

The Education of Deaf and Hard of Hearing Children in Ireland

NCSE POLICY ADVICE PAPER



The Education of Deaf and Hard of Hearing Children in Ireland

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Foreword

The National Council for Special Education (NCSE) is pleased to submit its policy advice to the Minister for Education and Skills on the education of Deaf and hard of hearing children in Ireland. We are aware that this policy advice has been long awaited by parents, teachers, policy makers and the Deaf community.

In preparing this advice, we knew that research findings have shown that the academic achievement of Deaf and hard of hearing children is lower than that of hearing children of similar ability, despite recent technological advances and updated teaching methodologies.

Our advice emphasises the critical importance of early identification and assessment for Deaf and hard of hearing children so that they can have meaningful access to language as soon as possible. We have considered the educational and health supports that are required by Deaf and hard of hearing children in mainstream and special settings. Our recommendations are informed by the best national and international evidence that was available to us.

We would like to thank all those people who assisted us in the development of this advice, including parents, pupils, teachers, members of the NCSE consultative forum and representatives of the Deaf community.

The NCSE believes that Deaf and hard of hearing children should be able to leave school with levels of educational attainment that are on a par with their hearing peers of similar ability. We hope that this policy advice will be a positive influence in achieving this goal and in shaping the future direction of the education of Deaf and hard of hearing children in Ireland.

Teresa Griffin

CEO

Abbreviations

ALD	Assistive Listening Devices
AO	Assessment Officer
BSL	British Sign Language
CDS	Centre for Deaf Studies, Trinity College, Dublin
CIDP	Catholic Institute for Deaf People
CPD	Continuing Professional Development
DES	Department of Education and Skills
DOH	Department of Health
ECCE	Early Childhood Care and Education
ENT	Ear, Nose and Throat
EPSEN	Education for Persons with Special Educational Needs
FM	Frequency Modulation
GAM	General Allocation Model
GMS	General Medical Services
HI	Hearing Impairment
HSE	Health Service Executive
IASLT	Irish Association of Speech and Language Therapists
ICT	Information and Communications Technology
IDS	Irish Deaf Society
ISL	Irish Sign Language
ITE	Initial Teacher Education
NCCA	National Council for Curriculum and Assessment
NCSE	National Council for Special Education
NDCS	National Deaf Children's Society
NEPS	National Educational Psychological Service
NFQ	National Framework of Qualifications of Ireland
NRB	National Rehabilitation Board
NVQ	National Vocational Qualifications (UK)
PCT	Primary Care Team
PTR	Pupil-Teacher Ratio
QCF	Qualifications and Credit Framework
RACE	Reasonable Accommodations in Certificate Examinations
SCPA	Scheme for Commissioning Psychological Assessments
SEC	State Examination Commission
SENO	Special Educational Needs Organiser
SERC	Special Education Review Committee
SESS	Special Education Support Service
SLA	Service Level Agreement
SLI	Sign Language Interpreter
SNA	Special Needs Assistant
UNHS	Universal Newborn Hearing Screening

Executive Summary



Executive Summary

Introduction

The Council is pleased to submit its policy advice to the Minister for Education and Skills in relation to the future educational needs of Deaf and hard of hearing children in Ireland. This policy advice is based on:

- evidence from national and international research, including an international review of best practice models and outcomes in the education of Deaf and hard of hearing children, commissioned by the National Council for Special Education (NCSE) and published in 2009 (Marschark and Spencer, 2009)
- views expressed during a consultation process conducted with educational stakeholders and other experts, including NCSE council members and staff
- advice from the NCSE consultative forum as provided for under Section 22 of the Education for Persons with Special Educational Needs (EPSEN) Act, 2004.

Findings of Relevant Research Studies and Policy Documentation

In addition to other national and international studies, this paper draws extensively on the NCSE commissioned international review of evidence of best practice models and outcomes in the education of Deaf and hard of hearing children (Marschark and Spencer, 2009). This research makes a number of suggestions, outlined below.

1. The impact of early hearing loss on children's ability to reach their developmental and educational potential is highly significant. Apparently 'mild' levels of permanent hearing loss and unilateral hearing loss can have detrimental effects on a child's educational progress.
2. In order to acquire any language, children must have exposure, in quality and quantity, to accessible linguistic input, via meaningful interactions with others who are already capable users of the language.
3. Effective early intervention can apparently greatly ameliorate, although not eliminate, barriers to learning that are faced by Deaf and hard of hearing children. There is strong evidence that timely diagnosis and intervention for children with permanent deafness results in improved outcomes at a relatively low health care cost.
4. No single educational model has proved effective for all Deaf and hard of hearing children. Evidence points to the need for a range of educational settings to be available, so that children can discover which one best suits their needs.
5. To date, minimal evidence is available regarding the impact of bilingual education on academic achievement.
6. The academic achievement levels of Deaf and hard of hearing children remain significantly delayed when compared to those of hearing children, even when they share a similar level of non-verbal cognitive potential.

7. An evidence base is beginning to grow in relation to effective educational approaches to promoting literacy skills, regardless of the modes or approaches used for language development. Achievement tends to be higher when teachers are both subject-matter specialists and are also knowledgeable about the special learning needs of students with hearing loss.
8. A significant number (up to one third) of Deaf children have one or more additional disabilities.
9. A general consensus exists regarding the central importance of teacher education in relation to the education of Deaf and hard of hearing children. In order to improve educational outcomes for Deaf and hard of hearing pupils, teachers must be equipped to recognise and understand the cognitive and language abilities of Deaf and hard of hearing pupils. They must also be enabled to use materials and methods appropriate to their ways of learning.
10. The physical environment of the classroom is an important factor in facilitating access to education for Deaf and hard of hearing children – classroom acoustics should be addressed.
11. Special needs assistants (SNAs) have specific functions to support children with sensory impairment. The role of the SNA in Irish schools needs to be clarified for parents, schools and professionals. Criteria for the allocation of SNA support for Deaf and hard of hearing children should be clearly re-stated and be subject to ongoing review.
12. Greater co-operation is required between the Department of Health (DoH) and the Department of Education and Skills (DES) to ensure the delivery of effective services to Deaf and hard of hearing children in a timely and consistent manner.

NCSE Policy Advice

NCSE recommendations are based on the findings of the above research studies and on advice received during the consultation phase. The policy advice developed in this paper reflects the need to provide the following:

- early identification and intervention for Deaf and hard of hearing children, so that they can be supported to develop fluent language
- objective and comprehensive information for parents from the point of diagnosis
- a range of educational settings in which Deaf and hard of hearing children can obtain the necessary support services, while being involved with their hearing peers to the greatest extent possible, in accordance with their learning needs and abilities
- assistive technology and acoustic treatment of classrooms
- ongoing professional development for teachers to enable them to meet the needs of Deaf and hard of hearing children in their classrooms

- co-operation between the health and education sectors to ensure the delivery of coherent and consistent support to Deaf and hard of hearing children and their families.

The policy advice set out in the paper supports the findings of the Health Service Executive (HSE) Report of the National Audiology Review (HSE, 2011) concerning the introduction of a universal national programme of newborn hearing screening and the further development of audiological services.

The Council considers that the goal should be that Deaf and hard of hearing children graduate from school with levels of educational attainment that are on a par with their hearing peers of similar ability. It sets out six principles, which underpin its advice in relation to the education of Deaf and hard of hearing children. The main recommendations are summarised in Table 1 below.

Table 1: Main Recommendations

EARLY INTERVENTION

Early intervention programmes

- The Council welcomes the recommendation of the National Audiology Review Group that ‘a universal national programme of newborn hearing screening be introduced as a priority such that all babies have their hearing screened shortly after birth’ (HSE, 2011, p. 19).
- Up to date, objective and comprehensive information should be made available to parents from the point of diagnosis and in clear and accessible formats, to include Irish Sign Language (ISL). Upon diagnosis, parents should be provided with a package (developed jointly by the HSE and the NCSE) that provides information on available services and supports and where to obtain this support. This package should include information on: services and supports that are available; the importance of early language acquisition and the various communication options that are available; and available educational placements, including the possibility of placement in mainstream, special classes and special schools.
- A counselling service should be made available to parents and children by the HSE, where necessary, as part of early intervention services.
- Early Childhood Care and Education (ECCE) centres should be resourced to provide the supports necessary to enrol Deaf and hard of hearing children.
- Health and education funded support services should be coordinated, and provided by professionals who are equipped to assist parents to enable their children to acquire the most suitable language and communication skills for them, be that signed, spoken or bilingual.
- Deaf and hard of hearing children should have timely access to speech and language therapy from the point of diagnosis, where this is indicated.
- Audiological services should be provided on a consistent, efficient and equitable basis throughout the country.

- Council supports the recommendation of the HSE National Audiology Review (HSE, 2011) for continued ring-fenced financial support for the cochlear implant programme, but at levels that allow for simultaneous bilateral implantation for children. Teachers and other professionals should be aware that children with cochlear implants require ongoing support and should also understand the nature of the support required.

Acquisition of language

- All Deaf and hard of hearing children should be provided with opportunities, at an early age, to acquire fluent language skills while engaged in meaningful activity with capable users of the language, whether the language to be acquired is in signed, spoken or written form.
- The Departments of Health, Education and Skills, and Children and Youth Affairs should jointly develop one streamlined approach to determining and providing the supports necessary for Deaf and hard of hearing children to acquire language, so that they are ready to attend school at an appropriate age.
- All Deaf and hard of hearing children and their families should be provided with the opportunity to learn Irish Sign Language (ISL) through the ongoing provision of the ISL Support Scheme.
- Parents should be informed about the availability of the ISL Support Scheme, both at the point of diagnosis and during subsequent discussions concerning approaches and options around language acquisition and communication.
- The DES should review the ISL Support Scheme and this should include an assessment of the quantum of hours which are sufficient to enable parents and children to develop an adequate proficiency in the use of ISL.
- Following this review, the DES policy regarding the provision of ISL instruction should be available to parents and should address:
 - the number of ISL tuition hours available to families
 - the availability of the service throughout the year, including the summer holiday period.
- The DES should set a minimum qualification level for ISL tutors and arrange for the compilation of a register of ISL tutors, which should then be made available to parents.
- A grant should be made available to schools to provide sign language instruction for the hearing children in a class where a sign language user is enrolled.
- Schools should have qualified ISL interpreters available, where necessary, when meeting parents who use ISL as their primary means of communication.
- The National Council for Curriculum and Assessment (NCCA) should consider how the development and refinement of competence in ISL is best addressed within the school system.

Visiting Teacher Service

- The role of the Visiting Teacher Service should be reviewed and updated by the DES to take account of the changes proposed in this policy advice.
- The caseloads of visiting teachers should reflect the need for greater intervention in the early years.
- Protocols should be developed to standardise practice across the Visiting Teacher Service in relation to assessment, teaching, advice and liaison functions, in order that a consistent service is provided to Deaf and hard of hearing children around the country.
- The DES should set minimum standards for visiting teachers in relation to their proficiency in ISL.

SCHOOL AGE YEARS

Educational models

- The Council recommends that a continuum of educational provision should be in place to include:
 - mainstream classes in primary and post-primary schools
 - special classes for Deaf and hard of hearing children attached to mainstream schools
 - special schools.
- All of the above settings should be resourced, as required, with the technology necessary to deliver an appropriate education to Deaf and hard of hearing children, including acoustic treatment of classrooms and assistive technology.
- The DES Building Unit should develop general guidelines on the acoustic treatment of classrooms, which should be made available to schools through the Visiting Teacher Service and the special educational needs organiser (SENO) network.
- Pupils with special educational needs should be enrolled, alongside their peers, in mainstream classes in mainstream schools, to the greatest extent possible.
- Special classes for Deaf and hard of hearing children should be organised on a clustered/regional basis to facilitate the:
 - provision of educational settings in which Deaf and hard of hearing children have the opportunity to learn and interact together
 - development of specialist knowledge amongst teachers.
- Children placed in special schools should be those with complex needs. In the future, special schools should be designated and resourced to serve pupils within the community who require special school placement rather than be limited to any specific category of disability.

- Consideration should be given to the need to provide temporary specialist provision for Deaf and hard of hearing children in separate specialist settings; for example, this could be used to provide intensive tutoring in ISL.

Bi-lingual education

- A bilingual education should be available in special classes for Deaf and hard of hearing children and in special schools.
- Mainstream schools should be resourced to facilitate the education of pupils who use ISL as their primary mode of communication. The extent of support required will depend on the individual child's needs; relevant factors include their levels of functional hearing loss, literacy levels and academic ability.

Placement of pupils

- The placement of Deaf and hard of hearing children should be explicitly addressed within the Code of Practice that was proposed in the Council's policy advice on the future role of special schools and classes.
- There should be ongoing assessment and monitoring of progress so that placement and service decisions can be adapted, particularly for Deaf and hard of hearing children with additional disabilities.
- Shared placement between special and mainstream settings should be explored for Deaf and hard of hearing children with additional disabilities, in line with NCSE recommendations on the future role of special schools and classes (NCSE, 2011a, pp 110-111).

Acquisition of literacy and numeracy

- All teachers working with Deaf and hard of hearing pupils should be cognisant of the body of knowledge which now exists, concerning how Deaf students think and learn, so that teachers are better able to utilise the strengths of these children and to accommodate their needs.
- Initial (ITE) and continuing professional development (CPD) programmes for teachers should include a focus on effective approaches for the teaching of literacy and numeracy to all pupils, and address how these approaches can be differentiated for Deaf and hard of hearing pupils.

Additional teaching support for Deaf and hard of hearing children

- Schools, in conjunction with the Visiting Teacher Service, should identify children with mild hearing loss who require access to additional learning support and should ensure that children receive such support within the current school allocation.
- Pupils with mild hearing loss should be specifically mentioned in the list of pupils with learning difficulties for whom schools are provided with additional teaching resources under the general allocation model (DES, 2005a, Section 3.1).

- Children with cochlear implants should continue to receive additional educational support, on the same basis as other Deaf and hard of hearing children, on an ongoing basis.
- Additional teaching support for deafness as a low incidence disability in mainstream schools should be allocated in accordance with the:
 - level of pupil’s learning need
 - level of pupil’s functioning in the classroom
 - current DES policy parameters, and
 - the level of support granted should be reviewed on an annual basis.

Focus on outcomes and the monitoring of pupil progress

- There needs to be a sustained emphasis on measuring the outcomes for children with special educational needs, including those for children who are Deaf and hard of hearing.
- Individual education plans should be drawn up to enable each child to develop according to his/her ability. Communication targets should be included as part of these plans, and should be formally reviewed on an annual basis.
- The Visiting Teacher Service should have a substantial role in assisting the development of individual education plans for Deaf and hard of hearing children and in carrying out assessments to inform the plans.
- The Visiting Teacher service should develop protocols for the assessment of Deaf and hard of hearing children, which should be consistently applied by all visiting teachers.
- Schools should inform the Visiting Teacher Service of end of year assessment and examination results for Deaf and hard of hearing children. The aim here is to facilitate the tracking of educational outcomes for these pupils with a view to ensuring that they are making progress commensurate with their abilities.

Professional development for teachers of children who are Deaf and hard of hearing

- The NCSE considers it desirable that all teachers in specialist settings should have additional post-graduate qualifications in special education (to include a module on Deaf education). They should also access CPD programmes provided by the Special Education Support Service (SESS) and have adequate competency in the use of ISL. The Council recommends that the DES put measures in place which, over time, would make possible a requirement that teachers in specialist settings for Deaf and hard of hearing children must have a recognised qualification in the education of Deaf and hard of hearing children.
- The DES should prescribe a minimum range of qualifications for teachers who are teaching Deaf and hard of hearing children in mainstream and special education settings. The Department should also specify the additional qualifications for teachers following entry into the Visiting Teacher Service. These qualifications should include minimum standards of competence in the use and teaching of ISL.

- Programmes of initial teacher education (ITE) should include a compulsory module on the education of children with special educational needs, which should address the particular needs of children who are Deaf and hard of hearing.
- Current post-graduate programmes in special education should include a compulsory element on the education of children across disability categories, including Deaf and hard of hearing children.
- A postgraduate programme that leads to recognised qualifications in the education of Deaf and hard of hearing children should be available for teachers working in specialist settings. These programmes should include the following areas:
 - early intervention
 - language acquisition and development
 - education of children who are Deaf and hard of hearing or Deafblind
 - education of children who are Deaf with additional disabilities and
 - educational audiology.
- All teachers who work with Deaf and hard of hearing children should continue to have CPD opportunities in relation to Deaf education, through courses provided by the SESS.
- All teachers who work with Deaf and hard of hearing children who use sign language as their primary mode of communication should be required to have adequate competency in the use of ISL. In the case of primary/special schools, this would usually be the relevant class teacher. In the case of post-primary schools there should be a designated teacher who becomes sufficiently competent in sign language to support the education of the pupil concerned, across subject areas as required.
- All teachers should have an appropriate level of awareness of issues relating to Deaf and hard of hearing people that have an impact on teaching and learning.

National Educational Psychological Service (NEPS)

- The NEPS should work towards the provision of a psychological service with a sufficient level of competency in ISL to administer psychological assessment and to communicate with parents and children whose preferred mode of communication is through ISL.
- In the meantime, ISL interpreters should be used for translation purposes, where necessary, when working with teachers, parents and children who are ISL users.

Special needs assistants

- In cases where an SNA with ISL expertise, who is working with a Deaf and hard of hearing child is made redundant, due to a reduction in the level of SNA support in a particular school, the Deaf and hard of hearing child must continue to have ISL support available

- Schools should ensure that SNAs working with Deaf and hard of hearing children are equipped with the skills necessary to support their particular needs.

Development of co-operative structures

- A nominated person should be given the responsibility of liaising between and across locally delivered health and education funded services. The SENO could be the person so nominated.
- The DES should clearly define linkages between the Visiting Teacher Service, the NCSE, SESS, and NEPS, in order to ensure the provision of a streamlined service to Deaf and hard of hearing pupils and to avoid the possibility of role overlap.

Implications of Policy Advice for the Resources of the State

When developing policy advice, the Council is required to:

- provide an assessment of the implications of that advice for the resources, including financial resources, available to the State in respect of the provision of education, and
- have regard to the practical implementation of that advice (Section 20 (3) (b), EPSEN Act, 2004) (Government of Ireland, 2004).

The final section of this report examines the recommendations that have implications for the resources available to the State. In order to do this, cross-cutting recommendations have been grouped under the following twelve headings, with costs estimated accordingly:

1. Provision of information
2. Health funded supports
3. Irish Sign Language (ISL)
4. Visiting Teacher Service
5. School age years: educational models
6. Deaf and hard of hearing children with additional disabilities
7. Teaching support
8. Focus on outcomes and the monitoring of pupil progress
9. Professional development for teachers of children who are Deaf and hard of hearing
10. National Educational Psychological Service (NEPS)
11. Special needs assistants (SNAs)
12. Development of co-operative structures.

The NCSE has submitted a background paper detailing the additional costs associated with the implementation of the recommendations within this policy advice paper to the DES. A summary of the estimated additional costs for health funded supports is included in Table 5. A summary of the estimated additional costs for education funded supports is included

in Table 6. Recommendations that can be implemented within existing resources, thereby incurring no additional costs to the State, are outlined in Table 7.

Chapter 1

Introduction



1 Introduction

Deaf education has a long history in Ireland, with the first recorded school for Deaf children opened in Dublin in 1816 by Dr Charles Orpen (Crean, 1997). The Catholic Institute established St. Mary's School for Deaf Girls, under the management of the Dominican Sisters Order, in Cabra, in 1846. St Joseph's School for Deaf Boys was established under the management of the Christian Brothers, in Cabra, in 1857.

Over many years, Deaf education was dominated by an ongoing international debate surrounding the relative benefits of oral versus manual approaches to the education of Deaf children. Policy shifts towards the use of an oralist approach in the early twentieth century caused major difficulties for members of the Deaf¹ community, in that a strictly enforced oralist policy was often accompanied by a diminished use of sign language. This made it difficult for many Deaf pupils to access the curriculum in schools as they couldn't understand what the teachers were saying (Leeson, 2007).

The predominance of oralism began to wane in many European countries in the 1970s as across the continent, research studies began to indicate the poor achievement levels of Deaf children. A seminal study by Conrad (1979), found that Deaf pupils left school with median reading ages of nine, with poor speech intelligibility and with lip-reading skills no better than those of the hearing population, despite their training in this area (quoted in Gregory, 1996). This dissatisfaction with oralism led to the introduction of what became known as 'total communication' methods and, later, bilingual education.

The National Council for Special Education (NCSE) now wishes to address the future educational needs of Deaf and hard of hearing children in Ireland so that they are enabled to participate in and benefit from education, and to achieve educational outcomes that are on a par with those achieved by their peers of similar ability.

1.1 Context

In Ireland, an advisory committee on Deaf Education was established by the Minister for Education and Science² in December 2001. Its role was to review educational provision for Deaf and hard of hearing children. This was the first in-depth review of Deaf education since the publication of the 1972 Government report, 'The Education of Children who are Handicapped by Impaired Hearing' (DES, 1972).

This advisory committee engaged in ongoing discussions with a view to reaching a consensus regarding the main issues identified. Background documentation was prepared to support its work. The work of the committee was not finalised and the Minister for Education and Skills requested the NCSE to provide policy advice in relation to the future education of Deaf and hard of hearing children.

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- 1 The Irish Deaf Society (IDS) defines the Deaf community as a group of people who share a perception of the world through an emphasis on visual and kinaesthetic input. This description of 'Deaf' is most commonly used for people who are Deaf at birth or who become so in very early childhood. This definition identifies a cultural, social and linguistic group, and is often signified by the use of a capital 'D' (<http://www.Deaf.ie>). In this paper, the term 'Deaf' is used to include all Deaf people.
 - 2 The Department of Education and Science was renamed Department of Education and Skills in May 2010.

1.2 National Council for Special Education

The Council is now pleased to submit its policy advice to the Minister in relation to the education of Deaf and hard of hearing children. This policy advice addresses tasks that were originally set out in the terms of reference for the Advisory Committee on Deaf Education. They are:

- to review the adequacy of the current range of educational support services available to students who are Deaf and hard of hearing
- to identify and prioritise areas of policy and/or service provision that require further development or adjustment
- to bring forward such proposals, as are considered appropriate, to ensure the development and delivery of an appropriate, effective education support service for students who are Deaf and hard of hearing.

In 2008, the Council commissioned an international review of the evidence of best practice models and outcomes in the education of Deaf and hard of hearing children, appointing Professor Marc Marschark, Rochester Institute of Technology, as lead investigator. The completed report was published by the Council in 2009 (Marschark and Spencer, 2009).

Under the terms of the EPSN Act 2004, the NCSE is required to appoint a national consultative forum to consult on matters relating to the performance of the NCSE's functions. The forum's members represent stakeholders in special education. The term of office of the current forum is from 2010 to 2012. The Council sought advice from the forum regarding the formulation of this policy advice, as provided for under Section 22 of the EPSN Act, 2004 (Government of Ireland, 2004).

In addition, the Council engaged in a consultative process with stakeholders and other experts. The policy advice presented here is based on evidence from national and international research, the views expressed during the above consultation process and the experiences of NCSE Council members and NCSE staff.

The consultation process included discussions with the following groups/individuals:

- the consultative forum, which included presentations from the SESS, the Visiting Teacher Service and parents of Deaf children, and a written submission from the Education Partnership Group (2009)³
- The DES, which included the Special Education Section, the NEPS, the Inspectorate and the Visiting Teacher Service
- Parents of Deaf and hard of hearing children.

In addition, visits were made to special schools for Deaf children, mainstream schools with Deaf pupils enrolled, and the cochlear implant unit at Beaumont Hospital.

3 The membership of the Education Partnership Group includes representatives of DeafHear.ie, the Irish Deaf Society (IDS), the Catholic Institute for Deaf People (CIDP), the Centre for Deaf Studies, Trinity College, Dublin (CDS) and the Schools for Deaf Children in Cabra.

Both the shape of this report and its final recommendations are influenced by the views and findings expressed during the above consultation process. Particular account was taken of the advice received from the NCSE consultative forum.

In preparing policy advice, the Council is obliged to provide an assessment of its implications for the resources, including financial resources, available to the State, and to have regard to the practical implementation of that advice (Section 20(3) (b), EPSEN Act, 2004). In providing this assessment, Council is conscious of the need to recognise the particularly difficult economic context in which the policy advice is being developed and the reality that expenditure on education over the next four years must be planned in line with the National Recovery Plan, 2011 – 2014 (Government of Ireland, 2010).

1.3 Structure of the Policy Advice Paper

The policy paper is structured as follows:

Section 1 Introduction

Section 2 Current policy and provision for the education of Deaf and hard of hearing children in Ireland

Section 3 Examination of research findings and other policy documentation

Section 4 NCSE policy advice

Section 5 Implications of this policy advice for the resources available to the State for the provision of education and a consideration of the practical implementation of the recommendations.

Chapter 2

Current Policy and Provision for the Education of Deaf and Hard of Hearing Children in Ireland



2 Current Policy and Provision for the Education of Deaf and Hard of Hearing Children in Ireland

2.1 Deaf and Hard of Hearing Children

Hearing problems arise from impairments in the function of the outer/middle of the ear and result in conductive hearing loss. Dysfunction of the inner ear (the cochlea) gives rise to sensorineural hearing loss. Conductive hearing loss may potentially be managed by surgery. At present, the only effective management for sensorineural hearing loss is amplification through hearing aids and/or cochlear implants (HSE, 2011).

The extent of a child's hearing loss is measured by the level at which sound is detected across different frequencies on the audiogram. An audiogram records a standard hearing test in graphical form. These may be averaged to give a single number, which represents mild, moderate, severe or profound hearing loss. These levels are set out in Table 2 below.

Table 2: Levels of hearing loss

Description of hearing loss	Hearing Level in better ear
Mild	≤ 40 dB HL
Moderate	41 to 70 dB HL
Severe	71 to 95 dB HL
Profound	>95 dB HL

(Adapted from the National Audiology Review, HSE, 2011, p 27)

The Special Education Review Committee (SERC) Report (DES, 1993) recommends that any diagnosis should be functionally-oriented. It states that the extent to which pupils are making satisfactory progress through school should be taken into account as a critical factor.

Children who are born Deaf and hard of hearing, or who acquire deafness at an early age, are affected at a critical stage of language development. The National Audiology Review (HSE, 2011) makes the point that apparently 'mild' permanent hearing loss and/or unilateral hearing loss can have detrimental effects on a child's educational progress. This can then present difficulties, particularly for children with other complex needs. This paper addresses the educational needs of children with permanent hearing loss across the full range of hearing loss: mild or unilateral; bilateral; moderate; and severe to profound.

2.2 Prevalence of Deafness and Hearing Loss

According to the National Audiology Review (HSE, 2011), data from the UK, US and Europe suggest that the prevalence of permanent bilateral moderate or greater hearing impairment at birth is approximately 1 to 1.20 per 1,000. This prevalence increases during the early years and through acquired childhood hearing impairment to about 2 to 2.5 per 1,000. About one third of children with permanent bilateral hearing impairment will have other complex needs. Additionally, about 0.4 to 0.6 per 1000 are born with a unilateral

hearing loss of moderate or greater degree. If so called 'mild' hearing impairments are included, the total prevalence at school entry (unilateral and bilateral, mild to profound) is thought to be of the order of 3 to 4 per 1000; thus some 3,000 to 4,500 pre-school and school age children in Ireland will have a permanent hearing impairment with potential consequences for communication, literacy and social and emotional development. This is in line with data drawn from the National Disability Survey carried out by the Central Statistics Office (CSO, 2006), which estimates that 3,300 children up to the age of 17 years report having a hearing disability ranging from a moderate level to 'cannot do at all'.

The proportion of moderate to severe to profound permanent childhood hearing loss is approximately 2:1:1. About 30 per cent of these children will have additional special educational needs. A small proportion of them will have very complex needs.

Well over 90 per cent of Deaf and hard of hearing babies are born to hearing parents, with a small number born to parents who are Deaf and who may belong to the Deaf community. This figure has implications for language acquisition as hearing parents of Deaf babies will generally not be fluent sign language users and may wish to explore the acquisition of sign language for themselves and their family.

2.3 Current Department of Education and Skills Policy

The Department of Education and Skills has responsibility for the development and determination of policy in relation to the education of children with special educational needs. The DES policy development in this area is informed by the findings of the Special Education Review Committee (SERC) report (DES, 1993), by national and international developments and by research findings. Since 1998, various acts have been passed that have a direct bearing on education provision for children with special educational needs; notable examples include the Education Act 1998 (Government of Ireland, 1998), the EPSEN Act 2004 (Government of Ireland, 2004) and other related equality-based legislation. This legislation has had a significant influence on departmental policy in relation to special education provision. A short overview of important aspects of this legislation in relation to Deaf and hard of hearing children is provided in Appendix 1 of this paper.

2.3.1 Inclusive education

Section 2 of the EPSEN Act, 2004 explicitly states that:

- ... a child with special educational needs shall be educated in an inclusive environment with children who do not have such needs unless the nature or degree of those needs of child is such that to do so would be inconsistent with:
 - a. the best interests of the child as determined in accordance with any assessment carried out under this Act, or
 - b. the effective provision of education for children with whom the child is to be educated (Government of Ireland, 2004).

2.3.2 Continuum of provision

In Ireland, pupils with special educational needs are served by a continuum of provision ranging from full-time enrolment in mainstream classes to full-time enrolment in special schools, with a variety of options in between. This means that a range of placement options is currently available to pupils who are Deaf and hard of hearing. These include:

- a mainstream class, with additional support provided by
 - the class teacher through differentiation of the curriculum, co-teaching with other teaching staff as required
 - a resource/learning support teacher and
 - the Visiting Teacher Service for Deaf and hard of hearing pupils
- a special class in a mainstream school with additional support from the Visiting Teacher Service for Deaf and hard of hearing pupils
- a special school which has been designated by the DES for a particular category or categories of disability. This includes three special schools for Deaf and hard of hearing pupils.

Pupils are enrolled in special schools, special classes or mainstream classes, in accordance with the terms of DES circulars, the recommendations contained in professional reports and parental wishes.

2.4 Current Provision: Education Supports

2.4.1 Early intervention

The State supports early intervention for children with special educational needs, including children who are Deaf and hard of hearing, through the provision of funding to a number of crèche/pre-school settings. The Early Childhood Care and Education (ECCE) scheme allows eligible children to avail of a free pre-school place in the year before they commence school. Two options are available to parents of all eligible children under the ECCE scheme:

- A free, three hour daily placement, for the duration of one school year (38 weeks per annum)
- A free, two and one quarter hour session as part of a half-day or full-day childcare place over one calendar year (50 weeks per annum), with the overall childcare fees being reduced by €48.50 per week.

Two capitation rates are payable by the State, depending on the qualifications of the pre-school leader. The higher capitation rate amounts to €75 per week (€2,850 per annum) for leaders who have a qualification at Level 7-8 (or equivalent) on the National Framework of Qualifications (NFQ) as well as three years experience in the sector. Assistant staff must

be qualified to NFQ Level 5. The standard rate is €2,450 per annum, for leaders with a qualification at Level 5 on the NFQ. For the school year 2010 – 2011, the scheme's total cost was €166 million. This is expected to rise to €180m in the 2011 – 2012 school year (Source⁴: Department of Health, 2011).

Children with special educational needs, including Deaf and hard of hearing children can avail of this scheme over a two year period, with the number of hours and funding per child equating to a single year. In addition, Deaf and hard of hearing children with care needs may be allocated a care assistant through Health Service Executive (HSE) funding, although the provision of this support varies considerably across different regions of the country.

Pre-school leaders must hold a certification for a major award in childcare or early education, at a minimum of Level 5 on the NFQ or an equivalent nationally recognised qualification or higher award in the childcare/early education field. For the period of September 2010 to August 2012, this qualification requirement is considered met if a leader can demonstrate that they have achieved certification for an award in ECCE that includes significant content covering the core areas of knowledge. Further details on the ECCE scheme are available from the website of the Department of Children and Youth Affairs (at <http://www.dcy.gov.ie>).

Deaf and hard of hearing children may also attend other state funded crèche or pre-school settings for children with special educational needs. This includes early intervention settings that are attached to HSE funded service providers for children who are Deaf and have additional disabilities. It also relates to private pre-school settings that are supported by HSE grant aid or HSE funded pre-school assistants.

The State aims over time to support a single early intervention setting structure. In the meantime, parents can access one or more of the above mentioned early intervention settings, subject to availability of service and meeting the eligibility criteria for support (DES, 2010).

2.4.2 Visiting Teacher Service

Children who are Deaf and hard of hearing are generally referred to specialist audiology services at an early age. From there they are referred to the Visiting Teacher Service of the DES. This service is for children with a hearing impairment in mainstream schools or in special schools and classes other than special schools for Deaf and hard of hearing pupils. It is provided from the time of referral through to transition to third level education. Currently, 29 full time posts are allocated to this service; their role is to enable teachers to work with children who are Deaf and hard of hearing. Currently, these teachers support approximately 2,350 pupils throughout the country (Source: DES, 2011).

Visiting teachers are qualified teachers, the majority of whom hold postgraduate qualifications in Deaf education. A significant number hold other relevant postgraduate qualifications in special education. These teachers provide advice and support to parents

⁴ The use of the term Source throughout the document is to signify data obtained directly from the named Government department or agency.

and schools and play a key role in facilitating the inclusion of Deaf and hard of hearing pupils in mainstream settings.

The aim of the Visiting Teacher Service is to support Deaf and hard of hearing children and their parents/guardians and teachers, to assist children to achieve their linguistic, educational, social and personal potential and become independent learners and members of society.

The service provided by visiting teachers includes:

- providing guidance, support and specialist teaching to pre-school children and their parents in the home
- providing guidance, support and specialist teaching in relation to the acquisition of language
- providing specialist teaching, support and monitoring in schools
- liaising with schools for Deaf children during a pupil's transition to the special school or from the special school to mainstream school
- advising parents and teachers on curricular and environmental implications, including the use of assistive technology
- using appropriate assessment tools and monitoring protocols to plan, monitor and assess communication development
- liaising with parents, teachers and professionals including audiologists, speech and language therapists, SENOs, and the cochlear implant team
- advising the State Examination Commission (SEC) in relation to applications for Reasonable Accommodation in Certificate Examinations (RACE)
- providing a transition report for students in final year post-primary education, to advise disability and access officers in relation to appropriate accommodations and supports to be provided at third level. The visiting teacher may provide additional support if necessary during the pupils' first year in college.

Each visiting teacher is allocated a caseload of children within a specified region. Children with moderate to profound hearing loss are placed on their active caseload while those with mild and unilateral hearing loss are seen on request. Table 3 shows the number of children within the mild, moderate, severe and profound range of hearing loss and their educational placement.

Table 3: Educational placement of Deaf and hard of hearing children

Active caseload			
Level of hearing loss			
Moderate	939		
Severe	347		
Profound No cochlear implant	109		
Profound Cochlear implant	217		
Not recorded	10		
Total	1622	→	
		Placement	
		Home	118
		Pre-school	104
		Primary mainstream	718
		Post-primary mainstream	405
		HI special class primary	25
		HI special class PP	14
		Designated special class non HI	37
		Designated special school non HI	142
		Other	46
		Not recorded	13
On request caseload			
Level of hearing impairment			
Mild	500		
Unilateral	221		
Not Recorded	12		
Total	733	→	
		Placement	
		Home	17
		Pre-school	9
		Primary mainstream	370
		Post-primary mainstream	228
		HI special class primary	4
		HI special class PP	1
		Designated special class non HI	6
		Designated special school non HI	67
		Other	16
		Not recorded	15

(Source: Department of Education and Skills, 2011)

The support offered by the visiting teacher reflects the diversity of need among Deaf and hard of hearing children. It can range from occasional information and guidance to

parents, the child and teacher to regular visits involving tuition, assessment and ongoing guidance. In addition, the amount and type of support a Deaf and hard of hearing child needs can depend on their stage of development and education. The visiting teacher works with babies as young as a few weeks or months old and in some instances, with students until the end of second level education. The frequency of support provided to children on the visiting teacher's active caseload depends on the level of need; it can be provided on a weekly, fortnightly or monthly basis, on a per term basis, annually, or on request.

2.4.3 School-based supports for pupils who are Deaf and hard of hearing

During the school year of 2010-2011, approximately 856,685 pupils were enrolled in schools aided by the DES. Of these, 350,687 pupils were enrolled in post-primary and 505,998 pupils were enrolled in primary schools (DES, 2011a).

(a) Special schools for Deaf and hard of hearing pupils

According to NCSE figures, 6,338 pupils attended special schools for children with disabilities during the 2010-2011 school year. During the same year, of those who attended special schools, approximately 152 attended special schools for Deaf and hard of hearing children (NCSE, 2010⁵).

Three special schools for Deaf and hard of hearing children exist in Ireland. Their names and enrolment figures for the 2010-2011 school year are outlined here:

- St Mary's School for Deaf Girls, Cabra – 74 pupils
- St Joseph's School for Deaf Boys, Cabra – 62 pupils, and
- Mid-West School for Hearing Impairment, Limerick – 16 pupils.

(b) Special classes for Deaf and hard of hearing pupils

In the school year 2010-2011, there were 15 special classes for Deaf and hard of hearing children across 12 mainstream schools, with approximately 48 pupils enrolled (Source: Special Education Administrative System, NCSE, 2011). Approximately 34 of these pupils were at primary level with 14 pupils enrolled at post-primary level (Source: Special Education Administrative System, NCSE, 2011). Table 4 presents a list of the mainstream schools with special classes for Deaf and hard of hearing pupils.

⁵ Cited in *The Future Role of Special Schools and Classes in Ireland* (NCSE, 2011a) submitted to the Minister for Education and Skills in February 2011.

Table 4: Schools with special classes for Deaf and hard of hearing pupils 2011

School name	County	School type
Ennis Community College	Clare	Post- primary
Bishopstown Community School	Cork	Post- primary
Mercy Secondary School	Longford	Post- primary
Darley National School	Cavan	Primary
Ennis Convent National School	Clare	Primary
St Columba's National School with facility for Deaf children	Cork	Primary
Scoil Chaitríona Junior	Galway	Primary
Scoil Chaitríona Senior	Galway	Primary
S N An Chroi Naofa Presentation Convent	Kerry	Primary
St Matthews Mixed National School	Longford	Primary
Scoil na Croise Naofa	Offaly	Primary
Portlaw National School	Waterford	Primary

(Source: Special Education Administrative System, NCSE, 2011)

(c) Educational support provided to Deaf and hard of hearing pupils in mainstream classes

Learning support/resource teaching

A general allocation of learning support and resource teaching hours is provided to primary schools, to support the inclusive education of the following categories of pupils: those with special educational needs arising from high-incidence disabilities; those who are eligible for learning support teaching; and those with learning difficulties (DES, 2005a). High incidence disabilities comprise borderline mild general learning disability, mild general learning disability and specific learning disability. Pupils whose achievement is at or below the tenth percentile on standardised tests of reading or mathematics are given priority when schools are determining eligibility for learning support teaching. Pupils with learning difficulties include pupils with mild speech and language difficulties, pupils with mild social or emotional difficulties and pupils with mild co-ordination or attention control difficulties (DES, 2005a).

Approximately 3,760 teaching posts have been allocated to primary schools under the General Allocation Model (GAM) at an estimated annual cost of €225 million per annum (Source: DES, 2011).

Post-primary schools are provided with a general allocation of learning support teaching hours to support pupils who are eligible for learning support teaching.

Pupils with mild/unilateral hearing loss, who require additional teaching support, may access support through this general allocation of teaching hours in primary and post-primary schools.

Individual Allocation of Additional Teaching Support

Additional teaching resources are allocated to primary schools for the support of individual pupils who have complex and enduring special educational needs and have been assessed as having a low incidence disability. Additional teaching resources are allocated to post-primary schools for the support of individual pupils assessed as having either a high or low incidence disability. The number of hours allocated varies by category of disability.

Under the terms of DES Circular Letter 02/05, pupils with a hearing impairment are considered to be those pupils, whose hearing disability is so serious as to significantly impair their capacity to hear and understand human speech, thus preventing them from participating fully in classroom interaction and from benefiting adequately from school instruction. The great majority of them have been prescribed hearing aids and are availing of the services of a visiting teacher. This category is not intended to include pupils with mild hearing loss (DES, 2005a).

Schools with a pupil who has been assessed as having a hearing impairment and no other assessed disability may be allocated a maximum of four hours teaching support per week from a resource teacher, or from a visiting teacher and resource teacher combined. Where a pupil with a hearing impairment also meets the criterion for another low-incidence disability category, five hours teaching support per week may be allocated as the pupil is deemed to have multiple disabilities (DES, 2005a).

Additional teaching support sanctioned by the NCSE

In the school year 2010-2011, additional teacher resources were allocated to schools in respect of 369 post-primary pupils and 680 primary pupils (totalling 1049 pupils) who were Deaf and hard of hearing (Source: Special Education Administrative System, NCSE, 2011). These figures do not include children with mild or unilateral hearing loss who were supported through the General Allocation Model (GAM) in primary schools and through learning support in post-primary schools.

Access to SNA support

Special needs assistants (SNAs) are allocated to primary, post-primary and special schools; they address care needs in order to facilitate the inclusion of children with special educational needs. These allocations are based on individualised applications and are subject to eligibility criteria laid down by the DES. In order to qualify for SNA support, a pupil must have a disability and care needs as outlined in DES circulars 07/02 and 02/05. The care needs of the child must be assessed and described by a professional who is also required to state why the support of an SNA is necessary and to outline the benefits that would accrue to the child from receiving such care in the school setting. In the case of Deaf and hard of hearing pupils, the SNA support is intended to meet significant care needs arising from an impairment of sensory function (DES, 2002). The duties of SNAs are solely related to care needs and are strictly of a non-teaching nature.

Applications for SNA supports for particular pupils are made by schools to special educational needs organisers (SENOs) who examine each request in the context of DES policy and the SNA resources already provided to the school in question. The SENO decides if the pupil is eligible to receive support and, if so, whether the school has sufficient SNA resources to meet the care needs of the child. It is important to maintain a balance between the allocation of necessary care support and the right of the child to acquire personal independence skills. Where the child is eligible for SNA support and the school has an insufficient number of SNAs to provide the required support, additional SNA staffing may be sanctioned by the SENO. Schools are advised to regularly review the care needs and the level and type of support being given to the child.

Some pupils have major care needs and require the assistance of an SNA on a full-time basis. Others require SNA assistance on an intermittent basis, for their needs to be met as they arise.

In the 2010-2011 school year, 230 Deaf and hard of hearing pupils in primary schools and 67 Deaf and hard of hearing pupils in post-primary schools (totalling 297 pupils) had access to SNA support (Source: Special Education Administrative System, NCSE, 2011).

2.4.4 Additional supports

National Council for Special Education

The NCSE has a range of functions in relation to the support of Deaf and hard of hearing children. Its local service is provided through the network of Special Educational Needs Organisers (SENOs). Currently, the NCSE employs 75 SENOs and twelve senior SENOs. Each SENO has responsibility for specific primary, post-primary and special schools within their area. SENOs provide a service to all primary, post-primary and special schools in the country.

At present, SENOs provide information to parents concerning educational options for children with special educational needs. They resource schools to meet the needs of these children. They sanction resource teaching hours, special needs assistant posts and they process applications for assistive technology and transport. SENOs are also involved in strategic local planning in consultation with stakeholders. They advise the DES on local needs in relation to children with special educational needs.

The SENO, on behalf of the Council, liaises with local health authorities to co-ordinate the delivery of services between the health and education sectors. In this way, they facilitate the inclusion of the child in the school system.

The National Educational Psychological Service (NEPS)

The mission of the NEPS is 'to support the personal, social and educational development of all children through the application of psychological theory and practice in education, having particular regard for children with special educational needs' (DES, 2007).

The NEPS is a part of the Department of Education and Skills. NEPS psychologists work with both primary and post-primary schools and are concerned with learning, behaviour, and social and emotional development. Each psychologist is assigned to a group of schools.

The NEPS currently employs 171 psychologists (Source: NEPS, 2011) with an additional six posts in the process of being filled by the Public Appointments Service. Schools that do not currently have a service from NEPS may avail of the DES Scheme for Commissioning Psychological Assessments (SCPA).

NEPS psychologists specialise in working with the school community. They work in partnership with children, parents, teachers and other professionals in identifying educational needs, including the Visiting Teacher Service.

Through consultation, NEPS psychologists encourage schools to apply a staged, problem-solving approach in identifying special educational needs and in facilitating early intervention (DES, 2007). NEPS psychologists are involved in each stage of this process. They offer consultation and assessment, as well as systemic support and development work at a whole school level.

Children with sensory disabilities (which includes Deaf and hard of hearing pupils) are a service priority and NEPS psychologists in each region have received training in relation to best practice in working with these children. They are available as a regional support to their colleagues who are working with Deaf and hard of hearing children.

In cases that involve parents and children who are ISL users, ISL interpreters are used, where necessary.

Irish Sign Language (ISL) Support Scheme

This scheme provides training in Irish Sign Language (ISL) to Deaf and hard of hearing children and their families. During the 2009-2010 school year, the DES sanctioned ISL tuition for 128 pupils under the ISL Support Scheme. This allows for one hour of tuition per week, increasing to 7.5 hours per week for the months of July and August, at a cost of €28.97 per hour (Source: Special Education Section, DES, 2011). In the 2010 financial year, a total of €166,354 was spent on ISL tuition for 128 pupils. In 2009, it was provided for 103 pupils, at a cost of €136,892 (Source: Special Education Section, DES, 2011).

Assistive technology

The term 'assistive technology' refers to any item of equipment that can be used to improve the functional capability of a pupil with special educational needs that is of direct educational benefit to them. The scheme applies to pupils who have been diagnosed as having serious physical and/or communication disabilities that make ordinary communication through speech and/or writing impossible for them.

In relation to Deaf and hard of hearing pupils, the visiting teacher assesses and gives advice in relation to equipment commonly recommended; examples here include amplification systems, surround sound systems and radio aids. The SENO takes account of the visiting teacher's recommendations when considering applications for equipment for such pupils (DES, 2005b).

NCSE records that assistive technology was provided to 939 Deaf and hard of hearing pupils of primary, post-primary and special schools in the school year 2010-2011 (Source: Special Education Administrative System, NCSE, 2011). The total cost of providing assistive technology is estimated to be in the region of €2 million for the 2010-2011 school year, representing an average cost of €2,100 per pupil.

Special transport provision

The purpose of this scheme is to provide a reasonable transport service for children with a diagnosed disability and/or special educational need, who, because of the nature of their disability, may not be in a position to avail of a school bus service time-tabled to pick up other children along its route. A child is eligible for school transport support if he/she is attending the nearest recognised mainstream school, special class, special school or unit that is or can be resourced to meet the child's special educational needs under DES criteria. Where the provision of a reasonable level of transport service is not possible, or where the costs of providing such a service is prohibitive, the DES may provide grant aid towards the cost of private transport arrangements.

During the 2010-2011 school year, transport was provided by the DES for 166 Deaf and hard of hearing pupils. Of these, 22 were transported to post-primary schools, 49 to primary schools and 95 to special schools (Source: Special Education Administrative System, NCSE, 2011).

2.4.5 Continuing professional development (CPD) for teachers

Special Education Support Service

In September 2003, the teacher education section of the Department of Education and Skills (DES) established the Special Education Support Service (SESS). The aim of this service is to enhance the quality of learning and teaching, through the delivery of a range of professional development initiatives and support structures for school personnel working with students with special educational needs.

In relation to Deaf education, the SESS provides CPD and support through a designated team. This team comprises the deputy director of the SESS and teachers of Deaf pupils with specialist expertise who work with the SESS on a part-time basis as local facilitators and who engage in the SESS support programme for schools.

The provision of CPD and support for teachers of students who are Deaf and hard of hearing is organised through the schemes outlined below.

(i) Support Scheme: through this, schools and/or individual teachers can identify their own professional development needs and apply to the SESS for support. Support sought may be financial, professional or advisory in nature. Through this scheme, the SESS provides:

- individual school visits or seminars, provided by a team of SESS local facilitators with specialist expertise in Deaf education
- funding for whole-staff training in Irish Sign Language (ISL)

- funding for teachers to avail of post-graduate qualifications.
- (ii) SESS core strategy.** Since its establishment in 2003, SESS has prioritised and organised the following events:
- introductory five day courses for teachers of Deaf and hard of hearing pupils
 - A series on Language Assessment for Teachers working with Deaf Students (Sue Lewis, Mary Hare College)
 - A one day course called, Deafness: A Seminar for Mainstream Class Teachers and Resource/Learning Support Teachers
 - A series called, Language and Literacy Development: Deaf and Hard of Hearing Students (Connie Mayer, University of Toronto).
- (iii) Disability Awareness: the *Kids on the Block* programme.** The *Kids on the Block* programme on deafness was developed to educate children about deafness, both its implications as a medical condition and Deaf culture. It is designed to:
- promote awareness and sensitivity among hearing children
 - promote appreciation of the differences in each individual
 - explore some aspects of Deaf culture and contributions of people who are Deaf
 - teach children several simple signs.
- Based on the Japanese theatre form called Bunraku, the *Kids on the Block Inc* was created by Barbara Aiello in the USA in 1977. It is an international company dedicated to teaching children and adults to accept and appreciate differences and disabilities.
- (iv) Irish Sign Language.** SESS supports the learning and teaching of Irish Sign Language (ISL) to school staff and pupils.

Postgraduate programmes in special education

The Teacher Education Section of the DES provides for post-graduate programmes in special education that aim to develop teachers' knowledge, understanding and skills in relation to students with special educational needs and students who are identified as requiring learning support teaching.

The combined postgraduate diploma programme of CPD development for teachers involved in learning support and special education is currently funded by the Teacher Education Section, DES and is delivered at seven colleges and universities around the country. The programmes are of one academic year duration. Participating teachers require a total of eight weeks leave from schools/centres for attendance at the relevant programme venue. For the rest of the course, participating teachers teach in their educational setting.

Supervised teaching practice is a key component of the post-graduate programmes funded by the Teacher Education Section. The awarding of the post-graduate qualification is conditional on the candidate successfully completing the practicum through demonstrating satisfactory competence in the learning and teaching of students with special educational needs and students who require learning support teaching.

The knowledge, understanding and skills acquired by teachers who participate in these programmes have an impact on the learning experience of all students with special educational needs, including those who are Deaf and hard of hearing.

Postgraduate programmes in Deaf education

Funding has been provided, through the SESS, for teachers to avail of post-graduate qualifications in Deaf education. To date, teachers have accessed the following post-graduate programmes:

- Deaf Education in the University of Birmingham, University of Manchester and Mary Hare College, Newbury, UK
- Educational Audiology in Mary Hare College, Newbury, UK
- Multi Sensory / Deafblindness in the University of Birmingham.

2.5 Current Provision: Health Funded Supports

2.5.1 Identification and assessment

The Department of Health recognises the importance of early intervention for all young children with developmental delay, as appropriate to their needs. Health supports are deployed on the basis of presenting need rather than diagnosis (Source: DoH, 2011).

A child's hearing loss can be identified in a number of different ways which include GP visits, developmental checks carried out by the Public Health Nurse when children are around nine months old or through other professionals with whom the child is involved.

If a parent/guardian considers that their child, aged under five years, may have a disability, they can apply under Part 2 of the Disability Act, 2005 (Government of Ireland, 2005) for an assessment of need. This assessment must be carried out without regard to resource constraints or service availability and is arranged by the HSE Assessment Officers (AOs). Where an assessment report identifies a need for health or education supports, a service statement is prepared which specifies the health services to be provided with reference to available resources. Education supports are not specified in the service statement where the subject of the statement is a child.

If an educational need is identified during the assessment of need process, the inputs from the education sector are provided by the NCSE in co-operation with the NEPS under Section 8(3) of the Disability Act, 2005.

2.5.2 Primary care and specialist disability supports

A national programme for the reconfiguration of specialist disability services for children and young people has been initiated by the HSE, based on the recommendations of the National Reference Group on Multidisciplinary Disability Services for Children Aged 5-18 (HSE, 2009). This report recommends that health services for children should be provided in partnership with their parents and as close to their homes as possible. Children should be seen at local primary care level when their needs can be met there and referred to

specialist disability services, if necessary, if their needs are more complex. The new HSE national plan is based on the premise that close co-operation and teamwork between health services and schools will be required so that children are helped to achieve their maximum potential.

Primary care teams

A key HSE objective is to develop Primary Care Teams (PCTs) which provide services in the local community. Primary Care Teams, (for population 8,000-10,000) should include physiotherapists, occupational therapists, speech and language therapists and psychologists with paediatric training and expertise. This will give people direct access to integrated multi-disciplinary teams. The HSE has indicated that there will be 530 Primary Care Teams developed by 2011. At the end of December 2010 there were 351 Primary Care Teams in place around the country. (Source: HSE,2011)

Specialist disability services for children and young people

As noted above, if a child's needs are more complex, they should be seen by either the early intervention or school age teams, as appropriate, in their network area. Where possible, the network school age team and early intervention team should be accommodated in the same premises in order to allow for sharing of some facilities and to promote effective co-ordination of services.

It is envisaged that primary care and network teams should be supported, as appropriate, by sub-specialist teams with a high level of expertise in particular fields, including intellectual disability, autism, physical disability and sensory disability. These sub-specialist teams will provide training and consultation for primary care teams and network teams and limited direct intervention for children when necessary to respond to exceptional complexity or specialist nature of their needs. Finally specialist medical services (neurology, Ear Nose Throat (ENT) specialist, audiology etc.) will be co-ordinated at national level and accessed regionally.

2.5.3 Audiology

Audiology services are concerned with the identification, assessment and management of hearing difficulties and are generally available in community and in hospital settings.

The HSE community audiology services have traditionally offered assessment and rehabilitation for General Medical Services (GMS) Card Holders and, separately, for children. The following audiology services are provided:

- audiological assessment
- aural rehabilitation, hearing aid fitting and management advice
- impression-taking for ear-mould manufacture
- advice on the use of assistive listening devices (ALDs), and discussion of rehabilitative options

- onward referral to acute ENT, a cochlear implant programme, speech and language therapy or other services, as appropriate,
- referral of children with a hearing loss to the Visiting Teacher Service.

Finally, as part of the transfer of staff and functions from the former National Rehabilitation Board (NRB) to the former health boards and now to the HSE, NRB administrative staff has historically provided minor hearing aid/ear-mould repairs such as re-tubing. In some regions, this practice continues to be provided to clients on a 'walk in basis'.

In addition to public health services, a number of voluntary organisations provide support for Deaf and hard of hearing children and their families. They include DeafHear, the Irish Hard of Hearing Association, the Irish Deaf Society, and an online information service (at www.irishDeafkids.ie). DeafHear is the largest provider of such services and receives significant funding from the HSE.

The services offered by these organisations include family and support services (social work, counselling, respite and family activities), assistive technology and assistive listening devices, communication therapy and lip-reading classes, information and advice, sign language classes, and a mental health and deafness service. These organisations receive funding from the HSE, both through local grants of varying amounts and direct funding.

Despite an annual investment of approximately €11.3 million, the National Audiology Review identified a number of current inadequacies in the availability and delivery of audiological services nationally and made recommendations for their improvement and development. The HSE has committed €1.8 million to deliver enhanced audiology services (HSE, 2010) through the implementation of Phase 1 of the Audiology Review recommendations (HSE, 2011).

2.5.4 Universal newborn hearing screening

Universal newborn hearing screening (UNHS) is internationally recognised as good practice. This is a process whereby all newborn babies are offered a test to identify those who may be at increased risk of hearing loss. Parents can be offered further information and the option of further tests at that point.

The National Audiology Review recommends that, 'a universal national programme of newborn hearing screening be introduced as a priority, such that all babies have their hearing screened shortly after birth.' (HSE, 2011, p.19). Once UNHS has been implemented, the report recommends that the eight month infant distraction test screen be discontinued. The report recommends that full national implementation should be achieved as quickly as possible and no later than the end of 2012 (HSE, 2011).

The aims of the national programme include the following:

- to offer a hearing screen to all eligible newborn babies, in Ireland, using an agreed national protocol for screening
- to screen all eligible babies using the agreed national protocols for screening within four weeks of birth, and by 44 weeks gestational age for babies who have been in a special or intensive care units for more than 48 hours

- To ensure timely referral and assessment to integrated audiology services of babies identified as requiring assessment (HSE, 2011).

The report states that ongoing monitoring of childhood hearing as part of the child health surveillance programme is critical, as well as audiological monitoring of children with risk factors for hearing loss. It recommends that screening be undertaken by dedicated screeners in each of the HSE maternity hospitals (HSE, 2011).

Funding of €1.9 million has been made available in the HSE National Service Plan 2011 for the rollout of newborn hearing screening, in line with the national model (HSE, 2010). The programme is now operating in Cork University Maternity Hospital with plans being progressed for roll out to all HSE South maternity hospitals by the end of 2011. Other regional plans are also in progress, but on a phased basis.

2.5.5 Cochlear implantation

The national cochlear implant programme at Beaumont hospital has served both children and adults with severe to profound hearing loss since its foundation in 1995. The multidisciplinary team is made up of highly trained and qualified professionals specialising in deafness, including ENT surgeons, audiological scientists, speech and language therapists, teachers of the Deaf, psychologists and administrators.

The programme is completely publically funded and includes assessment, hearing aid fittings, surgical intervention, and all post-operative follow up and management. Babies of a few months old are assessed for cochlear implant suitability and the programme includes children with complex needs. Following cochlear implantation, the cochlear implant programme provides lifelong management for cochlear implant recipients residing in the Republic of Ireland. This includes individuals transferred from other programmes worldwide. Currently, the programme has over 400 cochlear implant recipients under its care and continues to grow.

Current figures show that 305 children (aged between nine months and 16 years) have been implanted as part of the paediatric programme since it began in 1997. Many of this number transferred to the adult programme at 16 years. Up to 40 children are implanted each year. Of the 257 children on the paediatric programme, 211 were implanted under the age of five years and 42 were implanted between five and 16 years. Referrals are made by GPs, parents, Ear, ENT specialists, audiologists. Patients are also referred to the programme following standard hearing tests. There have been 1,717 referrals to the programme since its commencement, but not all referrals are necessarily deemed suitable for implantation. (Source: Cochlear implant programme, June 2011).

The HSE National Audiology Review (HSE, 2011) recommended that financial support for the cochlear implant programme continue to be ring-fenced, but at levels that allow for simultaneous bilateral implantation for children. The report also recommended the integration of the cochlear implant programme with paediatric audiology at the new national paediatric hospital.

2.5.6 Speech and language therapy

Speech and language therapy includes the assessment, diagnosis, identification and rehabilitation of individuals presenting with communication disorders. Deaf and hard of hearing children are a heterogeneous group and not every child in this group requires speech and language therapy (Source: Irish Association of Speech and Language Therapists (IASLT), 2011). The aims and objectives of speech and language therapy vary, depending on the type of deafness, the age of the child and the type of communication difficulty.

Speech and language therapists work with other members of the multi-disciplinary team to meet the needs of these children. This includes parents, teachers of the Deaf, audiologists and other health and education professionals. Speech and language therapy may be delivered in any of the following settings:

- primary care settings
- disability teams
- specialist cochlear implant teams
- specialist schools for children who are Deaf and hard of hearing.

During the consultation process parents reported that waiting lists for speech and language therapy are long in certain parts of the country. Speech and language therapy for Deaf and hard of hearing children may include the following:

- working with parents on programmes to encourage communication and listening in the home
- training teachers and other educational staff to promote communication and listening in the classroom
- individual therapy with the child
- group therapy with groups of children (groups can either solely involve children who are Deaf and hard of hearing, or they can also include children who do not have hearing loss).

In the case of Deaf and hard of hearing children, speech and language therapists work with the child to promote the development of communication. It is important that speech and language therapists understand the specific language needs of children who are Deaf and hard of hearing and that they continue to work closely with other professionals in the development and ongoing monitoring of programmes.

Chapter 3

Examination and Interpretation of the Findings of Relevant Research Studies and Other Policy Documentation



3 Examination and Interpretation of the Findings of Relevant Research Studies and Other Policy Documentation

This section summarises the main findings and recommendations of relevant research studies and policy documentation.

3.1 Early Identification

The impact of early hearing loss on children's ability to reach their developmental and educational potential is highly significant (Marschark and Spencer, 2009). This is because there is evidence that the first six months of a child's life are critical for language development (Yoshinaga-Itano et al, 1998). In order to acquire a language, children must have 'exposure in quality and quantity, to accessible linguistic input, in meaningful interactions with others who are already capable users of the language' (Mayer, 2007, p.411). These conditions pertain to both spoken and signed languages. It is therefore very important that an infant has access to sound (both environmental and spoken) and to good communication, from as early an age as is possible.

Significant advances in recent years in the early diagnosis of deafness can ensure that an infant can be fitted with hearing aids as soon as possible and receive a cochlear implant at an early age, where this is indicated. Technological aids, including cochlear implantation can increase the child's exposure to sound and to language, thereby increasing the child's opportunity to acquire language at an early age. Marschark states that, 'effective early intervention can apparently greatly ameliorate, although not eliminate, the barriers to learning faced by Deaf and hard of hearing children – at least during the early years of life' (Marschark and Spencer, 2009).

Where effective intervention is provided, average language and early literacy functioning of young children with hearing loss has been found to fall within the range for hearing children, albeit the 'low average' range (Moeller, 2000; Yoshinaga-Itano, 2003 quoted in Marschark and Spencer, 2009). Marschark points out that this, in turn, reduces the necessity for intensive support from speech and language therapists, a Visiting Teacher Service and resource teacher services at a later age.

The National Audiology Review supports Marschark's findings in proposing that there is strong evidence that timely diagnosis and intervention for children with permanent deafness and hearing impairment results in improved outcomes at a relatively low health care cost (HSE, 2011).

3.2 Early Intervention Programmes

The implementation of newborn hearing screening and the early identification of hearing loss will have implications for services that support Deaf and hard of hearing children and their families. Yoshinaga-Itano (2003) points out that the diagnosis of hearing loss within the first few months of life creates the opportunity to begin early intervention services for families with infants. This early intervention results in significantly better language,

speech and social-emotional development. For these reasons, a need exists to establish effective intervention programmes following early identification.

Best practice features of early intervention programmes have been established (Yoshinaga-Itano 2003). They are as follows:

- providers of early intervention services are trained professionals who receive regular additional in-service training
- services to parents are provided for 1-1.5 hours weekly and include information on child development, communication strategies and early language acquisition
- first contact is made immediately after the diagnosis and professionals are specially trained to provide emotional support as needed
- parents are provided with the information and guidance necessary to assist them in choosing an initial approach to language use, but this initial decision can be modified when appropriate
- options for various language approaches are available and decisions may be changed over time
- children's developmental progress is assessed twice yearly and results are used to help parents make or revise decisions on how to support their child's development.

3.3 Cochlear Implant Programmes

Cochlear implantation is recommended as an option for people with severe to profound deafness who do not receive adequate benefit from acoustic hearing aids. There is good evidence concerning the benefits of cochlear implantation and the added benefit of bilateral implantation for children (HSE, 2011).

Marschark says that contrary to early expectations, implants neither 'make Deaf children into hearing children' nor 'leave Deaf children stranded between Deaf and hearing worlds'. Available research indicates that using a cochlear implant gives a profoundly Deaf child access to information from sound that is similar to that of a child with a moderate-to-severe hearing loss who uses a hearing aid. This is an advantage within the educational setting but it still leaves the child with limitations and in need of additional educational support (Marschark and Spencer, 2009).

3.4 Educational Models

No single educational model has proved optimally effective for all Deaf and hard of hearing children. Available research clearly points to the need for an array of alternative educational settings, ranging from separate schools or programmes for Deaf and hard of hearing children to fully inclusive classrooms in which children can obtain all necessary support services while integrated with their hearing peers. Evidence points to a mix of such settings as being most beneficial; this allows children to move into and out of various settings and discover those in which they are most likely to thrive (Marschark and Spencer, 2009).

When individual student and family characteristics are taken into account, type of school placement has been found to account for only about 1-5% of the variance in academic outcomes for Deaf and hard of hearing children (Marschark et al, 2011). In addition, recent research has shown that 'when taught by experienced teachers of the Deaf in mixed classrooms, Deaf and hard of hearing students may learn as much as their hearing peers, even if they come into the classroom with less content knowledge' (Marschark and Spencer, 2009).

3.5 Bilingual Education

Bilingual education means that the child's natural sign language is modelled and expected to be the child's first language and primary means of communication; it also serves as the classroom language and provides a bridge to learning literacy in the hearing community's spoken language (Marschark and Spencer, 2009). In Ireland, bilingualism means that the child attains fluency in Irish Sign Language (ISL) and in English or Irish (spoken and/or written).

According to Marschark and Spencer (2009), the research evidence regarding the positive impact of bilingual education on academic achievement thus far is minimal. However, they consider that bilingual education 'does no harm and clearly does contribute to social-emotional and interpersonal growth' (p. 207).

3.6 Acquisition of Literacy and Numeracy

The impact of early hearing loss on children's ability to reach their developmental and educational potential is highly significant (Marschark and Spencer, 2009). The academic achievement levels of Deaf and hard of hearing children remain significantly delayed compared to those of hearing children even in those cases where the non-verbal cognitive potential is similar. Marschark refers to the work of Allen (1984) and Traxler (2000) who reported that the median level of reading comprehension for Deaf and hard of hearing school leavers in the US approximated to that of hearing children at fourth grade level, whose average age is nine years. In addition, Deaf and hard of hearing students, aged 17-18 years, obtain mathematics scores similar to those of hearing students in the fifth or sixth year of school, who are aged 10 to 12 years. Marschark concludes that these difficulties in literacy and mathematics clearly affect this cohort's abilities to acquire information and skills in other academic areas (Marschark and Spencer, 2009).

Difficulties experienced by Deaf and hard of hearing pupils may be due to a variety of factors, including the under-use of metacognitive strategies, decreased visual attention to information provided in classrooms, lack of language skills for understanding written texts and information presented during class and relatively infrequent exposure to true problem-solving activities during class time.

Marschark's review suggests that an evidence base is beginning to grow in relation to educational approaches to promote literacy and numeracy skills, regardless of the modes or approaches used for language development. In general these include:

- direct instruction provided in meaningful and interactive contexts

- early shared reading and writing experiences
- the visual presentation of mathematical concepts
- embedding writing activities into science and related classes (this appears to promote both concept development and literacy skills).

Significantly, achievement tends to be higher when teachers are both subject matter specialists and are also knowledgeable about the special learning needs of students with hearing loss (Marschark and Spencer, 2009).

Very little research evidence is available on the experiences of Deaf and hard of hearing pupils in Irish schools. The NCSE recently commissioned a study to examine access to the curriculum for pupils with a variety of special educational needs in mainstream junior infants to second class (Ware et al, 2011). The study included three children with a 'hearing impairment', one in junior infants, one in first class and one in second class. Using classroom observation, the researchers concluded that, for most of the time, differentiation strategies were successful in facilitating access to the curriculum for the great majority of the case study children. Half of the research observations of children took place during literacy and numeracy lessons. However, the researchers found that the three children with hearing impairment were less likely to gain access to the curriculum than children with other types of special educational needs. In all of these cases, the interviewees suggested that this was at least in part due to late diagnosis and delays in providing the appropriate assistive technology. While it is important to give these findings due consideration, they cannot be generalised due to the very small number of Deaf and hard of hearing children involved in the study.

3.7 Teaching Support for Children with Mild Hearing Loss

The National Audiology Review (HSE, 2011) notes that apparently 'mild' permanent hearing loss and/or unilateral hearing loss can have detrimental effects on a child's educational progress. This can present difficulties, particularly for children with other complex needs. Marschark also notes that recent evidence indicates that children with 'mild' or minimal hearing loss are at risk academically (Marschark and Spencer, 2009).

3.8 Children with Additional Disabilities

About one third of Deaf and hard of hearing children have other complex needs (HSE, 2011); these can include physical, intellectual, emotional and behavioural difficulties, and autistic spectrum disorder. Children can also have a combination of hearing and visual impairment, now commonly referred to as Deafblindness. Marschark and Spencer note that while one cannot make assumptions about an individual's academic and functional capabilities based on the occurrence of a particular disability, nevertheless the effect of the disability multiplies as they increase in severity and number. One implication of this is that educational planning must cater for a wide diversity of needs and abilities (Marschark and Spencer, 2009).

Deaf and hard of hearing children with additional disabilities can have diverse complex needs and educational planning needs to address them. Marschark and Spencer point

out that service provision for children with multiple disabilities requires multiple specialists and, typically, more intensive service delivery than that for children with hearing loss alone (Marschark and Spencer, 2009).

3.9 Professional Development for Teachers of Children who are Deaf and Hard Of Hearing

There is a general consensus in the literature regarding the central importance of teacher education in relation to the education of Deaf and hard of hearing children. Recent studies suggest that teacher variables are likely to account for at least half of the variance in academic outcomes between Deaf and hard of hearing pupils and hearing pupils. Studies have also shown differences emerging between teachers with and without experience in teaching Deaf and hard of hearing students (Marschark et al, 2011).

Marschark points out that while Deaf and hard of hearing students and hearing students clearly share more similarities than they have differences, at the same time, Deaf and hard of hearing children are not simply hearing children who cannot hear (Marschark et al, 2011). Recent research has demonstrated that Deaf and hard of hearing children have different knowledge, learning styles and problem solving approaches than hearing children. Large individual differences also exist among Deaf and hard of hearing pupils. There is general agreement in the literature that Deaf and hard of hearing children need access to teaching in additional curriculum areas, such as the use of assistive technology and sign language, if they are to have access to the core curriculum.

In order to improve educational outcomes for Deaf and hard of hearing pupils, teachers must be equipped to recognise and understand the cognitive and language abilities of Deaf and hard of hearing pupils and use materials and methods appropriate to their ways of learning. Teachers need to establish what their Deaf and hard of hearing pupils already know about a particular subject and to understand how they acquire new information and the ways in which they apply what they know. Teachers need to appreciate that Deaf and hard of hearing children may require long-term assistance in developing effective approaches to problem-solving and integrating information from different sources. Teachers need to be familiar with the classroom methods used by effective teachers of Deaf and hard of hearing children, to assist them in learning and benefiting from education. Teachers also need access to initial and ongoing professional development that equips them with the above knowledge and additional skills in order to understand and teach Deaf and hard of hearing children (Marschark et al, 2011).

3.10 Physical Supports Required in the Classroom

The physical environment of the classroom is an important factor in facilitating access to education for Deaf and hard of hearing children. Background noise is especially problematic for these children, including those using hearing aids and cochlear implants. It is therefore important that classroom acoustics are addressed. The needs of children in mainstream classrooms were evaluated in a US-based study (Wilkins and Ertmer, 2002, quoted in Marschark and Spencer, 2009). They concluded that the following were required: preferential seating; use of personal and sound-field frequency-modulated (FM)

systems; and presentation of important material in writing followed by frequent checks of comprehension (Marschark and Spencer, 2009).

Access can also be directly facilitated by the provision of real-time text (captioning provided in real time) and by sign language interpreting for those using sign language. Following a review of studies on the use of these supports with different groups of Deaf and hard of hearing students, Marschark and Spencer conclude that,

... neither sign language interpreting nor real-time text has any inherent, generalised advantage over the other in supporting Deaf students in secondary or post-secondary settings' (Marschark and Spencer, 2009: 165).

Significantly, however, both supports appear to offer better communication support than none at all even though they don't eliminate learning differences between Deaf and hard of hearing students and hearing students (Marschark and Spencer, 2009).

It is important to note that when hearing students are included in research studies, they consistently outscore Deaf and hard of hearing students on post-instruction tests, whether or not the Deaf and hard of hearing students have received real-time text, sign language interpreting or direct instruction by teachers who signed themselves (Marschark and Spencer, 2009).

3.11 Role of the Special Needs Assistant

During site visits to schools, principals and teachers indicated that SNAs frequently have experience of deafness and expertise in Irish Sign Language, and are able to provide support services, such as sign language interpreting, to the Deaf and hard of hearing child (Marschark and Spencer, 2009). However, Marschark and Spencer also note that Deaf and hard of hearing pupils sometimes appear to be over-reliant on 'untrained, if enthusiastic and well-meaning' special needs assistants (p.91).

The recently published Value for Money Review of Expenditure on the Special Needs Assistant Scheme (DES, 2011b) concludes that the scheme needs to be restated, in order to ensure an efficient allocation of SNA resources and to clarify the 'care' nature of the SNA role for parents, schools and professionals. The report also states that the criteria for the allocation of SNA support should be clearly re-stated and be subject to ongoing review. Moreover, it finds that SNAs have specific functions to support children with sensory impairment and also recommends that the role of the SNA should be restated to ensure that it includes the necessary duties required to support the care needs of Deaf and hard of hearing students (DES, 2011b).

3.12 Development of Co-operative Structures

Marschark and Spencer (2009) consider that one implication of implementing nationwide screening is that it will require unprecedented co-operation between the Department of Health and the Department of Education and Skills. They suggest that this collaboration will need to include better training or restructuring of the Visiting Teacher Service, alongside improved training for SENOs, as well as a national network of audiological and speech and language services.

Chapter 4

NCSE Policy Advice



4 NCSE Policy Advice

4.1 Principles Underpinning Policy Advice

The NCSE sets out the following principles underpinning its advice in relation to the education of Deaf and hard of hearing children. The Council considers that the goal should be that Deaf and hard of hearing children graduate from school with levels of educational attainment that are on a par with their hearing peers of similar ability.

1. In line with Section 2 of the EPSEN Act 2004, Deaf and hard of hearing children should be educated in an inclusive environment with children who do not have such needs unless this is inconsistent with the best interests of the child as determined by an assessment carried out under the Act or the effective provision of education for children with whom the child is to be educated (Government of Ireland, 2004).
2. Deaf and hard of hearing children should have the same access to education as their peers but it should be recognised that they have distinctive needs in relation to language acquisition and communication.
3. There is a requirement for greater focus on early identification and intervention so that the necessary supports can be put in place to assist early language acquisition for Deaf and hard of hearing children.
4. Teachers must have the appropriate skill sets to meet the needs of Deaf and hard of hearing children in mainstream and special school settings.
5. Deaf and hard of hearing children should be able to access education on an appropriate basis throughout the country.
6. Deaf and hard of hearing children should be supported on a collaborative basis between the health and education sectors.

4.2 Main Recommendations

This NCSE policy advice takes into account the educational needs of Deaf and hard of hearing pupils with permanent hearing loss, ranging from mild or unilateral hearing loss to those with bilateral profound hearing loss. This cohort comprises pupils with individual and diverse educational needs.

4.2.1 Early intervention

(a) Early identification

In light of evidence regarding the critical importance of early intervention for children who are Deaf and hard of hearing, the Council welcomes the recommendation of the National Audiology Review Group that, 'a universal national programme of newborn hearing screening be introduced as a priority such that all babies have their hearing screened shortly after birth' (HSE, 2011, p.19).

(b) Early intervention programmes

There is clear evidence showing that early identification of hearing loss should be followed by the implementation of an effective early intervention programme so that the Deaf and hard of hearing child is supported to acquire fluency in a language at the earliest possible time. The literature suggests that early intervention programmes for Deaf and hard of hearing children should consist of:

- comprehensive and objective information and advice to parents
- counselling services to provide emotional support to families, where required
- audiological services to include assessment and management of children with permanent hearing loss
- The availability of a Cochlear Implant programme, where indicated and in accordance with parental views
- speech and language therapy, where indicated, from the point of diagnosis
- psychological services, where required
- Visiting Teacher Service
- Early childhood education.

Based on good practice guidelines, the Council makes a range of recommendations that are summarised below.

- Up to date, objective and comprehensive information should be made available to parents from the point of diagnosis and in clear and accessible formats, including ISL. The need for such information was consistently highlighted by parents during the consultation process carried out in preparation for this paper. The NCSE should have responsibility for the preparation, publication, dissemination and updating of this information.
- Upon diagnosis, parents should be provided with a package (developed jointly by the HSE and the NCSE) that provides information on available services and supports and where to obtain this support. The package should include details about who will be contacting the family and when this will take place, and information on support systems for parents and families. Finally, as good evidence exists concerning the benefits of cochlear implantation (and the added benefits of bilateral implantation for children), the package should include information for parents about the availability of the cochlear implant programme.
- Parents should be informed about the importance of early language acquisition and the various communication options that are available. Parents should be provided with objective information about the educational placements that are available, including the possibility of placement in mainstream, special classes and special schools. The risks and benefits of particular options should be outlined for parents in an objective manner. The Visiting Teacher Service has an important role to play in providing parents with this information and advice.

- A counselling service should be made available to parents and children, as necessary, by the HSE as part of early intervention services. The Council considers that Deaf and hard of hearing children and their families should have access to the psychological service provided by the HSE, through community services and on the same basis as other families. The Council notes that Deaf and hard of hearing children also have access to counselling, mental health support, family therapy etc through DeafHear. Children who have received a cochlear implant will have access to psychological support through the cochlear implant unit at Beaumont hospital.
- The Council also considers that those involved in delivering general psychological services through the HSE need to have an understanding and awareness of the potential impact of deafness on the emotional and behavioural needs of children and adolescents. This may require, in some instances, additional training in relation to particular aspects of working with Deaf and hard of hearing children. This should form part of the CPD programme for psychologists employed in the health service and should not incur additional expenditure beyond that already committed to ongoing CPD for professionals within the HSE.
- ECCE centres should be resourced to provide the supports necessary to enrol Deaf and hard of hearing children.
- Health and education funded support services, as outlined above, should be coordinated and provided by professionals who are equipped to assist parents to enable their children to acquire the most suitable language and communication skills for them, be that signed, spoken or bilingual.
- Deaf and hard of hearing children should have timely access to a speech and language therapist for an assessment of their communication skills, and to support parents in communicating with their child and in making decisions regarding choice of sign or oral language for their child and speech and language therapy, as necessary.
- Audiological services should be provided on a consistent, efficient and equitable basis throughout the country. Such services should include diagnostic assessments, fitting and management of hearing aids, fine-tuning of hearing aids at appropriate review appointments, providing ear moulds as required, referral to other services such as the implant team and continuing support for technology.
- Children with cochlear implants should continue to receive additional educational support, on the same basis as other Deaf and hard of hearing children, on an ongoing basis. Teachers and other professionals also need to be aware that children with cochlear implants require ongoing support and should understand the nature of the support required.
- The Council supports the recommendation of the HSE National Audiology Review (HSE, 2011) that financial support for the cochlear implant programme should continue to be ring-fenced, but at levels which allow for simultaneous bilateral implantation for children.

(c) Acquisition of language

Deaf and hard of hearing children have distinct and complex needs in relation to the acquisition of language due to hearing loss at a critical stage of language development. In order to acquire any language, a learner must have exposure, in quality and quantity, to accessible language while engaged in meaningful activity with capable users of the language (Mayer, 2007). This is the case whether the language to be acquired is in spoken, signed or written form.

Providing Deaf and hard of hearing children with greater opportunities to acquire fluent language skills is therefore fundamentally important to facilitating their greater access to education. Marschark and Spencer (2009) point out that this will also result in medium and long term financial savings from educational, health and social service provision perspectives.

The Council is cognisant of the distinct needs that Deaf and hard of hearing children have in relation to language acquisition. In relation to this, it makes the following recommendations:

- All Deaf and hard of hearing children should be provided with opportunities, at an early age, to acquire fluent language skills while engaged in meaningful activity with capable users of the language, whether the language to be acquired is in signed, spoken or written form
- The Departments of Health, Education and Skills, and Children and Youth Affairs should jointly develop one streamlined approach to determining and providing the supports necessary for Deaf and hard of hearing children to acquire language so that they are ready to attend school at an appropriate age
- All Deaf and hard of hearing children and their families should be provided with the opportunity to learn Irish Sign Language (ISL) through the ongoing provision of the ISL Support Scheme
- Parents should be informed about the availability of this service both at the point of diagnosis and during subsequent discussions concerning approaches and options around language acquisition and communication
- The DES should review the ISL Support Scheme, and this should include an assessment of the quantum of hours sufficient to enable parents and children to develop an adequate proficiency in the use of Irish Sign Language
- Following this review, the DES policy, in relation to the provision of ISL instruction, should be available to parents and should address
 - the number of ISL tuition hours available to families
 - the availability of the service throughout the year, including the summer holiday period
- The DES should set a minimum level of qualification for ISL tutors and arrange for the compilation of a register of ISL tutors, which should then be made available to parents. The Council does not consider that this should lead to an increase in remuneration for ISL tutors as these levels of qualifications, while currently unspecified,

should be the expected standard. Signature, the awarding body for ISL qualifications, recommend that an ISL tutor should have, at minimum, a level of ISL that is one grade higher than that of their students

- A grant should be made available to schools to provide sign language instruction for the hearing children in a class where a sign language user is enrolled. This will reduce the isolation of the Deaf and hard of hearing child and enable the hearing children to communicate more effectively with their Deaf classmate
- Schools should have ISL interpreters available, where necessary, when meeting parents who use ISL as their primary means of communication.

The Council notes that ISL is already offered as part of the Leaving Certificate Applied programme. While this is a welcome development, the Leaving Certificate Applied programme has limited recognition in terms of access to third level education.

- The Council recommends that the National Council for Curriculum and Assessment (NCCA) should consider how the development and refinement of competence in Irish Sign Language is best addressed within the school system.

4.2.2 Visiting Teacher Service

The National Audiology Review (HSE, 2011) proposes that input of the visiting teacher for Deaf and hard of hearing children is key to:

- coordinating and providing information
- explaining audiological and developmental assessments
- advising on language, communication, social and emotional play
- monitoring progress and implications of the individual audiological management plan; this means monitoring the child's use of and benefit from their hearing aids and cochlear implants, as well as monitoring the progress that the child is making through the use of standardised assessment protocols
- advising other professionals on Deaf awareness and the implications of hearing loss for the child and family.

In relation to parents, the above review proposes that the input of the visiting teacher is key to:

- developing individual strategies for encouraging language, communication and general development, in the context of the child's particular hearing loss
- advising on hearing aid or implant use and its management in the home, nursery and elsewhere
- liaising with audiology services with regard to hearing aid use, benefit and needs
- advising on trouble shooting strategies for hearing aid and ear mould problems
- providing a structured programme of support or intervention for the child and family on the basis of the whole child and degree of hearing loss (HSE, 2011).

The Council notes that the above proposals represent a significant change and development of the role of the visiting teacher for Deaf and hard of hearing children. It considers that the role of the visiting teacher should be focused on language and learning rather than on audiological issues, as other professionals such as audiologists have key expertise in their own areas.

The Council is of the view that other services, alongside the Visiting Teacher Service, are required to provide a response to parents and children following early diagnosis. It is clear that a multi-disciplinary response is required to include inputs from audiologists, speech and language therapists, public health nurses and visiting teachers. Marschark and Spencer (2009) explicitly acknowledge this need when they suggest that one implication of implementing nationwide screening is that it will require unprecedented co-operation between the Department of Health and the Department of Education and Skills (Marschark and Spencer, 2009: 205). They suggest that this collaboration will need to include better training of visiting teachers or restructuring of this service, alongside improved training of SENOs and the provision of a national network of audiological and speech and language services.

Early support for children with permanent hearing loss and for their parents should be a major priority for the Visiting Teacher Service. The visiting teacher is in a good position to assist parents of Deaf and hard of hearing children to access available services. There should be close liaison between the visiting teacher and health funded services. This would allow interagency exchange of information with regard to hearing aid use, assistive technology, development of speech, language and communication, and academic and social progress in schools. It is important that the visiting teacher provides comprehensive information and support to parents regarding particular approaches to communication. Parents should be enabled to make an informed choice regarding different models of intervention for the child.

The introduction of UNHS should not have a significant impact on the number of children who are diagnosed with hearing loss since all such children are eventually diagnosed, even though currently, this tends to happen later in their life. However, it is likely that UNHS will have an impact on the age distribution of children comprising the caseload of the visiting teacher, as the age of diagnosis will be brought forward.

Additional training is required to facilitate visiting teachers who are working with very young Deaf and hard of hearing babies and their families. In order to provide a comprehensive and effective service to young babies and pre-school children, visiting teachers for Deaf and hard of hearing children must have an in-depth understanding of early childhood development, early language acquisition and the ways in which Deaf and hard of hearing children acquire language. Visiting teachers should also have a proficiency in Irish Sign Language. Further training may be required to equip all visiting teachers with the skills necessary to achieve this, through an interagency approach.

The National Audiology Review (HSE, 2011) report proposes a significant change/development of the visiting teacher's role, in relation to matters such as:

- explaining audiological and developmental assessments

- monitoring progress and implications of the individual audiological management plan
- advising on hearing aid or implant use and its management in the home and crèche/pre-school
- liaising with the audiology services with regard to hearing aid use, benefit and needs, and
- advising on trouble shooting strategies for hearing aid and ear mould problems.

For this reason, the DES should carry out a review of the Visiting Teacher Service with a view to redefining the role of the service, as necessary, to ensure that the policy under which the service operates is fit for purpose. The review should also clarify the relative and complementary roles of the Visiting Teacher Service and other services such as audiological services and speech and language therapy services in the provision of a comprehensive response for children who are Deaf and hard of hearing, particularly those who are diagnosed with significant hearing loss following newborn screening.

The Council recommends that:

- the role of the Visiting Teacher Service should be reviewed and updated by the DES to take account of the changes proposed above. This should involve consultation with the management of the service, visiting teachers, schools, parents and pupils
- Caseloads of visiting teachers should reflect the need for a greater focus on the early years
- Protocols should be developed to standardise practice across the Visiting Teacher Service in relation to assessment, teaching, advice and liaison functions, in order that Deaf and hard of hearing children around the country receive a consistent service
- The DES should set minimum standards for visiting teachers to achieve in relation to proficiency in Irish Sign Language.

4.2.3 Recommendations: school age years

(a) Educational models

Available research clearly points to the need for a range of educational settings to be available for Deaf and hard of hearing children. These settings should enable these children to obtain necessary support services while being included in activities with their hearing peers to the greatest extent possible, in accordance with their learning needs and abilities.

In line with these findings, the Council recommends that a continuum of educational provision should be in place for Deaf and hard of hearing pupils to include:

- mainstream classes in primary and post-primary schools
- special classes for Deaf and hard of hearing children attached to mainstream schools
- special schools.

All of the above settings should be resourced, as required, with the technology necessary to deliver an appropriate education to Deaf and hard of hearing children, including acoustic treatment of classrooms and assistive technology.

The Council also recommends that the DES Building Unit should develop general guidelines on the acoustic treatment of classrooms and make them available to schools through the Visiting Teacher Service and the SENO network.

The NCSE has previously submitted policy advice to the Minister for Education and Skills on the future role of special schools and classes in Ireland (NCSE, 2011a). Here, it concluded that pupils with special educational needs should be enrolled alongside their peers, in mainstream classes in mainstream schools, to the greatest extent possible. In situations where full-time placement in a mainstream class is not possible for an individual child, placement in a special class should be considered. Special classes should be organised on a flexible basis to provide for specialist interventions and supports specific to children's needs and to facilitate an inclusive approach which allows each child to join mainstream classes to the greatest extent possible.

In line with this previous advice, the Council now recommends that special classes for Deaf and hard of hearing children should be organised on a regional basis. This would facilitate the provision of educational settings in which Deaf and hard of hearing children have the opportunity to learn and interact together. In doing so, it may serve to reduce social isolation and yet offer opportunities for Deaf and hard of hearing children to interact with both hearing and Deaf and hard of hearing peers. It would also enable the development of specialist knowledge amongst teachers.

In its previous policy advice, the Council recommended that pupils placed in special schools should have complex needs, as defined in the policy advice paper (NCSE, 2011a, p. 89). The Council recognised that in accordance with the EPSEN Act 2004, decisions on the placement of children in special schools and classes must always be made on an individual basis. The Council recommended that, in the future, special schools should be designated and resourced to serve pupils within the community who require special school placement rather than be limited to any specific category of disability.

Special schools should continue to have the autonomy to organise their pupils in class groupings and, in doing so, take appropriate account of factors such as age, category of special educational need and levels of ability, both socially and academically.

The Council also recommends that consideration should be given to the need to provide temporary specialist provision for Deaf and hard of hearing children in separate specialist settings; an example here would be the provision of intensive tutoring in Irish Sign Language. Such additional support could be provided through temporary placement in an existing special school or special class. The Council considers that current pupil-teacher ratios for special schools and classes for Deaf and hard of hearing children are sufficient to accommodate this additional flexibility. However, this may need to be reviewed if the demand for such temporary placement is greater than anticipated.

(b) Bilingual education

The Council understands bilingual education to mean that the child's natural sign language is modelled and expected to be the child's first language and primary means of communication, as well as to serve as the classroom language and to provide a bridge to learning literacy in the hearing community's spoken language (Marschark and Spencer, 2009). In Ireland, bilingualism means that the child attains fluency in Irish Sign Language (ISL) and in English or Irish (spoken and/or written).

The Council notes that the evidence regarding the positive impact of bilingual education on academic achievement thus far is minimal. However, it also takes note of Marschark's observation that bilingual education clearly contributes to social-emotional and interpersonal growth (Marschark and Spencer, 2009).

The Council is aware that a small number of Deaf pupils use ISL as their primary means of communication. It recognises that particular difficulties are associated with including this group of children in mainstream schools, particularly in relation to their isolation from a peer group of sign language users. In relation to this cohort of pupils, the Council recommends that: a bilingual education should be available in special classes for Deaf and hard of hearing children and in special schools.

It also recommends that mainstream schools should be resourced to facilitate the education of pupils who use Irish Sign Language as their primary mode of communication. The extent of support required will depend on the individual child's needs, including factors such as their levels of functional hearing loss, literacy levels, and academic ability. It is therefore necessary for a range of supports to be available, as required. This should include class teachers and resource teachers trained in ISL, SNA support and appropriate technology. There may also be exceptional instances where it is necessary to have teachers available who are trained as sign language interpreters, e.g. to support ISL users who are studying higher level technical or scientific subjects for Leaving Certificate.

4.2.4 Placement of pupils

The EPSEN Act, 2004 (Section 2) explicitly states that children with special educational needs shall be educated in an inclusive environment with children who do not have such needs unless the nature or degree of those needs of the child is such that to do so would be inconsistent with:

- the best interests of the child as determined in accordance with any assessment carried out under the Act or
- the effective provision of education for children with whom the child is to be educated (Government of Ireland, 2004).

The Council recognises that some children with special educational needs, including some Deaf and hard of hearing children, have needs of greater complexity to the extent that education in a mainstream setting is not consistent with their own best interests or the effective provision of education for children with whom they are to be educated (NCSE, 2011a). The Council also recognises that decisions relating to the educational placement of Deaf and hard of hearing children should take into account the wishes of parents who

may seek to have their child placed in a special school or in a special class for Deaf and hard of hearing children.

The Council is of the opinion that a graduated approach should be adopted when considering the placement of a Deaf and hard of hearing child in a special school or special class. The process of assessment should include a rigorous examination of the interventions that were or could be put in place to support the inclusion of the child in mainstream education; this should take place before a decision is made regarding alternative placement in a special class or special school setting. In the case of post-primary schools, the experience of the child in primary school should be taken into account. Parents should be informed regarding the educational rationale, benefits and consequences of such a placement.

Placement decisions should be based on a multi-faceted assessment, which, in addition to cognitive ability, takes into account the child's interest in the widest sense. Factors to be taken into account include access to an education appropriate to the child's needs, the child's potential to benefit from mainstream education, the child's communication, social and emotional developmental levels, personal development, development of life skills, self esteem, ability to form friendships, and the likelihood of isolation arising in the chosen setting (NCSE, 2011a).

In the policy advice on the future role of special schools and classes (NCSE, 2011a), the Council recommends that the Department of Education and Skills should initiate the development of a Code of Practice, with NCSE as the lead agency. This would guide parents and professionals in making decisions regarding the placement of individual children with special educational needs. This paper set out detailed advice concerning the issues that should be addressed by this proposed Code of Practice.

The Council is of the view that decisions on the placement of Deaf and hard of hearing pupils should be based on:

- the assessed needs of the pupils
- individual level of functioning
- professional advice
- informed parental choice and the informed views of the child, to the extent appropriate according to age and intellectual capacity.

Placement options for Deaf and hard of hearing children with additional disabilities must be carefully considered to ensure that these pupils are enabled to participate in and benefit from school placement. For example, it must be clearly understood that the options considered for Deaf and hard of hearing pupils with mild cognitive difficulty will be greatly different to those children with a more severe learning disability. Within the selected educational setting, teachers must have knowledge and understanding of both deafness and the pupil's additional disability. Appropriate communication approaches must be available to pupils – to include oral through to sign only approaches, and should reflect the needs of the student in question.

In relation to Deaf and hard of hearing children, the Council recommends that:

- placement of Deaf and hard of hearing children should be explicitly addressed within the Code of Practice proposed in the Council's policy advice on the future role of special schools and classes
- ongoing assessment and monitoring of progress should take place, so that placement and service decisions can be altered, particularly for those Deaf and hard of hearing children with additional disabilities
- shared placement between special and mainstream settings should be explored for Deaf and hard of hearing children with additional disabilities, in line with NCSE recommendations on the future role of special schools and classes (NCSE, 2011a, p. 110-111).

4.2.5 Acquisition of literacy and numeracy

The Council welcomes the commitment contained in the recent national strategy to improve literacy and numeracy among children and young people that, in the future:

... every child leaving our school system understands mathematics and is able to speak, read, write and spell at a level that enables them to participate fully in education and in the local, national and global communities in which they live. (DES, 2011b, p. 10).

In its response to the draft plan published as part of the consultation process for the development of this national strategy, the Council pointed out that Deaf and hard of hearing children can experience significant difficulties in acquiring basic literacy and numeracy skills and, as a consequence, fail to achieve adequate levels of literacy and numeracy. The Council expressed its concern that the needs of this group of pupils ought to be addressed in a focused and pro-active way in the plan's development and implementation (NCSE, 2011b).

In addition, the Council considers that all teachers working with Deaf and hard of hearing pupils should be cognisant of the existing body of knowledge concerning the ways in which Deaf and hard of hearing students think and learn. This will improve teachers' capacity to utilise the strengths of these children and to accommodate their needs. It can be achieved through initial and CPD. Third level institutions have an important role to play here, for both primary and post-primary teachers. The SESS also has a role to play in the dissemination of this information through the provision of CPD to teachers and through whole school in-service training. The Visiting Teacher Service can also disseminate this information through its individual work with teachers of Deaf and hard of hearing pupils in schools and with their parents.

The Council recommends that initial and CPD programmes for teachers should address effective approaches for the teaching of literacy and numeracy to all pupils. In particular, they should explore the issue of how these approaches can be differentiated for Deaf and hard of hearing pupils.

4.2.6 Additional teaching supports for Deaf and hard of hearing children

A continuum of support is in place in primary and post-primary schools for pupils with special educational needs (DES, 2007). This approach uses a problem solving model of assessment. It involves intervention in schools whereby pupils are offered support along this continuum depending on the nature and extent of their learning needs. It starts with extra support being provided by the class teacher in the regular classroom, followed by learning support and/or resource teaching interventions if necessary, and finally, the involvement of external services such as psychologists (DES, 2007). Pupils with mild/unilateral hearing loss may access additional learning support on the same basis as other children who require such support.

Under the terms of Circular 02/05, primary schools with pupils assessed as having hearing impairment, as defined in the circular with no other assessed disability, may be allocated a maximum of four hours teaching support per week from a resource teacher, or from a visiting teacher and resource teacher combined. Where a pupil with a hearing impairment also meets the criterion for another low-incidence disability category, provision is allocated as for multiple disabilities. Post-primary schools may be similarly resourced for pupils assessed as having hearing impairment.

During the consultation process, it was brought to Council's attention that Deaf and hard of hearing pupils who meet eligibility criteria are generally always granted the full four hours teaching support per week, whether or not the pupil in question requires this level of support and whether or not they have access to a visiting teacher. This could occasionally result in pupils losing valuable time in their mainstream classes in order to receive unnecessary additional support, in a withdrawal situation.

In relation to the provision of additional teaching support, the Council recommends that:

- schools, in conjunction with the Visiting Teacher Service, should identify children with mild hearing loss who require access to additional learning support and ensure that these children receive such support within the school's current allocation
- pupils with mild hearing loss should be specifically mentioned in the list of pupils with learning difficulties for whom schools are provided with additional teaching resources under the general allocation model (Circular Sp Ed 02/05, Section 3.1 (DES, 2005a))
- children with cochlear implants should continue to receive additional educational support, on the same basis as other Deaf and hard of hearing children on an ongoing basis
- additional teaching support for deafness as a low incidence disability in mainstream should be allocated in accordance with the:
 - level of pupil's learning need
 - level of pupil's functioning in the classroom
 - current DES policy parameters
 - the level of support granted should be reviewed on an annual basis.

4.2.7 Focus on outcomes and monitoring of pupils' progress

The Council believes that there needs to be a sustained emphasis on measuring the outcomes for children with special educational needs, including outcomes for those children who are Deaf and hard of hearing. In order to achieve this, it is necessary to identify how such outcomes should be measured. The NCSE has recently commissioned research to review how progress and meaningful outcomes for children with special educational needs can be identified and measured, drawing on international experience. This study will include an examination of the potential of existing data in Ireland to meet this end. It will also explore the possible need for improved indicators and data collection on outcomes for children with special educational needs. The specific roles of the school, parents, children, the Inspectorate, the NEPS and other agencies, as appropriate, will need to be clarified as part of this process.

The Council recognises that Deaf and hard of hearing children have diverse needs. In light of this, it makes the following recommendations:

- Individual education plans should be drawn up to enable each child to develop according to his/her ability. Communication targets should be included as part of these plans and these should be formally reviewed on an annual basis. In relation to Deaf and hard of hearing children placed in special classes, individual education plans should clearly indicate the time periods that the pupils will spend in the special class and in a mainstream class.
- The Visiting Teacher Service should have a substantial role in assisting the development of individual education plans for Deaf and hard of hearing children and in carrying out assessments to inform the plans.
- The Visiting Teacher Service should develop protocols for the assessment of Deaf and hard of hearing children, and these should be consistently applied by all visiting teachers. Protocols should include a statement detailing the assessments that are to be administered to Deaf and hard of hearing children, (for example, tests of functional hearing, speech tests, language acquisition, standardised tests of literacy and numeracy), and how often these tests are to be administered.
- Finally, schools should inform visiting teachers of end of year assessments and examination results for Deaf and hard of hearing children to ensure that they are making progress commensurate with their abilities and to facilitate the tracking of educational outcomes for these pupils.

4.2.8 Professional development for teachers of children who are Deaf and hard of hearing

Many of the research studies commissioned to date by the NCSE have contained extensive recommendations in relation to the need for ongoing professional training and development of teachers of pupils with special educational needs (Cooper, 2011; Marschark and Spencer, 2009; Parsons et al, 2009; Ware et al, 2009).

The Council is conscious that teachers in different educational settings require differential levels of CPD in order to meet the needs of Deaf and hard of hearing children in their class-

rooms. For example, teachers in mainstream settings (including classroom/subject teachers, resource and learning support teachers) may have Deaf and hard of hearing children in their school only from time to time over the course of their teaching careers and will need special support for that duration. Such teachers, while working with Deaf and hard of hearing children, will need the support of the Visiting Teacher Service and access to CPD programmes provided by the SESS. These CPD programmes should cover: language acquisition and development; literacy; effective approaches to promoting teaching and learning for Deaf and hard of hearing children; use of assistive technology; and issues facing children who are Deaf and hard of hearing. They should also promote Deaf awareness and understanding of the Deaf community.

Teachers' ability to communicate well in the language used by their students clearly represents 'best practice' in Deaf (as well as general) education settings (Marschark and Spencer, 2009, p. 139). In cases where Deaf and hard of hearing children are sign language users, teachers in mainstream settings also need training in Irish Sign Language.

All teachers should understand the ways that Deaf and hard of hearing pupils learn. In addition, they should be cognisant of the body of knowledge that now exists in relation to the use of effective strategies in the classroom, particularly as outlined in the international review of the literature (Marschark and Spencer, 2009). It is particularly important that all teachers have high expectations of achievement for Deaf and hard of hearing pupils.

The Council considers it desirable that all teachers in specialist settings (including special classes, special schools and the Visiting Teacher Service) should have additional post-graduate qualifications in special education, including a module on Deaf education. They should access CPD programmes provided by the SESS and have adequate competency in the use of Irish Sign Language. Current post-graduate programmes in special education should include a compulsory element on the education of children across disability categories, including Deaf and hard of hearing children.

The Council considers that teachers in special schools and classes with Deaf and hard of hearing children and visiting teachers for Deaf and hard of hearing pupils should have additional post-graduate qualifications in the education of Deaf and hard of hearing children. The Council recognises that it will take time to achieve this but recommends that the DES put in place measures which, over time, would make possible a requirement for teachers in specialist settings for Deaf and hard of hearing children to have a recognised qualification in the education of Deaf and hard of hearing children.

Currently, teachers in Ireland who wish to access a post-graduate programme in the education of Deaf and hard of hearing children must gain their qualification through distance learning, most commonly through a university in the UK, as there is no postgraduate programme available in Ireland. The Council is conscious of the value of having an international perspective but is also of the opinion that providers of postgraduate programmes should demonstrate a good understanding of the Irish educational context for Deaf and hard of hearing pupils, including:

- legislation
- Individual Education Plans

- Irish Sign Language
- the examination system
- the diversity of needs within the Deaf and hard of hearing population
- pupils with Irish (or other European language) as their first language.

The Council makes the following recommendations in relation to teacher education:

- The NCSE considers it desirable that all teachers in specialist settings with Deaf and hard of hearing pupils enrolled (including the Visiting Teacher Service), should:
 - have additional post-graduate qualifications in special education (to include a module on Deaf education)
 - access CPD programmes provided by the SESS and
 - have adequate competency in the use of Irish Sign Language.

Council recommends that the DES put in place measures which, over time, would make possible a requirement for teachers in specialist settings for Deaf and hard of hearing children to have a recognised qualification in the education of Deaf and hard of hearing children.

- The Department of Education and Skills should prescribe a minimum range of qualifications for teachers who are teaching Deaf and hard of hearing children in mainstream and special education settings. The Department should also specify the additional qualifications for teachers following entry into the Visiting Teacher Service. These qualifications should include minimum standards of competence in the use and teaching of ISL.
- Programmes of ITE should include a compulsory module on the education of children with special educational needs, which addresses the particular needs of children who are Deaf and hard of hearing.
- The Council notes that this recommendation is in line with the Teaching Council stipulation that Inclusive Education (Special Education, Multiculturalism, Disadvantage, etc) should be a mandatory element of all ITE programmes (Teaching Council, 2011a). Programmes of initial teacher education should equip newly qualified teachers with a set of competences to facilitate quality learning and cater for current educational priorities such as literacy and numeracy, Information and Communications Technology (ICT) and inclusion (Teaching Council, 2011b). The Teaching Council does not specify the quantum of time to be devoted to the mandatory elements but a four year primary concurrent programme of ITE is taken to span 120 weeks.
- Current post-graduate programmes in special education should include a compulsory element on the education of children across disability categories, including Deaf and hard of hearing children. Content relating to Deaf and hard of hearing children should cover:
 - early language and literacy development for Deaf and hard of hearing children
 - effective approaches to the teaching of Deaf and hard of hearing children, including those with cochlear implants

- use and maintenance of assistive technology in the classroom
- supports required in the classroom
- audiological reports
- understanding Deaf history and culture
- emotional development and support of Deaf and hard of hearing pupils, particularly during adolescence.
- A postgraduate programme leading to recognised qualifications in the education of Deaf and hard of hearing children should be available in Ireland. These programmes should include the following areas:
 - early intervention
 - language acquisition and development
 - education of children who are Deaf and hard of hearing or Deafblind
 - education of children who are Deaf with additional disabilities
 - educational audiology.
- All teachers who work with Deaf and hard of hearing children should continue to have CPD opportunities in relation to Deaf education through courses provided by the SESS.
- All teachers who work with Deaf and hard of hearing children who use sign language as their primary mode of communication should be required to have adequate competency in the use of Irish Sign Language. In the cases of primary and special schools, this would usually be the relevant class teacher. In the case of post-primary schools, a designated teacher should be available, who becomes sufficiently competent in sign language to support the education of the pupil concerned, across subject areas as required.
- All teachers should have an appropriate level of awareness of issues relating to Deaf and hard of hearing people that impact on teaching and learning.

The Council notes that Deaf people can experience difficulty in gaining access to primary teacher training. A number of factors contribute to this difficulty, particularly entry requirements relating to Leaving Certificate Irish and medical fitness to practice. In this paper, the Council has focused on the education of Deaf and hard of hearing children. The Council notes the establishment, by the DES, of a group in St Patrick's College, that aims to develop a framework for planning changes across colleges in relation to access to teaching training for Deaf and hard of hearing students. The Council understands that this group will examine mechanisms that could be put in place to address concerns such as fitness to practice, health and safety regulations, reasonable accommodations and the assessment of individual cases.

4.2.9 National Educational Psychological Service (NEPS)

NEPS psychologists who are working with Deaf and hard of hearing children may, in some instances, require additional training in relation to particular aspects of working with these children.

The child's mode of communication and level of language competence are key considerations when planning work with Deaf and hard of hearing children. Due to late identification, many Deaf and hard of hearing children have delays in their language development, and many enter school when their language skills are still in the early stages of development.

When conducting cognitive assessments of Deaf and hard of hearing children, nonverbal tests of intelligence may often be fairer and more appropriate. In order to ensure a comprehensive assessment, information on a child's language competency should also be gathered. Regarding pupils who are ISL users, it will be necessary to draw on the expertise of teachers (who are fluent in ISL) and ISL interpreters in gathering this key qualitative information about the child's language competency in ISL.

- The Council recommends that NEPS should work towards a psychological service being available with a sufficient level of competency in ISL to administer psychological assessment and to communicate with parents and children whose preferred mode of communication is through ISL.
- The Council recognises that it is difficult to achieve this level of technical proficiency in a language and that it requires significant time and opportunities for practice. In the meantime, ISL interpreters should be used for translation purposes, where necessary, when working with teachers, parents and children who are ISL users.

4.2.10 Role of the special needs assistant (SNA)

A consensus emerged during the consultation process that SNAs can play an important role in supporting the care needs of Deaf and hard of hearing children who have general communication difficulties in the classrooms. Marschark and Spencer (2009) suggest that Deaf and hearing special needs assistants with backgrounds and/or experience in Deaf education should be encouraged and supported in their present positions.

The Council welcomes the recommendations contained in the recently published Value for Money Review of Expenditure on the Special Needs Assistant Scheme (DES, 2011b) that:

- SNAs have specific functions to support children with sensory impairment, and that
- the role of the SNA in Ireland should be restated to ensure that it includes the necessary duties that are required to support the care needs of Deaf and hard of hearing students (DES, 2011b).

The Council is conscious that situations can arise whereby SNAs, with ISL expertise working with Deaf and hard of hearing children, hold the most junior position on the school staff and are made redundant when the level of SNA support required is reduced in a particular school.

- The Council recommends that in the event of such a redundancy, the Deaf and hard of hearing child must continue to have such support available.
- The Council recommends that schools should ensure that SNAs who work with Deaf and hard of hearing children are equipped with the skills necessary to support the particular needs of these pupils.

4.2.11 Development of co-operative structures

Parents report that following diagnosis of their child's deafness, they have contact with many different professionals from a range of services. These professionals can include a visiting teacher for the Deaf, a speech and language therapist, a community audiologist, a cochlear implant team, medical specialists, hospital audiologist, among others. When the child goes to school, this team can grow to include others such as the class teacher, resource teacher and the SNA. During the consultation process, parents expressed the view that services should be consistent around the country and not based on 'luck' or 'chance'. These services therefore need to be coordinated and to take account of national policies on service provision for Deaf and hard of hearing children and their families, in order to promote equal opportunities for each Deaf and hard of hearing child. Well coordinated services will help to ensure that families receive coherent and consistent support.

The National Reference Group on multidisciplinary disability services for children was convened to report in an advisory capacity to the HSE in order to inform the Cross Sectoral Team for the implementation of the Disability and EPSEN Acts. The Cross Sectoral Team is engaged in ongoing work, based on the recommendations of this report that is focussed on ensuring the delivery of health and education services in a complementary and effective manner to children with complex disabilities.

The Council makes the following recommendations:

- Effective collaboration is needed between professionals, teachers and other service providers to meet the needs of Deaf and hard of hearing children who have additional disabilities.
- Greater levels of co-operation should take place between the health and education sectors; this will require the development of protocols regarding the management of referrals, recording and sharing information as well as joint planning, delivery and review of support to families.
- A nominated person should be given the responsibility to liaise between and across locally delivered health and education funded services. The SENO could be the person so nominated.
- The DES should clearly define linkages between the Visiting Teacher Service, the NCSE, the SESS and the NEPS, in order to ensure a streamlined service to Deaf and hard of hearing pupils and to avoid the possibility of role overlap.

Chapter 5

Implications of Policy Advice for the Resources of the State and Consideration of the Practical Implications of Recommendations



5 Implications of Policy Advice for the Resources of the State and Consideration of the Practical Implementation of Recommendations

5.1 Introduction

When developing policy advice, the Council is required to:

1. provide an assessment of the implications of that advice for the resources, including financial resources, available to the State in respect of the provision of education, and
2. have regard to the practical implementation of that advice (Government of Ireland, 2004, Section 20 (3) (b)).

In this section, the recommendations that have implications for the resources available to the State are examined. Cross-cutting recommendations have been grouped under the following twelve headings as listed below and costs estimated accordingly:

1. Provision of information
2. Health funded supports
3. Irish Sign Language
4. Visiting Teacher Service
5. School age years: educational models
6. Deaf and hard of hearing children with additional disabilities
7. Teaching support
8. Focus on outcomes and monitoring of pupil progress
9. Professional development for teachers of children who are Deaf and hard of hearing
10. National Educational Psychological Service (NEPS)
11. Special needs assistants
12. Development of co-operative structures.

The NCSE has submitted a background paper for this policy advice paper to the Department of Education and Skills; it details the additional costs associated with the implementation of the recommendations made here. A summary of the estimated additional costs for health funded supports is included in Table 5. A summary of the estimated additional costs for education funded supports is included in Table 6. Recommendations that can be implemented within existing resources, thereby incurring no additional costs to the State, are outlined in Table 7.

5.2 Health Funded Supports

(a) Universal Newborn Hearing Screening (UNHS)

A recommendation for the introduction of UNHS is contained in the Report of the National Audiology Review (HSE, 2011). No additional costs arise here regarding recommendations from this policy advice paper.

(b) Early Childhood Care and Education (ECCE) scheme

The Council considers that training programmes leading to recognised qualifications for pre-school leaders should include mandatory elements on the education of Deaf and hard of hearing children, in order to enable these children to receive the support they need to access the scheme. This should form part of existing programmes and should not incur additional cost to the State. The visiting teacher should provide support and training to the pre-school staff once a child is placed in a pre-school setting.

In addition, the Council is of the opinion that those children with moderate to severe/profound levels of hearing loss and who use ISL as their primary language may require specific supports within the ECCE settings. Where a number of these children are within a reasonable geographic area, consideration should be given to bringing them together in a small number of pre-school settings to facilitate the development of specialist knowledge amongst the staff, to reduce social isolation amongst the children and to rationalise human and financial resources.

Funding should be provided for appropriate assistive technology for these children within the ECCE scheme, which could later transfer with the child to primary school. This is in line with the recommendation of the National Audiology Review that:

... the Department of Health and Children and the Department of Education and Skills collaboratively develop a robust and comprehensive candidacy strategy for personal FM systems to include pre-school provision. We recommend that the two Departments review the system for procurement, provision, repair and maintenance of personal and soundfield FM systems, to ensure the needs of children are fully and effectively met in the most efficient way. (HSE, 2011, p.20)

Finally, the Council is of the view that an adult, with adequate competence in ISL, should be available in the pre-school setting to promote the development of the child's language and communication skills.

The total additional cost of the above recommendations for the development of the ECCE scheme is estimated to be €1.8 million. (See Table 5).

(c) Speech and language therapy

Deaf and hard of hearing children who present with communication difficulties require speech and language therapy. Deaf and hard of hearing children comprise a heterogeneous group and the level and frequency of therapy required will vary according to the type of deafness, type of communication difficulty and age of the child. (Source: IASLT, 2011).

It is estimated that in the region of an additional €2.15 million per annum is required to provide Deaf and hard of hearing children with timely access to speech and language therapy from the point of diagnosis, where this is indicated. (See Table 5).

(d) Cochlear implant programme

The National Audiology Review (HSE, 2011) recommended continued ring-fenced funding for the cochlear implant programme but at levels that allow for simultaneous bilateral

implantation for children. No additional costs arise regarding these recommendations from this policy advice paper.

(e) Audiological services

A vision for the future delivery of audiology services is outlined in the Report of the National Audiology Review Group (HSE, 2011), which also outlines associated costs. No additional costs arise regarding these recommendations from this policy advice paper.

Total additional health funded costs are estimated to be in the region of €4 million. (See Table 5).

5.3 Education Funded Supports

(a) ISL Support Scheme

The National Audiology Review estimates that each year in Ireland, 74 children are born with a permanent bilateral moderate, severe or profound hearing impairment. These numbers are subject to considerable year on year variability (HSE, 2011).

Drawing from these figures, it can be estimated that each year approximately 75 children born with bilateral moderate to profound hearing impairment may require access to the ISL support scheme. As children require this support over a number of years, it is likely that in any given year, a multiple of 75 children will require such support. The DES sanctioned ISL tuition for 128 pupils under the ISL Support Scheme for the 2009–2010 school year (Source: DES, 2011). This figure suggests that a significant number of parents may be eligible to avail of this scheme for their children but are not doing so. This could be due to a lack of knowledge about the scheme, a factor that should be addressed by providing parents with a comprehensive package of information, as proposed in this paper.

The visiting teachers have approximately 225 children on their active caseload (with bilateral moderate to profound hearing loss) who they visit at home or in a pre-school setting. If this figure is taken as an estimate of the children who might avail of the scheme in any one year, the cost to the State would be in the region of €292,500 per annum. As the State is already spending an average of €150,000 per year on the scheme, the additional cost would be in the region of €142,500 per year. (See Table 6).

(b) ISL grant scheme to schools to provide sign language instruction for the hearing children in a class where a sign language user is enrolled

In estimating the cost of this service, an assumption is made that children in the severe to profound range of hearing loss (without cochlear implants) are most likely to use sign language as their primary means of communication. Approximately 456 children in the severe to profound range are currently on the caseload of the Visiting Teacher Service, across mainstream and special settings. (See Table 3). The additional cost to the State of providing a grant to schools to provide sign language instruction per week to hearing children in each of these classes is approximately €502,500 per annum. (See Table 6).

(c) Bilingual education

The main cost associated with providing a bilingual education in special schools and classes is incurred through training the teachers involved to an adequate level of competence in Irish Sign Language. A second significant cost is the training of teachers to provide a bilingual education as language competence alone may not be sufficient. These costs are included in the general costs associated with the professional development of teachers.

(d) Resourcing of mainstream schools to facilitate the education of pupils who use sign language as their sole means of communication.

Pupils who use sign language as their sole means of communication are most likely to be severe to profoundly Deaf, without cochlear implants, and include those whose parents wish them to be part of a Deaf community and to use sign language as their first language. The majority of these pupils are currently being educated in special schools and classes. The Council recognises that particular challenges are associated with including this group of children in mainstream schools, particularly in relation to avoiding their isolation from a peer group of natural sign language users.

Nonetheless, a small number of these pupils are now included in mainstream settings. The extent of support required depends on the individual child's needs, including their levels of functional hearing loss, literacy levels and academic ability. It is therefore necessary to have a range of supports available to mainstream schools, as required, to include class teachers and resource teachers who are trained in ISL, SNA support and appropriate technology. In addition, the child will need to be supported by a teacher who is competent in the use of ISL. If the child is being supported by a teacher who is competent in the use of ISL, he/she will generally not also require SNA support unless he/she has care needs arising from an additional co-morbid disability. The additional cost of providing teachers who are competent in the use of ISL is estimated to be in the region of €890,300.

In addition to the usual range of supports, there may be exceptional instances where post-primary students who use ISL as their sole language require the services of a teacher trained to interpreter level in ISL in order to gain access to the full curriculum at this level. Interpreter services in this context might be required to provide Deaf and hard of hearing pupils with access to academic subjects such as higher level science or mathematics. While these would be exceptional circumstances, the Council considers that it may be necessary for a number of teachers to be trained (and deployed through the Visiting Teacher Service), as sign language interpreters to interpret for profoundly Deaf and hard of hearing students in post-primary schools. These interpreters would then take the place of the teacher referred to in the previous paragraph.

Costs for this proposal are estimated on the basis that at the outset, five teachers, in different regions of the country, are trained as sign language interpreters. This could increase to 10 teachers over the following five years. It is estimated that the total cost of training these teachers would amount to €224,000, over a 10 year period.

The total cost of resourcing mainstream schools to facilitate sign language users is estimated to be in the region of €1,114,300. (See Table 6).

(e) Use of ISL interpreters at parent meetings

ISL interpreters are generally required at school-based meetings with parents who use ISL as their primary means of communication. It is estimated that less than 10 per cent of Deaf and hard of hearing children are born to Deaf and hard of hearing parents. In the school year 2010-2011, there were approximately 1,251 Deaf and hard of hearing pupils in schools. This figure includes special schools, special classes and those pupils resourced by NCSE in mainstream schools. It does not include children with mild or unilateral hearing loss who were supported through the general allocation model in primary schools and through learning support in post-primary schools.

The cost of sign language interpreters (SLI) varies but would be in the region of €300 for a full day for a qualified interpreter in an educational setting. In general, SLIs work on a half day or full day basis. Here, the estimate of costs is based on the premise that 10 per cent of the parents of the above cohort of children (125 parents) require sign language interpreting for two meetings in schools, over one academic year. The total cost is estimated to be in the region of €75,000. (See Table 6).

5.4 Visiting Teacher Service

The Council considers that the recommendations pertaining to the Visiting Teacher Service should be implemented as standard practice across the service. Any additional training required should be incorporated into the ongoing programme of CPD. As no additional costs are envisaged, all the recommendations in this section are entered on Table 7.

5.5 School Age Years: Educational Models

(a) Clustered special classes for Deaf and hard of hearing children

In the school year 2010-2011, there were 15 special classes (for hearing impaired children) across 12 mainstream schools, eight of which were primary schools, and four of which were post-primary schools, with approximately 48 pupils enrolled. The pupil-teacher ratio (PTR) for these classes is 7:1; this means that these classes are currently under-utilised as potentially a further 57 pupils could be enrolled. These classes are located in eight counties, leaving 18 counties with no special class for Deaf and hard of hearing children. Dublin and Limerick are served by three special schools, leaving 16 counties without any special settings. It should be noted that there are only four post-primary classes available throughout the country.

The Council recommends that, in the future, special classes for Deaf and hard of hearing children should be organised on a clustered or regional basis. The SENOs, in conjunction with the visiting teacher, should be sufficiently well informed to plan the location of these classes.

The cost of establishing additional special classes is estimated on the premise that there should be one primary special class and one post-primary special class between every two counties, with one each in larger counties, which should include Cork, Donegal, Dublin, Galway, Kerry and Mayo. This would yield a total of 32 classes, 16 in primary schools and 16 in post-primary classes. Eleven primary classes and four post-primary classes already

exist, so an additional five primary and 12 post-primary classes are required, giving an additional total of 17 classes.

This development could lead to a total of 224 children being supported, representing an increase of 176. Some of these children may move from existing special schools to a location nearer home, others may come from existing special classes and schools that are not Deaf and hard of hearing specific and some children may come from mainstream if they are experiencing difficulties in this setting.

These classes should be opened when and as required. SENOs should have arrangements in place to trigger the opening of a class when projected figures indicate the need.

The cost of establishing an additional 17 special classes for Deaf and hard of hearing children is estimated to be in the region €2,118,676. (See Table 6).

(b) Temporary education intervention in specialist settings

Support for Deaf and hard of hearing children in mainstream schools who require additional intensive interventions, to learn sign language for example, could be provided in a temporary capacity in an existing special school or special class. The provision of this additional flexibility will have implications for the resources of the State, albeit for a small number of pupils. The cost of this support is estimated on the basis that one child per visiting teacher caseload (approximately 29 children) might require temporary placement in a special class for one year. The cost of this placement is estimated to be approximately €230,666 (see Table 6). Costs as estimated include capitation grant and transport.

The Council considers that staffing arrangements in special schools and classes for Deaf and hard of hearing children should currently be able to accommodate this additional flexibility due to the small numbers of pupils in classes. However, this may need to be reviewed if the demand for such temporary placement is greater than anticipated.

5.6 Professional Development for Teachers of Children who are Deaf and Hard of Hearing

The provision of teacher education and consequent up-skilling of teachers is central to ensuring the development and delivery of an appropriate, effective education service for students who are Deaf and hard of hearing. The recommendations below relate to this issue and have cost implications for the State.

(a) Postgraduate programme in the education of Deaf and hard of hearing children

The Council proposes that all teachers in the three special schools that are currently designated as schools for the Deaf and hard of hearing should have access to a place on the above postgraduate programme. In addition, one teacher in each of the other categories of special school, 115 schools in total, that have Deaf and hard of hearing children enrolled, should have access to a place on this postgraduate programme. Visiting teachers for the Deaf and hard of hearing should also have access to it.

A significant number of teachers employed in the above settings will have already completed a recognised qualification in the education of Deaf and hard of hearing chil-

dren. In a survey of special schools conducted as part of commissioned NCSE research on the role of special schools and classes, it was established that 39 teachers in special schools (figures based on a total of 988 teachers across 83 special schools) held an additional qualification in the education of Deaf and hard of hearing children (Ware et al, 2009). Practically all 29 teachers who are currently employed in the Visiting Teacher Service hold such additional qualifications.

The Council proposes that the DES should consider funding 30 places per annum on recognised training programmes, for an initial five year period, until both the current cohort of teachers and newly appointed teachers in the above settings have obtained qualifications in the education of Deaf and hard of hearing children. Thereafter, 10 places should be provided, if required, every year. It is estimated that this would represent an annual investment of €195,000 per year for the first five years, totalling €975,000 over the initial five year period, (see Table 6) and thereafter an annual investment of €65,000.

(b) Continuing professional development (CPD) provided by the SESS

Relevant CPD opportunities are those programmes provided through the SESS schemes that should address issues such as language acquisition, signed language, audiology, issues concerning Deaf and hard of hearing children in relation to learning and Deaf culture. The relevant programmes are outlined below.

1. Seminars to schools provided by a team of SESS local facilitators with specialist expertise in Deaf education

The SESS can provide a one day in-school seminar on Deaf Education to 30 participants or to a cluster of schools, with up to 30 schools participating. The Council recommends that this training should be available to all schools that have Deaf and hard of hearing children enrolled or about to be enrolled. Approximately 800 schools are currently estimated to have Deaf and hard of hearing pupils enrolled; the NCSE therefore proposes that the seminar is offered, on a clustered basis, to these schools, at an estimated cost of €43,200. (See Table 6). It should be noted that the SESS has already delivered this seminar to a number of schools around the country.

Following delivery of this seminar on a clustered basis, schools might also wish to undertake this training on a whole school, internal basis.

2. Funding for whole-staff training in Irish Sign Language

The SESS provide staff training in Irish Sign Language on an in-school or external cluster basis.

Mainstream schools

The Council recommends that ISL Levels 1 and 2 training should be immediately available to all 800 mainstream schools that have Deaf and hard of hearing children enrolled or about to be enrolled, initially on a clustered basis, at a total approximate cost of €1,059,200. Following delivery on a clustered basis, schools might also wish to undertake this training on a whole school, internal basis.

Specialist settings

The Council notes the recent publication by the National Deaf Children's Society (NDCS) of the UK quality standards relating to resource provision for Deaf and hard of hearing children and young people in mainstream schools in the UK. A resource provision specifically caters for the needs of Deaf and hard of hearing children as an integral part of a mainstream school. It provides support from a range of specialist staff that ensures the needs of the Deaf and hard of hearing pupils are met within the daily life of the school.

The standards set out that all teaching staff within the resource provision should hold or be in training for a mandatory Teacher of the Deaf qualification. The standards do not specify qualifications that teachers should hold in relation to British Sign Language (BSL). However, they do recommend that, where Deaf and hard of hearing pupils use sign language to access the curriculum, communication support workers and teaching assistants should be qualified to BSL Level 3 or have BSL Level 2 and be actively working towards Level 3 (NDCS, 2011).

The Council proposes that the DES should work towards a position where the following teachers have qualifications in Irish Sign Language that are commensurate with the above standards:

- one teacher in every special school
- all teachers in schools currently designated for the Deaf and hard of hearing
- teachers in special classes for Deaf and hard of hearing pupils
- teachers employed in the Visiting Teacher Service for Deaf and hard of hearing pupils.

The above teachers should be qualified to Signature Level 2 and be actively working towards Signature Level 3. (For a description of Signature levels, please refer to Appendix 2.) It is estimated that the full cost of training these teachers to Level 3, on a clustered basis, will be in the region of €436,800. (See Table 6).

A number of these teachers have already received training in ISL: 137 teachers took part in such training over a three-year period up to 2009, through the SESS support scheme (Source: DES, 2010). The full training cost could be spread over a number of years as it takes time for teachers to achieve these levels of competency.

3. Introductory (one day) course for teachers of Deaf and hard of hearing children

To date, the SESS provides this one day course at five different venues each year. The average per teacher cost for this course is approximately €70.

The NCSE recommends that this introductory course should be available to all class teachers, learning support and resource teachers in primary and post-primary mainstream schools who have a Deaf and hard of hearing child in their class/school for the first time. If, as a starting point, the SESS were to provide such training to one teacher in each of the 800 schools with a Deaf and hard of hearing child being supported through the NCSE, this would cost in the region of €56,000.

The total additional education funded costs are estimated to be in the region of €6.75 million. (See Table 6).

Table 5: Estimated additional costs: health funded supports

Reference	Recommendation heading	Estimated cost
5.2 (b)	Early Childhood Care and Education (ECCE) Scheme	
	• Assistive technology	€140,400
	• ISL	€1,719,120
5.2 (c)	Speech and language therapy	€2,155,000
Total		€4,014,520

Table 6: Estimated additional costs: education funded

Reference	Recommendation heading	Estimated cost
5.3	Irish Sign Language	
	• ISL Support Scheme	€142,500
	• ISL grant to school	€502,500
	• Resourcing of mainstream	€1,114,300
	• Use of ISL interpreters	€75,000
5.5 (a)	Clustered special classes for Deaf and hard of hearing children	€2,118,676
5.5 (b)	Temporary education intervention in specialist settings	€230,666
5.6	Initial and continuing professional development for teachers	
	Postgraduate programme in Deaf Education	€975,000
	CPD provided through the SESS	
	• Delivery of seminar on Deaf Education	€43,200
	• ISL for teachers in mainstream schools	€1,059,200
	• ISL for teachers in specialist settings	€436,800
	• Introductory course for teachers of Deaf and hard of hearing children	€56,000
Total Estimated Cost		€6,753,842

Table 7: Recommendations to be implemented within existing resources

Recommendation	Rationale	Ref.
Provision of information		
Up to date, objective and comprehensive information should be made available to parents from the point of diagnosis and in clear and accessible formats, including Irish Sign Language (ISL).	A parental information package should be prepared and circulated jointly by the NCSE and the HSE. The package should consist of information drawn from existing sources and its delivery managed within existing resources, at no additional cost to the State. The NCSE is currently preparing a pamphlet for the parents of Deaf and hard of hearing children, which will be available in clear and accessible formats.	4.2.1 (b)

Recommendation	Rationale	Ref.
Health funded supports		
A counselling service should be made available to parents and children, as necessary, by the HSE, as part of early intervention services.	A counselling service should be made available as part of existing provision – any additional training requirements regarding Deaf and hard of hearing children should be part of an ongoing regular programme of CPD for HSE professionals.	4.2.1 (b)
Training programmes leading to recognised qualifications for pre-school leaders within the ECCE scheme should include mandatory elements on the education of Deaf and hard of hearing children.	This should form part of existing training programmes, leading to qualifications under the NFQ.	
Consideration should be given to clustering children, who use ISL as their primary language, in a small number of ECCE centres within local areas.	Clustering arrangements could result in a reduction of costs to the Exchequer, as well as facilitating the development of specialist knowledge, reducing social isolation and rationalising human and financial resources.	
Health and education funded support services should be coordinated and provided by professionals equipped to enable children to acquire the most suitable language/ communication skills (signed, spoken or bilingual).	This should be implemented within current resources, as a best practice model.	
Irish Sign Language		
A review should be conducted of the ISL Support Scheme.	The review should be undertaken by DES staff and prioritised within existing work programmes.	4.2.1 (c)
The DES policy in relation to the provision of ISL instruction should be available to parents.	The policy, when reviewed, should be published on the DES website, included in NCSE information booklets and disseminated through SENOs, the Visiting Teacher Service and other relevant services.	
The DES should set a minimum level of qualification for ISL tutors and arrange for the compilation of a register of ISL tutors	The Council does not consider that setting levels of qualifications for ISL tutors should lead to any increase in remuneration as such levels of qualifications, while currently unspecified, should be reasonably expected.	
The NCCA should consider how the development and refinement of competence in Irish Sign Language is best addressed within the school system.	This could be considered as part of current policies under development by the NCCA.	
Visiting Teacher Service		
The role of the Visiting Teacher Service should be reviewed and updated by the DES to take account of the changes proposed in this policy advice paper. Caseloads of visiting teachers should reflect the need for a greater focus on the pupils’ early years. Protocols should be developed to standardise practice across the Visiting Teacher Service in relation to assessment, teaching, advice and liaison functions, in order that a consistent service is provided to Deaf and hard of hearing children around the country.	Recommendations relating to the Visiting Teacher Service should be implemented as standard practice across the Visiting Teacher Service and any additional training required should be incorporated into the ongoing CPD programme.	4.2.2

Recommendation	Rationale	Ref.
School age years: educational models		
All educational settings, both mainstream and special, should be resourced with the technology necessary to deliver an appropriate education to Deaf and hard of hearing children; this should include the acoustic treatment of classrooms and assistive technology.	The NCSE records that 939 pupils were provided with assistive technology in the school year 2010-2011 (Special Education Administrative System, NCSE, 2011) – with total cost estimated to be in the region of €2 million for the 2010-2011 school year. This gives an average cost of approximately €2,100 per pupil. This technology is already provided by the DES so does not represent additional expenditure.	4.2.3 (a)
General guidelines on the acoustic treatment of classrooms should be produced by the DES Building Unit, in consultation with the Visiting Teacher Service, and made available to schools.	The guidelines would be produced internally by the DES Building Unit for circulation, at no additional cost to the State. Each school receives a minor works grant and should prioritise the acoustic treatment of classrooms from this grant.	
Children placed in special schools should be those with complex needs. In the future, special schools should be designated and resourced to serve pupils within the community who require special school placement rather than be limited to any specific category of disability.	This recommendation is in accordance with previous policy advice submitted by the Council. No additional costs arise for Deaf and hard of hearing children as special schools either already exist or are planned as part of the school building programme. The number of pupils currently attending special schools is very low (152 pupils over three special schools for Deaf and hard of hearing children), with many of these pupils having complex special educational needs. It is not therefore envisaged that the number of pupils enrolling in mainstream classes will increase significantly as a result of this policy advice.	
Consideration should be given to the need to provide temporary specialist provision for Deaf and hard of hearing children in separate specialist settings; for example, this could be used to provide intensive tutoring in ISL.		
Placement of pupils		
The placement of Deaf and hard of hearing children should be explicitly addressed as part of the Code of Practice proposed in the Council’s policy advice on the future role of special schools and classes in Ireland.	This recommendation is in accordance with previous policy advice submitted by the Council on the future role of special schools and classes. The implementation of this code of practice may have implications for the work of professionals involved in the assessment of children.	4.2.4
There should be ongoing assessment and monitoring of progress so that placement and service decisions can be changed, particularly for Deaf and hard of hearing children with additional disabilities.	This recommendation represents good practice.	
Shared placement between special and mainstream settings should be explored for Deaf and hard of hearing children with additional disabilities, in line with NCSE recommendations on the future role of special schools and classes (NCSE, 2011a, pp 110-111).	Previous NCSE policy advice recommended that a comprehensive study be undertaken, as part of the NCSE ongoing research programme, to examine: the possible impact of dual enrolment for the individual child (including educational and social outcomes) and factors that are critical to the successful implementation of dual placement.	

Recommendation	Rationale	Ref.
Additional teaching supports for Deaf and hard of hearing pupils		
<p>Schools, in conjunction with the visiting teacher, should identify children with mild hearing loss who require access to additional learning support. They should ensure that children receive such support within the school's current allocation.</p> <p>Pupils with mild hearing loss should be specifically mentioned in the list of pupils with learning difficulties for whom schools are provided with additional teaching resources under the general allocation model (DES Circular Sp Ed 02/05, Section 3.1).</p>	<p>Approximately 3,760 teaching posts have been allocated to primary schools under the General Allocation Model (GAM) at an estimated annual cost of €225 million per annum (Source: DES, 2011). Children in mainstream schools, with mild/unilateral hearing loss, who require additional support, should be included under existing schemes, without incurring additional costs to the State.</p>	4.2.6
<p>Additional teaching support for deafness as a low incidence disability in mainstream schools should be allocated in accordance with the:</p> <ul style="list-style-type: none">• level of the pupil's learning need• level of the pupil's functioning in the classroom• current DES policy parameters• The level of support granted should be reviewed on an annual basis.	<p>If the level of a pupil's functioning in the classroom has improved, it may be possible to reduce the amount of support required by the pupil, from the current level of four hours. The implementation of a review mechanism could result in a saving to the Exchequer.</p>	
<p>Children with cochlear implants should continue to receive additional educational support on the same, ongoing basis as other Deaf and hard of hearing children.</p>	<p>This is a continuation of existing good practice.</p>	
Focus on Outcomes and Monitoring of Progress		
<p>Sustained emphasis is required on measuring the outcomes for children with special educational needs, including outcomes for those children who are Deaf and hard of hearing.</p>	<p>Information will be provided from research recently commissioned by the NCSE to review how progress and meaningful outcomes for children with special educational needs can be identified and measured, drawing on international experience.</p>	4.2.7
<p>Individual education plans should be drawn up to enable each child to develop according to his/her ability.</p>	<p>Consideration should be given to including the development of individual education plans within the additional hour per week, as agreed under the terms of the Croke Park Agreement, thereby incurring no additional cost to the Exchequer.</p>	
<p>The Visiting Teacher Service should play a substantial role in assisting the development of individual education plans for Deaf and hard of hearing children and in carrying out assessments to inform the plans.</p>	<p>Recommendations under the Visiting Teacher Service should be implemented as standard practice across the service. Any additional training required should be incorporated into the ongoing programme of CPD; accordingly no additional costs are envisaged.</p>	
<p>Schools should inform visiting teachers of end of year assessment and examination results for Deaf and hard of hearing children, in order to facilitate the tracking of educational outcomes for these pupils, and with a view to ensuring that they are making progress commensurate with their abilities.</p>	<p>No additional cost should be incurred as this should be regarded as good practice.</p>	

Recommendation	Rationale	Ref.
Professional development for teachers of children who are Deaf and hard of hearing		
The DES should prescribe a minimum range of qualifications for teachers who are teaching Deaf and hard of hearing children in mainstream and specialist education settings, to include minimum standards of competence in the use and teaching of ISL.	This should incur no additional cost to the State.	4.2.8
Programmes of ITE should include a compulsory module on the education of children with special educational needs which addresses the particular needs of Deaf and hard of hearing children.	The module should form an integral part of the extended programmes for ITE stipulated by the Teaching Council and will not incur additional expenditure to the State beyond that already committed to these programmes.	
Current post-graduate programmes in special education should include a compulsory element on the education of children across disability categories, including Deaf and hard of hearing children.	It is intended that existing post-graduate programmes should include this compulsory module, at no additional cost to the State.	
Programmes of initial and CPD for teachers should include a focus on effective approaches for the teaching of literacy and numeracy to all pupils and address how these approaches can be differentiated for Deaf and hard of hearing pupils.	This proposal is in line with the recommendations of the National Strategy to Improve Literacy and Numeracy among Children and Young People (DES, 2011c) and should not incur expenditure additional to that already committed to the implementation of this strategy.	
National Educational Psychological Service (NEPS)		
Psychological services should be provided through ISL.	Due to the current recruitment embargo, it will be necessary for NEPS to prioritise this service within existing staffing allocations.	4.2.9
ISL interpreters should be used by NEPS for translation purposes, where necessary.	This is currently being delivered within NEPS existing budgetary expenditure.	
Special needs assistants		
Where an SNA, with ISL expertise working with a Deaf and hard of hearing child, is made redundant due to the reduction in the level of SNA support required by a particular school, Deaf and hard of hearing children who require such support must continue to benefit from a similar level of expertise.	This should be achieved within existing costs.	4.2.10
Schools should ensure that SNAs working with Deaf and hard of hearing children are equipped with the skills necessary to support their particular needs.	No additional cost is envisaged as SNAs allocated to work with Deaf and hard of hearing children should have the requisite skills.	
Development of Co-operative Structures		
A nominated person should be given the responsibility to liaise between and across locally delivered health and education funded services. The SENO could be the person so nominated.	Recommendations under this section involve the re-organisation and re-prioritisation of existing work programmes and practices to ensure greater adherence to principles of good practice in relation to collaborative working. It is intended that this would be achieved within existing staffing and resourcing limits.	4.2.11
The DES should clearly define linkages between the Visiting Teacher Service, NCSE, SESS, NEPS in order to ensure a streamlined service to Deaf and hard of hearing pupils and to avoid the possibility of role overlap.		

Appendices

Appendix 1: Legal Context

Education Act 1998

The purpose of the Education Act 1998 is to make provision for the education of every person in the state, including persons with a disability or other special educational needs. The following specific references to children with special educational needs are made in the first three stated objectives of the Act:

- a. to give practical effect to the constitutional rights of children, including children who have a disability or who have other special educational needs, as they relate to education
- b. to provide that, as far as is practicable and having regard to the resources available, there is made available to people resident in the State a level and quality of education appropriate to meeting the needs and abilities of those people
- c. to promote equality of access to and participation in education and to promote the means whereby students may benefit from education.

The Act makes specific reference to Deaf and hard of hearing children in a number of sections:

- Under Section 2, support services are defined to include provision for students learning through Irish Sign Language or other sign language, including interpreting services.
- Section 13 (4) (e) states that one of the functions of the Inspectorate is to advise the Minister on any matter relating to the linguistic needs of Deaf students in recognised schools.

Education of Persons with Special Educational Needs Act, 2004

The Education for Persons with Special Educational Needs (EPSEN) Act (Government of Ireland, 2004) was enacted in 2004 to

... make further provision for the education of people with special educational needs and to provide that the education of people with such needs shall, wherever possible, take place in an inclusive environment with those who do not have such needs and to provide that people with special educational needs shall have the same right to avail of, and benefit from, appropriate education as do their peers who do not have such needs. (Government of Ireland, 2004)

The Act provides for the rights of children to an assessment, an individual education plan and an independent appeals process. Full implementation of the EPSEN Act has been deferred. The sections that have been commenced mainly deal with the right to be educated in an inclusive manner, the duties of schools and the establishment of the NCSE.

The Disability Act 2005

The Disability Act 2005 makes provision for the assessment of the health and education needs of people with disabilities, for services to meet those needs, preparation of service plans, and appeals in relation to the non-provision of services. The Disability Act, 2005

complements the objectives of the EPSEN Act, 2004 and supports its implementation. When read together, the Acts appear to envisage a high level of co-operation between the education and health sectors so as to ensure the delivery of an effective and co-ordinated service to children with special educational needs, in inclusive settings (Government of Ireland, 2005).

The Disability Act 2005 amends the Broadcasting Act 2001 (Government of Ireland, 2001) to ensure that each broadcaster must take specified steps to promote the understanding and enjoyment by people who are Deaf or have a hearing impairment. In addition, each broadcaster must provide access to material through sign language.

United Nations Convention on the Rights of Persons with Disabilities

The Convention on the Rights of Persons with Disabilities was adopted on 13 December 2001. To date, 147 countries have signed the Convention, with 99 countries ratifying the Convention. Ireland signed the Convention on the 30th March 2007 but to date has not ratified it.

Article 24 (Education) states that State Parties should ensure that:

- a. persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability
- b. persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live
- c. reasonable accommodation of the individual's requirements is provided
- d. persons with disabilities receive the support required, within the general education system, to facilitate their effective education
- e. persons with disabilities learn life and social development skills to facilitate their full and equal participation in education and as members of the community.

To this end, States Parties shall take appropriate measures, including:

- a. facilitating the learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring
- b. facilitating the learning of sign language and the promotion of the linguistic identity of the Deaf and hard of hearing community
- c. ensuring that the education of persons, and in particular children, who are blind, Deaf or Deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximise academic and social development.

Article 30 relates to participation in cultural life, recreation, leisure and sport. It states that persons with disabilities shall be entitled, on an equal basis with others, to recognition and support of their specific cultural and linguistic identity, including sign languages and Deaf culture (UN, 2006).

Appendix 2: Signature Levels

Signature

Signature is an organisation that offers nationally recognised qualifications in British and Irish Sign Language and administers the National Registers for Communication Professionals working with Deaf and Deafblind people in the UK. National Vocational Qualifications (NVQs) are work-based awards in England, Wales and Northern Ireland that are achieved through assessment and training.

Signature Level 1: this level provides an introduction to ISL, is suitable for all learners and is aimed at people who wish to communicate in simple, everyday language. Successful candidates can progress to Signature Level 2 Certificate in Irish Sign Language.

Signature Level 2: this level is suitable for anyone who has a basic level of skills and knowledge in ISL. It is aimed at people who wish to communicate in a range of familiar and work-related contexts, participating in longer and more open-ended exchanges than at Level 1. Candidates are assessed by a combination of a multiple choice exam paper, a presentation, and a conversation in ISL. Successful candidates can progress to Signature Level 3 NVQ Certificate in Irish Sign Language.

Signature Level 3: this level caters for the learning needs of those who already have knowledge and skills in ISL at Level 2. It uses the UK Occupational Language Standards which define competent performance in Irish Sign Language (ISL) skills in both receptive and productive units. Candidates will provide evidence for both units of their ability to use ISL by compiling a portfolio of evidence. Both units are internally assessed. Successful candidates are awarded an NVQ Certificate in Irish Sign Language, Qualifications and Credit Framework (QCF) and can progress to Signature Level 6 NVQ Certificate in Irish Sign Language.

Signature Level 6: this level uses the UK Occupational Language Standards and is designed for learners who can understand and use complex language, express themselves fluently and deal confidently with most work situations. It is useful for those who work on a daily basis with Deaf and hard of hearing people, as well as learners who wish to become an Irish Sign Language (ISL)/English Interpreter. This level leads to the award of an NVQ Certificate in Irish Sign Language. Successful candidates can progress to an NVQ Diploma in Sign Language Interpreting.

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