

DIMENSIONS FOR LEARNING - Hearing Impairment

The term “**hearing impairment**” refers to all types of hearing loss - from those with a mild hearing loss to those who are profoundly deaf, including temporary loss such as that caused by ‘glue ear’ and one sided (unilateral) hearing loss. For educational purposes, pupils are regarded as having a hearing impairment if they require hearing aids, adaptations to their environment and/or particular teaching strategies in order to access the concepts and language of the curriculum.

Sensori-neural or Nerve Hearing Loss

As sound passes through the outer and middle ear, tiny hair cells in the cochlea convert sound waves into electrical signals. These signals travel along the nerve of hearing, (the auditory nerve) to the brain. Most cases of sensori-neural deafness are caused by loss of, or damage, to the hair cells in the cochlea which means that the cochlea is not processing the sound effectively. The deafness may be genetic or caused by an infectious disease such as rubella, mumps, measles, or meningitis and is permanent. A child may be born deaf because of a shortage of oxygen in the bloodstream at birth or some other birth trauma.

Conductive Hearing Loss is the most common type and occurs when sound cannot pass through the outer and middle ear to the cochlea and auditory nerve in the inner ear. This is often caused by fluid building up in the middle ear (glue ear). Glue ear can cause temporary deafness and can either clear up naturally after a short period of time, or it can develop into a long-term condition requiring surgical intervention, (such as the insertion of grommets), or wearing hearing aids. It is estimated that 1 in 5 children around the age of two will be affected by glue ear at any given time, and about 8 in every 10 children will have had glue ear at least once by the time they're 10 years old.

The term “**mixed deafness**” is often used when a child has a mixture of conductive and sensori-neural deafness.

Degrees of Hearing Loss

There are different degrees of hearing loss and these are most often classified as **mild** (20-40dB), (41-70dB), **severe** (71-95dB) or **profound** (95dB+). Very few deaf children have no useful hearing. Most deaf children can hear some sounds at certain frequencies and volume, and with the use of hearing aids or cochlear implants they are able to hear the full range of speech sounds. There are some children who have little or no hearing in one ear, and ordinary levels of hearing in the other. This is known as **unilateral deafness**. Hearing loss does not always fit into a particular category, for example, a child might have a moderate to severe hearing loss and therefore features of both levels need to be considered. It is also important to be aware that children with the same level of hearing impairment, experience sounds differently and as a result require different levels of support.

The majority of children with permanent hearing needs are identified in their early years, prior to beginning school and are, therefore, known to the Hearing Impairment Support Service. In partnership with the NHS, Halton operates a New-born Hearing Screening programme. As a result, all children born with moderate to profound permanent bilateral hearing loss should be identified within the first few weeks of birth. Intervention begins at diagnosis, and an early years education programme prepares the child for school. There will always be a number of children who will develop a hearing loss in early childhood. Infections like meningitis, measles and mumps can damage hearing. Ototoxic drugs, used to treat other types of infections in babies, can also be a cause.

The involvement of the Hearing Impairment Support Service requires a diagnosis of hearing loss from either the audiology clinic or the ENT clinic.

Hearing Impairment: Universal Support and Quality First Teaching Strategies

The child or young person experiences a unilateral/mild sensorineural hearing loss or a conductive hearing loss. There may or may not be advice on management of the loss from the Hearing Impairment Support Service.

Assess, plan, do, review	Teaching and learning	Resources
<p>Assess</p> <p>Class teacher identifies pupil is having difficulty in following the content of the lesson. Pupil may be underperforming.</p> <p>Pupil struggling to hear adult and peers in group discussions, pairs working or practical activities such as PE and Games.</p> <p>Pupil may be struggling during break time or lunchtime with friendships with peers.</p> <p>Plan</p> <p>Class teacher makes adjustments to the classroom environment to improve acoustic conditions.</p> <p>Class teacher uses strategies to improve communication within the classroom.</p> <p>Strategies shared with pupil and parents/carers.</p> <p>Do</p> <p>All adults working with pupil are aware of</p>	<p>Good management of the classroom environment to ensure background noise is kept to a minimum and there are not too many visual distractions.</p> <p>Make sure the pupil is in the best position to be able to see the face of the teacher and to be able to hear what the teacher is saying. This may change with different activities.</p> <p>Plan for short periods of listening interspersed with individual or small group activities.</p> <p>Make sure you have the pupil's attention before you start speaking.</p> <p>Ensure that your face is in clear view so that the pupil can lip read. Make use of facial expression and body language to support what you say. As much as possible, stand still and face the class when speaking.</p> <p>Outline the content of the lesson at the beginning using visual cues/key words.</p>	<p>Ensure the classroom is a “listening friendly” environment</p> <p>Carpeting—if there is not wall-to-wall, try to have some large rugs.</p> <p>Acoustically treated ceiling tiles.</p> <p>Avoid situations where the class is split and half of the children are listening to one teacher and the other half are listening to someone else.</p> <p>Window treatments (curtains or blinds).</p> <p>Replace buzzing lights.</p> <p>Displays on the wall help to absorb noise.</p> <p>Use corkboards or similar absorbent material whenever possible.</p> <p>Place flat surfaces (movable boards) at an angle.</p> <p>Place tennis balls or rubber tips on chair feet (keep in mind latex allergies) to stop them scraping.</p>

<p>strategies.</p> <p>Class teacher uses quality first teaching methods.</p> <p>Peers are made aware of strategies to use with pupil.</p> <p>Pupil is monitored to determine effectiveness of strategies.</p> <p>Review</p> <p>The impact of strategies and quality first teaching methods is reviewed by class teacher and SENDCo to decide whether or not further assessment is required.</p> <p>The views of the pupil and their parents/carers should also be sought as to the effectiveness of strategies employed.</p>	<p>Present the lesson content in as visual a way as possible: use pictures, key words on the board and demonstration.</p> <p>Make sure the hearing impaired pupil has access to what the other pupils say. Repeat/rephrase the answers pupils give or ask them to speak at the front.</p> <p>Check that the pupil has understood the task before they begin. "Tell me/show me what you have to do."</p> <p>Recap the main points of the lesson at the end and provide an opportunity for the pupil to show what they have understood.</p>	<p>Have soft chairs (small beanbag chairs) in leisure/reading areas.</p> <p>Do not have noisy equipment (e.g., computers, projectors) on if you are not using them.</p> <p>Try to keep doors and windows closed to reduce interference from outside noise.</p> <p>Encourage peers to use good communication strategies.</p> <p>Staff Training</p> <p>School based training by Hearing Impairment Support Service for those adults working with pupil.</p> <p>Use of National Deaf Children's Society materials for schools.</p>
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Hearing Impairment – Targeted Support

The child or young person experiences a moderate/severe, bilateral sensori-neural hearing loss that necessitates the use of aids or cochlear implant and the support of a Specialist Teacher of Hearing Impairment. There may be support and advice from Specialist Speech and Language Therapist for Hearing Impairment.

Assess, plan, do, review	Teaching and learning	Resources
<p>Assess</p> <p>Strengths and weaknesses will be analysed using curriculum-related assessment, criterion-referenced assessment and may be supplemented by standardised tests and/or diagnostic tests.</p> <p>Specialist Listening Skills and Language assessments carried out by the Specialist Teacher for Hearing Impairment and/or Specialist Speech and Language Therapist for Hearing Impairment</p> <p>Pupil voice should be included in the assessment and this should inform the plan e.g. what strategies help and support them, peer groupings which they see as helpful etc.</p> <p>Plan</p> <p>Support plans should be set using “SMART” outcomes targeted at the areas of need with appropriate provision to achieve these outcomes.</p>	<p>Class or subject teachers are responsible for the progress and support of the pupil. Additional adult support may be provided to rephrase questions, modify language and explain tasks.</p> <p>Pupils with a hearing impairment may or may not have delayed language. If their language levels are significantly below what would normally be expected for their chronological age, they will need differentiated teaching materials in addition to the modifications of your normal teaching style.</p> <p>Communication</p> <p>Check that the pupil is wearing his/her hearing aids and he/she sits near to you. Hearing aids will not pick up sounds clearly at distances more than 2metres.</p> <p>Clear, natural spoken language delivered at a normal rate</p> <p>Clear messages</p>	<p>Good acoustic environment as listed above.</p> <p>Daily checks of hearing aids and FM system either by key adult working with the pupil or by pupil themselves under adult supervision depending on age and understanding of pupil.</p> <p>To enable the pupil to have a better understanding of their hearing impairment, use of resources such as Oticon Activity Booklet, NDCS “Healthy Minds”, “Who am I?” DVD by NDCS, “The Buzz” website for young people run by the NDCS and The Ear Foundation “Personal Understanding of Deafness”</p> <p>Staff Training</p> <p>School based training by Hearing Impairment Support Service for those adults working with pupil.</p> <p>Attendance by key adult at Hearing</p>

<p>Assessment information informs further adjustments to teaching and learning that may be required as well as identifying additional intervention required.</p> <p>Pupil and parent/carer involvement in the teaching programme will be clearly defined. Strategies on how to support the pupil at home should be included in the support plan.</p> <p>Do</p> <p>Advice from external agencies is included in the Support Plan and recommended interventions and strategies are implemented.</p> <p>Some additional support time may be required. The SENDCo facilitates assessment, planning and monitoring. Appropriate provision and interventions are deployed without delay targeted at the area of need.</p> <p>All staff working with the pupil are aware of the plan and follow the advice and strategies contained within it.</p> <p>Parents follow the plan in supporting the pupil at home.</p>	<p>Visual support</p> <p>Repetition/recapping of key points</p> <p>Differentiation of the level of questioning you direct at the hearing impaired pupil Ensure good light on your face, but don't stand in front of the window with the light behind you.</p> <p>Don't talk to class while writing on whiteboard, demonstrating a practical task or looking down at another pupil's work.</p> <p>Differentiation of lesson content</p> <p>Differentiate the language used on worksheets or in written materials supporting class discussion/learning. Make sure that the written language presented is accessible for the hearing impaired pupil but also stretches them.</p> <p>Consider the objectives of the lesson: it is common for hearing impaired pupils to understand concepts and facts but be unable to demonstrate this because the language used to frame follow up questions is too complex.</p> <p>Reduce the amount of new and/or technical vocabulary introduced in a lesson if it is not essential to meet the</p>	<p>Impairment Support Service whole day training for school staff.</p> <p>Use of National Deaf Children's Society materials for schools.</p>
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<p>Review</p> <p>Assessment of progress should be analysed in terms of rate of progress, age expectation and should take into account other related needs such as cognitive difficulties, emotional well-being.</p> <p>Regular reviews should be held on at least a termly basis. Parents/carers and pupil must be involved. Review should focus on pupil progress, effectiveness of strategies, new information or factors and the setting of new outcomes</p>	<p>learning objectives.</p> <p>Reduce the amount of information or number of concepts where possible.</p> <p>Modifying text</p> <p>All materials presented in a written form should be differentiated to take account of a pupil's language level.</p> <p>Think about the purpose of the teaching materials you are using. Is the key point to get some facts or concepts over or is the language being used itself the 'content' of what has to be learned?</p> <p>Think before you start about what technical or specific language is essential</p> <p>Adjust the carrier language for content so that it is appropriate to the level of the subject matter and age/ability of the pupil</p> <p>Reduce the complexity of the text</p> <p>Use clear headings which give a good idea of the subject matter which follows</p> <p>Consider the font size, spacing on the page and general layout</p> <p>Use clearly labelled diagrams and pictures</p>	
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	<p>if they are available</p> <p>Use shorter sentences</p> <p>Present information sequentially</p> <p>Write statements first, then ask questions</p> <p>Avoid words with double meanings</p> <p>Avoid passive sentence constructions, e.g. "Marconi invented the radio" rather than, "The radio was invented by Marconi."</p> <p>Most hearing impaired pupils will benefit from a clear list of key words and concepts covered in the lesson and used in written follow up materials. Some will be helped by written follow up materials which are specifically designed to reinforce and test understanding of a reduced range of vocabulary or content.</p> <p>Some pupils will benefit from follow up materials which allow them to express their understanding in a more visual/pictorial way than would be appropriate for other children.</p>	
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Hearing Impairment – Specialist Support

The child or young person experiences a severe/profound, bilateral sensori-neural hearing loss that necessitates the use of aids or cochlear implant and the support of a Specialist Teacher of Hearing Impairment. Pupil may also use BSL either as first language or in addition to Spoken English to augment understanding of language. There will also be support and advice from Specialist Speech and Language Therapist for Hearing Impairment

Assess, plan, do, review	Teaching and learning	Resources
<p>Assess</p> <p>If there has been little identified progress towards achieving outcomes, it may be necessary to adjust the outcomes and the time frame to achieve these outcomes. More regular reviews and shortened cycles of assess-plan-do-review may be required to monitor the impact of intervention.</p> <p>School will continue to use the assessments identified at specialist level to inform any further plans.</p> <p>Additional specialist language and listening assessments to be carried out by the Specialist Teacher for Hearing Impairment and the Specialist Speech and Language Therapist for Hearing Impairment.</p> <p>Plan</p> <p>Support plans will include very carefully considered targets, delivery methods and</p>	<p>As for targeted support plus:</p> <p>An individually devised, school-based language development programme. Programme to be delivered 5 days per week in 15 – 20 minute sessions.</p> <p>Pre-tutoring with a key adult for at least 20 minutes per week of key vocabulary for the following week’s lessons.</p> <p>Post – tutoring with a key adult for at least 20 minutes per week to check the pupil has understood the concepts of the lessons.</p>	<p>For pupils using BSL, a communication support worker to help pupil understand the lessons.</p> <p>Targeted weekly / fortnightly lesson with Specialist Teacher for Hearing Impairment.</p> <p>Specific programmes from Specialist Speech and Language Therapist for Hearing Impairment.</p> <p>Alternative placement in the LA’s resourced based provision for hearing impairment following an application for enhanced provision or a review of enhanced provision.</p> <p>Staff Training</p> <p>Training to be given to whole school staff by Hearing Impairment Support Service.</p>

evaluation techniques. Any advice from external professionals is clearly evidenced in the plan and carried out.

Information contained within a speech and language care plan will be included in the support plan.

Do

Schools follow the support plan as they have at targeted level.

Strategies and advice from external professionals are implemented and evidenced in teacher's planning, further adjustments to teaching and learning and provision.

Review

Reviews will be carried out in consultation with the pupil, parents/carers and the specialist services involved to consider the impact the interventions have had on pupil progress. It is recommended that at least 2 cycles of Assess, Plan, Do, and Review are completed.