

Assessment and Support 1999 – 2000

A pack of CALL leaflets, including an updated version of the leaflet ‘CALL Assessment and Support Services’ was mailed out in May 1999. This leaflet explains the aims and procedures of the CALL assessment and support services. The leaflet pack was sent to all Scottish education authorities, Psychological Services, selected special schools and units, and other key contacts.

Assessment and Support Targets

The four broad targets for CALL assessment and support targets for the year 1999-2000 have all been met.

Targets	Met?
Continue assessment of small number of pupils (max. 1 per LA) under SEED core funding	✓
Continue and develop Service Level Agreements with local authorities, covering assessment of referred pupils	✓
Train new staff in carrying out assessments	✓
Collect more video material from assessment sessions	✓

Pattern of Referrals

CALL worked across a total of 17 different Scottish authorities in the course of assessment and support activities in 1999-2000.

It is difficult to perceive any clear pattern, other than individual pupil need. It is plainly *not* the case that only authorities with no specialist service locally refer to CALL. Pupils have been referred from all of the following:

- Authorities with no specialist service locally; authorities with a partial service locally; and authorities with highly effective specialist services locally.
- Authorities with large populations, and those with very small populations.
- Special schools & Units
- Mainstream schools

More details of the school settings of CALL assessment service users are provided in Table 6.

Referrals are co-ordinated by and channelled through Head Teachers, Educational Psychologists, SEN Advisers or Education Officers, but may have originated elsewhere. In 1999-2000, the original source of referrals included: Head/Assistant

Head Teachers; class teachers; SEN teachers; learning support teachers; specialist visual impairment teacher; specialist AAC and assistive technology services; speech and language therapists; physiotherapists; educational psychologists; parents.

Some local authorities want to refer more than one pupil to CALL in the year, whereas others do not refer any. Discrepancies between authorities may be accounted for by population size, and/or by familiarity (those who are aware of the procedure of referral and who have experience of the possible benefits of CALL assessments and support services are more likely to refer again). Those that do not refer may feel they have a satisfactory level of service provided locally, or perhaps they are not attracted by a limited service delivered on an outreach basis from far afield. Alternatively, they may be unaware of pupil needs or of the possibility of referral to CALL, the referral procedures, or the possible benefits of a CALL assessment.

Pupils can be referred to CALL for assessment under one of two schemes. Like the previous year, the CALL Work Plan for 1999-2000 set an assessment/support target of not less than 20 children, of which a maximum of ten (not more than one per authority) would be from authorities with whom CALL does not currently have a Service Level Agreement (SLA).

Assessments under SEED Core Funding

This service is funded from the core funding grant made to CALL by the Scottish Executive. The aim of this arrangement is equity – a basic level of service is assured across Scotland, so that a pupil anywhere can be seen for assessment relatively quickly, when necessary, without bureaucratic complications.

In 1999-2000, CALL was contacted by nine different authorities and assessed ten pupils on this basis (and provided additional advice or support to a number of pupils previously assessed/known by CALL). However, CALL does not have the resources of staff time to see many pupils like this on an open-ended, ‘first come, first serve’ basis. In the CALL leaflet pack circulated in May 1999, all authorities were made aware that if they required a more extensive or a more integrated assessment service from CALL, they should explore the possibility of taking up a Service Level Agreement (SLA). As soon as a child is referred – and especially if more than one child is referred from any one authority – the authority is alerted to the idea that they might consider an SLA with CALL.

Service Level Agreements

It is explained to education departments that a service level agreement may be the best way forward if they wish to be able to: refer several pupils for assessment; tie in assessment with in-service training for their staff; have more control over planning and organising how CALL assessment and support services are delivered; involve their own staff in ongoing teamwork with CALL; ensure continuity over a period of time.

In 1999-2000, CALL renewed service level agreements with Dumfries and Galloway, the Highland Council, and Shetland Islands Council. New agreements were negotiated with Clackmannanshire, Orkney Islands, and Stirling.

Discussions have also taken place during the year with other authorities about possible future SLAs. The usual minimum contract is for 6 days, although special circumstances can be discussed and alternative arrangements negotiated, on occasion.

In 1999-2000, the cost to an authority for an SLA was £220 per CALL person day, plus VAT (normally reclaimable by authorities) and plus travel and other expenses. This cost was held down at the same level as the previous year, and compares extremely favourably with other comparable specialist services. SLA purchasers also receive considerable 'added value' from all the products of other CALL activities, for example, CALL information & training services, loans & technical services, and research & development work, funded by SEED's core funding grant to CALL.

Additionally, but along slightly different lines, CALL service level agreements were negotiated with the University of Edinburgh Disability Service, with Smile Rehab (supplier of the CALL Smart Wheelchair), and with three individual schools. SLAs with individual schools are an experimental new development, for CALL. In one case, rather than assessment and support of individual pupils, the agreement was to cover services related specifically to use of the CALL Smart Wheelchair (see 'Loans and Technical Services' section, pages 28 – 31). In other cases, a 'whole school' model of assessment was followed (see 'Working with whole schools/units', opposite). Students of The University of Edinburgh seen for assessment/support were fewer than the previous year, by design; a strategic decision was taken to spend the limited time available to CALL on work at policy and planning level with the UofE Disability Committee & Technology Sub-Committees, rather than with individual students.

Additional Staff Resources

Increased demand for CALL assessment and support services through SLAs has generated increased income for the CALL Centre. This has been used to fund the employment of an additional full-time member of staff, (Sandra O'Neill, who started in October 1999) supplementing the CALL staff team members available to carry out assessment and support work.

Working with Parents

When a child is referred for assessment, CALL contacts the parents (enclosing the CALL leaflet 'Information for Parents and Families') to tell them when the assessment visit will take place in school. CALL invites parents to attend for part or all of that session. Most/many parents do attend, often at the end of the school day. CALL will visit pupils' homes on occasion, when required (for example, if families are unable to attend at the school, or if equipment needs to be set up or demonstrated in the home setting).

Working with Whole Schools/Units

In some cases, a number of pupils in the same school are felt to require assessment. Often it becomes clear that the whole school or special class or unit would benefit from an overall 'audit' of existing hardware and software, and a review of the use of technology, and/or low and high tech communication generally. This also involves identification of needs for new equipment and specification of such equipment, identification of staff training needs (and sometimes immediate delivery of training), as well as assessment of several individual pupils. In the figures in Table 3, below, only those named pupils who received more substantial input of CALL face to face and report writing time are counted as full assessments, although many others may have been seen and included in general recommendations. We have followed this model in three or four cases, always within the context of an SLA. In two cases, CALL was asked to provide input to schools following an HMI inspection.

Smart Wheelchair Assessments

CALL provides information, assessment and training, in Scotland for pupils, schools, and families who are considering buying CALL Smart Wheelchairs from the supplier Smile Rehab (who are based in the south of England).

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Assessment and Support Service Users

Tables 2 and 3, below, indicate the assessments carried out in 1999 – 2000: 65 overall (58 children, 7 students). Obviously, this greatly exceeds the target total of 20 children overall, and is significantly higher than last years figures (indicated in brackets on the Tables). The high number of assessments carried out was made possible mainly because of the extra CALL staff member joining the CALL assessment team and working in this area. (The target was set before the new member of staff joined CALL.) The trend certainly is towards greater numbers of referrals each year, and all referrals appear to be appropriate.

However, in general we prefer to maintain reasonably low targets, to allow for the possibility of providing more extensive input, if required, for some children with very complex support needs. Also to allow ‘room’ for change in the way work is carried out – e.g. development of different types of SLA and new models of assessment like the ‘whole school/unit’ model emerging in the course of this past year. It may be that numerical targets for pupils assessed will cease to be a very meaningful way of measuring CALL assessment and support work, as diverse types of SLAs and different models of assessment develop.

Type of Assessment	Target for Year	Actual Assessments Carried out	Funder
One - off SEED core funded assessments	10 minimum (10)	10 (10)	SEED
SLAs with authorities	10 minimum (10)	42 (25)	SEED + local authority Education Departments
Other SLAs	No target set	6 (n/a)	Individual Schools, Smile Rehab
Non school SLAs	No target set	7 (10)	The University of Edinburgh
SLA Subtotal	10 minimum (10)	55 (35)	SLAs
Totals:	20 (20)	65(45)	local authorities + others

Type of Assessment	Target for Year	Actual Assessments Carried out	Authority	Funder
SLAs with Local Authority Education Departments				
individuals		3	Clackmannan.	SEED + Clacks.
individuals + whole unit		16	Dumfries & Galloway	SEED + D&G
individuals		3	Highland Council	SEED + Highland Council
individuals		2	Orkney Islands	SEED + Orkney
individuals + whole unit		4	Shetland Islands	SEED + Shetland Is.
whole school		5 + 9	Stirling (2)	SEED + Stirling
SLAs with other bodies				
whole school		Children seen in 2000-01, not in 1999-00	School 1 a & b (Clackmannan.)	SEED + schools SLA
technical support Smart Wheelchair		Not applicable	School 2 (Capability)	SEED + school SLA
individuals		6	Smart Wheelchair (Glasgow, Highland, North Lanarkshire, Stirling)	Smile Rehab.
Sub total (school SLAs)	10 (10)	48 (10)		SEED + SLAs
Sub total (non school SLA)		7 (10)	The University of Edinburgh	The University of Edinburgh
Total All SLAs	10 (10)	55 (35)	Clients from 10 authorities	SEED + SLAs

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Children referred for CALL Assessment and Support Services

All of the children referred for CALL Centre assessment and support services are by definition, 'special' and cannot be easily categorised into groups. However it is possible to make a very basic analysis of age groups, type of difficulties, and educational placements.

The seven University of Edinburgh students are excluded from the analyses that follow.

Records of Needs

Most but not necessarily all of the pupils referred to CALL have Records of Needs or are in the process of having a Record drawn up. However it is not useful for us to make a breakdown of CALL assessment clients by Record of Needs since the fact that particular children do or do not have Records may reflect more the diversity of policy and practice in the Psychological Services of different authorities, rather than whether children have more, or less, severe disabilities.

Age Range

The age range of CALL Centre assessments covers from pre-school to school leaving age. (And of course, just to confuse CALL figures, some children make the transition from pre-school to school and from Primary to Secondary, in the course of the CALL Assessment year.)

Overall we assessed more younger children (37: 6 Preschool and 31 of Primary age) than Secondary age pupils (21) – a slight change from last year when older children were marginally in the majority. Nonetheless the 21 children of Secondary school age seen last year represents more Secondary assessments than in any previous year (16 in 1998-1999).

Severe Low Incidence Disabilities

As will be obvious from Table 4, below, most children assessed by CALL in 1999 – 2000 experienced multiple impairments. It is difficult to be totally cut and dried about these categorisations, but overall, only about 6 (10%) of the total number of assessment service users have only one single, 'main' area of difficulty (e.g. dyslexia, physical writing difficulties, or blindness). Amongst the remaining

52 (90%), some of the children had impairments that - although possibly covered by a single word diagnosis - have a severe impact upon just about every area of learning (e.g. dyspraxia). Others may have impairments that are individually less severe but which in combination add up to complex learning difficulties. Thus the majority of CALL assessment clients fall within the definition established in the Advisory Committee Report into the Education of Children with Severe Low Incidence Disabilities (Scottish Executive, 1999). (In the past, all of these have been characterised in CALL reporting as 'complex multiple disabilities'. In common with the Scottish Executive, and following Riddell, we now use the term *severe low incidence disabilities*.)

Types of Difficulty	Incidence among CALL Clients – Children (58)	
Communication difficulty	55	
<i>Severe - no speech or unintelligible speech and limited language</i>	51	
<i>Limited speech and/or disordered language</i>	4	
Physical disability	51	
<i>Mild / moderate (limited hand function)</i>	27	
<i>Severe (switch use, eye pointing)</i>	24	
Learning difficulties	49	
<i>Mild / moderate</i>	32	
<i>Severe / profound</i>	17	
Pre-literate / non-literate	38	
Physical writing difficulties / access to computer issues (in literate pupils)	15	
Specific learning difficulties / dyslexia	4	
Visual impairment (varying degrees)	26	
<i>Diagnosed impairment</i>	12	
<i>Query over vision / perception</i>	14	
Hearing impairment	1	
Total of types of impairments / difficulties	236	

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Complexity / Severity of Difficulties	CALL Clients (Children only)
Single disability / main area of difficulty	6
Severe low incidence disabilities	52
<i>Multiple disabilities: severe difficulties and / or complex combination of difficulties</i>	32
<i>Profound difficulties</i>	20
Total	58

School Settings and Special Educational Support Needs

As the Riddell Report emphasises, one of the key issues for children with severe low incidence special educational needs is their *support needs*, in the educational context, rather than any specific medical diagnosis. For this Report therefore, we have attempted to show a profile of the kind of support children referred to CALL are currently receiving in education, (Our records currently do not show the amount of therapy – a health service provision – children are receiving.)

In 1999-2000, the number of CALL assessment clients attending special schools or units (lightly shaded in grey on Table 6) was 41.5 (one child was in a split placement), outnumbering the number in mainstream placements (16.5). This is a changeover from earlier years, when mainstream children slightly predominated.

1999/ 2000 – Mainstream 16.5 / Special 41.5

1998/1999 – Mainstream 22 / Special 13

1997/1998 – Mainstream 14 / Special 13

We believe that there is no real significance to these figures. It just so happens that more children with more severe low incidence disabilities were referred to CALL in the course of 1999-2000, as compared with the two previous years.

Pre-school age children		6
Home base, with pre-school home visiting teacher service		<i>0.5 (split placement)</i>
Special education setting with or without PSHVT input		2 + 0.5 (split)
Local mainstream school nursery with or without PSHVT input, with extra auxiliary support		3
Other		–
Primary school age children		31
Special school		17
Special unit attached to local mainstream school		8
Mainstream School with support of auxiliary only		1
Mainstream School with support of auxiliary and SEN teacher		–
Mainstream School with support of SEN teacher only		1
Mainstream School with support of auxiliary and Learning Support input		3
Mainstream school with Learning Support input only		1
Other		–
Secondary School age children		21
Special school		8
Special unit attached to local mainstream school		6
Mainstream school with support of auxiliary only		–
Mainstream school with support of auxiliary & SEN teacher		2
Mainstream School with support of auxiliary and Learning Support input		2
Mainstream school with Learning Support input only		2
Other		1

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Evaluation and Feedback from Service Users

Once the whole process of assessing a child, report writing lending equipment where appropriate, and finalising recommendations is complete, CALL sends out evaluation forms asking about client satisfaction with the assessment process.

The following comments have been made about the CALL assessment and support service during the past year:

Many thanks for the report on the schools. It is a super and very helpful report.
(Head Teacher)

...we are still working on info from the report. I thought the expertise and advice invaluable and the suggestions made were relevant and helpful

(Head Teacher)

The assessment and advice were excellent - perceptive, relevant and up-to-date.
(Referrer)

CALL provided useful & appropriate advice to help us meet X's needs. We are very grateful for the personal touch as 'computer speak' can be so confusing over the phone!
(Deputy Head Teacher)

A great deal of time and effort was expended in trying to peel away the layers of difficulty in this case. The resulting report was informative, challenging and thought provoking. A change of practice was effected as a result of CALL's involvement.
(Development Officer, IT/SEN)

The staff from the CALL centre were keen to meet C's needs and were encouraging and helpful at all times.
(Class Teacher)

The follow-up advice was immediate and extremely helpful when I was experiencing difficulties with software.
(Parent)

I found the CALL centre staff were interested in our daughter and in working with us on her behalf.
(Parent)

An extremely useful service for children with a wide range of learning difficulties. I feel the aim should be to extend the service to many more pupils to enable more children to achieve their true potential.
(Parent)

