Articulating the specialism – early years

The role of the Qualified Teacher of Deaf Children and Young People (QToD) supporting in the early years (0–5 years).

The term ‘early years’ is used to describe any child who is not yet in statutory education, regardless of whether they are accessing early education and childcare (EEC) or being looked after in the home.

We use the term 'deaf' to refer to all types of deafness from mild to profound. This includes deafness in one ear or temporary deafness such as glue ear.

Background

Deaf babies and children experience the world differently because of their deafness. Most deaf babies are born to families with no knowledge or experience of childhood deafness and development, the language used to describe deafness, hearing technologies, and the systems and support which are available to their child (Wright et al, 2021). One to two babies in every thousand are born with permanent hearing loss in one or both ears. This increases to about 1 in every 100 babies who have spent more than 48 hours in intensive care. Most of these babies are born into families with no history of permanent hearing loss. Families therefore need to have access to skills and information from birth, so they can feel able to make the important decisions and provide the support their child needs to thrive.

Early support

The first two years lay the foundations for future development. During this time of rapid growth, babies’ brains are shaped by their experiences, particularly the interactions they have with their parents and other caregivers. Studies show that children who receive the right intervention and support as soon as possible after identification of deafness have better developmental outcomes compared with those who receive interventions later.

Family-centred approaches

A family-centred approach for deaf children and young people and their families emphasises strengths rather than deficits. It promotes family choice and control over desired resources and actively develops collaborative relationships between families and professionals. This approach supports the diverse needs of families and deaf children in the early years and can actively identify, and where possible overcome, challenges – both specific to deafness and within their environment. It is well researched that families experiencing stress or mental health challenges can have long term negative impacts on children's outcomes.

What is the role of a QToD?

A QToD is an experienced teacher with an additional qualification in childhood deafness who has the skills, knowledge, and expertise required to provide quality support to deaf babies, children, and young people from 0–25 years and their families, in the home and in educational settings (mainstream and specialised provisions).

QToDs play a crucial role in supporting families to interact confidently and effectively with their baby from the point of identification. They also support them using evidence-based strategies to create rich language environments and make informed choices about which language and communication choices are right for them and their deaf child.

QToDs are uniquely placed as a home-visiting service to assess children's everyday language and communication environments and make suggestions and recommendations so families can make their language and communication as accessible as possible. This could include practical advice on communication options, e.g. use of sign language, using hearing technologies, developing listening and attention skills both through audition and vision cues, and advising on simple acoustic adaptations.

The home learning environment (HLE) is one of the strongest predictors of a child's development in the early years. The HLE influences outcomes at five years, over and above factors such as socio-economic status, maternal education, and family income. QToDs can support families to create a stimulating and rich HLE through everyday routines, appropriate experiences, and play which meet the individual needs of the child and their family.

QToDs can help bring families of deaf children together and provide opportunities to meet with deaf adults. These experiences help to form vital networks of support, shape families' attitudes towards deafness, and create positive deaf identities.

Families of deaf children frequently have to navigate multiple systems and be experts in their child's deafness to access the support to which they are entitled. QToDs can provide a single point of entry or facilitate coordination of support. These can include audiology and associated/other health services; language and communication classes and therapy, including speech and language therapy; British Sign Language (BSL)/Irish Sign Language (ISL) classes and other communication approaches; education and the special educational needs and disability

(SEND)/additional support for learning (ASN)/additional learning needs (ALN) system, and benefit and disability systems.

What are the statutory requirements, both for deaf children and the QToD?

Deaf children have a right[1] to specialist input from a QToD from identification. QToDs are crucial in effectively delivering governments' commitments to supporting deaf children and upholding their rights under legislation, policy, and the international conventions. This includes ensuring deaf children's rights under the United Nations Convention on the Rights of the Child (UNCRC) including Article 23 (support for disabled children), Article 28 (right to education), and Article 30 (minority language rights, including BSL/ISL) are upheld in the teaching of deaf children. QToDs are also central to ensuring that deaf children's rights under Article 24 of the United Nations Convention on the Rights of People with a Disability (UNCRPD), which commits governments to recognise the right of people with disabilities in education, are realised.

Teachers employed as ToDs who do not already hold the mandatory qualification (QToD) are required to gain the qualification within a specified period[2] [3].

Health authorities have a duty to inform local authorities (LAs) when deaf children are identified. LAs contact the deaf child's family to offer support. Specialist input may be identified as part of a statutory document. The various governments of the UK have long recognised the need for mandatory training, and this dates to the early 1900s.

Other supporting information

Further information and guidance can be found on the following websites:

- NDCS website – Early years
- BATOD website – Training as a QToD
- BATOD/NDCS Specialist Deaf Curriculum Framework
- Council for Disabled Children (CDC):
    1. Blog
    2. Training and guides

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[1] NDCS website: Understanding your rights as a deaf young person Accessed 10th July 2025.
[2] Scottish Government Guidelines (2007). Accessed 10th July 2025.
[3] UK Government Guidelines for England and Wales. Accessed 10th June 2025.

Statutory

England

- Special Educational Needs and Disability (SEND) Code of Practice
- Special Educational Needs and Disability Regulations 2014 Section 32 Children and Families Act 2014

- Scottish Government – Additional Support for Learning Act Code of Practice
- Special Education Needs Code of Practice – Northern Ireland
- Additional Learning Needs Code for Wales

Supplementary information

Access supplementary information about how QToDs work via this link.

References

Wright, B, Hargate, R, Garside, M, Carr, G, Wakefield, T, Swanwick, R, Noon, I, and Simpson, P (2021), 'A systematic scoping review of early interventions for parents of deaf infants', *BMC paediatrics*, 21(1) pp 1–13.

Reviewed June 2025

Review June 2026