



Centre for Research in Education Inclusion and Diversity



CREID BRIEFING 18

THE IMPACT OF THE EDUCATION (ADDITIONAL SUPPORT FOR LEARNING) (SCOTLAND) ACT 2004 ON DEAF CHILDREN

Research undertaken for the National Deaf Children's Society

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April 2009

Introduction

This research was commissioned by the National Deaf Children's Society (NDCS) in 2008, to investigate the impact of the Education (Additional Support for Learning) (Scotland) Act 2004 (the ASL Act) on deaf children aged 3-18. It draws on published statistics and literature, and on the views of two groups: of parents, and of professionals and other key stakeholders concerned with education of deaf children in Scotland.

Background

Key features of the Education (Additional Support for Learning) (Scotland) Act 2004 (the ASL Act) include:

- Widening the definition of additional support needs
- Improving provision for children
- Harmonising and strengthening the planning mechanisms
- Improving the co-ordination of services
- Streamlining the arrangements for transition
- Enhancing the rights of parents and children, including rights to access routes of redress.

According to the 2008 School Census, there were 954 deaf pupils in publicly funded Scottish schools, accounting for 2.5% of the population for whom reason of support is reported. In 2004, prior to the new legislation, there were 639 pupils with a significant hearing impairment, representing 2% of the additional support need population. The corresponding figure for 2006 was 837 (2.3%). This shows a modest increase over the period 2004 to 2008; however, this increase may be a result of changes in data collection that came into effect with the ASL Act which allows pupils to be counted in more than one category of support need.

Deaf pupils, according to government statistics, accounted for around 0.1% of the pupil population in 2008. This contrasts strongly with our data from local authorities which suggested that up to 0.4% of pupils required support due to hearing impairment. Official statistics include only those with CSPs and IEPs. The fact that a number of authorities use alternative plans which are not included in official statistics raises serious issues about the extent to which official statistics represent an accurate picture of the number of deaf school pupils.

Parents' views were gathered through a survey of 256 NDCS members, and interviews with a stratified sample of 19 parents who volunteered. Views of professionals and other stakeholders were gathered through a survey of the 32 local authorities, and interviews with 12 key stakeholders in Scottish Government, local authorities, schools and voluntary sector organisations.

Findings

Postal survey of parents and carers

The questionnaire was sent to 256 parents of children aged 3-18; 128 (50%) responded. The survey was most likely to be completed by a mother; the ethnic origin of most respondents was White UK; and 8% of the parents were themselves deaf. They had a total of 136 deaf children in their families, 17 below, and 10 above, compulsory school age. Of these children, 60% had profound hearing loss, 63% of those having cochlear implants. Virtually all those with severe, moderate or mild hearing loss had behind the ear hearing aids. Most (75%) identified speech and lip-reading as the preferred

method of communication, while 14% said their child preferred British Sign Language (BSL), and 7% Sign Supported English (SSE). At school, communication methods used were speech and lip-reading for 105 children, BSL for 30 and SSE for 29, with some using a combination of methods. When asked about **planning**, parents reported that 30% of the children had a Co-ordinated Support Plan (CSP); and 47% indicated that their child had previously a Record of Needs (RoN). This suggests that far fewer have CSPs than previously had RoNs. The total number of pupils with an Individualised Educational Programme (IEP) was 65 (48%), including 15 who also had a CSP. Ten had other local plans. Overall, 74% of children had a plan; 26% had none. A third of children and 80% of parents had been involved in planning. Of these, 85% were satisfied with their involvement in the process, slightly fewer (76%) were satisfied with the outcome.

When asked about **support from staff**, they said that more than half the children received help from a class teacher, visiting teacher of the deaf, audiologist and/or speech and language therapist. Most were satisfied with this support; comments suggested problems were lack of availability or frequency of visits from these professionals rather than quality of service provided when available. Around a third of the children were supported by a school-based teacher of the deaf, in classroom or support base. Seventeen parents described 'other' support for their child, most commonly from a non-school organisation such as NDCS. Learning support staff, auxiliary or care staff, family, an interpreter, private tutor and sign tutor were also mentioned. In general, parents were satisfied with the support provided by these others.

Questions about **resources** revealed that over a third of the children had had adaptations in school or nursery to improve acoustics and most were satisfied with this when provided. Just under half used a radio hearing aid and again levels of satisfaction were high. Additional access to computers and software or DVDs were available for 44%. Levels of satisfaction with this type of resource were not quite as high. When asked about **transitions**, more than half the parents (60%) reported satisfactory transitions from nursery to primary and all but two parents were also satisfied with arrangements for moving from primary to secondary. Those who were dissatisfied cited poor planning and lack of communication.

Of 128 parents, 48 (37%) said they had had some **disagreement with their school or local authority**, most frequently about access to communication support and specialist staff. Teaching methods, school placement and assessment of difficulties by education staff were also mentioned. Most cases were dealt with informally. In cases handled at school level just over half of the parents were satisfied; fewer were satisfied with those handled at local authority level. Formal mediation, adjudication and appeal to the tribunal had been used by very few. Three had been involved in mediation; two of these were satisfied and one was not. One parent had used adjudication and was satisfied; two parents had used the tribunal, and one was satisfied and one was not. For **information**, a few parents had contacted Enquire, the national advice and information service for additional support needs, and were generally very satisfied with their support. Comments from parents also show high satisfaction with NDCS and/or local organisations supporting deaf children.

Interviews with parents and carers

A stratified sample of 19 interviewees was selected from volunteers amongst respondents to the survey. They included three parents or carers of pre-school children, eight of primary children and eight of older children. The sample included deaf parents, fathers as well as mothers, carers, ethnic minority parents and parents who had moved from outside Scotland. Four interviewees had two deaf children and were encouraged to talk about both. Interviews therefore provide insights into education and support for 23 deaf children, of whom six had mild or moderate hearing loss, five severe and twelve profound. Twelve used behind the ear hearing aids, and eleven had cochlear implants. Twelve were described by their parents as having other support needs in addition to hearing loss.

After discussion of the child's diagnosis, interviews covered areas which the ASL Act was intended to improve. Parents recalled the stress of **diagnosis**, especially when the child had additional health needs. Most said the **assessment of educational needs** of their child had involved a wide range of professionals, including audiologists, educational psychologists and speech and language therapists, as well as teachers of the deaf. Two parents described resisting successfully the choice of school initially suggested by their local authority, and one anxious parent of a nursery child complained she was not kept informed about where her child might start school.

When asked about **educational planning and review**, a few parents could not name their child's plan, but responses suggest eight of the 23 had CSPs, and two others were applying for one; ten had IEPs, including two who also had CSPs; and four had other local plans. One mother did not think her daughter, studying for Highers, needed one. Another was uncertain whether her primary-aged child had a plan, as she had not been to a review meeting since changing school. Parents were generally happy about attending reviews and most felt they were listened to. We found little evidence of nostalgia for the Record of Needs; parents were less concerned about documentation and more concerned about whether services worked smoothly. On the topic of **co-ordination of services** supporting their child, although many had large multi-agency teams involved, 16 out of 19 said that on the whole they were happy that their children had the services required. When asked to suggest improvements, however, some issues were raised about supply of speech and language therapy, support for needs such as dyspraxia, and communication between professional groups.

Discussion of arrangements for **transitions** suggested that most parents think this is working well. They described extra visits to new schools arranged well in advance. Nevertheless, there were also examples of deaf children arriving in schools where class teachers had not been briefed about their needs. Several parents mentioned children's difficulties in social adjustment on moving to secondary school, where some found it hard to make new friends. Only a few transitions out of secondary school were mentioned. In one case, a teacher of the deaf escorted a pupil on visits to further and higher education establishments to help assess the learning support there, while another young person, after college visits and discussions with a careers advisor, was considering a further year at school instead.

On the question of **parents' rights**, 17 out of 19 parents said they had been involved in the important decisions about their child's education, although some felt they had had to be assertive to achieve that. Although only one parent had been involved in dispute resolution procedures, others had resolved disagreements at local level. Asked about **children's rights**, parents differed in their views about the appropriate age for their child to be involved. Some had started to attend review meetings in Primary 5, while others were reluctant participants at secondary school reviews. When asked about **access to information**, parents cited as their sources the health and education professionals working with their children, and NDCS, through publications, website and meetings for parents run by NDCS. Other sources of information were other voluntary organisations, Enquire, family members and friends, including other parents of deaf children met through NDCS networks.

Parents were asked whether they saw the **overall impact of the ASL Act** as positive, negative or neutral. Five said they could not judge, but of the other 14, seven reported positive impact; six neutral impact, with no obvious change; and one, unhappy with her son's current school, was undecided between negative and neutral. Finally, they were asked if they had **advice for the Scottish Government or NDCS** on improvements which would benefit deaf children. Some suggested reinforcing aspects of services which they had found helpful, such as flexibility and choice; while others wanted more support for BSL users and deaf children in mainstream schools. Improvements to acoustics and building regulations and more accessible information for parents of deaf children were also suggested.

Crosscutting themes from parents and carers

The overall picture, from survey and interviews, is of a majority of satisfied parents, taking an active role in their children's education in collaboration with education and health professionals. There is, however, a sizeable minority of parents (over 30%) who expressed concerns about some aspects of their children's support, including staffing, levels of awareness of the needs of deaf children and lack of training for staff. Individual professionals' communication skills make a difference in establishing good relationships with parents. Parents also appear to differ in their ability and willingness to communicate with schools, and to use their rights. Disagreement could sometimes - though not always - be seen as part of a healthy relationship between parent and school. The survey and interviews demonstrate the sheer diversity of the needs of deaf children and of the provision for them, ranging from an occasional visit in a mainstream school to the constant presence of a teacher of the deaf in their classroom, and the diversity of the expectations of their parents. Some parents were predominantly concerned with their child's social adjustment, others with their academic achievement.

Survey of local authorities

Questionnaires were sent to those responsible for the service to deaf children in their authority. Fourteen questionnaires were returned from 16 authorities (50%). Respondents were most likely to be Heads of a Sensory Service or teachers of the deaf. For these authorities, the proportion of deaf children in the school population ranges from 0.1% to 0.4%. Children with mild or moderate hearing loss predominate, and most are in mainstream education.

All the authorities have **staff** with teacher of the deaf qualifications. For BSL, 11 of the 14 authorities had teaching staff with BSL level 1, nine had staff with level 2, and only four had staff trained to level 3 or 4. Levels of communication support qualifications amongst support staff were considerably lower. The most commonly used **assessments** are audiograms, speech tests and audiological tests with other methods such as vocabulary and literacy tests used by fewer authorities. Teachers of the deaf and the classroom teacher were almost always involved in assessment, usually with educational psychologists, speech and language therapists and learning support teachers. Most respondents felt that the ASL Act had had little impact on assessment procedures.

Questions about **planning** revealed considerable variation between authorities in use of CSPs, IEPs and alternative plans. Parent, classroom teacher, educational psychologist and teacher of the deaf were almost always involved in the development of CSPs and the same, apart from the educational psychologist, in planning of IEPs. Children and other professionals were involved less frequently. Radio aids were the most commonly available **resources** and interpreting was the resource least likely to be available. Respondents emphasised that resources were allocated according to individual need. Most did not think the ASL Act had impacted on support, **coordination** between agencies or **transition** arrangements. The key people in providing **support** for deaf pupils were teacher of the deaf (school based or more often peripatetic) and classroom teacher, followed by classroom assistants, speech and language therapists and audiologists, on a less frequent basis. There had been relatively few **disagreements** between parents and schools and/or local authorities about support for deaf children. All but one had been resolved informally, one being referred to the tribunal. Most likely areas of disagreement were access to classroom assistants or other personnel, school placements and decisions not to open CSPs.

When asked about the **strengths and weaknesses** of the new legislation, most said the focus on coordination of services, a wider definition of additional support needs, strict criteria for a CSP and additional routes of redress were its strengths. Just over half of respondents identified lack of clarity about what counts as 'significant coordination needs' as a weakness and about the same number saw variation between local authorities in the use of CSPs as cause for concern. Limited access to the tribunal, lack of clarity about assessment and lack of specificity in relation to content of IEPs were not generally considered a problem.

Interviews with professionals and other key informants

Semi-structured interviews were conducted, face-to-face or by telephone, with twelve key informants, including five senior staff with responsibility for school-based and/or peripatetic services for deaf children; four other professionals working with deaf children and three officials, one from Scottish Government, and two from the voluntary sector. Descriptions of **approaches to meeting deaf children's needs** highlighted the diversity of services, some BSL-based, others oral/aural, most seeking to provide both within their system. **Identifying and assessing needs** was described as a multi-agency activity, but most did not think this had changed since the introduction of the ASL Act.

Only nine of the 334 deaf children covered by interviewees' services had CSPs and 90 had IEPs. In discussion of **recording of children's needs**, views differed widely about the importance of a CSP, some seeing it as giving legal rights, while others stressed that a CSP is '*about the co-ordination of the plan, it is not a passport to services*' (K12). IEPs and the multi-agency review meetings with parents (and sometimes children) were widely valued, particularly for generating action points and targets. When asked about the impact of the ASL Act on recording, of the nine able to comment, four felt that it was the same as before; three that it was better, because of better awareness of inter-agency responsibilities; and two non-teaching interviewees felt it was worse.

Discussions of **decision-making** demonstrated the importance of collaboration between teaching staff, other agencies, parents and children, both at review meetings, and in informal negotiations about meeting children's needs. While there was agreement that decisions about support should be needs-led and in the best interest of the child, a few interviewees mentioned that intervening factors of finance and availability of trained staff might affect decisions. Of eight interviewees in a position to assess the impact of the ASL Act on decision-making, six said it was the same as before, while two felt it had improved. When asked whether it had improved **co-ordination** of input from different professional groups, they were more positive: three said it was unchanged, and five said it had improved. Nine commented on the impact of the Act on **parental involvement**, five saying that it had improved, four that it was unchanged.

Discussions of **adjustments and learning support** suggested that provision of equipment and building adaptations has improved, although some attributed this to other legislation such as the Disability Equality Duty, rather than the ASL Act. Teachers of the deaf use a range of techniques to support deaf pupils, and stressed the importance of supporting mainstream teachers and encouraging deaf awareness and language modification. Some saw scope for improvement in use of technology. Three felt that adjustments and learning support were better since the introduction of the ASL Act; five reported no change; and four were unsure or unable to comment.

Interviewees were invited to identify **strengths and weaknesses of the ASL Act**. Strengths included: wider definitions of additional support; opportunities to strengthen interagency working and clarify responsibilities; and improved rights for parents. Weaknesses included concerns over definitions of 'adequate and efficient provision'; problems dealing with cross-border issues between authorities; time-consuming CSPs and inappropriate expectations of their power since they are not '*a passport to services*'; and concerns about whether procedures would be adequately monitored and enforced. Others pointed to difficulties in encouraging all parents to become involved and empowered. In their final comments, several highlighted **staffing** shortages, for teachers of the deaf, many of whom retire soon, speech and language therapists and auxiliary staff, especially with BSL skills. The need to employ more deaf people was stressed, both for their skills and for their value as role models.

Crosscutting themes from professionals and other key informants

The local authority survey and interviews suggest little has changed as a result of the ASL Act, but where it has changed, this has been for the better. Slight improvements were noted, in the way needs were assessed, recorded and reviewed and in the provision of adjustments and learning support for deaf children. Evidence suggests the ASL Act has had more impact in the areas of parental involvement and co-ordination of multi-agency working.

Concerns were raised about low numbers of teachers of the deaf, now and in future; shortages of posts for communication support workers and speech and language therapists; and the need to involve more deaf people in deaf children's education. Concerns about funding recur in survey and interviews, and awareness that schools now have a wider population of pupils requiring additional support for learning. While survey data confirms that there are relatively low numbers of CSPs and slightly higher number of IEPs in place, the predominant view from the local authority staff is that the documentation is less important than the planning process itself, and that needs would be met regardless. Almost all disagreements between parents and service providers are being resolved informally at school level.

Conclusions

Are parents of deaf children satisfied that their children's needs are being met?

Overall, the majority of parents are satisfied that their children's needs are being met, although just over a third raised some concerns about funding for equipment, acoustics, levels of support in the classroom, availability of speech therapy and the BSL skill levels of some staff working with them.

How many deaf children are being identified as having additional support needs since the introduction of the new legislation?

The evidence of this project confirms that the official Scottish Government statistics, based on numbers of deaf children with a CSP or IEP, seriously underestimate those requiring and receiving support in Scottish schools. It seems important that methods of counting deaf children in Scottish schools should change to reflect the reality of children's needs. Moreover, although previously there were concerns about the degree of local variation in practice in use of the RoN, it seems there is now even greater local variation in use of IEPs and CSPs.

What types of educational planning mechanisms are used for deaf children in different parts of Scotland? How are assessments of needs conducted and how do these vary by local authority? How are decisions made on additional support and how do these vary by local authority?

Evidence also suggests that assessment and planning mechanisms, including multi-agency collaboration and involvement of parents and, when appropriate, children, in reviews and decision-making work well, although they are not seen to represent a great change from the previous system. Most parents are happy with their involvement, although we note they need reliable and accessible information on which to base their choices. There is, however, a minority of parents who are not satisfied with decision-making and their role in it. While there was consensus that services should be needs-led, both parents and professionals mentioned constraints in budgets which sometimes limited the support available, even when all involved in the planning process agreed that the child would benefit from more. It is also worrying that parents reported that only 30% of their children had CSPs, a total of 67% had a CSP and/or an IEP, and 7% had other local plans, suggesting that 26% of deaf children had no plan at all, leaving them vulnerable to withdrawal of services. It could be argued that deaf children who have no CSP or IEP are, strictly speaking, not having their ASL needs met under the terms of the ASL Act and the accompanying Code of Practice.

Are the available routes of redress sufficient to ensure that the rights of deaf children and their parents are being met?

Over a third of parents surveyed said they had had some disagreement with their school, most of which had been dealt with at school level. Very few have taken advantage of routes of redress provided by the ASL Act, but the evidence suggests that the system is working and that some parents are using their rights to be involved, to disagree and to challenge. Serious questions, however, remain about the extent to which parents are aware of the routes of redress open to them.

Overall, has the ASL Act made a difference to services?

Assessing the impact of the ASL Act is complicated by other legislation, such as the Disability Discrimination Act, and initiatives such as *Getting It Right for Every Child*, which have also encouraged awareness of needs of deaf children and the value of child-centred approaches. It seems, however, that there is still need for more awareness training about the needs of deaf children. Overall, it has not led to huge changes, and relatively low numbers of CSPs and persisting variations in planning and services in local authorities suggest the ASL Act has not met all its objectives.

Are further changes required?

It would appear that many local authorities are failing to comply with the educational planning and recording aspects of the legislation, and measures may be needed to ensure that these aspects of the ASL Act are not ignored, and more deaf children receive IEPs and CSPs. Concerns about staffing levels, in education and in health services, suggest that clarification of the numbers, both of the children requiring support, and of those available to support them, is urgently required.

Further information

The final report on which this Briefing is based is available on our website www.creid.ed.ac.uk.

Further information about the project is available from Sheila Riddell, CREID, Moray House School of Education, University of Edinburgh, Holyrood Road, Edinburgh EH8 8AQ
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