



## Dyslexia in Leicestershire Information for families and schools

### Identification, Assessment and Diagnosis

#### Main terms

Do you find some of the terms used confusing? For example -

Assessment	EHC Needs Assessment	SENCO
Diagnosis	Graduated Approach	SEND
Dyslexia	Identification	SEND Code of Practice
Intervention		

#### Explanations of main terms

##### Assessment

**Assessment** refers to tests or checks and can be formal or informal or a mixture of both. Different assessments have different purposes (e.g. to establish baseline data or to identify strengths and weaknesses). Assessment usually refers to a range of tests, checks and observations being carried out and usually includes background and historical information. Contributions from parents/carers are vital.

Educational establishments are expected to offer good quality whole class teaching to ensure expected attainment and progress of all pupils (this is monitored by schools).

*Progress of all children and young people is assessed as matter of course as part of routine class and school practice. This is to check that pupils are attaining their expected learning levels.*

Where children and young people are not progressing as expected, further investigation **must** be carried out by the school. Parents/carers should contribute to these investigations.

Where concerns continue, individual assessments can be carried out by specialists (eg. qualified specialist dyslexia assessors; educational psychologists). These assessments may be an investigation of a pupil's underlying strengths and weaknesses (if appropriate including self-esteem and emotional issues) and include advice for support. Specialist assessments do not necessarily result in a diagnosis.

##### Diagnosis

Diagnosis is a decision made by a suitably qualified professional (eg. a qualified specialist dyslexia assessor; educational psychologist). This would be based on: - background

information and history relating to the pupil; information and views of the pupil and their parents, school and any other involved agencies; medical information; informal tests/checks; standardised tests; non-specialist and specialist tests and responses to structured learning programmes and evidence of dyslexia friendly approaches provided over time (see Appendix 4).

**PLEASE NOTE:** Information and input from the pupil and their parents/carers is a crucial element in the diagnosis process. When given the opportunity, most children and young people are able to express their learning experiences, and what they feel could help them. Parents/carers hold the full picture of their child's development and background.

## Dyslexia

The Learning Support Service of Leicestershire's Children and Family Services uses the following definition taken from "[Identifying and Teaching Children and Young People with Dyslexia and Literacy Difficulties](#)", an independent report from Sir Jim Rose to the Secretary of State for Children, Schools and Families, June 2009:

- Dyslexia is a learning difficulty that primarily affects the skills involved in accurate and fluent word reading and spelling
- Characteristic features of dyslexia are difficulties in phonological awareness, verbal memory and verbal processing speed.
- Dyslexia occurs across the range of intellectual abilities
- It is best thought of as a continuum, not a distinct category, and there are no clear cut off points
- Co-occurring difficulties may be seen in aspects of language, motor co-ordination, mental calculation, concentration and personal organisation, but these are not, by themselves, markers of dyslexia.
- A good indication of the severity and persistence of dyslexic difficulties can be gained by examining how the individual responds or has responded to well-founded intervention

In addition to the characteristics noted in the [Rose definition](#), the British Dyslexia Association acknowledges the visual and auditory processing difficulties that some individuals with dyslexia can experience, and points out that dyslexic readers can show a combination of abilities and difficulties that affect the learning process. Some also have strengths in other areas, such as design, problem solving, creative skills, interactive skills and oral skills.

Furthermore, it is useful to refer to the recent description from the Dyslexia SpLD Trust document, '[Educating, employing and training people with Dyslexia-Spld for 2020](#)'.

'Dyslexia is a specific learning difficulty that affects auditory memory and processing speed which impacts on literacy development, mathematics, memory, organisation and sequencing skills to varying degrees. Dyslexia can occur at any level of intellectual development. It is neurological in origin and is seen to run in families. It affects up to 10% of the UK population at some level and can affect anyone of any age and background.'

Dyslexia is defined by the [British Psychological Society](#) as:-

‘...evident when accurate and fluent word reading and/or spelling develops very incompletely or with great difficulty’.

**PLEASE NOTE:** Delayed literacy skills can be the result of many factors and are not necessarily an indication of dyslexia. For example, health, social and emotional issues, and attendance can impact on literacy development and attainment.

## **EHC Needs Assessment (Statutory Assessment)**

An EHC needs assessment is an assessment of the Educational, Health care and Social Care needs of a child or young person. An EHC needs assessment can be requested by parents/carers as well as schools, academies and other involved professionals. An EHC needs assessment is undertaken for pupils with complex and/or severe needs who require support not normally available in a mainstream school.

It is the Local Authority which carries out the EHC needs assessment, and to do so it must seek the following advice and information:

- about the needs of the child or young person;
- about what provision may be required to meet such needs;
- about the outcomes that are intended to be achieved by the child or young person receiving that provision.

## **Graduated Approach**

The Graduated Approach refers to a process of action and intervention (see below) triggered by initial concerns about progress, and described in the Special Educational Needs and Disability Code of Practice as – Assess – Plan – Do – Review. This approach recognises that there is a continuum of literacy and/or dyslexic needs and that it may be necessary to increase actions over time.

## **Identification**

Identification relates to noticing and acknowledging an issue with learning; identifying inexplicable lack of progress or slow progress (this is different from ‘diagnosis’, see above). Identification should happen as early as possible - educational establishments (including pre-school settings) should be alert to any early indicators of dyslexia and note these on the child or young person’s educational record.

The following documents may be helpful:

- [Early Indications that might suggest dyslexia](#) (Appendix 1)
- [Indicators at primary phase of education](#) (Appendix 2)
- Indicators at secondary phase of education (Appendix 3)

## **Intervention**

Intervention is a form of support designed to accelerate progress and improve educational and emotional outcomes. This could be the use of reputable published programmes, multi-sensory approaches and/or direct teacher or teacher assistant support.

## **Screening**

Screening tests can be carried out in order to give an indication of possible dyslexia. They do not give a diagnosis of dyslexia.

There are different types of screening tests. Some are computer based, while others are carried out manually. Some screeners give an estimate as to whether the individual is likely to have dyslexia. Some give more detail, for example a profile of strengths and weaknesses which can be used to form a teaching programme.

## **SENCO**

SENCO stands for - Special Educational Needs Co-ordinator. This is the member of staff in a school, academy or early years education setting who has responsibility for coordinating Special Educational Needs provision within the establishment.

## **SEND**

SEND stands for - Special Educational Needs and Disability. 'A pupil has SEND where their learning difficulty or disability calls for special educational provision, namely provision different from or additional to that normally available to pupils of the same age' (Special Educational Needs and Disability Code of Practice)

## **SEND Code of Practice**

This is the new Special Educational Needs and Disability Code of Practice: 0 to 25 years (January 2015). This is statutory guidance produced by the Department for Education, for organisations which work with and support children and young people who have special educational needs or disabilities.

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/398815/SEND\\_Code\\_of\\_Practice\\_January\\_2015.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf)

## Identification, assessment and intervention

### What happens, when

#### Raising concerns

Parents and/or pupil and/or school have concerns about a pupil's functioning, progress or well-being.

The school should create a monitoring record to document discussions, actions, interventions and results of investigations. This record **must** be created in partnership with pupils, their parents, and all involved school staff. This will record the graduated approach taken, and will document pupil and parent contributions, including any information about factors which could be contributing to delayed progress.

Adjustments **must** be made at whole class level to try to ensure improved progress, e.g. using differentiated teaching and learning approaches and/or dyslexia friendly practices (see Appendix 4).

A review date must be set, ideally within half a term.

#### Still worried?

Where concerns continue – class/subject teacher continues to work in partnership with pupil and parents/carers, to further investigate the nature of the pupil's difficulties (this may include health checks) and to consider whether the pupil has Special Educational Needs/Disability (SEND) in the area of literacy difficulties or whether other factors have impacted on progress and attainment.

If it is suspected that the pupil has Special Educational Needs/Disability (SEND) in the area of literacy difficulties, the class/subject teacher begins to involve the SENCO, still closely involving the pupil and parents/carers.

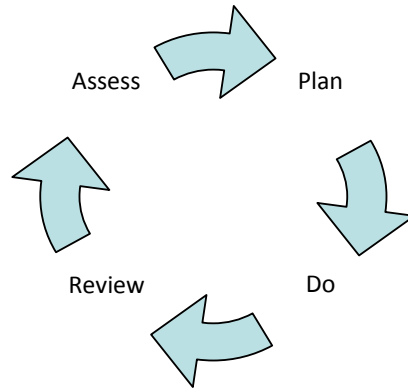
**PLEASE NOTE:** Some pupils may attain national expectations for their age but still have dyslexia (dyslexia is included in the Equality Act 2010 as a disability), and therefore may still require reasonable adjustments or provision different from or additional to that normally available, in order to fulfil their potential.

Ongoing investigations of need should not prevent increased provision for the pupil - therefore alongside these investigations, schools should use interventions designed to secure better progress (pupil responses to these can add to the identification of needs).

During the investigations - if it is established that the pupil has indicators of SEND in the area of literacy difficulties or a specific difficulty/disability (e.g. dyslexia) then schools must put effective special educational provision in place. At this point the decision should be made to place the pupil at the SEND Support Stage.

## The Graduated Approach

In line with the new SEND Code of Practice, the school, in partnership with parents and pupil, should use The Graduated Approach by following the four part cycle - Assess; Plan; Do; Review - in successive cycles, reviewing and revising support and intervention.



This cyclical process enables a growing understanding of the pupil's individual profile and learning styles and support becomes increasingly personalised.

The Graduated Approach should enable schools/academies to fulfil their duty to make their best endeavours to meet the Special Educational Needs of their pupils.

Where concerns persist, this may result in the involvement of specialists (.eg. qualified specialist dyslexia assessors; educational psychologists). Although schools may involve specialists at any point to advise them on effective support for pupils.

This graduated process should result in improved progress/outcomes and the equipping of pupils with strategies to sustain progress in the long term and to develop independent learning.

In a small minority of cases, where a pupil's needs are severe and complex and where there has been no, or minimal, progress, despite successive intensified cycles within the graduated approach, it may be beneficial to request an EHC needs assessment from the Local Authority (parents, young people aged between 16 and 25 and schools can request statutory assessment).

## Diagnosis – some explanation

### Early identification

As part of the graduated approach in terms of dyslexia, it is essential that identification, ongoing assessments and intervention should begin as early as possible, see 'Identification' in the 'Explanation of Terms' section above.

Parent/carers and pre-school settings may have noted some early indicators and the Early Years Foundation Stage Framework provides opportunities for staff working in early years settings to identify children whose development is causing concern, and to start to address this.

Pre-school settings provide Progress Summaries as part of transition to school arrangements where these early observations are passed on. Subsequently, within schools, during Reception, KS1, and continuing into KS2, it is crucial that observations (see Primary school checklist), provision, monitoring, and review should continue as already described as the Graduated Approach (Assess – Plan – Do – Review). This is part of the identification process and should be clearly documented.

Although it is **essential** to monitor as described above, it should be noted that some behaviours associated with dyslexia can be part of normal development in the early years and some children 'grow out' of these early behaviours, developing at their own unique rate.

### A Diagnostic Assessment

A firm and clear diagnosis of dyslexia can be made with more confidence after the age of 7 years. However, recognition of indicators and identification of need alongside suitable interventions should begin as early as possible.

This allows for targeted teaching, extra support, structured programmes, observations and assessment, to be implemented over time (in line with the graduated approach) in order to establish if the needs are persistent and suggestive of dyslexia.

In some cases, schools, parents and pupils may wish to discuss whether a full diagnostic assessment of dyslexia would be an essential part of identifying and meeting the pupil's need.

However, the school may be able to evidence that they are already able to fulfil their duty to identify and provide for need in line with the SEND Code of Practice. It is also worth noting the Rose Report view –

*“What matters most is to ensure that children’s difficulties with literacy learning are identified and addressed in ways that advance their progress, whether or not the difficulties are described in terms of dyslexia”.*

Where the pupil and/or parents/carers express the view that a diagnostic assessment is necessary in order to meet the pupil's needs, schools must give this serious consideration.

When it has been decided that a diagnostic assessment would be an essential part of the process to identify, support and provide for the learning needs, this can be arranged in a number of ways: -

- A referral to Leicestershire Educational Psychology Service (particularly if literacy difficulties are part of a complex profile of need which includes low self-esteem and emotional barriers to learning)
- A referral to Leicestershire's Learning Support Service
- A referral to a suitably qualified specialist teacher/assessor. This is a specialist teacher who holds a Level 7 Post-Grad qualification in assessing and teaching learners with Specific Learning Difficulties/dyslexia and who holds a current PATOSS (Professional Association of Teachers of Students with Specific Learning Difficulties) Assessing Practising Certificate.
- A referral to a private educational psychologist who is registered to practice by the Health Care Professions Council
- A referral to a voluntary agency (eg. Dyslexia Action, or Leicestershire Dyslexia Association)

**PLEASE NOTE:** Where a report by a suitably qualified specialist diagnoses dyslexia, it should be noted that the Equality Act 2010 includes dyslexia as a disability and therefore any suggested reasonable adjustments should be seriously considered by schools, pupils and parents/carers.

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## Appendix 1

### Indications which may suggest dyslexia

Many children experience some of these behaviours at times. If a child demonstrated many of these indicators, and these tended to persist over time, it could be significant.

No crawling stage - bottom shuffled instead

Finding it hard to remember nursery rhymes

Spoken language late to develop and/or poor articulation

Finding it hard to do up buttons

Short concentration span

Interested in the world around them

Getting dressed is challenging – clothes on in wrong order, back to front, shoes on wrong feet

Difficulties developing knife and fork skills, and scissor skills

Having problems with learning to ride a bike, and throwing/catching skills

May need extra thinking time during conversation

Difficulties remembering names of well known objects, eg. settee, kettle

Enjoys taking things apart and putting back together, or making models from scrap material

May seem unable to remember words they need in conversation or may forget what they are saying in the middle of a sentence

Insecure sense of direction and use of direction words

Finding it hard to organise themselves or their belongings

Unsure of what day it is or what part of the day it is

Difficulties sequencing an order of events

Difficulties in remembering common sequences e.g. days of the week, the alphabet

Abilities seem to vary from day to day

Finding it hard to develop reading and writing skills

**Appendix 2**

**Taken from the Inclusion Development Programme (National Strategies 2008)**

**Identification of pupils on the dyslexia continuum - Primary**

Is there a family history of dyslexia?.....

Does the child have a history of ear infections or hearing loss? .....

Was the child late to start talking? .....

<b>Focus</b>	<b>Some of the typical signs or behaviours in pupils at risk of dyslexia.</b>	<b>Observed in named pupil? Y/N</b>
<b>General</b>	Slow to process instructions..... Problems with sequencing e.g. getting dressed..... Poor concentration..... Does not retain concepts from one lesson to the next. .... Problems with fine or gross motor skills.....	
<b>Writing</b>	<p><b>Content does not reflect ability:</b></p> Good at thinking of ideas, but cannot get them down on paper ..... <p>Uses simple ideas and vocabulary that does not reflect verbal ability .....</p> <p>Written work often not completed.....</p> <p>Reluctant to write .....</p> <p><b>Difficulties in structuring written work:</b></p> Problems with grammar e.g. tenses of words muddled .....                     Problems sequencing ideas, e.g. when writing a story .....                     Ideas not logically linked together-rambling style..... <p>Inaccurate punctuation.....</p> <p><b>Poor Handwriting:</b></p> Reverses some letters when writing, e.g. b/d p/q m/w .....                     Older child does not write cursively.....                     Writing badly arranged on the page.....                     No spaces between words .....                     Slow writing speed .....                     Problems copying from the board ..... <p><b>Inaccurate spelling:</b></p> Omits letters within words .....                     Errors in discriminating individual sounds, eg middle sound.....	

	Letters in words in the wrong order .....
	Bizarre spelling .....
<b>Reading</b>	Problems choosing a book at a suitable reading level .....
	Does not read for pleasure .....
	Reluctant to read out loud.....
	<b>Inaccurate reading:</b>
	Unable to read high frequency words as well as peers .....
	Confuses words that are visually similar e.g. was/saw .....
	Omits words when reading .....
	Poor tracking along words and lines when reading.....
	<b>Lack of reading fluency:</b>
	Sounding out each word. ....
	Needs time to process visual information .....
	Lack of expression .....
	Slow reading speed. ....
	<b>Does not understand what is being read:</b>
	Not reading for meaning and using context as a strategy .....
	Cannot predict what is going to happen next .....
	Cannot summarise what has happened .....
	Needs to read several times to understand meaning.....
<b>Mathematics</b>	Problems remembering times tables.....
	Difficulty with mental maths .....
	Confusion of visually similar numbers e.g. 6/9.....
	Forgets maths concepts if not practiced regularly .....
	Misreads signs.....
	Misreads written instructions.....
<b>Concept of time</b>	Confusion about timetable for the day .....
	Problems adapting to changes in routine.....
	May not be able to say what day it is .....
<b>Organisation</b>	Problems finding what they need to start a task.....
	Difficulties executing tasks in the right order .....
	Often forgets to bring dinner money/P.E. kit etc.....
<b>Behaviour and Motivation</b>	Uses bad behaviour to avoid work .....
	Often off task.....
	Reluctant to contribute in lessons .....
	Copies from other children .....

**Appendix 3**

**Taken from the Inclusion Development Programme (National Strategies 2008)**

**Identification of pupils on the dyslexic continuum – Secondary**

Is there a family history of dyslexia?.....

Does the pupil have a history of ear infections or hearing loss? .....

Was the pupil late to start talking? .....

<b>Focus</b>	<b>Some of the typical signs or behaviours in pupils at risk of dyslexia.</b>	<b>Observed in named pupil? Y/N</b>
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<b>General</b>	Slow to process instructions..... Problems with sequencing, e.g. does not know the alphabet ... Poor concentration..... Does not retain concepts from one lesson to the next ..... Problems with fine or gross motor skills .....	
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<b>Writing</b>	<p><b>Content does not reflect ability:</b>                      Good at thinking of ideas, but can't get them down on paper ...                      Uses simple ideas and vocabulary that do not reflect verbal ability .....                      Written work often not completed.....                      Reluctant to write .....</p> <p><b>Difficulties in structuring written work:</b>                      Problems with grammar, e.g. tenses or words muddled .....                      Problems sequencing ideas when writing .....                      Ideas not logically linked together – rambling style .....                      Inaccurate punctuation .....</p> <p><b>Poor handwriting:</b>                      Reverses some letters when writing, e.g. b/d, p/q, m/w .....                      Does not write cursively .....                      Writing badly arranged on the page.....                      No spaces between words.....                      Slow writing speed .....                      Problems copying from the board .....</p> <p><b>Inaccurate spelling:</b>                      Omits letters within words .....                      Errors in discriminating individual sounds, e.g. middle sound...                      Letters in words in the wrong order.....                      Bizarre spelling .....</p>	
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<b>Reading</b>	Problems choosing a book at a suitable reading level .....	
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Does not read for pleasure .....  
Reluctant to read out loud.....

**Inaccurate reading:**

Unable to read high frequency words as well as peers .....  
Confuses words that are visually similar (e.g. was/saw) .....  
Omits words when reading .....  
Poor tracking along words and lines when reading.....

**Lack of reading fluency:**

Sounding out each word .....  
Needs time to process visual information .....  
Lack of expression .....  
Slow reading speed .....

**Does not understand what is being read:**

Not reading for meaning and using context as a strategy .....  
Cannot predict what is going to happen next .....  
Cannot summarise what has happened.....  
Needs to read several times to understand meaning.....

**Mathematics**

Problems remembering times tables.....  
Difficulty with mental maths .....  
Confusion of visually similar numbers (e.g. 6/9).....  
Forgets maths concepts if not practised regularly.....  
Misreads signs.....  
Misreads written instructions.....

**Concept of time**

Difficulty using and understanding a timetable .....  
Problems adapting to changes in routine .....  
May not be able to say what day it is .....  
Often late for school or lessons.....

**Organisation**

Problems in having/finding necessary equipment in school.....  
Difficulties executing tasks in the right order.....  
Forgetting or not doing homework .....

**Behaviour and motivation**

Uses bad behaviour to avoid work.....  
Often off-task .....  
Reluctant to contribute in lessons .....  
Relies on other students for help .....  
Withdrawn.....

## Appendix 4

### Examples of Dyslexia Friendly Classroom practice

#### The Practice

##### Planning and Preparation

The teacher knows which pupils are affected by dyslexia

The teacher mark book indicates these pupils

Differentiation is evident in plans and lesson delivery

##### The Environment

The room is suitably lit and ventilated

Water is available

Interactive Whiteboard background is set to buff or pale blue

Resources, trays, drawers, are labelled with writing and graphics

Dyslexic pupils face the board and have a "classroom buddy"

Displays are uncluttered and at a height that can be accessed by pupils

Information displays use colour coding and are supported by graphics whenever possible

##### Resources

Coloured overlays are available

Worksheets are printed on coloured paper

Worksheets are clear and uncluttered and information chunked, eg. using text boxes

Desk top prompts are available (eg. spelling prompts; key words lists; sound mats; number bond strips)

Practical equipment is available (eg. tactile letters; beadstrings)

Reminder lists are supplied where a number of tasks or activities are involved

Visual or colour coded time-tables are supplied

ICT is available for some recording and reinforcement activities

Individual whiteboards or note pads available for jottings

Exercise books with coloured pages are available

Planning frames and scaffolded approaches are available for extended writing tasks

Suitable level reading books are readily available

Small personal self advocacy cards available (eg. small credit card sized)

Dictaphones and/or digital voice recorders are available

There is a choice of handwriting tools (eg. pens with grips)

### **Lesson delivery**

Lessons begin and end with the "big picture", supported visually whenever possible (what we are doing, why and where it fits)

Copying from the Interactive Whiteboard is kept to a minimum

Different coloured pens are used to separate information

Printed information uses dyslexia friendly font, eg. Century Gothic, Comic Sans or Arial, size 12/14

Staff handwriting is clear and/or Interactive Whiteboard handwriting recognition tool is used

Some information is presented using mind maps or flowcharts

Spoken instructions are kept as short as possible and are supported by visual aids or pictures

Support staff are aware of pupils who may need reminders of instructions

Time reminders are used and supported by visuals (eg. sand-timers; time-line on the board)

Alternative Recording methods are encouraged across the curriculum and for homework tasks

Teaching and learning styles are varied (eg. auditory, visual, kinaesthetic) and include multi-sensory approaches when appropriate

Organisation of learning is varied, eg. pairs, groups, individual

Adequate time and support is given to record homework tasks

## **Ethos**

Positive marking is used

Specific praise is used

Rewards are given for effort and attitude, as well as attainment

## **Homework**

Homework is given and explained well before the end of a lesson

Individual printed instructions or prompts are made available

A starting point is given for the homework

A template or planning grid is given

Homework along with instructions and useful information is posted on the school intranet/Virtual Learning Environment

A glossary of key terms is made available

Homework is differentiated – taking into consideration reasonable adjustments (eg. alternative recording methods)