**The specialist deaf curriculum framework:**

**Supporting deaf children and young people’s independence**

**What is the specialist deaf curriculum framework?**

The specialist deaf curriculum framework has been written to support deaf babies, children, young people, and their families to develop knowledge and make informed and independent decisions about their deafness, from identification through to adulthood.

It can support them to:

* understand and make decisions about their deafness
* develop the necessary social, pragmatic, and academic communication and language skills in their preferred communication style
* develop confidence in their ability to self-advocate and to self-determine
* create a positive sense of self and deaf identity
* manage change and have the skills needed for adulthood.

**How will it be used?**

There are three key aims of the resource:

* to identify areas of specialist support and good practice that can improve independence and outcomes for deaf children and young people (DCYP)and their families
* to raise awareness of deafness and the needs of DCYP and their families from identification through to adulthood with those who are new or unfamiliar with deafness
* to enable discussion with and a shared language about deafness between deaf children and young people, their families, their schools and settings, and Qualified Teachers of Deaf Children and Young People (QToDs) and the other professionals who work with them.

**Who will use it?**

This curriculum framework is a UK-wide resource for specialists in deafness such as QToDs and educational audiologists. It can also be used by DCYP, their families, education settings, and the other professionals who support them. The resource is designed to cover the breadth of work of the QToD/ToD however, the focus may vary depending on where the QToD works, e.g. school for DCYP, specialist provision, in a peripatetic role, etc.

**How did we choose which areas to include?**

Core areas have been identified by QToDs and other professionals who support DCYP and their families. They comprise the elements that should be considered when supporting DCYP from identification to 25 years of age.

**How is the specialist curriculum structured?**

A hub and spoke model illustrate the seven core areas.

Each area consists of:

* outcomes based on what we know works
* suggestions for interventions and good practice
* signposting to resources that could support you.

**How are resources selected to be included and how will they be monitored?**

Resources selected will:

* have a clear purpose
* be inclusive, accessible, well-presented and appealing
* be based on credible educational approaches and current research.

A panel of QToDs will review submissions from the profession. Every three years, the resources will be reviewed and either kept in place or removed as appropriate. We would welcome suggestions for resources.

**How will it fit in with the mainstream curriculum?**

It is a pleasure to acknowledge the huge amount of excellent curricular work that is carried out for DCYP by their mainstream teachers, and it is hoped that this description of a specifically deaf-oriented specialist curriculum will be used to inform and help joint working in this area.

**Acknowledgements**

The curriculum was developed by a working group with the following members:

* Caroline Chettleburgh, QToD, Sheffield Service for Deaf and Hearing Impaired Children
* Suzanne Churcher, QToD, Sensory and Communication Support Service, Torfaen, Wales
* Emma Fraser, QToD, National Deaf Children’s Society
* Steph Halder, QToD, University College London Hospitals and BATOD
* Martin McLean, Senior Policy Advisor, National Deaf Children’s Society
* Conor Mervyn, QToD, Education Authority Northern Ireland
* Teresa Quail, QToD and Educational Audiologist, BATOD
* Tina Wakefield, QToD, Consultant for the National Deaf Children’s Society
* Susan Winn, QToD and Educational Audiologist, Rotherham Hearing Impairment Team

(Roles correct as of start of project)

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**A note about terms**

We use the term ‘deaf’ to refer to all types and levels of hearing, from mild to profound. This includes deafness in one ear or temporary hearing loss such as glue ear. We include learners in schools and settings who may identify as having a ‘hearing impairment’ in the school census.

The term ‘language’ should be taken to refer to spoken language, British Sign Language or Irish Sign Language (in Northern Ireland).

QToD refers to teachers of DCYP who have successfully completed the mandatory qualification. ToD refers to those who are currently training.

**Section 1 Deaf identity**

How a deaf child or young people (DCYP), their family, and their community view their deafness will be individual and may change over time. Having opportunities to meet a range of deaf people who span the spectrum of communication will support understanding of different views, perspectives, and experiences. It is important to start these conversations early but also to recognise when DCYP and their families are ready.
Whilst there is also no one mode of communication that is right for all, regard should be given to the importance of British Sign Language (BSL) related to Deaf culture.
DCYP and their families may need to explore how they will respond to others who enquire about deafness or have different perspectives and reactions. These might include views on social and medical models of deafness, disability as a positive or negative, or how deafness intersects with race, ethnicity, and gender. DCYP have a right to be deaf in their own way and to know what their rights are as a deaf person.
Open discussions about the terminology used to describe deafness are encouraged so that individual DCYP and their families feel the appropriate terms are being used.

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| **1a. Knowledge of Deaf history and culture**   |
| DCYP and families know about* success and achievements of deaf people from the past to present
* how the rights of a deaf person have developed over time
* famous deaf people of the past (Thomas Edison, Kate Harvey, Annie Cannon, Ludwig van Beethoven, Franciso Goya)
* current role models (Rose Ayling-Ellis, Hermon and Heroda Berhane ‘Being Her)’ social media influencers, Jodie Ounsley)
* deaf events and organisations (Deaflympics, Deafinitely Theatre)
* books and films with deaf characters
* the history of deaf education from the past to present
* the debates and history around communication approaches
* the development of BSL and its recognition as a language.

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| **1b. Opportunities to meet with other deaf CYP, their families, and deaf adults**   |
| DCYP and families are given opportunities to * meet other DCYP and their families through various groups, platforms, and 1:1 meetings
* meet other families and parents of deaf children
* know about different national, regional, and local organisations for individual DCYP’s needs
* meet and work with a range of deaf people
* find out about availability of training on internet safety.

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| **1c. Understand different perspectives on deafness**NB: See also section related to preparation for adulthood  |
| DCYP and families know * and understand the different terminology used to describe deafness
* that they can choose how they describe their deafness
* the importance of respecting the choices of others
* about the different models of disability – social and medical
* deaf rights and campaigns
* about the development of BSL, its recognition as a language and the BSL Act (Scotland 2015, England 2022). and its impact on society
* the positives and negatives/advantages and disadvantages of being deaf, 'deaf gain’
* their deafness in relation to other aspects of their identity (gender, sexuality, race, other).
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**Section 2 Communication, language, and literacy**

Language and communication are at the heart of deaf children’s cognitive, emotional, and social development. A crucial element is the creation of rich, accessible language environments in every area of the deaf child’s life. This starts with supporting families to develop early interaction skills with their deaf baby and toddler, continues into education by supporting schools and settings to make language and learning accessible, and through to supporting young people to develop the skills for successful interaction in everyday life.
Qualified Teacher of Deaf Children and Young People (QToD) involvement is underpinned by the following
•informed choice
•evidence-based practice
•effective and regular planning and assessment
•joined up working and person-centred planning.

Deaf Children and Young People (DCYP) have a right to a full language, but their communication journeys can be complicated or may change. Everyone supporting the DCYP must be fully informed of how language, communication and literacy skills are developing, so they know how best to support through building upon strengths, and recognising and addressing barriers and challenges. The QToD is essential in working with non-deaf specialists in education to ensure the appropriate approaches and interventions are used to help a child develop their literacy skills.

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| **2a.** **Creating language rich home environments**  |
| Families are supported to* create a rich communication and language environment
* understand the broad range of reasons to communicate
* understand how language and communication development for a deaf baby/child is different
* experience opportunities to observe/engage with the range of communication used by deaf people
* understand what is needed to achieve their communication goal
* have a shared understanding and value the importance of language in creating relationships in the family and community
* understand the importance of language in learning and literacy
* understand the importance of language supporting sense of self
* know how to access information on the different types of communication and support from a range of organisations
* know about a range of resources available to support literacy
* co-produce communication goals.

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| **2b. Communication and language in education**  |
| DCYP and families * in partnership with others, support all professionals in the setting to communicate effectively and appropriately with their children
* know about a range of resources available to support literacy. e.g. Cued speech, colourful semantics, shape coding, visual phonics
* know how to access courses to further develop their language and communication skills, e.g. higher level BSL
* are involved in delivering deaf awareness training and supporting the setting to communicate effectively
* are aware of the tools and resources to ensure the communication, e.g. communication support workers (CSWs), working with interpreters.

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| **2c. Communication with others**  |
| DCYP and their families are supported to * develop strategies for school age children
* use role play to explore different communication environments
* encourage use of digital skills such as texting, pinning an interpreter in a video call and speech to text recognition (STTR) technology, functional literacy skills
* explore language skills for use in different areas and with different people, e.g. peers, family, medical appointments.

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| **2d. Technology for communication**  |
| QToDs * work with speech and language therapists (SLT) and teachers to develop use of augmented systems such as Picture Exchange Communication system (PECS)
* understand how the use of these systems relates to DCYP’s levels of deafness and other Special Educational Needs and Disability (SEND)/additional learning needs (ALN)
* help promote independent use of systems.

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  **Section 3 Understand access to sound**

Access to sound and speech is individual and influenced by a range of factors, so developing an understanding in this area is multi-faceted. Many Deaf Children and Young People (DCYP) will use some form of amplification or aid to hearing but not all. Hearing. Listening and language needs, skills, and priorities will likely change over time. As with all areas of this work, the aim is about equipping the DCYP with the understanding and knowledge of their deafness so they can make informed choices about why, how, and when they access sound and speech.

Open and sensitive discussions, for example, around aetiology (cause of deafness), are essential. This is supported by the Qualified Teacher of Deaf Children and Young People (QToD) having knowledge of the DCYP’s specific aetiology and what that means for the DCYP and the wider family. Language around deafness remains ever important.

Engagement with audiology remains key throughout a child’s lifetime even if they choose not to use amplification. Additional factors to consider will include the amplification requirements of DCYP with additional or complex needs, individual family circumstance culture and belief systems, individual preference and practicability, rapid changes in technology, and transition from paediatric to adult services.

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| **3a. Know about personal amplification**  |
| DCYP and families know* what personal amplification equipment they have and why
* what the equipment and its component parts are called
* what amplification is on offer to them
* the potential benefits and challenges with personal amplification
* what is required to care for equipment and ensure optimal working
* which programmes can be available/what features can do how to use equipment and are aware of potential hazards
* how to access further support and information from a range of sources
* how they can personalise and accessorise their equipment.
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| **3b. Know about other technology for access to sound**  |
| DCYP and families* are aware of how personal amplification equipment can be connected to other devices through Bluetooth
* know about different technology in different environments, e.g. in school, at home, and in the outside world, that links with their personal amplification
* have knowledge of options available to give access to sound when not using personal amplification, e.g. soundfield systems
* know about the technology options that are available through education services such as radio aids, remote mics, iPads, and the potential benefits and challenges of each.

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| **3c. Engage with audiology services and understand audiological information** |
| DCYP and families* know how to interpret their audiogram and understand what is means to them
* understand what happens when attending appointments at the hospital/clinics about their deafness
* know how to describe their hearing experiences and how their feedback can lead to change
* develop an understanding of what they can ask/query in appointments
* know about different ways of accessing sounds other than personal amplification – surgery, middle ear implants, grommets, ear wax
* understand the role of the different people they see about their deafness
* know what the purposes are of different tests and what these mean
* understand the importance of good listening skills/access to the range of speech sounds for developing spoken language.

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| **3d. Understand aetiology (cause) of deafness** |
| DCYP and families* know about the aetiology (cause)of their deafness or why it is not known yet
* understand how aetiology can be identified, e.g. genetic testing
* know aetiological investigations are an option for DCYP and families at any stage
* understand what it means if the aetiology is known
* understand the potential and challenges of genetic testing.
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| **3e. Knowledge of acoustics and the impact on listening** |
| DCYP and families* know how sound travels and is measured
* know how sound is heard/not heard
* know about the levels and types of deafness
* are aware of different listening environments, their impact and potential solutions.
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**Section 4 Social, emotional, physical, and mental health**

Developing a positive sense of self and connecting to and being part of a wider community is key for Deaf Children and Young People (DCYP) and their families. Providing opportunities for DCYP and their families to come together can support them to gain valuable support networks, both emotional and practical, and to meet others like them, reducing feelings of isolation or difference. Social activities also provide opportunities for deaf children to understand their own feelings and behaviour as well as those of others. Social communication skills such as pragmatic language skills and theory of mind (ToM) can be supported and developed. Understanding the language of the playground, slang, accessing vocal tone, and body language, are all important factors that can lead to greater social inclusion.

Deaf children and young people are more likely to experience mental health difficulties. ([**NDCS 2022 Emotional Well-being Survey of Deaf Children and Young People**](https://www.ndcs.org.uk/media/8503/emotional-well-being-survey-of-deaf-children-and-young-people_2022.pdf)) Being able to express feelings, seek support, and self-advocate, have positive self-esteem, and be able to self-determine are all essential skills for good mental health.

In terms of physical health, good health is also an important factor in deaf children experiencing positive well-being. There are features individual to a deaf person, for example, ensuring good ear mould hygiene to reduce any risk of infection. These aspects require specialist teaching and input, which is not part of the curriculum in mainstream education settings. The role of the specialist Qualified Teacher of Deaf Children and Young People (QToD) comes to the fore.

The increase in use of technology and social media presents both opportunities and challenges for DCYP and their families. DCYP are more likely to seek contact and friendships with others online. They are also more likely to be the victims of bullying. There is now a greater need for explicit teaching in this area.

Please refer to sections [**1**](https://www.batod.org.uk/resources-category/specialist-deaf-curriculum-framework/1-deaf-identity/) and [**5**](https://www.batod.org.uk/resources-category/specialist-deaf-curriculum-framework/5-manage-change/) on [**Deaf identity**](https://www.batod.org.uk/resources-category/specialist-deaf-curriculum-framework/1-deaf-identity/) and [**Manage change**](https://www.batod.org.uk/resources-category/specialist-deaf-curriculum-framework/5-manage-change/).

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| **4a. Social health**  |
| DCYP and families are supported to * form secure attachments
* have opportunities to experience a variety of relationships (e.g. after school club)
* develop their social communication skills
* develop an understanding of theory of mind (ToM)
* understand and reflect on different behaviours around deafness and the impact of those
* develop skills around assertiveness in relationships and how to have those interactions
* understand what resilience is and how to build that within self
* develop an awareness of accessibility within different contexts and feelings of exclusion
* find opportunities for peer-to-peer support, for example, modelling positive interactions, use of slang, etc
* understand different social situations and the levels of formality and language linked with those
* develop an awareness of the principles of consent within relationships
* develop strategies to deal with situations around bullying
* know how to keep themselves safe.

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| **4b. Emotional and mental health**  |
| DCYP and their families * are supported to have a positive view of their/their child’s deafness
* develop an awareness of accessibility within different contexts resulting in isolation or exclusion
* are given opportunities to be in contact with other families and DCYP and their families
* know about the range of support groups available
* know about local and national resources for DCYP and their families
* develop their sense of self and deafness as part of who they are
* are supported to develop their awareness of what good mental health looks like and some potential difficulties associated with deafness
* are supported to explore feelings around successes and perceived failures
* are supported to explore potential areas of difficulty, e.g. transition and how to approach these
* develop appropriate vocabulary for expressing feelings
* are signposted to the relevant sources of support and organisations regarding mental health.

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| **4c. Physical health**  |
| DCYP and their families * know about the links between exercise and mental well being
* find opportunities to participate in physical activity
* understand the language around healthy eating (including advertising)
* know about safety related to ear hygiene
* know about safety related to their hearing devices
* have opportunities to develop understanding of language around puberty, sexual health, gender, etc
* understand aetiology of deafness (including balance) and potential links with safety
* are given opportunities to participate in sporting activities safely, e.g. rugby, abseiling
* develop skills around participating in health appointments
* know about the different types of equipment to help keep safe, e.g. fire alarms, etc
* develop an awareness of the principles of consent within the health setting
* are signposted to resources and accessible information around a range of medical needs and appointments
* understand the importance of attending appointments related to health, including audiology, and the importance of lifelong care.
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| **4d. Technology and staying safe** |
| DCYP and their families * understand the benefits and challenges with social media
* develop digital skills, both personal and at school, including developing knowledge, and strategies to deal with cyberbullying
* understand of the challenging nature of social media and the internet.
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**Section 5 Manage change**

Transitions can present a unique set of challenges for deaf children and their families. They include transitions in education and childcare, health, training, and work. Due regard must be made to the relevant legislation, outlining best practice in relation to transition across the ages from birth to 25 years (where relevant) and Deaf Children/Young People (DCYP) and their families must be fully involved.

Other changes a DCYP may experience might include moving to another country or entering the UK from abroad. Their hearing levels may change, in some cases quite significantly. Careful management is required, as is the case where a child with typical hearing experiences sudden onset of deafness, both for the family and the child. Support for families is essential no matter the age of their child, when deafness is newly identified.

Careful planning is necessary to ensure that the receiving setting has made the necessary adaptations and adjustments. Understanding DCYP’s own access needs in different situations requires exploration. DCYP and their families must be consulted about their access needs, supported to develop their ability to make informed decisions, and conversations must be kept open to prevent communication breakdown. DCYP benefit from targeted support and opportunities to develop resilience, independence, and self-advocacy

Please also refer to [**Sections 2**](https://www.batod.org.uk/resources-category/specialist-deaf-curriculum-framework/2-communication-language-and-literacy/) and [**4**](https://www.batod.org.uk/resources-category/specialist-deaf-curriculum-framework/4-social-emotional-physical-and-mental-health/) where the DCYP’s aetiology indicates they may experience a change in their levels of hearing or where an additional need is identified.

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| **5a. Moves and changes in educational settings**  |
| DCYP and their families  * experience an effective and positive transition from one setting to another and within setting
* have the information to make decisions about educational placements
* have access to information about support available and feel confident in the management of the support available
* understand their rights within the education system to be fully included
* have the tools, knowledge, and skills to self-advocate
* know about different study options and what they need to achieve to achieve their aspirations
* have an understanding of the support mechanisms available to manage transition beyond secondary school
* have an awareness of the additional support available in their next educational setting
* know about the appeals process.

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|  **5b. Understand their own access needs**  |
| DCYP* are given opportunities to express their individual preferences
* have an understanding the options available, e.g. interpreters, notetakers, lipspeakers and palantypists
* have a thorough understanding of the roles to match their access needs
* know their access needs may change over time and what the process is for requesting a change
* know about reasonable adjustments and the requirement of the setting to meet these
* know about and secure access arrangements for assessments and exams at every stage
* are able to have discussions about their career pathway.
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| **5c. Moving to adult NHS services**  |
| DCYP and families * understand the differences between paediatric and adult services
* feel supported in understanding possible best care pathway options
* know about and are able to advocate communication preferences for appointments.
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Section 6 Preparation for adulthood

The United Nations Convention on the Rights of the Child (UNCRC) Article 23 states that children with a disability should get the education, care, and support they need to lead a full and independent life to the best of their ability, and to participate in their community. Developing knowledge and skills around decision-making relating to employment, finances, and safety are all essential in ensuring a Deaf Child/Young Person (DCYP) can achieve independence and meet their aspirations.

Preparing for and developing independence begins at the earliest age, for example, ensuring deaf children are enabled to make simple choices or involving deaf pupils in decision making about their school and community through groups, volunteering, or membership of organisations. Involving DCYP Iin all areas of decision-making about their deafness and support is key.

DCYP and their families need high aspiration and targeted support when making decisions about their future careers. Understanding the range of pathways into qualifications, training, and work is a key part of this, alongside developing the skills required to apply for and get a job. School/college careers staff require support to understand the needs of DCYP and what must be in place for a successful work volunteering placement.

Understanding rights, entitlements, and responsibilities in relation to money is a key factor for developing DCYP independence. For example, not just how to apply, but understanding any conditions or time frames around schemes such as Access to Work or Disabled Student Allowance. DCYP may require support to understand where and with whom responsibilities lie.

Supporting independent travel is important and can start early, for example, creating opportunities for DCYP to travel to school safely or use public transport.  Conversations around how to seek help and from whom, how to read and use timetables, and how different forms of public transport work can be explored to help a DCYP stay safe and confident to travel alone, both at home and abroad.

Staying safe is a key feature that spans all work with DCYP, with the need for them to be able to take increasing responsibility for their own safety as they progress into adulthood.

Please also refer to [**Section 5**](https://www.batod.org.uk/resources-category/specialist-deaf-curriculum-framework/5-manage-change/)

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| **6a.  Developing independence**  |
| DCYP, their families, and those working with them have opportunities to  * develop an understanding of the decisions that they can make at various times throughout their education pathway
* explore feelings and support families/staff to develop confidence in the child’s ability to do things for themselves (developmentally appropriate)
* develop skills to be able to communicate for themselves and assert their views, preferences, and rights in various situations, e.g. asking for clarification in the classroom, etc
* be clear on rights to reasonable adjustments and access arrangements.

Adults working together to support the DCYP are aware of how the individual is working to develop their independence and build resilience.  |
| **6b. Careers and seeking employment** |
| DCYP, their families, and those working with them have opportunities to  * understand careers options and any possible restrictions
* learn about the different ways in which you can be employed
* consider work experience and volunteering placements and what needs to be put in place to ensure they are successful
* participate in/have positions of responsibility within their education placement or outside of school, e.g. clubs
* explore whether to disclose deafness or not on application forms and in interviews
* be clear on rights to reasonable adjustments and communication support at interviews
* consider the challenges around application processes and seek support with this
* find out about programmes that are available for deaf or disabled people to find work (e.g. Work and Health programme)
* learn about the Disability Confident scheme.

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| **6c. Money management**  |
| DCYP, their families, and those working with them have opportunities to  * know how to apply and find out about benefits deaf people may be able to claim, e.g. PIP (Personal Independence Payment)
* be clear on the rights of the young person regarding access to these funds and supporting when this transitions from parent held to young person-held
* know about social security benefits available in the different nations of the UK– such as Universal Credit
* find out about accessible resources on money management
* find out about availability of advice and support from services in the community
* be clear on rights to reasonable adjustments and access arrangements in relation to finances, e.g. not being charged for interpreting, etc
* become aware that options may differ should they move from one nation to another.

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| **6d. Independent travel**  |
| DCYP, their families, and those working with them have opportunities to * learn about travelling on public transport and the accessibility features in place to support DCYP with this
* consider how to problem solve for when things go wrong
* learn about resources to help travel – reading timetables, producing card to say where they are going, using travel apps, railcards, freedom passes, etc
* know about options available on different modes of transport to support a DCYP’s accessibility, e.g. seat on a plane
* consider how to deal with travel disruption, e.g. not hearing tannoys, etc
* explore ways to ensure safe travel, e.g. walking in the dark, which train carriage to sit on, etc
* be clear on rights to reasonable adjustments and access arrangements in relation to driving lessons. and that insurance for deaf drivers is the same as for the rest of the population.
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| **6e. Preparing for the world of work**  |
| DCYP, their families, and those working with them have opportunities to  * understand the support that can be received from Access to Work, how to apply for it, where it can be used/not used (paid work and government-funded work-based training, not volunteering)
* are clear on rights to reasonable adjustments in the workplace and what rights a DYP has under the Equality Act/Disability Discrimination Act
* explore how the workplace might differ from previous experience, for example, expected behaviours, what ‘being professional’ means, self-directed activities, e.g. reading policies
* consider fully what it might be like in a particular place of work, find out about options to learn more about the role prior to starting
* learn about health and safety law in the workplace and access rights as a DYP
* understand what support is available through training providers for apprenticeships, traineeships, and supported internships
* develop awareness that there are financial responsibilities related to employment and signpost DCYP to information, tax, National Insurance contributions, and pension.
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| **6f. Staying safe** See also Section 4 about staying safe in relation to social media and Section 1 about Deaf Identity |
| DCYP, their families, and those working with them have opportunities to * develop an understanding of what a positive relationship is and be aware of signs of an unhealthy relationship, e.g. coercion, control, etc
* understand and respect choices around sexual orientation and preference
* explore barriers to dating hearing people, including online dating
* clarify their understanding around romantic/sexual relationships and be signposted to safe sexual health information
* consider putting safe practices in place in shared accommodation, e.g. housemates knowing you need to be alerted to a fire alarm
* know about the resources and equipment (including Bluetooth technology) available to support independent living and how to obtain them, e.g. fire alarms, flashing doorbell, vibrating alarms.

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| **6g. Technology to support independent living, learning and work**  |
| DCYP, their families, and those working with them have opportunities to find out about the wide range of options available for technology for living independently, e.g. * STTR apps
* Voice-recognition software
* Microsoft Teams and subtitles or book STTR through Access to Work
* text relay service for making phone calls
* video mail (send short messages in BSL)
* SignLive remote interpreter support
* navigation apps
* assistive listening devices.

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Section 7 **Specialist assessment and monitoring**

Qualified Teachers of Deaf Children and Young People (QToDs) need to have due regard for the guiding principles of assessment, following cycles as relevant to local legislation. The range of types of assessment are vast and there needs to be a clear rationale for the choices made about assessment carried out. Assessments must be age appropriate, holistic, and with input from families and the deaf child/young person DCYP themselves when they are able to. The aim of reporting on assessments is to ensure they are jargon free and understood by the DCYP, their families, and key stakeholders. Using terminology such as ‘not yet’ as opposed to ‘not able to’ is likely to result in a more positive interpretation of assessments and outcomes. The aim of specialist assessments is to guide input and support for DCYP and without judgment of skills and abilities.
The role of the QToD is often to support accessibility in assessment and also to provide interpretation to support understanding of the assessments carried out by others. DCYP are often assessed by others, e.g. SLT, educational psychologist (EP), audiology, SENDCO/ALN co-ordinator. Taking a balanced approach and ensuring assessments are carried out by suitably qualified people who know the child well will help to minimise any stress that testing may cause. QToDs will be mindful of timescales, frequency, and making sure there isn’t any duplication.

Please also refer to [**Section 6**](https://www.batod.org.uk/resources-category/specialist-deaf-curriculum-framework/6-preparation-for-adulthood/) which outlines the necessity for access arrangements for exams and statutory assessments.

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| **7a. Assessments** |
| **DCYP and their families** * understand the purpose of specialist assessments and can link these to outcomes and progress made
* know what the assessment results mean and are involved in planning for next steps
* have access to a range and type of assessments to identify areas of strength and areas for development
* develop confidence to participate in the assessment process
* have a clear understanding of their/their child’s communication, receptive, and expressive language development and how to support this
* Know that communication preferences can change over time, and assessment and demonstration of skills informs those decisions
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| **7b. QToDs and assessments** |
| QToDs* understand that assessments are crucial to inform statutory processes such as Education, Health and Care Plans (EHCPs), Additional Learning Provision (ALP), Child Plans, etc
* know about the standardisation processes around the different assessments and what these means for a DCYP
* know how to use a wide range of assessments (as appropriate) to monitor a DCYP’s communication and language development
* monitor communication, receptive, and expressive language skills, taking account of the first language used by the DCYP
* monitor functional listening skills through personal amplification and assistive listening technology and the different situations in which a DCYP spends their time
* know when assessments show that there could be an additional need and how to seek a differential diagnosis
* consider how adaptations might be possible to ascertain skills in children where formal assessment may be difficult or not age appropriate
* consider holistic assessment, e.g. social and emotional development, maths, literacy, listening, pragmatics, ToM, cognition, sensory integration
* specialist assessments also involve looking at all areas for independence and access, e.g. equipment in the home and for university, employability, team building, etc
* be involved in the two-year-old progress checks
* be aware of involving DCYP and their families in national research projects
* have the knowledge and skills to support DCYP and their families through the relevant statutory assessment processes; knowledge of time frames, writing effective requests and plans, etc
* be able to explain to DCYP and family’s specialist assessments from other professionals, e.g. EP, aetiology, SLT, audiology, etc.
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