Parent training on devices for home-based learning	Liaison/collaboration with NDCS
Children and young people training – devices for home-based learning	Liaison/collaboration with NDCS
Sound quality and ambient noise	Liaison/collaboration with ALTWG and BAEA
Assistive devices at home	ALTWG
Services	
Preparing for an influx of late diagnosed	Seek case studies from HOSS/QToD
Resuming normal provision	NatSIP
Work/life balance for catching up on caseload when normal returns	Meeting with unions
Use of personal devices for Zoom or WhatsApp video calls	Meeting with unions
Accessing accurate baseline information	Seek case studies from HOSS/QToD
Decline in QToD numbers	CRIDE
EY	
Newborn hearing screening	Working group NHS England, NHS website
Toddler groups	Signposting on BATOD blog and social media
BSL and early language input	Webinar series
School based provision	
Staff workload	Meetings with unions
Engagement with parents	Liaison/collaboration with NDCS
Remote learning	https://www.batod.org.uk/resource/advice-for-online-teaching/
Recovery curriculum/catch up	Examples from members via QToD forum/newsletter – add to resources pages on website Discussions with Unions and NDCS
Preparing for exams	Joint online material

	Standalone webinar package
Modified curriculum access	Examples from members via QToD forum/newsletter – add to resources pages on website
Interventions for reading, phonics and language	Examples from members via QToD forum/newsletter – add to resources pages on website
Post 16	
Transition offer for college	BATOD NEC Post 16
Low QToDs numbers in FE/HE	BATOD NEC Post 16
Ceasing of CSW provision from some agencies/providers	BATOD NEC Post 16
Technology	DEAL
Preparing for adulthood	BATOD NEC Post 16, liaison with NDCS, examples from members via QToD forum/newsletter, case study examples from HoSS/QToD
Apprenticeships/T levels	BATOD NEC Post 16 and liaison with NDCS
BSL	
Free parental access to BSL courses	Campaigning issue; support eg NDCS
Multi-agency working	
Information sharing	Seek case studies from HOSS/QToD
Staff well-being	Meeting with unions
Assistive listening devices	
More support from QToDs	ALTWG
Increased funding for assistive listening device	ALTWG and NDCS
Joint Health and Education commissioning	Hearing loss and deafness alliance
Managing classroom noise as normality returns	https://www.batod.org.uk/resource/uk-assistive-listening-technology-working-group-and-batod-joint-advice/
Technology upgrades	ALTWG
Recovery programmes	Unions
Government	
Country specific	Feedback from region and nation NEC reps
External services	
SALT	Collaboration with RCSLT
Grommets/Glue Ear	NICE consultations, ALTWG
CI referral	Collaboration with BCIG
School screening	
School screening	Liaison with ALTWG, Hearing loss and deafness Alliance, NDCS
Complex learning needs	Liaison with ALTWG, Hearing loss and deafness Alliance, NDCS, NatSIP/Government