Additional Support Needs:

A Collective Resource for GME

With contributions from specialist teachers, allied health professionals and psychologists, drawn from direct field and research contexts.

Stòrlann Nàiseanta na Gàidhlig

The Scottish Government Riaghaltas na h-Alba

Royal College of Speech & Language Therapists

NHS Scotland

GL assessment the measure of potential

Education Scotland Foghlam Alba

The University of Edinburgh

Bòrd na Gàidhlig

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Foreword

Dòmhnall U. MacGilleMhoire

Stòrlann Ceannard

Ann an 2013, le maoin bho Riaghaltas na h-Alba, chuir Bòrd na Gàidhlig sgrùdadh air dòigh air Feumalachdan Taic a Bharrachd 's trèanadh luchd-obrach ann am Foghlam tro Mheadhan na Gàidhlig. Thug molaidhean an sgrùdaidh fiosrachadh do bhuidheann-obrach ioma-chuspair a chuireadh air bhonn gus amas air dòighean co-obrachail air leasachadh ghoireasan a mhaoineachadh; b' e an t-Àrd AHP Nàiseanta airson Clann agus Theaghlaichean a bha sa chathair. Bha mi a' riochdachadh Stòrlann, am buidheann nàiseanta airson leasachadh ghoireasan sa Ghàidhlig, air a' bhuidheann, agus ghabh Stòrlann os làimh uallach gus rianachd a dhèanamh air na leasachaidhean co-cheangailte a leanas a tha a' buntainn ri stiùireadh Feumalachdan Taic a Bharrachd ann am Foghlam tro Mheadhan na Gàidhlig:

- **co-labhairt mhòr a chur air dòigh ann an Oilthigh Dhùn Èideann san Ògmhios 2014 air stiùireadh Feumalachdan Taic a Bharrachd ann an co-theacsa dà-chànanach, le òraidean bho eòlaichean air a' chuspair**
- **ìomhaigh nàiseanta a' chuspair seo àrdachadh le bhith a' toirt seiseanan trèanaidh le eòlaichean do thidsearan aig co-labhairt nàiseanta bhliadhanail an Alltain san Dàmhair 2014**
- **toiseach tòiseachaidh air rannsachadh air leasachadh innealan measaidh ùra sa Ghàidhlig a chuideachadh, is pròiseact mòr a' leantainn an-dràsta**
- **pàipearan agus goireasan bho na h-iomairtean sin a chur ri chèile, gus an Goireas air-loidhne seo a dhèanamh do luchd-obrach sna dreuchdan a tha a' buntainn ri Feumalachdan Taic a Bharrachd ann am foghlam dà-chànanach.**

Tha an goireas air a dhealbh gus cothrom a thoirt gu furasta air fiosrachadh air-loidhne air co-theacsa a' phoileasaidh air a bheil solar foghlam dà-chànanach air a stèidheachadh; agus dòighean co-obrachail air feumalachdan an sgoileir a mheasadh, agus leasachadh ro-innleachdan leis an urrainn an tidsear an làimhseachadh. Tha aire shònraichte air an fhianais a tha a' sìor nochdadh a tha a' toirt mion-chunntas air buannachdan cognatach fòghlam dà-chànanach, agus air an fheum a tha ann air sreath de rannsachaidhean làidir agus iomairtean luachaidh air a' chuspair seo ann an Alba, anns am bi tar-iomradh air leasachaidhean ann am buidhnean cànain buntainneach. Leis a' chruth air-loidhne, faodar tuilleadh phàipearan, ghoireasan agus stuthan fiosrachaidh a chur ris mar a thèid rannsachadh agus luachadh air cleachdadh ann am foghlam a dhèanamh.

Tha liosta de bhuidhnean agus de dhaoine ri fhaighinn ann an earrann 'buidheachas' air leth. Ach bu toigh leam am prìomh àite aig Eàirdsidh MacLullich nach maireann a shònrachadh, ann an co-òrdanachadh agus dealbhadh an leabhair-làimhe agus ann an iomairt ASN san fharsaingeachd. Thairis air iomadh bliadhna, bha càirdeas dòigheil, blàth aig Stòrlann ri Eàirdsidh na dhreuchd mar chomhairleach air gnothaichean co-cheangailte ri feumalachdan taic a bharrachd – obair a rinn e le tuigse dhomhainn agus le dealas.

Do Stòrlann, tha an goireas seo na chiad fhoillseachadh a thèid ùrachadh agus a leasachadh san àm ri teachd mar a leudaicheas agus a leanas maoineachadh agus taic do raon ASN na Gàidhlig.

Foreword

Donald W Morrison

Stòrlann CEO

In 2013, an audit of Additional Support Needs and Staff training in Gaelic Medium Education was commissioned by Bòrd na Gàidhlig with funding support from Scottish Government. The recommendations of the audit informed the deliberations of a multi disciplinary working group set up to focus on collaborative approaches to resource development and chaired by the AHP National Lead for Children and Families. Stòrlann as the national body for resource development in Gaelic, through my representation on the group, assumed managerial responsibilities for the following interlinked developments concerned with the management of Additional Support Needs in Gaelic Medium Education:

- **organization of a major conference at Edinburgh University in June 2014 on the management of Additional Support Needs in a bilingual context with specialist speakers on this subject;**
- **raising the national profile of this topic through the provision of specialist training events for teachers at the national Alltan conference in October 2014;**
- **contributing to the initiation of research covering the development of new assessment tools in Gaelic language with a major project in process;**
- **collating papers and related resources, drawing on these initiatives, to form this online Resource for practitioners from the range of disciplines concerned with Additional Support Needs in bilingual education.**

The Resource is designed to provide easy access to online information about the policy context underpinning the provision of bilingual education together with collaborative approaches to the assessment of pupil need, and the development of teacher focused strategies to tackle these. Particular attention is focused on the cumulative evidence detailing the cognitive benefits of bilingual education and the need to develop a range of robust research and evaluative initiatives on this topic in Scotland incorporating active cross referencing to developments in other relevant language groups. The online format is designed to encourage the addition of further papers, resources and briefing materials as these become available through research and the evaluation of educational practice.

A listing of organisations and persons is provided in a separate acknowledgements section. However, I wish to highlight the central role that the late Archie MacLullich played in the co-ordination and design of this resource and the wider ASN initiative. Over many years, Stòrlann enjoyed a long-standing relationship with Archie in his role as advisor and consultant on matters relating to additional support needs - a work that was delivered with enthusiasm and deep insight.

For Stòrlann, this resource represents a first edition that is designed to be updated and added to in the future as the work of resourcing and supporting the Gaelic ASN sector expands and continues.

Introduction

Archie MacCullich

This online resource has been derived from the recommendations made within the recent audit (http://www.gaidhlig.org.uk/bord/en/our-work/gaelic-education/additional-support-needs/) on this topic, initiated by Bòrd Na Gàidhlig in 2013. The audit showed that 15% of the sample of 1,673 pupils within Gaelic Medium Education had an Additional Support Need; the profile of the distribution of such needs in the sample was similar to the profiles produced by Scottish Government and other related surveys.

In the recent document "Advice on Gaelic Education" (http://www.educationscotland.gov.uk/resources/a/advicegaeliceducation.asp), reference is made to the legislative imperatives which place duties on local authorities and other agencies to provide additional support to all children. The document states: "An area of specific need identified for Gaelic Medium Education is assistance for children and young people who need additional support with their learning". The nature of such assistance has several interlinked elements:

- assessment tools to define the nature of the additional support needs;

- resources such as differentiated materials for focused intervention;

- staff training to enhance skills in supporting pupils in this bilingual context.

The Resource can be regarded as the proceedings of the seminar (http://www.storlann.co.uk/asn-slt/), held at Edinburgh University in June 2014, on the assessment and management of Additional Support Needs in Gaelic Medium Education. The seminar was attended by psychologists, education and allied health professional staff involved in the management of such needs and also representatives from the research and teaching communities in colleges and universities. The resource has been designed to reflect the interests of these various groups and the online chapters are cross referenced, where appropriate, to the recorded talks given at that seminar.

The primary focus of the resource is on the development of assessment tools and methods – across disciplines and professions – which take account of the distinctive nature of the Gaelic Medium Education context described in the above advice note from Education Scotland.

The contents include contributions from specialist teachers, allied health professionals and psychologists, drawn from direct field and research contexts. The need for collaborative approaches to the assessment of Additional Support Needs is a recurring theme across these chapters and this orientation was also strongly represented in the seminar presentations. A further theme suggests that processes underpinning such assessment should be carefully matched and reconciled against the primary focus of the Curriculum for Excellence, with its emphasis on "assessment for learning", in order to inform the next steps in the progress of pupils.

The sustainable change model required to improve the range of resources for the assessment of Additional Support Needs in this context is similar to that proposed by Hayward et al 2010[1]. The model suggests a comprehensive overview, characterized by "educational, personal, professional and systemic integrity", which places the relationship between the class teacher and the pupil at the centre. Further, a commitment to inclusive approaches to education is emphasized, with a particular focus

on the use of social moderation mechanisms for the assessment of all pupils and their individual needs and also for the development of staff skills.

The Resource is a first step in an ongoing process of bringing together theoretical and applied considerations in tackling a resource inequity in the assessment of pupils in Gaelic Medium Education.

The final chapters cover considerations of context and policy: account is taken of changes which have developed within statutory authorities in recent years. In addition, in the concluding three chapters, research options to guide action to tackle such inequity are considered, together with notes on some current development of resources to support teaching and learning in this context.

1 Hayward, L., and Spencer, E. (2010) The complexities of change: formative assessment in Scotland. Curriculum Journal, 21(2), pp. 161-177. (doi:10.1080/09585176.2010.480827

1 Assessing spoken language development in Gaelic Medium Education

Morag L. Donaldson

The central role of spoken language development

Children's ability to produce and comprehend spoken language plays a central role both in the development of their social skills and in their educational achievement. Language serves many functions. It is a communication tool that can be used for a wide variety of social purposes, such as attracting and directing other people's attention, influencing their behaviour, justifying one's own actions, expressing emotions, negotiating, arguing and coordinating joint activities. Language use and understanding therefore contributes to the development and maintenance of social relationships, for example with family members, peers and teachers. Language is also a powerful cognitive tool that contributes to children's ability to learn, think, reason and solve problems.

In educational settings, the communicative and cognitive functions of language are often closely intertwined. Much of children's learning in all areas of the curriculum involves listening to and understanding what their teacher and classmates are saying, as well as making their own contributions to classroom interactions. This is especially so in the early years of education, when children's literacy skills are limited. In other words, children's spoken (or oral) language skills are important in accessing all areas of the curriculum, as well as being a curricular area in their own right. Furthermore, spoken language provides one of the main ways through which children can demonstrate to their teachers the extent and limits of their knowledge and understanding. Oral language skills also provide a foundation for the development of reading and writing skills.

Children with language impairment

While the vast majority of children develop spoken language abilities remarkably rapidly and without explicit tuition, some children have difficulties with spoken language development. Given the centrality of spoken language skills, difficulties in this area typically give rise to additional support needs (ASN), and may also interact with other types of ASN. Spoken language difficulties are sometimes associated with other, more global, difficulties such as general learning difficulties, hearing impairment or autistic spectrum disorders. In other cases, spoken language difficulties can be attributed to obvious biological causes (e.g., brain injury) or to severe environmental deprivation (e.g., very limited exposure to language). In yet other cases, though, children have spoken language difficulties that cannot readily be attributed to more global developmental difficulties or to other obvious causes. The terms "specific language impairment (SLI)" or "primary language impairment" are often used to refer to language difficulties that lack an obvious explanation, whereas "secondary language impairment" is used when there is a clearer or more general explanation. There is, though, a considerable amount of variation and inconsistency in terminology (see Bishop, 2014). For example, "language impairment" may be used either to cover both primary and secondary language impairment or to refer just to primary/specific language impairment. The term "speech,

language and communication needs (SLCN)" is being used increasingly in educational contexts and usually applies to all types of spoken language difficulties. In this chapter, "language impairment (LI)" will be used to refer to both primary and secondary language difficulties, but the main focus will be on the former.

Children with LI vary considerably in the types of language difficulties they have. While some of them have difficulties that are mainly expressive (i.e., difficulties producing language when they are in the role of speaker), others also have receptive difficulties (i.e., difficulties comprehending language when they are in the role of listener), and this is usually indicative of a more severe form of LI. Children with LI are particularly likely to have difficulties with grammatical structure, but they may also have vocabulary difficulties and/or pragmatic difficulties (i.e., difficulties in using language appropriately to serve communicative purposes, e.g. to ask for help or to explain their behaviour).

Why is it important to assess spoken language development?

There are a variety of reasons for assessing children's spoken language development. In relation to ASN, an important function of language assessments is to identify children with LI. An equally important function is to clarify what type of additional support is likely to be beneficial, by profiling individual children's strengths and weaknesses across different aspects of linguistic ability, and by investigating how their linguistic abilities relate to other aspects of their abilities. Once additional support is being provided, further assessment is needed in order to monitor children's progress and to adjust the support accordingly. Of course, this cyclical process of using assessment to set learning goals, to design learning activities and resources, to monitor progress and to refine learning goals is not specific to children with ASN. This "assessment for learning" approach is relevant for all children and is embedded within the Curriculum for Excellence framework as a key aspect of inclusive practice (Curriculum Review Group, 2004).

Identifying language impairment in bilingual children

While bilingual children are not at increased risk of having LI, they are as much at risk of LI as monolingual children are (see Letts, 2013). Therefore, it is important to find ways of assessing bilingual children's spoken language development that enable children with LI to be identified accurately.

It is useful to distinguish between language learning ability (i.e., a child's ability to learn language when given "typical" opportunities) and language proficiency (i.e., a child's skills in a particular language at a particular point in time). The language proficiency of bilingual children in each of their languages considered separately is influenced not only by their language learning ability but also by the amount of exposure they have had to that language, especially during the early stages of acquiring that language (see Gathercole et al., 2013). Therefore, if a bilingual child shows a low level of language proficiency, this does not necessarily indicate that they have LI, but may instead indicate that they have not yet had sufficient experience of one (or both) of their languages.

Children with LI are, by definition, impaired in their ability to learn language, in that they have linguistic difficulties despite having had typical learning opportunities, including adequate exposure to language. It follows that if a bilingual child has LI, this will affect both their languages. Research evidence suggests that this is indeed the case, although the specific nature of the difficulties sometimes differs between languages (Bedore and Peña, 2008). This means that if a bilingual child shows "normal" language proficiency in either one of their languages, then language impairment can usually be ruled out.

Language assessment in Gaelic Medium Education: challenges and opportunities

Assessing typical and atypical spoken language development in a Gaelic Medium Education (GME) context is challenging in five main respects. Not surprisingly, these challenges are specific versions of challenges that have been identified in relation to bilingual education more generally (see, for example, Letts, 2013).

First, there are virtually no standardised tests for assessing Gaelic spoken language development. This is problematic because standardised tests play a key role in the identification of children with LI by making it possible to compare an individual child's performance to typical levels of performance (i.e., norms) for their age group.

Second, there is very little research documenting the typical course of Gaelic oral language development. Therefore, knowledge is lacking about which aspects of Gaelic children are likely to find most challenging and about how long it will usually take for particular errors or difficulties to resolve in typical language development.

Third, children in GME vary considerably in the nature and extent of their experience of Gaelic outwith the school setting, both before and after they start school. This means that it is not straightforward to establish typical levels of Gaelic language development for children at particular ages, which could then serve as a comparison point for identifying children with ASN.

Fourth, caution is required when interpreting the performance of GME children on

standardised tests of English language development, since there are no norms for the performance of Gaelic-English bilingual children on these tests. The norms for English language tests are usually based on the performance of monolingual English speakers. However, bilingual children's development in a given language sometimes differs from that of monolingual children. Furthermore, bilingual children's development is influenced by such factors as the amount, context and timing of exposure to their two languages and the linguistic characteristics of the two languages. While there are a few tests of English language development that include bilingual norms, these usually do not distinguish between different types of bilingual context and they apply either to bilingual acquisition in general or to specific pairs of languages (not including Gaelic). See Gathercole et al. (2013) for further discussion of these points.

Fifth, many of the specialist professionals, such as speech and language therapists and educational psychologists, with whom GME teachers need to collaborate in assessing and supporting children with ASN are not Gaelic speakers. Collaboration amongst professionals with different types of expertise is generally agreed to be crucial in meeting children's additional support needs (Reid et al., 1996; Cairns, this volume).

There is, though, much that can be done, both in the short-term, to find ways of assessing the spoken language development of children in GME despite these challenges, and in the longer-term, to address and reduce these challenges. Parents, teachers, other professionals in GME and academic researchers all have key roles to play in collaborating to find both short-term and longer-term solutions, as will be argued in the remainder of this chapter.

In some respects, language assessment is likely to be less challenging in GME than it is in many other bilingual/multilingual situations. All the children in a GME classroom are learning the same two languages, Gaelic and English, although a few of them may also be learning other languages as well. All GME teachers speak both the languages that their pupils are learning (i.e., Gaelic and English), although they vary in their degree of Gaelic proficiency and in whether they learned Gaelic as a first or second language. Furthermore, the parents of children in GME have deliberately chosen this type of educational context for their children, rather than it perhaps being an unintended consequence of other circumstances.

Can standardised tests of English spoken language development be used to assess whether children in GME have language impairment?

It is generally agreed that, ideally, bilingual children's abilities should be assessed in both their languages, but if this is not possible, then they should be assessed in their dominant language. For most children in GME, the dominant language will be English. Thus, for these children, standardised language tests in English may be useful as part of the process of establishing whether or not they have LI. As noted earlier, if a bilingual child has LI, then both their languages will be affected. Therefore, even for children whose dominant language is Gaelic or for whom neither language is clearly dominant, assessment with standardised tests in English may serve to rule out LI if their performance turns out to be age-appropriate. On the other hand, if children in GME perform on these tests at a level that would be indicative of LI for children who

are monolingual English speakers, then there is a need for caution in interpreting their results, due to the lack of norms for children with similar language backgrounds. The need for caution is likely to be greatest for children whose language experience at home is predominantly in Gaelic rather than English.

Combining evidence from standardised tests with evidence from other forms of assessment

Even in situations where standardised tests and norms are available, they are not usually relied on as the sole method for identifying children with LI. Speech and language therapists also take account of functional criteria, that is whether the child's linguistic difficulties are having a significant negative impact on their ability to communicate and function effectively in everyday contexts, such as their homes and classrooms. In order to make this more rounded assessment, evidence from standardised tests needs to be combined with other types of evidence, for example from observations of children's spontaneous use of language in everyday contexts, from parents' reports on their children's language skills and from structured tasks designed to probe particular aspects of children's production and/or comprehension. Structured tasks designed to investigate in more detail the nature of an individual child's strengths and weaknesses are particularly useful when the purpose of assessment is to plan goals and activities for teaching or intervention and to monitor progress. This applies not only to children with ASN but to all children. When profiling the strengths and weaknesses of children in GME, both Gaelic and English should be assessed in order to give a more complete picture of their language and communication abilities.

Although standardised tests of children's spoken language development in Gaelic are

not currently available, there is considerable scope for developing and deploying some of the other forms of assessment that are usually used to complement standardised tests. Indeed, it is likely that many GME teachers are already carrying out some of these types of assessment informally as a means of testing their hypotheses about what individual children have achieved or are finding difficult, so that they can plan their teaching accordingly. Also, some of the classroom activities and materials used to develop children's Gaelic language skills could potentially be adapted to serve as assessment tools.

Translating and adapting assessment tools from English

It may sometimes be feasible to translate and adapt English assessment tools for use as Gaelic assessment tools. Possible sources of such tools include tasks used in research studies on typical and atypical language development, as well as standardised and non-standardised tests used by teachers, educational psychologists and speech and language therapists. This can facilitate comparisons between the children's Gaelic and English proficiency. However, it is not always straightforward to translate or adapt assessment tools for use in a different language. For example, even for an apparently simple task such as the British Picture Vocabulary Scale (BPVS; Dunn et al., 2009), where vocabulary comprehension is assessed by asking the child to choose a picture to match a spoken word, there may be words that do not have a single or direct translation equivalent in Gaelic. It is even more challenging to adapt tests of grammatical abilities, since there are fundamental differences between the grammatical structure of Gaelic and English. A more promising approach would probably be to borrow some of the task formats that have been developed for English tests (e.g. answering questions about picture sequences, completing sentences, choosing pictures to match sentences, acting out sentences using toys), but to develop new items relevant to key features of Gaelic grammar rather than translating items from English. The New Reynell Developmental Language Scales (NRDLS; Edwards, Letts and Sinka, 2011) includes a multilingual toolkit which provides guidance on adapting this test for use in languages other than English (Letts and Sinka, 2011).

Deciding which aspects of language proficiency to assess

Since there is variation in the types of difficulties that affect children with LI, it is important to assess grammatical abilities, vocabulary abilities and the ability to handle language appropriately in relation to particular communicative purposes and discourse contexts. Both production and comprehension skills should be assessed for each of these aspects of language ability, in as far as this possible given the child's level of language development. For example, at early stages of language development, assessment of production skills will need to focus mainly on vocabulary since children will be producing only single words rather than sentences, but it may nevertheless be possible to assess some aspects of grammatical ability using sentence comprehension tasks.

In developing assessment tools for Gaelic, more specific decisions also need to be taken about what to assess – for example, which particular vocabulary items and grammatical

constructions. These decisions could be guided by a number of considerations. If the purpose of a vocabulary assessment is to monitor progress and set learning goals, then the words selected should include ones that have been taught or used in class and ones that are likely to be relevant to lessons being planned for the near future. If a standardised English test (e.g., BPVS) is being used as the basis for a Gaelic assessment, then a useful initial step would be to ask children who have had a high level of exposure to Gaelic and whose language learning abilities are not causing concern to name the pictures in Gaelic. These Gaelic words could then be used to assess vocabulary comprehension in a broader range of children. Assessments of grammatical abilities often focus on aspects of the grammar of a particular language that appear to be challenging, on the grounds that these aspects are likely to be especially susceptible to impairment. Although systematic evidence is lacking about which aspects of Gaelic grammar are the most challenging, some clues can be gleaned from observing the types of errors that children of different ages tend to make when speaking Gaelic and also from the intuitions of adult Gaelic speakers (both fluent speakers and learners).

Assessing language learning ability

As noted previously, if a bilingual child shows a low level of language proficiency, this might indicate either that they have LI or that they have not yet had sufficient experience of one (or both) of their languages. One approach that can help to tease out these two possibilities is to make use of tasks that are designed to assess children's ability to learn language, rather than focusing primarily on the products of language learning. For example, to complement tests like the BPVS that assess whether children have particular words in their vocabulary, children's ability to learn new words can be assessed by introducing them to unfamiliar words in different learning contexts and tracking what they learn about the words over a period of time. In a study using this approach, Nash and Donaldson (2005) found that children with LI learned less than typically developing children about the meaning and pronunciation of new words, both when the words were presented in the context of a story (illustrated with pictures) and when the researcher explicitly taught the child about the words' meanings in the context of a game. Furthermore, the poorer word-learning performance of the LI children was evident not only after six presentations of the new words but even after twelve presentations. The rationale for using word-learning tasks of this sort is that it helps to control for possible differences in children's linguistic experience by giving them all the same amount of exposure to novel words in an experimental context. Such tasks are therefore potentially very useful as assessment tools in GME, where children vary considerably in their language backgrounds and hence in opportunities to learn particular vocabulary items.

Similarly, within a dynamic assessment framework, children's language learning ability can be assessed by investigating how they respond to varying levels of prompting and feedback. There is increasing evidence that dynamic assessment is a useful complement to more conventional forms of "static" assessment in distinguishing between bilingual children with LI and those whose performance is being temporarily affected by limited exposure to a particular language (e.g., Camilleri and Botting, 2013; Hasson et al., 2013). This evidence suggests that a higher level of prompting and feedback is required to support language learning in bilingual children with LI than in those who may just have had limited experience of a particular language.

Making comparisons between children that take account of their language backgrounds

Standardised language tests have been developed recently for Welsh-English bilingual children. Since the norms for these tests take children's home language background into account, children can be given a score based on comparing their performance to other children whose linguistic experience is similar to theirs in terms of relative exposure to Welsh and English (Gathercole at al., 2013). It is not currently possible to apply an equivalent approach when assessing Gaelic-English bilingual children (because of the lack of standardised Gaelic tests and norms). Nevertheless, the principles underlying this approach could be applied in a smaller-scale and more informal way.

If information can be collected from parents about children's experience of Gaelic and English, then individual children's performance on linguistic assessments can be compared to the performance of other children of the same age who are similar in terms of relative exposure to Gaelic and English. This would be particularly useful when interpreting the results of assessments of Gaelic abilities, due to the lack of standardised tests. However, even when a child whose dominant language is English is being assessed using standardised English tests because of concerns about possible LI, it would be beneficial to compare performance not only to the monolingual norms associated with the test but also to the performance of GME classmates from a similar language background whose language abilities are not giving cause for concern. In other cases, it may be informative to compare children for whom LI is suspected to children with similar language backgrounds and similar levels of performance on language assessments but who are younger, since this could give an indication of the extent of delayed language development. Of course, such comparisons need to be interpreted cautiously since children also differ from one another in many other ways.

In collecting information about children's experiences of Gaelic and English, it is likely to be useful to ask questions about such issues as:

- **the age at which the child started speaking each language**
- **which languages are spoken at home, by whom and in what proportions**
- **the nature and extent of the child's experience of each language in other contexts (e.g., nursery/playgroup)**
- **which language (if any) the child tends to speak most and whether/how this varies across contexts.**

Responses to some of these questions may well change as children get older, so it would be advisable to up-date this information periodically.

Future directions

An important next step to improve the assessment of spoken language abilities in GME would be to facilitate the sharing of expertise and resources amongst professionals. This could include providing opportunities for GME teachers to exchange ideas about ways of integrating language assessment with teaching activities. Information could also be

shared about how children of different ages and with different types of Gaelic-English experience perform on various linguistic assessments. Collaboration amongst different professional groups is always fundamental to meeting children's additional support needs effectively. In GME, strong inter-professional collaboration becomes even more crucial when, as is frequently the case, some of the key professionals are not Gaelic speakers. Gaelic expertise then becomes one of the forms of expertise that needs to be shared.

In the longer term, it would be beneficial to develop standardised tests of spoken Gaelic development and norms for Gaelic-English bilinguals. It is equally important, though, to build up a repertoire of other types of Gaelic language assessment tools and to conduct basic research on the trajectory of Gaelic language development for children with different language backgrounds. This would require significant funding, as well as collaboration between researchers and practitioners. Parents, teachers and other professionals working in GME are in a strong position to contribute to the development of Gaelic language assessment tools, for example by sharing their knowledge and experience about what is typical, what is challenging and what is important regarding children's Gaelic language development in the context of Gaelic Medium Education.

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2 Precision teaching

Dr Callum Urquhart

Supporting all children, not just those with Additional Support Needs, requires a balance of teaching that affords opportunities for new learning and the consolidation of knowledge and skills already acquired. The particular challenge faced by those wishing to support children with ASN is identifying the precise point at which a child has mastered a certain concept or skill and can be moved on to the next proximal goal; if a child is moved on too soon they won't retain the taught concept, too late and they will have lost additional ground closing the gap between themselves and their peers. The purpose of this chapter is to elaborate on a technique know as Precision Teaching that provides a basis of making the decision about when to introduce new concepts or skills in an evidence-based way.

Precision Teaching is a somewhat misleading term, as it does not describe a teaching approach as such, but rather a way of identifying the types of teaching techniques that are most suited to a particular learner. As such Precision Teaching provides a complimentary approach to those described elsewhere in this book.

When considering how a learner's competence on a specific topic can be described, two terms help to illuminate the contribution Precision Teaching makes. The first, accuracy, will be familiar to all as it has traditionally been used to identify a child's progress. For example a child can be said to have made progress if they can accurately read 30 of the first hundred high frequency words when before they could only read 15. The second term, fluency, may be less familiar and is used to indicate the degree to which the learner is using a cognitively efficient strategy when encountering a stimulus. For example a child who uses an orthographic strategy to read (i.e. "whole word sight reading") has a more cognitively efficient method of reading than a child who has to decode each phoneme within a word and then successful blend them. This more cognitively efficient strategy would allow a child to read the first 30 of the hundred high frequency words more quickly than a child who may use a segment and blend approach to accurately read the same 30 words (it is important to note that fluent readers will also make use of the phonetic approach when encountering unfamiliar words). Once a child becomes fluent in a technique or skill they have a greater ability to divert their attention and processing to other aspects of a task. Box 1 provides an example from casework that illustrates the impact fluency has in the classroom.

Fluency in the classroom.

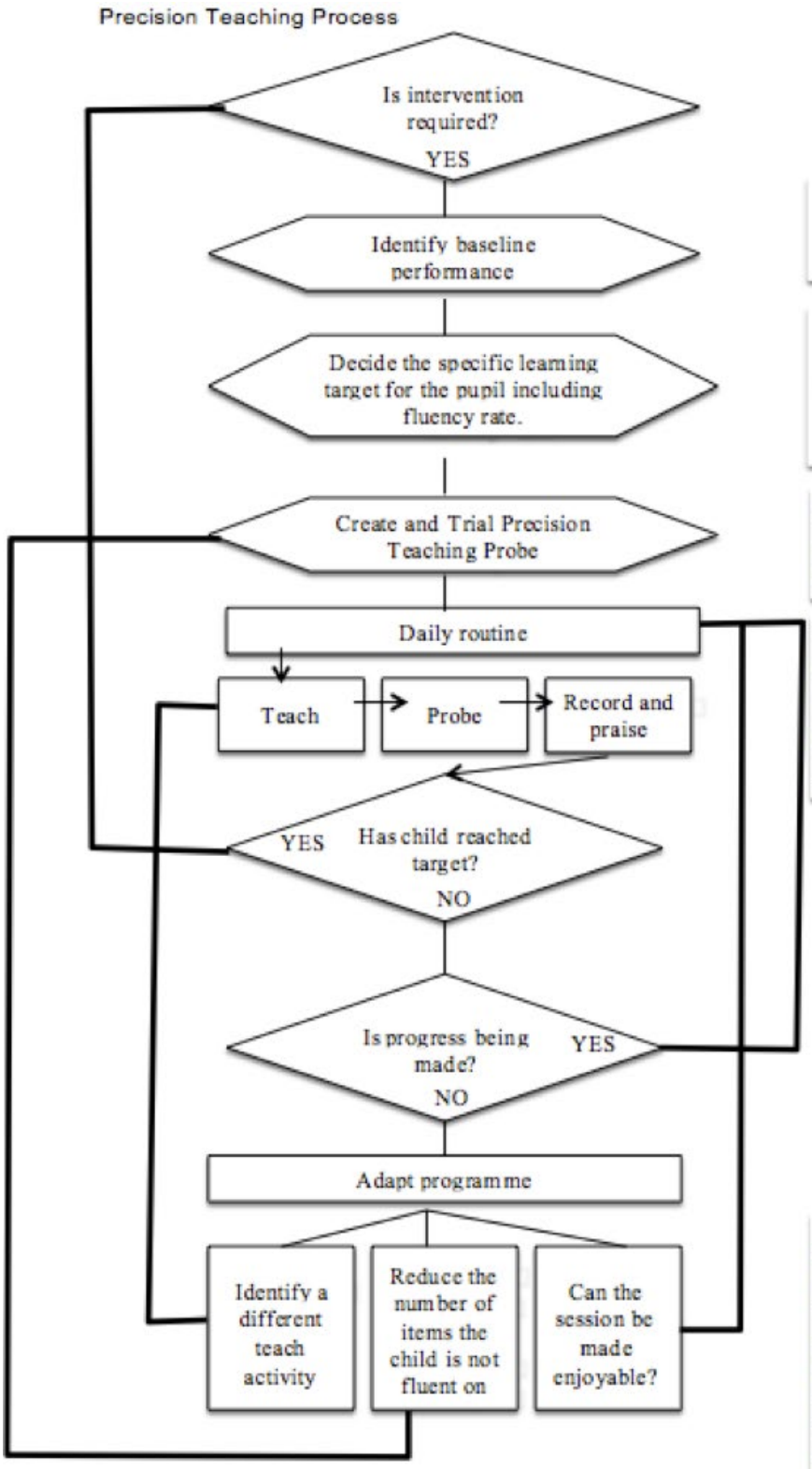
Ms Wallace contacted me to express some concern about a pupil in her P3 class who could not retain ideas for more than a minute. Ms Wallace felt that the difficulty was not in helping the pupil to acquire new skills and techniques, as the pupil was able to demonstrate their competency with talking partners, on their whiteboard and through different forms of whole class questioning, but in retaining this skill long enough for them to apply it independently in their workbooks. My own classroom observation was consistent with Ms Wallace's description however the challenge appeared to be with fluency rather than memory. In one specific observation the children in class had been exploring ways to set out multiplication calculations and the pupil in question had shown herself to be capable of this with a little support. However during the independent exercise she was unable to set out the calculation as she had done only minutes before. However when the specific task was analysed (word problems involving multiplications) it was clear that the pupil was not yet fluent in a number of component skills (her 4 times table, the different words used to signal a multiplication was required, how to set out the calculation) despite the fact she was able to perform each of them accurately in isolation. When I set out a few different tasks that only required one of the component skills the pupil was able to show that she did indeed manage to retain the ideas and concepts but that when they were all combined she did not have the cognitively capacity to process all of the requirements she was not yet familiar with. This difficulty in processing multiple novel demands is not a specific challenge for this pupil but one that we all face. Think of the first time you had to drive on the other side of the road in a foreign country and the stress that this involved!

While both fluency and accuracy are important in understanding the potential contribution Precision teaching can make, it is also important to discuss the concept of self-efficacy and how this can also impact on a child in the classroom. Bandura (1982) defined self-efficacy as an individuals self-judgement about their ability to perform a task within a specific domain. The link to Precision Teaching is that in addition to promoting fluency and accuracy, it is also a technique that can be used to support those children who feel that they aren't capable of certain academic tasks and therefore don't try or use a diversionary behaviour to avoid failure. When we explore some of the determinants of a child's self-efficacy for, let's say, writing a sentence Bandura (1997) would identify a child's previous experience of writing sentences, what they have observed from their peers and the verbal feedback they have had as being particularly influential. If we consider that some children may have had a history of failing to succeed on tasks that are not yet fluent on and may therefore have been paired or grouped with children who have experienced similar difficulties and may have been party to language that reinforces their emerging belief they can't write well it is easy to see how we may have individuals who we know are capable of achieving well but don't seem 'motivated' to make a start on their work. The 'slow to start' children are also a group who are often attributed to having difficulties with attention or motivation but are often simply avoiding opportunities to

reinforce the negative self-judgements they have. Precision Teaching's process and daily routines systematically tackle the sources of negative self-efficacy for academic tasks and should be considered even in those case where a child has shown they are fluent on a certain task yet remain reluctant to start their work.

In this section we have explored three key concepts that should help practitioners identify children who may benefit from precision teaching. The first, accuracy, is usually the easiest to ascertain and therefore has long been the focus of educators and those working within the field of additional support needs. Fluency has received less attention given that it is less amendable to measurement and also because difficulties in this area are often attributed to issues with memory or retention. This attribution is true only to the extent that all brains experience a difficulty in processing ideas or tasks that require a significant degree of cognitive effort (i.e. are not yet fluent). The final concept of self-efficacy is also important when considering which children may benefit from Precision Teaching as it can also manifests itself in ways that don't immediately signify and academic intervention is required (i.e. challenges with attention or concentration are often medicated and behavioural avoidance is often seen as a social skill deficit).

Precision Teaching has a highly structured process that helps to identify progress, target intervention and support practitioners in identifying the specific pedagogical approaches the child benefits from the most. The following section outlines each step of the process illustrated in Figure 1.



The baseline should be relevant to the Child's Plan and should be timed

This should be expressed as number of correct and incorrect trails within a specified period (i.e. number of words correctly identified in a minute)

The majority of items within the probe should be ones the pupil is already fluent with

The focus of the daily routine should be fun and enjoyment. This is the primary aim. The secondary aim is to teach the skill or concept in a way that is useful for the young person.

The learner is always right! If a child is not making progress then usually adapting the teaching activity will help. A significant advantage of Precision Teaching is that it is not prescriptive about the types of technique used to teach- anything goes as long at the child is enjoying it and it is impacting on their fluency and accuracy.

Is intervention required?

The introductory section for this chapter will have provided the reader with some guidance around the types of challenge that Precision Teaching is well suited to deal with. However it is important to note that the successful characteristics of intervention include more than an alignment of intervention tool with assessed need and include parental/carer investment and confidence in the intervention, a shared understanding of what the need is and how the intervention would support it, enthusiastic staff who can develop a relationship with the child and so on. The framework for developing this in Scotland is Getting It Right For Every Child (GIRFEC) and it would be important to ensure that the decision to intervene using Precision Teaching occurs within the local guidance and practice in relation to this national policy.

Identify baseline performance

Depending on the area for intervention a suitable baseline should be derived that can help those supporting the child to make judgements about the success or otherwise of the Precision Teaching intervention. If for example the general area of intervention is addition and through assessment it has been shown that the next stage of development for the young person is number bonds to twenty (7 + 2 =?, 11+ 4 =?, 13 + 7 =?, 6 + 8 = ?) they should be given the opportunity to complete as many random number bonds to twenty as they can in a specified time. In all baseline assessments it would be important to record at least three items of information; how many they get correct, how many they get incorrect and the total time taken. By noting the items that the child already appears fluent on during the initial assessment you can incorporate some of these into the design of the initial Probe to ensure the child experiences success from the first time they encounter Precision Teaching (discussed below).

This baseline data can be used within the Child's Plan to show the starting point of the child and the same materials can be used to generate an outcome measurement when the Child's Plan is reviewed.

Decide the specific learning target for the pupil.

The specific target for intervention using Precision Teaching is likely to be a smaller subset of the original baseline measure given the relatively short durations between reviews. If we continue with the previous example and we find that in 5 minutes the child identified 26 number bonds correctly and made 20 mistakes we can begin to think about setting a target that encompasses fluency as well as accuracy. Given that the child is correct in just over half the trails I would be confident that we are focussing on the right area. If the child had only correctly identified 2 or 3 number bonds and was incorrect in 40 other's I might want to target number bonds to 5 or 10 first. When I do an error analysis of the original baseline assessment I may notice a pattern. It may be that the child made most errors when a double-digit number was part of the bond or when two single digits added together totalled more than ten. This type of error analysis is useful as it informs the type of target set. If we say the most errors occurred when a single digit was added to a double digit then our target may read as follows:

The pupil will correctly identify (?) number bonds to twenty that include double digit numbers in a minute with (?) errors.

By following this process we are able to specify very clearly what we are aiming to do, making it measurable and linked to our assessment of what the precise area of need appears to be. However we still have some unknown information within the target relating to fluency and accuracy. How can we meaningfully determine the unknowns without having to pick a target arbitrarily? The aim of Precision Teaching is to develop fluency and so in determining what fluent performance looks like targets should be linked to what a fluent person can perform. Developing the example we have thus far the unknowns in the target about could be determined by presenting a skilled peer or adult with number bonds to twenty that involve a double digit number and record how many they get correct and incorrect in a minute. This should be your aim rate as it shows what fluent performance looks like. The target can then be amended to include this information:

The pupil will correctly identify 40 number bonds to twenty that include double-digit numbers in a minute with 0 errors.

Create and Trail a Precision Teaching Probe

Once you have a clear target in mind you can develop a probe that will be used as part of the 'Daily Routine' (described below). The probe is a stimulus that the pupil's timed performance will be based on. There are a few important considerations when creating the Probe and it is important to test out the Probe before using it as part of the daily routine. The first consideration is how many unique items will make up the probe. If we return to the example above we can see that the pupil attempted 46 items in five minutes. This suggests that a lot of time was spent working out the items or being hesitant in answering. Because of this I would be inclined to have a smaller amount of unique items (around 5) in the Probe so that the child is more likely of rapid success. If the child's baseline assessment had revealed they were more accurate (a greater number correct) and more fluent (more items completed correctly in the specified time) I may want to increase the number of novel items to between 7 and 10. A second important consideration is to include a majority of items the child is already fluent in. By doing this you are assured that they will experience success. An example of a suitable probe is shown in Figure 2 below:

Items the child is *already* fluent with.			Items to be developed.		
5+3=	8+1=	6+2=	15+3=	14+3=	5
8+1=	15+3=	14+3=	6+2=	5+3=	10
6+2=	14+3=	8+1=	5+3=	15+3=	15
8+1=	5+3=	15+3=	14+3=	6+2=	20
15+3=	6+2=	5+3=	8+1=	14+3=	25
5+3=	14+3=	15+3=	6+2=	8+1=	30
14+3=	5+3=	6+2=	8+1=	15+3=	35
8+1=	15+3=	6+2=	5+3=	14+3=	40

Figure 2 Example Precision Teaching Probe

As we can see we have included items that the child has demonstrated from the initial assessment that they already familiar with (5+3, 8+1, 6+2) as well as two number bonds that involve a two digit number (15+3, 14+3). These five items are then randomly distributed throughout the grid to make the Probe (for the example shown above I have used the Probe generator produced by John and Gwen Taylor which is free and highly recommended- http://www.johnandgwyn.co.uk/probe.html). Although there are forty numbers in the example above the total number of items within the probe is somewhat arbitrary, as the child would go back to the beginning if they still had any of the specified time (i.e 1 minute) left after getting to item 40. This is because the focus is on the development of fluency rather than demonstrating accuracy on a specified number of exemplars.

The 'Daily Routine'

The preceding steps represent the hard work in establishing what the child is capable of and their next learning goal, as well as designing a Probe to help establish when they have developed fluency in the learning target. These steps occur infrequently and the majority of your time spent doing Precision Teaching will be on the three components of the daily routine: Teach, Probe, Record and Praise.

Teach

The daily routine begins with a teach activity focussed on the learning target. Unless the child is given adequate opportunities to learn the new technique or skill during the 'Teach' component of the daily routine they will not develop fluency through the 'Probe' and 'record and Praise' elements alone. It is important to recognise that Precision Teaching is not prescriptive about the types of teaching activities that are used and so the reader will find it is a complimentary approach to many of the others described in the resource. What the Precision Teaching Technique will dictate is which of the chosen teaching activities are retained for future 'Daily Routines' (as they have been shown to impact on learning and fluency acquisition) and which don't appear to have an impact. The self-correcting nature of the Precision Teaching technique should give confidence to those making use of it with a child to explore a range of techniques, knowing that ineffective methods will soon become apparent. When considering which techniques to start with it is important to remember that the experience should be fun and enjoyable for the child and should be pitched at a level where they feel confident in what is asked of them. Where possible the teach activities should be linked to the same techniques the child is experiencing in class, allowing additional opportunities for them to practice and become fluent in the techniques used by the whole class. However, often children require a period of Precision Teaching because they have shown that the techniques used for the whole class may not be suited to them. In those instances where additional opportunities to practice and refinement the whole class methods within the daily routine have shown other techniques to be more effective this should then inform the types of teaching and learning experience the pupil has outwith the Precision Teaching sessions.

Probe

Unlike the 'Teach' element of the daily routine, the 'Probe' section will remain consistent and unchanged. Each day the same time interval will be used to explore performance on the same Probe. The time interval will have become clear during the trialling of the probe and when fluent performance was established (described above). For some tasks the interval will be longer > 5 minutes (i.e. sentence construction) where as other will have a shorter period <2 minutes. In the majority of cases Probes can be designed to be administered within a minute. Using the example shown in Figure 2 above the child or young person would start in the first box and a record would be made of the amount they got correct and incorrect over the course of a minute. It is important to emphasise that they are not bound by the total number on the Probe but by the time they have. If they get to the last item on the Probe and they have time remaining they would return to the first item again.

Record and Praise

A key aim of Precision Teaching is to encourage the child or young person to see themselves as confident and capable learners and it is during this stage of the daily routine that this can be really emphasised to them. Firstly, no matter how they have performed, it is important to find areas that you can praise. This praise should be specific and could refer to improvements in their performance, the use of a new strategy or technique, their learning attitude or their focus. The second way in which the child can see themselves as a learner is through the recording of their performance. By following the steps above you will have crated a Probe that the child or young person will succeed on, even if they haven't acquired any new learning. In addition as the teaching activities are gradually refined to identify those that are most effective the child or young person can be engaged in conversations about increases in correct items over time, decreases in incorrect items or changes in the approach to learning they have experienced. In practice I have found that electronic recoding methods are best as these can produce charts that summarise performance and help those involved, including the child/young person, to quickly identify trends and patterns in performance. For those who prefer a pen and paper based recording mechanism an example is contained in Appendix 1 which can also be downloaded at http://www.johnandgwyn.co.uk/PTprobechart.pdf. The final area that is important to make a note of is the 'Teach" activity used. This allows the adult to link changes in performance to teaching activities used so that the most effective forms of input for that particular child can be identified (an example of the recording sheet for the daily routine is available in Appendix 2).

Has child reached target?

The first decision to be made when analysing the information from the daily routine is to

decided whether the target set for the child following the baseline assessment had been achieved. If we use the example above the information from the daily routine can be used to establish whether the child can:

> correctly identify 40 number bonds to twenty that include double-digit numbers in a minute with 0 errors.

Given that the first Probe we designed included some single digit number bonds that the child they will not have achieved the target even if they correctly answered 40 or more calculations with no errors. If the child did perform at this level for three days in a row then you would change the Probe to include a greater proportion of double digit number bonds to 20 (knowing that based on there performance they were fluent on the double digit bonds used in the original Probe). Providing the child is performing with fluency (i.e. 40 correct in a minute with no errors) this process would be repeated until the Probe contained only double digit number bonds (seen Figure 3 below).

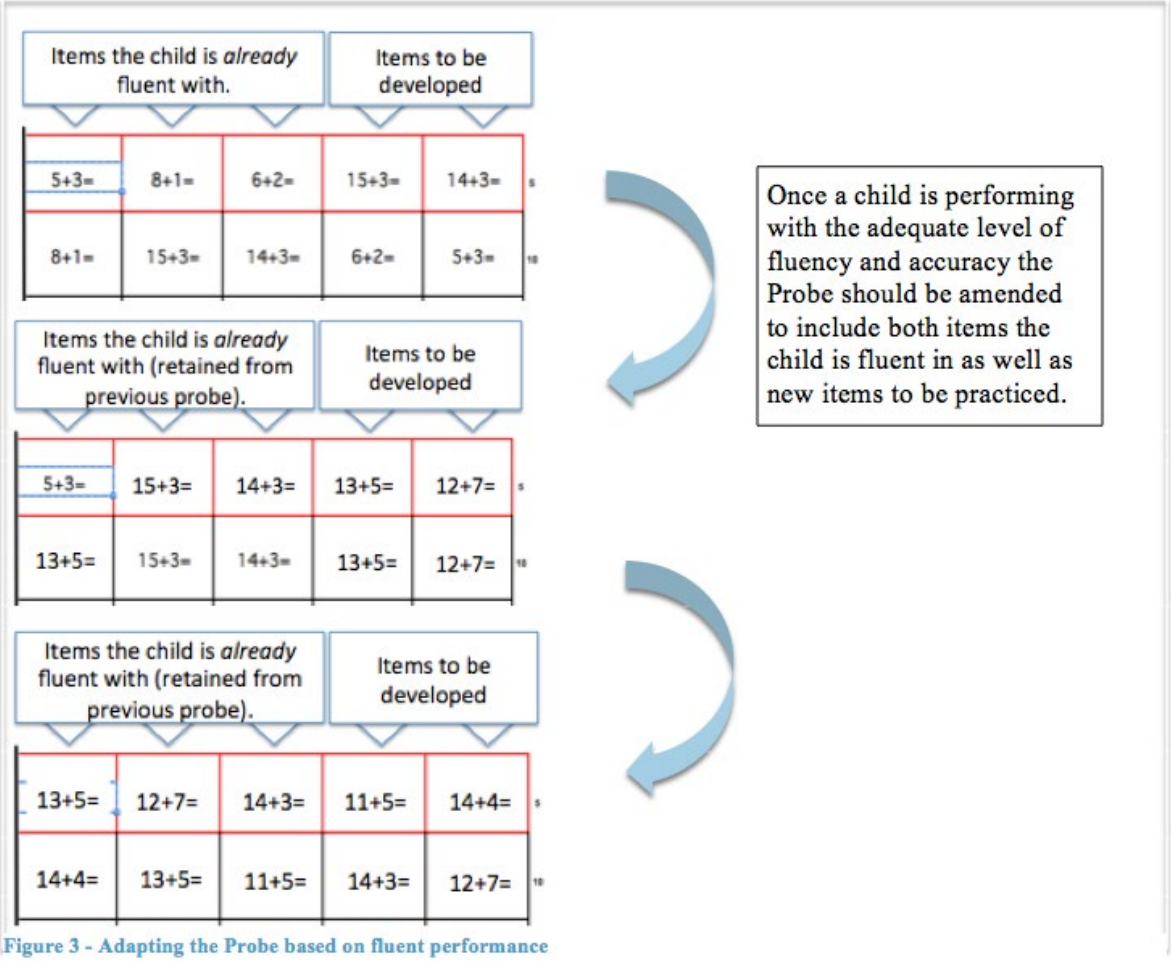


Figure 3 - Adapting the Probe based on fluent performance

As we can see, the third iteration contains only number bonds to 20 that contain double digit numbers as part of the bond. Once a child begins to demonstrate fluent performance from this Probe we can return to our original baseline assessment to see whether enough progress had been made so that the child would no longer require additional input in that area (see flowchart in Figure 1).

Is progress being made?

If the child has been selected for intervention it is unlikely that they will immediately reach fluent performance on each new probe produced. However it is important to identify if they are making progress so that either the teaching strategies that have been found to be effective for them can be continued and incorporated into other aspects of their learning in class, or if limited progress has been made the Precision Teaching process can be adapted in some way to address this. The most effective way to chart progress is in a way that can reveal trends visually. Figure 4 below can be used to achieve this by plotting the number the child gets correct and incorrect each day (software packages such as excel can be used to generate similar graphs electronically). It makes use of a semi-logarithmic scale which provides a better indication of relative progress (i.e. a child that improves their score from 5 to 10 correct in a minute has made better relative progress than a child who has improved from 25 to 30).

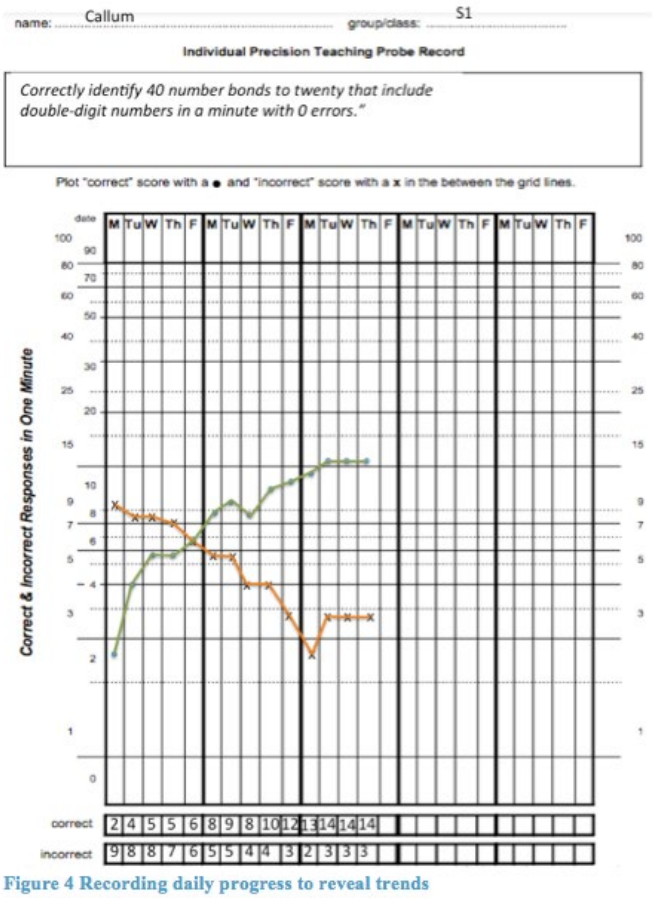


Figure 4 Recording daily progress to reveal trends

What we can see from Figure 4 is that for the majority of the sessions the child was making progress (i.e. the number correct was increasing and/or the number incorrect was decreasing). However it is evident that for the last three days the performance of the child has stayed stable. It is when there has been a period of stability or decline in performance that lasts for three days that a change to the programme is indicated. The way this occurs is detailed in the section below.

Adapted programme

When adapting a the Precision Teaching programme following a period of stability or decline in performance there are three main areas to consider:

Identify a different 'Teach' activity?

One of the principal aims of Precision Teaching is to identify the specific teaching activities that work for that particular child. When the charting of daily performance indicates progress is not being made the first consideration should be to identify a different teaching activity for the child. It may be that the activity needs to be more motivating (i.e. incorporating IT) or more practical. Precision Teaching offers the adults supporting the child a way to reflect on the teaching and learning experiences offered so that they can identify those that are most effective.

Reduce the number of items the child is not fluent on?

Although all Probes should include a majority of items that the child is already fluent with (to promote their sense of self-efficacy for the task), it may be that the number of items selected for the child to become fluent in may be too many. In these situations the child doesn't have the opportunity to have enough focussed teaching input for the unfamiliar items and so may struggle to develop fluency. In these situation the Probe can be adapted to include a smaller number of unfamiliar items to give the child a chance to develop the appropriate strategies to respond accurately and fluently.

Can the session be made more enjoyable?

As educators we can often become caught up in the desire to move a child's learning on without necessarily taking account of their enjoyment of the learning task. In situations where a child is no longer finding a session enjoyable you may find that teaching and learning strategies that had previously been associated with improvements in fluency are no longer effective. When designing and planning sessions it is important that fun and enjoyment are at the heart of the process.

Concluding remarks

It is hoped that the previous sections illustrate how Precision Teaching can be implemented to improve not only a child's accuracy and fluency on tasks, but also their confidence and self-efficacy. Part of the effectiveness of Precision Teaching is the ease with which it can be resourced, particularly when online resources such as http://www.johnandgwyn.co.uk are utilised.

Although the Precision Teaching technique can be made more complex, for example through the use of different techniques to determine the pace at which a child is making progress, the basic principles are the most important. Put simply these are to plan a fun and enjoyable daily routine that allows the adult to see which teaching techniques promotes learning and to identify those practices that may not be as effective. Finer points such as whether the progress is charted in a semi-logarithmic way or using a traditional scale, don't really matter as long as the child enjoys the session and the adult is able to identify the types of teaching and learning activity that promote success.

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3 Assessment of reading skills in Gaelic Medium Education: Exploring teachers' perceptions and present practice

Fiona Lyon & Sarah MacQuarrie

A distinctive feature of education in Scotland is the provision of Gaelic-medium education (GME), which spans preschool, primary and secondary education. During 2010–2011, over 2000 children were enrolled within 60 primary schools in 14 education authorities. Considering that GME was only formally introduced in 1985 these figures can be taken as an indicator of the demand for GME (HM Inspectorate of Education,

2005, 2011). However, concurrent developments have not transpired in the assessment tools available to Gaelic-medium teachers or indeed educational psychologists linked to GME schools. Difficulties with reading may be just as prevalent for Gaelic speaking pupils as for English speaking pupils. The aim of this study is to explore how language skills are assessed in GME. To this end, a teacher from each of the 60 GME schools and units spread across Scotland was invited to complete a questionnaire and comment on their experience regarding additional support needs in GME. In general, there was a reliance on teacher judgement to act as a means of assessment. Tools and tests available for use for assessment purposes were informal measures, and regularly found to be a translated version of existing tests. Tests that have been translated may suffer from inadvertent weaknesses, especially when the phonology of one language differs greatly from another. In order to support learners at an early stage in their education, not only do such tests need to be developed, but crucially they ought to be based on the Gaelic language.

Keywords:

GAELIC-MEDIUM EDUCATION (GME) first appeared in Scotland through playgroups in the early 1980s in an attempt to support Gaelic language usage and arrest the apparent decline. Gaelic-speaking parents ran the playgroups as there was no local authority provision and their success, together with parental pressure, led to demands for GME primary education. The rapid growth of GME that followed was such that by 2010 there were 60 primary schools engaged in GME, involving 2256 pupils as well as 58 nursery units and some 115 preschool groups throughout 14 education authorities (Bòrd na Gàidhlig, 2010). The commitment to the continued provision of Gaelic within Scotland is noted by the publication of the first Gaelic Language (Scotland) Act in 2005, followed in 2007 and 2013 by National Plans for Gaelic (Bòrd na Gàidhlig, 2007, 2012). The impact of such publications can be seen in the subsequent Gaelic plans of a wide range of local and national organisations. Clear trends are apparent with increasing opportunities for GME provision taking place throughout Scotland. However, concurrent developments have not transpired in the assessment tools available to Gaelicmedium teachers or indeed to educational psychologists linked to GME schools, a fact that was recognised by HM Inspectorate of Education in 2005:

'There was a lack of suitable resources to assess and diagnose the difficulties of pupils whose general and Gaelic learning needs were more challenging. Most typically, teachers felt unable to ascertain whether any difficulties that arose were related to the fact that the child was learning a second language or whether the difficulties were more fundamental and would have emerged in the context of their first language.' HM Inspectorate of Education (2005, p.26)

GME has existed since 1985 in Scotland, but the introduction of the Curriculum for Excellence in Scottish schools in 2010 prompted an analysis of the different language models in GME (O'Hanlon, Paterson & McLeod, 2012). Their report highlighted four different categories of GME, ranging from Gaelic as the medium of instruction throughout primary to Gaelic as the medium of instruction for only the first two years of primary education. Learning and Teaching Scotland (2010, p.3) state that the minimum curricular requirement for a school to be considered as GME is when 'learning and teaching is wholly through Gàidhlig during the immersion phase from P1–P3' followed by the gradual introduction of the English language through the medium of Gaelic 'with Gàidhlig remaining the predominant language of the classroom in all areas of the curriculum [throughout the primary school stages].' If this definition is closely adhered to, one would assume that assessment materials, especially those used in the identification of specific learning difficulties, were written and conducted in Gaelic. This is not the case, and the lack of such tools either for classroom-based teachers or educational psychologists involved in the assessment of additional support needs is inconsistent with the generally held understanding that early identification of language difficulties is supported through assessment (Lyon, 2003). The aim of this study is to explore how language skills are currently assessed in GME and to investigate areas for development.

Although it has been acknowledged that pupils receiving immersion or bilingual education are likely to achieve higher attainment than pupils receiving a monolingual education (Baker, 2011; Johnstone et al., 1999), it should be recognised that difficulties with reading can be just as prevalent for Gaelic speaking pupils as for English speaking pupils. In a recent survey, McLullich (2013) found that 15 per cent of pupils receiving GME had some additional support needs whereas 17 per cent of English-medium pupils in Scotland had additional support needs. In Ireland, the Pobal Report (2010) found that 20 per cent of the bilingual (Irish–English) school population had additional support needs at some stage in their school career.

Fluency, competence in and comprehension of spoken language are the keys to being able to learn effectively and support children's progress in every area of the curriculum (Riley, Burrell & McCallum, 2004). The majority of preschool children acquire spoken language simply by being exposed to speech at home. However, pupils in GME require considerably more exposure to Gaelic language as 'Gaelic is not just for the Gaels!' (Gaelic Excellence Group, 2011, p.4). Pupils in GME usually have had exposure to two languages at levels which vary considerably between home and school and pupils will reach stages at different times according to Highland Regional Council (1995). Spoken language needs to be developed both as a language for thought and as a basis for developing literacy skills and achieving access to other curricular areas. The emphasis on the functional aspects of language is important as it highlights the significance of communication. The Gaelic Language (Scotland) Act 2005 has raised the profile of the language for the general public, but it has also prompted educationalists to seek parity of provision. HM Inspectorate of Education (2005, p.39) recommended that national bodies should 'explore means by which schools and authorities in collaboration with other education and health professionals can work towards meeting the needs of pupils with additional support needs.' The Education Additional Support for Learning (Scotland) Acts in 2004 and 2009 provide a framework of support which includes the identification of additional support needs.

While acknowledging the relatively short life of GME provision, teachers, some of whom have benefited from GME themselves, feel disparaged by the lack of equivalent educational resources in Gaelic. The immersion curriculum, utilised in GME schools, is identical to the curriculum used elsewhere in Scottish schools. Therefore, pupils in GME should have access to the same level of support when needed, however, the lack of materials for pupils with additional support needs was noted as an important area of weakness within GME provision by HM Inspectorate of Education (2005).

In order to identify pupils in GME as having weaknesses with literacy one must first know what skills to look for. Considerable research has been carried out to try to identify the indicators of what are good predictors of later reading in English speaking schools and it has become clear that phonological awareness is a preeminent factor. Phonological awareness, including processing skills, has been identified as a suitable predictor of reading abilities in English (Hatcher, 2000; Muter & Snowling, 1998; Muter, 2003; Vellutino et al., 2004). In the classroom, this means that pupils who appear to be doing well but have a weak ability to spot the onset sound or rhyming patterns of words, frequently struggle at a later date. It is well established that phonological awareness skills in a native alphabetic language can transfer to the learning of a second language (Gillon, 2004; Kaushanskaya, Yoo & Marian, 2011). However, such transfer is influenced by the congruence or incongruence of characteristics within the native language to which a child is exposed and the second language a child is learning. Specific characteristics such as whether languages utilise an alphabetic or non-alphabetic script, and whether alphabetic scripts are more or less transparent[1], are worth bearing in mind when children complete phonological awareness tasks. Pupils in GME come from a variety of socio-economic backgrounds, with varying experiences of length of exposure to the Gaelic language. Thus, the timing of tests used with children having varied levels of language proficiency in Gaelic is an area suited to investigation.

A study undertaken in GME classrooms considered if phonological skills could be assessed in Gaelic and asked teachers to administer a phonological screening tool, which was created in Gaelic, to pupils (Lyon, 2011). The resulting phonological screening tool offers a good starting point for this study, indicating that the teaching population are themselves eager to be involved in such research and to share their views. This study describes how language skills are assessed in Gaelic, investigating what tools are in use, offering teachers and other such professionals in education the opportunity to share their views on the assessment of literacy in Gaelic.

Method

Design and sampling

Teachers from each of the GME schools/ units in Scotland were invited to complete a questionnaire and comment on their experience regarding additional support needs in GME. A questionnaire and a telephone interview facilitated data collection given the geographical spread of participants. Respondents from 45 out of the 60 schools returned a completed questionnaire. Two schools submitted two questionnaires each as teachers from both Primary 2 and Primary 3 classes decided to participate. Eighteen of the 45 respondents volunteered to be interviewed at a later date.

[1] Transparency refers to the relationship between printed text and its associated sound when read aloud.

Procedure and analysis

Each GME school in Scotland was invited to participate and a minimum of one response per school was encouraged. Questionnaires were posted to schools, enclosed with stamped-addressed envelopes to facilitate return of data. Questionnaire items included open-ended questions and a small number of scaled responses. Participants could respond to scaled items by selecting one of three responses (yes, quite or no), where participants omitted to select any option, a code of 'nil response' was used. The questionnaires sought to record demographical information and obtain information regarding whether participants were interested in volunteering their time to be involved in a semi-structured interview, as well as collecting information regarding the types of assessments used by teachers. Audio recordings of the semi-structured interviews facilitated transcription and were recorded using a dictaphone. Teachers' responses to the questionnaire were combined with the interview data and analysed to create subthemes.

Results

Teachers were asked to identify how language skills were assessed in GME and what tools were used. Participants were asked to complete a short questionnaire, following which they were given the option to be included in a semi-structured interview. Demographics of those involved in the questionnaire are presented, after which details of the interviews are given.

Given the relatively small number of Gaelic-medium schools/units in Scotland, all teachers of Primary 2 and Primary 3 pupils, pertaining to the immersion stage of GME, were invited to participate. Information regarding the respondent's current role, and details of the local authority in which they worked were collected to look at whether teachers holding different positions within the schools held different levels of knowledge regarding assessment and its role in literacy acquisition. A total of 45 questionnaires were returned; of these, 20 participants worked in the Western Isles, 13 in the Highland region, three in Argyll and one response was received from participants who each worked in nine separate local authorities. Western Isles and Highland Councils together made up more than 50 per cent of the teachers involved, which is not surprising given that these geographical regions show a high density of GME provision. The questionnaire respondents held various roles in the schools as shown in Table 1.

Given the focus of this study on the assessment tools used by teachers, it was encouraging to find that 62 per cent of respondents were indeed Classroom Teachers. Some schools offering GME in fact have only one teacher with responsibility for Gaelic, whereas the fact that only three Support for Learning teachers responded adds to wider research that suggests such teachers are scarce in GME (Lyon, 2003) meaning that there may be limited access to support in such settings (MacLeod and MacLeod, 2001).

Having completed the questionnaire, participants were asked to indicate their willingness to be interviewed, it was hoped that 10 per cent of questionnaire respondents would volunteer. In fact 40 per cent (18 of 45 respondents) elected to take part in the

telephone interviews and their respective positions are shown in Table 2. Interviews were considered an opportunity to find out information from teachers holding various posts in schools, in particular from Classroom Teachers.

A total of seven of the 11 local councils were represented among the interviewees. Some nine interviewees (50 per cent) were working in the Western Isles, a further four interviewees (20 per cent) from Highland Council and the remaining five interviews came from five separate local authorities (30 per cent). The fact that respondents who volunteered to be interviewed were drawn from a variety of locations, and held different roles and posts of responsibility within the school system, allowed for a wider perspective of the difficulties involved in assessing phonological awareness to be recorded. In all cases, a semi-structured format was used, which allowed the interviewees to be led through a series of preplanned questions.

Table 1: Questionnaires returned per participant group.

Teacher Group	Number of responses
Head	5 (11%)
Depute Head	2 (4%)
Principal	7 (16%)
Classroom	28 (62%)
Support for Learning	3 (7%)
Total	45 (100%)

Table 2: Interviews conducted per participant group.

Teacher Group	Number of responses
Head	1 (5.5%)
Depute Head	1 (5.5%)
Principal	2 (22.2%)
Classroom	10 (55.5%)
Support for Learning	2 (11%)
Total	18 (100%)

Forms of Assessment available for use

This section discusses how teachers would normally identify children at risk of reading failure or wider literary difficulties. It looks at the assessments currently used and the role of Support for Learning in GME. A specific question regarding a phonological screening measure that had recently been circulated to GME schools was included in the questionnaire given to teachers (for more details please see Lyon, 2011). Teachers who were familiar with the phonological screening test were asked to consider whether

they used any similar tests. Table 3 presents a summary of teachers' responses on that specific question.

Sixty per cent of questionnaire respondents stated that they did not use tests other than those listed either in Gaelic or English. Although 27 per cent of questionnaire responses stated that similar tests were used when identifying phonological awareness skills this reduced to one of the 18 teachers interviewed. Of the questionnaire respondents, five said the tests that they used were in English. One Principal Teacher stated that they: hadn't really done any sort of determining what… no formal sort of assessment like that. We had done sort of variations of what you had put together but nothing as formal as that from what we had done ourselves. (Principal Teacher 44)[2]

A variety of tests and assessment measures were noted by teachers as being available for use and are listed in Table 4. Each of these assessments has been created for different purposes, and aimed at children of different ages. None of the tests recalled by teachers were standardised tests of reading.

Table 3: Do you use any other similar tests?

Teacher Group	N	Yes	No	Nil response
Head	5	1	2	2
Depute Head	2	1	1	0
Principal	7	1	5	1
Classroom	28	8	18	2
Support for Learning	3	1	1	1
Total	45 (100%)	12 (27%)	27 (60%)	6 (13%)

Table 4: Tests named by Gaelic teachers.

Test Name	Description	Source	No. of teachers
Achievement in Literacy	Edinburgh Primary 1 Baseline Test.	The Edinburgh City Council,1999	1
Sound Linkage	Comprises of a criterion-referenced test of phonological awareness.	Hatcher, 2000	
Aston Index	Involves 16 tests covering visual and auditory discrimination, motor coordination, written language, reading and spelling as well as general underlying ability and attainment.	Thomson & Newton, 1982	1
Dyslexia Screener	Computer-based six tests covering ability, attainment and diagnostic areas.	Turner & Smith, 2004	1

[2] To ensure anonymity, each participant was given an identification number so that the data could be cross-referenced.

Dyslexia Screening Test (DST)	Subtests include one minute reading, two minute spelling, digit span, rapid naming, postural ability and bead threading.	Nicholson & Fawcett, 1996	
Special Needs Assessment Profile (SNAP)	Computer based profiling package that supports the identification of a wide range of additional support needs through pupil, parent and teacher questionnaires. Available with an accompanying Gaelic section.	Weedon & Reid, 2008	3
Measadh Leughaidh	A translation of an English Baseline Assessment that focuses on a child's familiarity with Gaelic.	The Highland Council, 2001	1
Measadh Bogaidh	Used to assess understanding of spoken Gaelic.	The Highland Council, 2001	2

GME related tests

The following three assessments are the only recognised ones for identification of literacy difficulties. Three references were made by teachers to the Special Needs Assessment Profile (SNAP); with fewer direct mentions of Measadh Bogaidh and Measadh Leughaidh.

SNAP

With some probes available in Gaelic, this assessment consists of a number of tests used to identify clusters of problems associated with specific learning difficulties.

…it is a good overall assessment of needs but doesn't go into so much detail phonologically. (Class Teacher 7)

I've been given a CD. Up till now I've used something produced by Highland, it's… now I can't think of it. I'd have to go and get it. I got it in a folder. (Support for Learning Teacher 32)

Measadh Bogadh

As this test was only mentioned twice in the 64 transcripts of interviews and questionnaires it can be acknowledged that it is not in widespread use. This measure is designed to assess the understanding of spoken Gaelic.

It's not specifically for rhyming. It deals with initial consonants, final consonants. (Support for Learning Teacher 32)

In the past I've used a test that was produced I think in Highland Region and it was 'Measadh Bogadh' or something, I can't remember the name of it. (Principal Teacher 37)

…used that but I found that that was possibly more to do with children who were just not using Gaelic, more sort of a general language based thing. (Principal Teacher 37)

Measadh Leughaidh

One participant mentioned this test, however, although labelled a reading test it is not standardised and is more appropriately described as an assessment of a child's linguistic ability rather than being overly focused on literacy acquisition.

Highland Council have a similar test in Gaelic – 'Measadh leughaidh – deuchainn sgrùdaidh 2001, deuchainn sgrionaidh. (Class Teacher 25)

Innovative and resourceful teachers

In the absence of any formal testing, some teachers created assessments although little substantive detail was given about what was being assessed:

…informal testing in class produced similar results. (Depute Head Teacher 35)

own generated tests to see where the children are in their learning. All work is in Gaelic. (Class Teachers 26, 28 and 35)

I do kind of informal not tests but things that would indicate where they are or where they should be. (Class Teacher 10)

Two teachers made reference to specific resources that they had prepared:

…assessment of sounds – own materials, (Head Teacher 40)

while another referred to …only pictures I have made up myself to reinforce letters and blends. (Class Teacher 10)

Effort involved in creating measures or assessment cannot be underestimated and goes a long way in pointing out that teachers can identify where tests can be applied and that a need for such tests is great in this area. A few teachers have shown their ability in creating suitable differentiated resources (e.g. Gaelic version of Phonic Code Cracker, Russell, 1993); however, it cannot be expected that such skills transfer to the creation of formal assessment materials, which involve expert input.

Professional insight as assessment

Many teachers did not identify weaknesses in phonological awareness through assessment but rather relied on their own judgement and experience as seen in the following comments:

you would just get to realise pretty quickly who is not recognising sounds, who can't hear them. (Principal Teacher 44)

… just through their lack of progress when it came to reading, that they weren't progressing and sort of using the skills with regard to phonics and not using that skill to progress with reading. (Principal Teacher 1)

…just by their lack of progress in reading, them not coming on as well as the rest. (Class Teacher 11)

…basically by checking spelling and certain words in their reading and writing. It's quite obvious you know if there's phonics mistakes. (Class Teacher 33)

…basically through observation and listening. You know routine observation. You become aware of when a child is having problems. (Depute Head Teacher 46)

However, teachers who draw on their own observations and experience to identify'at-risk' poor readers, often miss the mark (Flynn, 2000). Several teachers appeared to be using no form of assessment:

…just through class work. In small classes you're doing it [phonics] with them on a daily basis. Just a general impression. (Class Teacher 4)

…it was just the day-to-day activities and obviously just homing in on that particular difficulty. (Class Teacher 33)

…just through the normal course of reading and just through classroom use of phonics really. (Head Teacher 40)

…years of doing it. I'm very long in the tooth – a year to go to retirement! (Class Teacher 19)

I think probably day-by-day teaching in class. The teaching itself and through recognition of sounds within words and reading. (Principal Teacher 41)

Four interviewees did not carry out any assessment themselves explaining that the Support for Learning Teacher would undertake such activity, and such input would be sought by teachers when available:

Learning Support normally do that sort of thing in conjunction with the Class Teacher. A Learning Support Teacher would probably do it with a pupil anyway, but in English, andI would get feedback from them. (Class Teacher 17)

…if you had a child who was struggling with reading and writing you would refer them to them [Support for Learning] and they did whatever tests they had but then with the infant Gaelic class those tests weren't in Gaelic. (Principal Teacher 6)

Alternative approaches to assessment

In cases where literacy acquisition gives grave cause for concern, teachers will usually liaise with the Educational Psychologist associated with the school. However, it was noted that assessments of GME pupils were rarely carried out. Some critical comments were made regarding the provision of expert support and that this is always carried out in English. Indeed, HM Inspectorate of Education (2005, p.26) noted that 'in many instances, teachers reported that external support professionals had little or no

expertise in Gaelic-medium education or the issues pertaining to it'. This is particularly important in Gaelic-medium education as schools are widely spread across the country. On occasions, teachers are advised to alter their teaching approaches, employing general strategies that may support a child about whom they have concerns.

I've had a child that I've been specifically concerned about, then I've maybe had a word with the Educational Psychologist and they've sort of worked out a little bit with the child before me or a Learning Support Teacher. **(Principal Teacher 37)**

Generally it's very much you've just got to find a way that suits the child and suits the provision. **(Principal Teacher 37)**

…a Psychologist is very reluctant to see a child until Primary 3 anyway. **(Principal Teacher 1)**

And another thing that we're up against is a psychologist is reluctant as well to say whether it is because of doing an additional language that these difficulties occur or whether they would just occur anyway. **(Principal Teacher 1)**

Support for development of appropriate tests

The two Support for Learning Teachers interviewed were critical regarding the availability of Gaelic tests. They also commented that GME pupils experiencing language difficulties were not identified until late Primary 3 or Primary 4 suggesting that the current practice within GME does not mirror that available within English-medium education.

I've been working with children who have been in Gaelic-medium but the tests are only in English, you know the dyslexia tests. **(Support for Learning Teacher 22)**

…the trouble was that I didn't have an equivalent one in Gaelic. **(Support for Learning Teacher 32)**

…they had to wait until the end of Primary 3 and into Primary 4 before they were really tested to see if there was a dyslexic problem or whatever. **(Principal Teacher 6)**

The consequences stemming from a lack of suitable assessments was evident from comments made by teachers. I feel there is very little to aid those who struggle in this area. **(Classroom Teacher 8)**

…there's no tests. We just go by our experience if a child isn't performing well. **(Classroom Teacher 30)**

…there's been nothing used in the past in Gaelic. I don't use any tests at all. **(Classroom Teacher 11)**

…there's no specific thing – just what we've made up in school. **(Classroom Teacher 40)**

This frustration undoubtedly makes teachers feel that they are not teaching as effectively as they could be. I've been struggling with working with children in Gaelic medium where there's nothing. **(Support for Learning Teacher 14)**

I had one child there who we knew had problems but there don't seem to be any tests

available for teachers to use to identify what areas they are finding difficulties with. (Class Teacher 30)

I have children in other schools in Gaelic medium who actually have specific difficulties and there's just nothing. (Support for Learning Teacher 14)

The current arrangements for identification are gradually improving but there was not a great deal of difference between the findings of the present study and that reported in an earlier study, 10 years previously (Lyon, 2003).

Discussion

In general, there was a reliance on teacher judgement to act as a means of assessment. Assessments described as in, or available for, use were scarce, not widely utilised when available and regularly found to be translated version of tests. Tests that have been translated may suffer from inadvertent weaknesses, especially when the phonology of one language differs greatly from another. It would be effective practice to assess pupils using the language of the classroom. On the basis of the findings available within this study, if suitable Support for Learning is not available, teachers are not likely to attempt to implement formal assessments themselves, rather they prefer to utilise indirect means of assessing, such as using their professional judgment.

Difficulties in identifying and labelling children being educated in a bilingual setting have been noted in relation to dyslexia (Deponio et al., 2000). The suggestion to counter a weakness in practice, reported within a wider audit, was that Learning Support Teachers, rather than Educational Psychologists, could have a key function given that their position includes identifying and establishing the needs and long-term aims of some pupils. The value of early identification through screening is without question, and research has shown that such action can take place within Primary 1 and Primary 2 (Blatchford & Cline, 1992, 1994; Lindsay, 2004; Wilkinson et al., 1998). In the context of GME, however, any expectation or hope that Support for Learning Teachers can be called upon to fill the gap is questionable, based on the findings of this study as well as wider research and literature. This study noted the limited number of Support for Learning Teachers in place within GME. MacLeod and MacLeod (2001, p.13) interviewed Learning Support Teachers who, although aware of assessments developed for English, felt that 'the absence of a resource of equivalent substance and rigour in Gaelic was a source of frustration to them and raised concerns about equity in terms of entitlement'. This long-standing concern signals that urgent action is needed, particularly in light of a recent report that has commented that the number of Support for Learning Teachers remains unbalanced in relation to their need within GME (McLullich, 2013). This report suggested that existing staff could be trained ensuring that a fluent Gaelic speaker would be available to provide Support for Learning in each school. These staff members could have specific duties including liaison with external professionals offering Gaelic language assessment.

Adopting a broader perspective, similar difficulties regarding the development of language specific and language sensitive materials have been located in other countries. In Ireland, there is a dearth of dyslexia assessment resources for bilingual pupils and the only Irish tool available is the lettersound relations test in Áis Mheasúnaithe sa Luathlitearthacht: Treoir ar Mhúinteoirí (Clay & Nig Uidhir, 2007).

There is a great deal of information available for teachers in English-medium education, including diverse and detailed assessments but none exist in Gaelic. The identification of language difficulties in GME is constrained by the immersion model in which it operates, and that there are no tools in Gaelic suited to this purpose. Language difficulties, like dyslexia, are currently identified when such difficulties can be recognised in English. Consequently recommendations set out in early intervention guidelines cannot be fully implemented (Fraser, 1998). This need for material sensitive to the Gaelic language is a key finding of the study. Despite the range and variety of practice evident within this study, and existing within Gaelic-medium schools generally, such breadth cannot overcome the scarcity of such materials.

All children have a right to receive an education appropriate to their needs. As GME is so new, children should not be disadvantaged just because there are no methods of assessment of phonological awareness in Gaelic yet. A number of difficulties exist when developing a literacy assessment for a population that is quite unusual in education. GME attracts people from a wide variety of backgrounds, including those where Gaelic is the first language, but significant numbers come from homes where no Gaelic is spoken. The fact that pupils are learning to operate in two different phonological and written language systems could be a further complicating factor. This adds additional difficulties for the teachers when trying to identify specific learning difficulties with literacy where complete (or 'balanced') bilingualism has not been achieved. This study has highlighted an area where teachers, educational psychologists and stakeholders in education have the opportunity to increase their knowledge of issues arising in GME, contribute to the development and implementation of support available to schools, while also further developing an understanding of this minority group of learners and their needs. Of course, this presupposes that educational psychologists are able to make time to accommodate such opportunities (given the stretched nature of provision this may be less than realistic in some regions) and that educational psychologists or similarly trained experts who speak Gaelic are available. Yet, despite such tensions GME and the provision offered need to keep a pace with initiatives like the Dyslexia Friendly Schools Scheme (MacKay, 2006). Such initiatives have successfully led to alterations in practice so as to accommodate dyslexic pupils by using appropriate teaching methods and ensuring that all school environments are dyslexia friendly. It is important in terms of inclusion that this practice is available in all classrooms in Scotland irrespective of the medium of teaching.

These findings do not necessarily suggest that provision for additional support needs in GME is overlooked, rather that research driven measures would be a valuable and timely development within GME so as to provide forms of support that are relevant to good practice. Unless action is taken to remedy the paucity of tools available to assess children's literacy skills in GME, this situation will perpetuate. In order to support learners at an early stage in their education, not only do such tests need to be developed, but crucially they ought to be based on the Gaelic language. The Getting It Right for Every Child approach (Scottish Government, 2011) aims to improve outcomes for children and meet the needs of all children to ensure they reach their full potential. A sustainable approach is called for, where assessment measures are developed for a specific purpose, presenting an easy-to-follow format allowing a range of educational professionals to administer such measures.

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4 Supporting pupils with additional speech and language needs in Gaelic Medium Education

Marina MacLeod

The number of pupils attending GME across Scotland has risen dramatically in recent years. As the numbers have increased, so have the additional learning needs of pupils attending GME. This means that schools providing a Gaelic education to pupils with additional speech and language needs must ensure suitable support is given. There are very few Gaelic-speaking speech and language specialists available in the country. In this chapter, an account will be given of how one GME school is supporting pupils with specific additional speech and language needs.

The School

The bilingual Gaelic-English school is on mainland Scotland, near Glasgow. 98% of the total number of GME pupils are from non-Gaelic speaking homes and most travel to school by bus or taxi. There are 8 full-time Gaelic teachers, a Gaelic-speaking Depute Head and one Gaelic-speaking member of the classroom support staff. There are 30 pupils in the Gaelic nursery and 160 pupils between P1-7.

The GME Teaching Approach

The pupils are in their total immersion phase from Nursery until halfway through primary three (Some pupils begin primary 1 not having attended the GME Nursery). During the second term in primary three, the school uses the Gaelic phonic assessment, created by Fiona Lyons, to establish which pupils in the primary three year-group are ready to begin the transition to English . According to the results of the assessment, the pupils are banded into groups in preparation for the transition to English.

Those who are ready to begin English do so after Christmas, using English reading books and taking account of all the English specific phonic sounds not already covered in the Gaelic curriculum.

Those who are not yet ready to begin English will wait until after the Easter holidays and then begin English in the final term.

In primary 4-7, pupils are in the immersion phase and, at this stage, they do alternate Gaelic-English weeks. The class teacher speaks Gaelic the whole time and teaches English through the medium of Gaelic.

In addition to this, every class from P4-7 completes a 2-week block of Gaelic only learning, following a school holiday. This is to ensure the children are able to regain their Gaelic skills, not having used them during the holidays, and to maintain our main focus on Gaelic.

What kind of speech and language difficulties do our GME pupils experience?

Pupils in Gaelic-medium education present the same kinds of difficulties as pupils in any

Education system. It is vital that staff in GME have an informed awareness of the kinds of difficulties pupils may have to overcome. The following are examples of some of the challenges experienced by pupils in our school-

- **Some pupils have delayed speech. They begin Nursery without the ability to communicate properly. This applies also to a number of pupils coming into primary 1.**
- **Some pupils find it very hard to pronounce words in Gaelic and/or English accurately. They leave sounds out, or just cannot say some words accurately.**
- **Some struggle to comprehend what is being asked of them accurately and this leads to them not doing what was originally asked.**
- **Some struggle to follow instructions/directions, and those may have to be broken right down for them, step by step.**
- **Some struggle to retain information. It becomes mixed up or is forgotten altogether.**
- **Some need to see and hear things many times before they manage to remember and retain them accurately.**
- **Some have specific problems with recognising phonic sounds and spelling or reading.**
- **Some really struggle to remember and retain the Gaelic word for things.**
- **Many make very slow progress, even with additional support.**
- **Some really struggle to progress once they start doing English work.**
- **Very often they feel as if there is too much information surrounding them and they need things simplified for them.**

How do we support our pupils with additional speech and language needs?

Gaelic-speaking speech and language support is very sparse. Due to this, Gaelic-medium schools must find other ways to provide support. The following are examples of how we support our pupils-

- **We give them the opportunity to speak together in Gaelic in a small group. Depending on the age of the pupils involved this may be led by a Gaelic-speaking member of staff.**
- **We incorporate as much as possible of each child's English speech and language methodologies into GME.**
- **Additional support for learning is structured around the same targets that are being covered by the class teacher.**

- **If a child is receiving English and Gaelic ASL, we ensure that both ASL teachers cover the same learning targets.**
- **We have daily reading buddies.**
- **Gaelic-speaking classroom support staff on a daily timetable to support class teachers.**
- **Regular meetings to review each pupil's progress and make any changes if necessary.**
- **Online podcasts of spelling words to support pupils and parents at home.**
- **We begin the transition to English very gradually.**
- **A personal Additional Support Plan if needed.**

Identifying Progress

Continual assessment of progress is essential for ensuring pupils are receiving the support they need. Through this we can identify if additional support is still needed or if support can be gradually withdrawn. We assess our pupils in the following ways-

- **Additional support staff keep up-to-date detailed notes on every support session.**
- **We ask pupils for their feedback.**
- **We ask parents for their feedback.**
- **Class teachers keep assessments notes.**
- **Every pupil has learning journeys which they update regularly and which are checked and signed by their class teacher.**
- **We review support plans at the end of planning blocks (every 8 weeks).**
- **Regular meetings with all agencies supporting pupils to review progress.**
- **We use reports from English-speaking Speech and Language Support Staff to inform future planning.**
- **We use school reports and parents' nights as an opportunity to reflect on progress and current support.**

Supporting parents

It is a huge worry for any parent if their child has additional support needs. We must always remember the enormous amount of trust placed in us within GME by parents who send their children to be educated by us and the fact that many families are not Gaelic-speakers themselves. We must ensure that we deal sensitively and appropriately with

Speech and Language issues. We support our GME parents in the following ways-

- **Clarify in a sensitive way that the difficulties being experienced by their child are intrinsic and not as a result of them being in GME.**
- **Explain in detail the support their child will receive, and ensure there is an element of parental involvement, which can be done together at home.**
- **Give them the opportunity to meet with any support staff/external agencies who will work with their child prior to them commencing support. This can be very informal.**
- **Establish and agree on a pattern of communication between the parents and the school. Some prefer meeting face-to-face, others prefer a phone call and some prefer e-mail. It is important to put this in place before support begins.**
- **Reassure the parents by letting them know they can contact the school about their child at any time.**
- **Find out if they know where to get support with Gaelic homework (Gaelic4 parents. etc.).**
- **Ensure that everyone who works with their child is well informed about the basis of GME and its core approach.**
- **Ensure the pupil's class teacher is given the opportunity to reassure the parents about day-to-day support for the pupil in class. This should be detailed and show an understanding of the additional support being given too.**

There is a definite lack of qualified Gaelic-speaking Speech and Language support staff in GME. Despite this, I hope this chapter has inspired you to help support your pupils with Speech and Language difficulties in other ways. It is very important that staff in GME provisions work together as a team making best use of everyone's skills/talents.
At the end of the day, it is our duty as GME practitioners to ensure we use every resource, teaching method and learning style we know to support our pupils who have specific speech and language difficulties.

5 Who are Allied Health Professionals and what do they do?

Jane Reid

The Scottish Government wants all of Scotland's children to have the best start in life and to be ready to succeed. This includes ensuring that children and young people are successful learners, confident individuals, effective contributors and responsible citizens. To achieve this vision will require strong and effective partnership working across agencies. The Getting it right for every child approach (GIRFEC) was developed to help practitioners focus on what makes a positive difference for children and young people – and how they can act to deliver these improvements.

Some children will require extra help to fully benefit from education and a partnership approach is essential to this. This section will focus upon the partnership between education and Allied Health Professionals whilst acknowledging that this is not possible without parents and carers being involved too. The Curriculum for Excellence provides for the totality of experiences which are planned for children and young people through their education, wherever they are being educated.

This includes:

- **Developing skills for learning, skills for life and skills for work - include literacy, numeracy and associated thinking skills;**
- **Skills for health and wellbeing, including personal learning planning, career management skills, working with others, leadership and physical co-ordination and movement skills; and skills for enterprise and employability.**
- **These skills will be relevant to all children and young people and the responsibility of all practitioners.**

The Allied Health Professionals (AHPs) are a distinct group of health and social care practitioners who use their expertise to diagnose, treat, habilitate and rehabilitate people of all ages across health, education and social care. They use a variety of approaches including direct clinical care, self management & enablement strategies as well as the provision of rehabilitation and health improvement interventions (SG 2012).

Within Scotland the AHP group includes arts therapists, dietitians, occupational therapists (OTs), orthoptists, podiatrists, prosthetists and orthotists, physiotherapists, radiographers (diagnostic and therapeutic) and speech & language therapists. They are all individual professions in their own right having completed an under-graduate or post-graduate training programme at university; subsequently they are regulated by the Health & Care Professionals Council (HCPC 2013). AHPs are qualified to function as autonomous clinicians, and are able to accept referrals, treat and discharge patients without reference to third parties.

Although all AHPs may work with children and young people for the purposes of this

resource the focus will be upon:

- **Occupational Therapy**
- **Orthoptics**
- **Physiotherapy**
- **Speech & Language Therapy**

AHPs work within a variety of settings including:

- **Acute hospital**
- **Children and young people's homes**
- **Community based out-patient clinics**
- **Schools and nurseries**

AHP services

AHPs work within the principles of the Healthcare Quality Strategy by providing person-centred, safe, effective, efficient, equitable and timely interventions that are based upon best available evidence. There are a variety of ways that AHP interventions are provided and these are referred to as the AHP practice matrix and incorporate universal, targeted and specialist roles. Full details including case studies can be accessed within the Guidance on partnership working between AHPs and education (SG 2010). However, a brief overview is given below.

Target Population/ AHP Roles	**Universal Role**	**Targeted Role**	**Specialist Role**
	For all children irrespective of need. Includes preventative or health improvement measures. Examples in practice could include Leaflets on common conditions, How to support play/ development , position for play and suitable toys	For children potentially in need of support but not referred and un-named. Includes general advice for non-specified children but not advice for a named child. This can be post-discharge but the advice will be of a general nature and not specific to any one child.	For children in need of support and have been admitted to the AHP service. (Open duty of care exists if assessment has identified need. Referral may not be accepted if needs can be met through universal or targeted support alone.) Individual or group work.

Target Population/ AHP Roles	Universal Role	Targeted Role	Specialist Role
Individual Child or Young Person - intervention may be provided within a group	Information about the AHP services available and how they can be accessed. Awareness of environments which will optimise a child's development and facilitate identification of need.	AHP support given to school staff to enable them to help individual children within the school to achieve their learning outcomes or a particular group of children with common support needs.	Following assessment of need child requires time limited periods of AHP intervention to achieve predicted outcomes. Effectiveness of AHP support must be evidenced and either further support negotiated or child and family prepared for discharge. Specialist role could include supporting school staff in meeting identified needs.
School/ Educational Provision(pre-school to end of secondary school)	AHP support that impacts on the whole school population.	AHP support given to school staff to enable them to help a particular group of children within the school to achieve their learning outcomes.	
Local Area/ National Context	AHPs work in partnership with national and local policy makers and planners to develop understanding of AHP contribution to influence best outcomes for children.	AHPs contribute to forward planning and resourcing for children with additional support needs.	

Individual Professions

Occupational Therapy

OTs support children with difficulties in practical and social skills necessary for everyday life, aiming to enable children to be as physically, psychologically and socially independent as possible.

The College of Occupational Therapy (2007) mission statement highlights that OTs are the only profession where activity (task, performance and/or process) is the main method of intervention. They use activity to enable people to achieve health, wellbeing and life satisfaction through participation in occupation (COT 2004) e.g. to develop practical strategies to assist children, young people and their families overcome barriers to their independence.

Interventions are focused on occupational performance areas of developmental age appropriate personal activities of daily living (washing, dressing, feeding, toileting, personal grooming, and mobility, seating), school access and engagement (e.g. handwriting, attention, copying from the blackboard, provision of equipment and / or adaptations); and developmental play.

Occupational therapists have specific skills in activity analysis, sensory integration, visual perception, and the impact of disability and mental illness upon occupational functioning (COT 2007). Occupational therapists provide a range of interventions for different conditions to help improve children's:

- **functional ability which may be cognitive, physical or emotional (or a combination)**
- **co-ordination**
- **physical, sensory, intellectual and or psychosocial difficulties.**

Orthoptics

Orthoptists assess various aspects of vision including eye movement problems and specific visual perception problems in children and treat the visual problem or offer advice on strategies to enhance/aid visual performance.

Physiotherapy

The Chartered Society of Physiotherapy defines physiotherapy as a means to restore movement and function to as near normal as possible when someone is affected by injury, illness or by developmental or other disability and may also include pain.

Physiotherapists use physical approaches in the alleviation of all aspects of a person's physical condition. They combine their knowledge, skills and approaches to improve a broad range of physical problems associated with different 'systems' of the body. In particular they assess, analyse and treat conditions which may affect:

- **neuromuscular (brain and nervous system)**

- **musculoskeletal (soft tissues, joints and bones)**
- **cardiovascular and**
- **respiratory systems (heart and lungs and associated physiology).**

Physiotherapists utilise their knowledge of normal motor development, deviations from the norm and paediatric pathologies to enable them to work effectively with children and young people of any age. This may include advice on handling, positioning, facilitation of movement, provision of an exercise/activity programme for young person/ family/education staff to follow and advice to parents and education staff on protecting themselves from injury.

Speech & Language Therapy

SLTs provide services that anticipate and respond to the needs of individuals who experience speech, language, communication or swallowing difficulties which may include language disorder or delay. Speech, language and communication are the foundation of children's intellectual, social and emotional development. Therefore children and young people who have communication support need are amongst the most vulnerable and most in need of effective support to reach their potential and to avoid social, educational and workplace exclusion.

Over a million children and young people in the UK have speech, language or communication impairment equal to 6% or 2 children per classroom. Children and young people with the following "diagnosis" are likely to have communication support needs - specific language impairment, dyspraxia, dyslexia, stammer, learning disabilities, cerebral palsy, autistic spectrum disorder and mental illness. Problems include slow development of verbal understanding, limited vocabulary, and an inability to generate grammatical or fluent sentences and / or apply the social rules of interaction

The communication environment in the early years is crucial in ensuring school readiness and in lowering the risk of low attainment. At the root of this is the link between early spoken language skills and subsequent reading and writing skills. Competence in oral language and the subsequent transition to literacy is a vital protective factor in ensuring later academic success, positive self-esteem and improved life chances.

Resources

NHS Lothian have developed a very useful resource as part of their ASL Health inclusion project http://www.asl.scot.nhs.uk/Pages/default.aspx , although some of the information is specific to Lothian other information is applicable across Scotland.

The resource includes: -

- **Therapy resource packs**
- **Resource sheets containing pre-referral advice**
- **Information sheets relating to health conditions**

- **List of published resources with suppliers' details**
- **Links to websites containing further information**

How to refer

Education staff, as well as parents, health and social care practitioners are able to refer a child to the appropriate AHP. To ensure that this is as effective and efficient as possible a robust and equitable triage and demand management system is being developed.

This will include triggers for referral which are likely to include: -

- **Eating and drinking difficulties**
- **Speech disorder or delay**
- **Movement, balance, co-ordination difficulties**
- **Difficulties with activities of daily living**
- **Difficulties with fine motor skills/hand function**
- **Difficulties in maintaining attention**
- **Difficulties re physical access to school**
- **Visual perception difficulties**

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6 Adapting language assessment to a multilingual environment: The New Reynell Developmental Language Scales multilingual toolkit.

Carolyn Letts and Indra Sinka

When aiming to get an overview of the status of any child's language development, it is essential to conduct assessment in all the languages that the child uses or hears regularly in their environment. Depending on the purpose of the assessment, it may then be important to establish whether the results of such an assessment represent typical language acquisition in these circumstances, or whether there is cause for concern. Both tasks pose major challenges in a bilingual situation such as that found within Gaelic medium nurseries and schools. In the case of the first task, materials are often not available in one or more of the languages used by the child; for accomplishing the second, acquisition norms are frequently not established.

The New Reynell Developmental Language Scales (NRDLS: Edwards, Letts & Sinka, 2011) were developed during 2009-11 and constitute the most recent update and re-standardisation of the Scales. The Scales were originally created by Joan Reynell in the 1960s and have remained popular tools for language assessment of young children in the UK. New research developments in both child language and child language impairments were incorporated into the revisions, and the standardisation involved 1266 children aged between 2;00 and 7;05 years living in England or South Wales, the vast majority of whom were monolingual English speakers (bilingual 'two first language' speakers were included where English was arguably one of their first languages). This means that the test norms for NRDLS are robust for these speakers and the materials are culturally and linguistically appropriate. However in the face of ever-growing linguistic diversity in the UK we felt it was important to consider how assessment needs for bilingual children and those with English Additional Language (EAL) could be addressed, and so the Scales come with a Multilingual Toolkit (MLT: Letts & Sinka, 2011) which provides guidance for adapting the test materials to different linguistic and cultural contexts. Adaptations could be large scale, involving re-trialling of test items and complete re-standardisation on the relevant population, but equally could be small-scale modifications to provide a practitioner with some (non-normed) information on the language competencies of individual children.

A basic principle underlying the MLT is that of looking at the purpose of any set of test items (i.e. what linguistic skill are they aiming to measure?) and considering how this might apply to a different linguistic context, rather than focusing on superficial translation to a different language. Examples of issues and possible adaptation strategies are drawn from the NRDLS sections and items, but the principles could equally be applied to any test or indeed to starting from scratch with a new assessment developed exclusively for a particular linguistic context. The MLT follows a common format for each section of the original test:

1. Re-visits the purpose of that particular part of the assessment (linguistic focus).
2. Explores issues that might arise when considering whether a similar set of test items would work in a different language.

3. Suggests questions to be asked/things to consider when adapting to a specific language.
4. Gives more specific guidelines for adaptation of the section from NRDLS.

A good example of some of the issues that can arise when considering assessment in different linguistic contexts is that of testing the use and/or knowledge of verb endings, or of verb morphology in general. In the monolingual English context, broad age norms have been available from as far back as 1973 for when particular verb endings are acquired by typically developing (TD) children (Brown, 1973). Particular endings that indicate tense in English have been the focus of attention in relation to children with language impairment (LI) who are known to have difficulty acquiring and using these forms (specifically past tense {ed} in sentences like he jumped, and third person singular present tense {s} in sentences like he jumps). See for example Rice & Wexler (2001), and Conti-Ramsden (2003). It is generally thought that this difficulty arises because these endings are low in perceptual salience ('surface account': see Leonard, 1998) and also, for {s}, relatively low in frequency: all other present tense forms (e.g. I jump, they jump etc.) have no verb inflexion. Clearly though these characteristics are specific to English. According to the World Atlas of Language Structures Online (WALS: http://wals.info/), at least 88 languages have no past tense form at all. Many others have much more complex systems of verb inflexions where all verbs carry markers for tense, person, number and so forth; ironically these systems may be actually easier to acquire providing that the system is absolutely consistent (i.e. no exceptions or 'irregular' verbs), and that there are not too many alternative sets of endings that depend on the type of verb (traditional 'conjugations'). Bedore and Leonard (2005) present evidence for this for Spanish speaking children with specific language impairment. NRDLS has sections exploring comprehension and production of tense endings in English which would clearly be irrelevant or require considerable adaptation if applied to other languages.

NRDLS and its forerunners were developed as 'omnibus' assessments, meaning that they aim to capture important developments across a range of linguistic levels. As such its use lies chiefly with identifying potential language delay or disorder, as indicated when a child falls short of expectations. In individual cases, the child's patterns of difficulty my also suggest areas where further more specific assessments would be useful, for example applying a test such at the Test for Reception of Grammar (TROG: Bishop 2003) when the child appears weak in sections that test knowledge of sentence structure and/or verb inflexions. In taking this approach, the authors aimed to include key milestones in language acquisition which include early vocabulary, word combinations, simple sentence constructions, verb inflexions (where applicable), complex sentences, inferencing and metalinguistic awareness as indicated by a grammaticality judgment task.

Although the example of verb inflexions given above illustrates how some linguistic features such as inflexions may be highly language specific, it seems plausible to suggest that there is also a basic sequence to language acquisition which is more or less universal. Children begin to produce entities which constitute single words (or stereotyped phrases which are each used as if they are singe vocabulary items), go on at a later stage to combine words to make novel sentences, and then combine simple

propositions into more complex sentences. At the same time, language interacts with wider cognitive development, as the child becomes more skilled at making sense of their world and being able to talk about it. Cognitive development is likely to be particularly demonstrated by the child's ability to make inferences, and by their understanding and expression of a range of concepts such as attributes as expressed through adjectives, or spatial concepts as expressed through prepositions. The ability to express any idea linguistically will be dependent on both cognitive and linguistic demands: in some languages a simple idea may involve a complicated linguistic structure and vice versa. This interaction should always be taken into account as far as possible but, while keeping this in mind, it is feasible to focus on different linguistic levels and/or stages of development and consider factors that may be important for each when adapting assessment to a different language. The following gives some examples:

1. Single words (early stage) or measuring vocabulary growth at any point in development:
    a. words that appear to be translation equivalents but occupy different semantic 'space' in each language –e.g. some languages have separate words for hand and arm while others will have just one word that covers both;
    b. concepts/ideas that can be expressed through a single word in one language but that require a multi-word phrase in another –e.g. Welsh codi llaw (literally 'raise hand'), English wave.
2. Word combinations/ simple sentences:
    a. varying word order across languages; the extent to which word order can be 'free', with sentence relationships (i.e. 'who did what to who/what') expressed through case endings on nouns;
    b. phrases expressing spatial relationships: prepositions may be deployed somewhat differently in different languages – e.g. English on the wall applies to both something on top of a wall and something, for example a clock or picture, hanging essentially parallel to or against a wall. English on covers both, other languages may have different prepositions to cover each meaning.
3. Complex sentences: these will often involve subordinate or relative clauses.
    a. Ordering of clauses may vary across languages, and also the extent to which relative pronouns (e.g. who in the sentence the man who was feeling ill went home early) are required;
    b. some complex forms such as passives, may be commonplace in informal spoken language, or may be restricted to academic language or hardly used at all.

(Please refer to the Multilingual Toolkit for further examples.)

The above gives an indication of some of the challenges associated with adapting test materials to different languages. However the purpose of assessment is often to ascertain whether a child's language is developing appropriately and here it is very important to consider the context in which language acquisition is taking place. This includes consideration of culture, of bilingualism, and of purposes and social situations for which language is used. The GME context is likely to have several specific characteristics which will influence whether a child's linguistic development can be considered typical or impaired and whether the child can communicate effectively in the different situations they encounter day to day. Culturally, a child in GME is unlikely to be very far away from a monolingual English speaking child in that both will be undergoing a similar educational curriculum and have access to similar home and social experiences, albeit with differences in that the GME child will have access to two different traditions. Linguistically, factors that will be important are likely to include the following:

1. Developing language in bilingual context: while it is generally recognised that bilingual language acquisition is 'different' from monolingual acquisition, and that therefore one should be cautious about applying even very general norms, there is less agreement on exactly how it is different. When comparing acquisition rate of a bilingual child with that of a monolingual child, if only one language is looked at the bilingual child may appear to lag behind, although there is widespread consensus that they will catch up relatively rapidly and usually by school entry age. What is less clear is whether there is a period of more general lag, where the child is behind monolingual norms in both languages (Gathercole, 2007; Kohnert, 2013). Common sense suggests that this would not be unexpected, given that the child is acquiring two linguistic systems. Features of the two systems, especially how similar or different they are from each other, are also likely to have an effect. Furthermore, this all assumes that the child is acquiring two languages simultaneously, with balanced input from both, and this is rarely the case. Differences in age of first exposure to each language and ongoing patterns of exposure and opportunities to use each language all make establishing norms very difficult.

2. First versus second language: some children in GME will hear Gaelic spoken routinely in the home and for many of these it will be truly their 'mother' tongue. For a significant number of others though, it will be their second or 'additional' language, acquired in the educational setting. Successful second language acquisition for all children in GME is essential, but it is likely to be more difficult to characterise what constitutes success if the second language is Gaelic, because norms may not be available. A child encountering difficulty with their second language may well not be language impaired if their first language is intact, but will nevertheless be disadvantaged and this difficulty will need to be identified and remedied.

3. Language dominance, both for the child and in the wider community: very few bilingual speakers are totally 'balanced' in their language skills, that is to say that they do not have equal abilities in each. Use of a specific language may be restricted to particular situations and activities for example, where the individual might find it quite challenging to use their 'other' language. Taken as a whole though, the bilingual individual will have the communicative skills for

any situation they encounter, drawing from each language as appropriate. For a child in GME, especially if acquiring Gaelic as a second language, Gaelic may be used extensively in the school setting, but English may be used predominantly in other settings with the child having a wider range of vocabulary in English. In many 'language contact' communities, code switching among all speakers may be common, including the use of mixed utterances where elements from each language are found within the same sentence. In the latter case the mixing is not arbitrary, but follows grammatical rules (Myers-Scotton, 2002). When assessing children it is important to recognise the grammatical complexity of code-switched utterances and that these may be indicative of linguistic sophistication (Pert & Letts, 2006).

4. Language change: all languages are subject to change over time and this can be particularly rapid in language contact situations such as Gaelic/English, in which one language will have an influence over the other. Children are the drivers of language change, so that these influences will be particularly strong during acquisition. One way in which Gaelic grammar is very different from English is in the use of 'fused' forms, where pronouns, prepositions and verbs may be linked together into one word. In English these would be expressed in a multi-word phrase. Similarly, where English would have auxiliary verbs (usually the verbs to be or to have, plus the modal verbs (can, will, should, etc.), Gaelic may have a verb with a suffix. At the same time, the possibility exists in Gaelic to express the same ideas without using fused forms; because these are similar to the forms they experience in English, children may prefer to use these. For example:

Bhithinn vs bhiodh mi ('I would be')

Agamsa vs aig mise ('at me')

For the purposes of assessment for language impairment, either form is likely to be acceptable, providing that it is consistent with what the child hears regularly and with what is used by other children with similar levels of exposure to Gaelic.

There are then multiple challenges to assessing the linguistic development of children in GME. Practitioners should aim to get an overview of the child's ability across the two languages, bearing in mind that there may be an imbalance of knowledge and skills across the two. Stages of language development that may be considered universal may be helpful in making this assessment (see Letts, 2013, for further discussion of this). It is important to consider the wider linguistic context for the child and how this may influence code switching behaviour and ongoing changes to the languages they use day to day. There will also be a need to weigh up expectations for a child in GME and what skills they need to succeed linguistically and academically in the GME context.

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7 SLT assessment and intervention: Best practice for children and young people in bilingual settings[1]

Carol Stow and Sean Pert

Foreword

This chapter is aimed at professionals in Scotland working with children attending Gaelic Medium Education (GME) presenting with speech, language and communication difficulties (SLCD). This typically includes speech and language therapists (SLTs), teachers, education staff and other related professionals. Space restrictions have in places limited the detail which could be included: we have therefore added a large number of references to enable the reader to explore the evidence in greater depth if they so wish. Given the statistical fact that the majority of SLTs working in Scotland will come from a monolingual English background this chapter is written from that perspective. Similarly, reflecting statistical facts, SLTs are referred to as "she" and children seeing SLTs as "he".

Introduction

Language and cultural identity are inextricably linked. English is the most frequently spoken language in Scotland. However, in the last few decades there has been growing interest and support for re-establishing Scottish Gaelic. This has led to the establishment of groups of people dedicated to preserving and re-invigorating the use of their language. The phenomenon is entirely understandable and indeed from a linguistic context entirely commendable but it is important to understand that the preservation of any one particular language is not the remit of the SLT. SLTs are concerned with the 7-10% (Law 2000) of children who are experiencing difficulties communicating. It is therefore appropriate to start this chapter with an examination of the role of the SLT with bilingual children. This also means that we must initially set out what we mean by bilingual in the context of GME.

Definitions

SLCN and SLCD

Speech, language and communication needs has become a popular term following the UK cross-party Bercow report (2008). However, recent research has shown that the term is not understood in the same way by parents and professionals. Lindsay et al. (2010) distinguish between three sub-groups of SLCN. It is children presenting with primary speech, language and communication difficulties (SLCD), …where language difficulties occur in the absence of any identified neurodevelopmental or social cause' who are the focus of this chapter.

There may be many children who have SLCN '…associated with limited experiences, typically associated with socio- economic disadvantage'(Lindsay et al. 2010), but these children are not within the remit of clinical speech and language therapy interventions. Note that additional language learners may be described as presenting with SLCN caused by insufficient exposure to the additional language, but such individuals are not likely to experience life long difficulties with their (core, central) communication skills (SLCD).

[1] This document was commissioned by RCSLT and has been approved by accredited RCSLT expert advisers.

Speech and Language Therapists

'Speech and language therapists (SLT) assess and treat speech, language and communication problems in people of all ages to help them better communicate. They'll also work with people who have eating and swallowing problems.' (NHS Careers, 2014).

'Speech and language therapists (SLTs) are the lead experts regarding communication and swallowing disorders.' (Royal College of Speech and Language Therapists (RCSLT) 2006: 2).

Both these definitions highlight that SLTs work with communication problems or disorders. ,Indeed "...detailed assessment will facilitate the SLT to reach a differential diagnosis and establish if there is a primary communication difficulty that does not arise as a result of acquiring... an additional language' (RCSLT 2006). The section concerning bilingualism in professional guidelines specifically states 'Bilingualism is not a disorder...' (RCSLT 2006: 269).

Therefore, SLTs are not concerned with typically developing bilingual children, especially when the concerns are about the acquisition of additional language skills. Typically developing children will acquire an additional language(s) without specialist intervention.

In the Gaelic medium context this has the following implications. The SLT should consider the following children as clinical cases at the specialist level:

- **Children whose first language is Gaelic who experience speech, language and communication difficulties (SLCD) affecting their Gaelic, and any additional languages the child is expected to acquire, such as English**
- **Children whose first language is English who experience SLCD affecting their English, and any additional languages the child is exposed to such as Gaelic**

- **Children simultaneously acquiring two languages such as Gaelic and English who experience SLCD affecting both their languages when compared to other bilingual children**
- **Children whose first language is another community language (such as Punjabi) who experience SLCD affecting their first language, and any additional languages such as Gaelic and English.**

The SLT should consider the following children as candidates for further educational support (universal or targeted level, see Gascoigne (2006)), but not as clinical cases:

- **Children whose first language is Gaelic who have appropriate verbal skills in Gaelic but have yet to successfully acquire an additional language such as English**
- **Children whose first language is English who have appropriate verbal skills in English but have yet to successfully acquire an additional language such as Gaelic**
- **Children whose first language is another community language (such as Punjabi) who have appropriate verbal skills in their first language but have yet to successfully acquire an additional language such as Gaelic or English.**

The key principle underlying the above is that when a child has shown that they can successfully acquire language skills they must have developed the requisite component skills (semantic, grammatical, pragmatic etc). These skills may therefore be utilised to acquire additional language(s) given sufficient exposure and the pragmatic need to use an additional language.

Bilingualism

There are many routes to bilingualism and the term bilingualism itself is defined in contrasting ways by different authors (Afasic 2007). It is not the remit of this chapter to explore all these routes and the myriad terminological issues associated with this complex and fascinating topic.

RCSLT (2006) defines bilingualism as 'individuals or groups of people who acquire communicative skills in more than one language. They acquire these skills with varying degrees of proficiency, in oral and/or written forms, in order to interact with speakers of one or more languages at home and in society. An individual should be regarded as bilingual regardless of the relative proficiency of the languages understood or used.'

The above definition would therefore incorporate other terms such as 'trilingualism' and 'multilingualism'. The definition would also apply to mainly monolingual individuals who have no or minimal experience of an additional language but who are expected to acquire an additional language such as Gaelic.

It is important to highlight that 'As bilingualism does not cause communication disorders there is no reason why bilingual children should have a different rate of speech and language problems from a monolingual populations' (RCSLT 2006: 269). Parents and

carers may have a false belief that exposure to two (or more) languages has 'confused' their child. They must be reassured that the evidence base does not support such a belief (Baker 2000:79).

Code switching

Bilingual individuals have access to two (or more) languages. When a person changes from one language to another within a conversation, this is known as codeswitching (Myers-Scotton 2006, Winford 2002, Duncan 1989, Grosjean 1982).

There are two ways in which an individual may switch languages. The speaker may say a complete spoken sentence in one language and then change (or 'switch) to another language (or code) for the next. This is known as inter-sentential codeswitching. A speaker may also switch languages within a spoken sentence to produce a truly bilingual utterance formed from words and morphemes from two or more languages. This is termed intra-sentential codeswitching. Other researchers use the term intrautterance-code-mixing. Other researchers use the terms intrautterance-code-mixing '...because children - and adults - seldom speak in complete sentences.' (Genesee et al.2004).

'Mixing languages' may be viewed negatively by monolingual listeners and even bilingual speakers themselves may perceive codeswitching as lazy or sloppy speech (Baker 2002, Grosjean 2001). In the past, professionals have claimed that codeswitching is a sign of confusion, language disorder, or at the very least a way of filling in gaps of vocabulary knowledge. This is not the case. Codeswitching is '... constrained by syntactic and morphosyntactic considerations... (Auer 1998). Codeswitching is common and a sign of proficient bilingualism (Muysken 2000). Children's bilingual spoken sentences, enabling bilingual children to exhibit their true language potential (Pert and Letts 2006). This typically occurs when conversing with other bilinguals as even very young children are aware that certain languages should be used with certain conversational partners (Genesee et al. 2004).

Codeswitching varies between speakers and different linguistic communities (Winford 2003). Where codeswitching is frequent and acceptable in adult conversation, it is likely also to occur in children's speech. Since producing a spoken sentence using two languages is a sign of linguistic competence, children who do not produce code switched utterances may in fact have difficulties with syntax and grammar. Such children should be considered for further language assessment to test for language difficulties. Typically developing bilingual children's frequency of codeswitching actually increases with age and language ability (Pert 2007). This challenges the view that codeswitching occurs merely because the child is 'plugging a gap' in theiradditional language with a home language item. Children appear to view comparable lexical items in their two languages as synonyms, and use them as they feel appropriate. There is evidence that children with specific language impairment have much lower frequency of codeswitching and are unable to integrate two languages together in a sophisticated manner (Pert 2007).

Codeswitched bilingual utterances are not simply a random or haphazard 'mixing' of words and morphemes. Codeswitched spoken utterances are constructed using one of the languages as the frame. This means that the phrase (word) order will be taken from one of the speaker's languages and will not change even if all the content words are from

the speaker's other language. The frame comes first and content words are then inserted into that frame. The speaker will tend to unconsciously use any words from their lexicon and from either (any) of their languages. This happens in the same way in which a monolingual speaker might use two synonyms interchangeably.

Content words, most frequently nouns, are then inserted into the frame, maintaining the phrase order of the frame language and the integrity of any required morphology. For a detailed discussion of contact linguistics please see Myers-Scotton (2002) and Pert and Letts (2006) for examples from child language.

Code switching is different to lexical borrowing, where words from another language have been completely integrated into the language and are often phonologically and morphologically adapted (e.g. cappuchinos).

Speakers of minority and endangered languages are often concerned with avoiding undue influence from other majority languages and prefer speakers to use what they percieve as a 'pure' form of the language. Even a widely spoken language such as French has the Académie française to regulate the language. Such aims are understandable from a community viewpoint when a language may be closely associated with culture and identity.

However from the child's perspective, the bilingual codeswitching utterance is not conciously labelled by language, and lexical items are viewed as mere content to convey menaing. Correcting such utterances as 'errors' focuses on the 'surface' form of a child's communication, rather than the underlying thematic roles (meaning) and so will have little relevance and impact on the child other than to frustrate them.

It is important to differentiate codeswitching as a strategy to bridge two languages in the very early phase of second language acquisition and true proficient codeswitching. If a child does not know a word in their additional language they may consciously select an analogous word from their home language. Codeswitching a lexical item (typically a noun) from the additional language into the home language is more likely to be of the (unconscious) proficient type (Roseberry-McKibbin 2007: 92).

The clinical implications of codeswitching behaviour in children are important in the advice given to parents, during the assessment process and in delivering therapy. Parents are often advised to use a one-parent one- language approach to avoid the child becoming 'confused'. Research has shown that this is frequently unfeasible (as adults code switch themselves and are unaware of the fact) and unnecessary, as children are able to identify which language is appropriate for a conversational partners, topic or situation from a young age (22-26 months of age; Genesee et al. 2004)). Parents should be advised to use whichever language they feel appropriate, with the caveat that the child must receive enough exposure to a language in order to have an opportunity to acquire that language. This may be an issue if one parent is the main carer for the child and the other has limited time to interact in their language (Romaine 1995: 186). Other experts have recommended one language in the home and another outside the home (Grosjean 2009), but each method has to be tailored to the unique situation of the family and the languages involved. The main considerations are that children should receive adequate exposure in natural situations, during play and learning activities

and in social situations. When the child has an identified SLCD Grojean KLJKOLJKWV WKDW 'It is a widespread and erroneous idea, still conveyed by some professionals, that things will improve if parents revert to just one language' (2009: 6). Languages are not an additional load or demand on a child (Malakoff and Hakuta 1991: 141). This is also true when considering children who present with non-fluent speech (stammering) and such children do not have to be advised to use only one language.

During assessment of a child's expressive language, in order to gain the most representative language sample, the child should be assessed by a bilingual professional who the child knows can speak their languages. The environment should ideally not be associated with exclusive single language use. For example, in a Gaelic medium school a child may be less likely to use English as they associate educational activities with Gaelic and not English. An appropriate environment may be achieved by the use of bilingual SLTs or a monolingual SLT with a bilingual interpreter or assistant, and selecting materials and topics which are appropriate to the languages being assessed. The use of codeswitching in the language sample should be carefully analysed to identify if the child has been successful in producing an intact syntactic and grammatical frame.

Assessment of vocabulary should credit the child with a word regardless of which language they have acquired that word in. Children should not be expected to have both words in both languages for all categories. The concept of an ideal balanced bilingual is unrealistic (Hamers and Blanc 2000:34-35). For example, school related vocabulary will tend to be better developed in Gaelic if the child attends a GME school. The child should not be corrected for using a codeswitched lexical item.

Comparison of bilingual children's vocabulary growth to monolinguals will always show the bilingual to be less well developed from this perspective. However, when adding together the child's overall vocabulary across both (all) languages, it will be simialr to a monolingual child's development. Social and linguistic flexibility convey more advantage to the bilingual speaker than the raw total of words that the child knows (Bialystok, Luk, Peets and Yang 2010, Smithson, Paradis and Nicoladis 2014).

SLCD in a bilingual context

Referral

An obvious pre-cursor to SLT assessment is for the child to be referred to the SLT service. Referrals should be accepted in home language and an access and discharge policy should be written recognising a clear bilingual pathway. There is evidence of both under and over-referral of bilingual children to SLT services (Winter 2001). Over-referral happens when professionals fail to take into account the sum of all the skills a bilingual child exhibits when all the languages they understand / speak are considered and consider the chilG'V skills in only one language, taking no account of how long the child has been exposed to that language. Under-referral of bilingual children is widely reported in the literature (Crutchley, Botting and Conti-Ramsden 1997, Broomfield and Dodd 2004). There is also evidence that referral patterns for bilingual children vary significantly in comparison to their monolingual peers with speech disorders being under-represented (Stow and Dodd 2005). Departments are encouraged to conduct audits

of referrals to ensure that bilingual children are being referred in appropriate numbers (in relation to their representation in the local population) and to take remedial action where appropriate. Such action might include training referral agents to ensure all the languages spoken / heard by a child are considered prior to referral. Good practice is for referral forms to include a section for the referral agent to give information regarding all the languages to which a child is exposed.

Assessment: Case history and parent interview

As with any monolingual child, in order to evaluate the bilingual child in a holistic manner it is important to gather a full profile of the child's developmental history, medical information, educational experience and attainment (if any). This information is usually sourced from discussions with parent(s)/carer, medical professionals such as Health Visitors and Paediatricians and Education Staff. This information may help to identify any underlying causes of SLCN including sensory impairments (e.g. hearing loss) or learning difficulties.

For the bilingual child in addition to this usual case history, the parental interview should include a language case history. This will cover information about all the languages to which the child is exposed, considering the conversational partners, the language(s) used and the pragmatics of the situation. For example, a bilingual child who speaks English at home and Gaelic at school may use English with his brother for play activities; Gaelic and English with his mother depending on the topic; and Gaelic with his Gaelic speaking teacher.

Language selection is likely to depend heavily on the following factors:

- **Conversational partner ± the child knows which languages their partner speaks and is unlikely to use a language they do not know**
- **Activity ± including playing games, homework, leisure activities, shopping etc. These activities will be linked to a particular language by either:**
  - **Topic, e.g. homework set in Gaelic is likely to be discussed in Gaelic**
  - **Location. e.g. a friend's house where the family are known monolingual English speakers**
- **Group identity ± the expected language may be changed when a group of bilingual speakers are together and wish to speak 'privately' or create a sense of group unity, e.g. speaking Gaelic in a typically English speaking environment.**

The language case history will provide a profile of when a child started to talk in each of their languages and, considering their exposure and demand for use of that particular code, how well they have developed their skills. In order to do this the SLT must have a realistic idea of the typical pattern of bilingual language acquisition. This does not mean that the SLT has to rely on normative data. The SLT should be examining the relative development of each of the child's languages considering if there is any broad deficit which may not be explained by lack of exposure or opportunity to use the language. The

SLT must also ask: "Has this child the appropriate language skills expected froma child of this age and language exposure to communicate effectively in the language situations they face every day?

A bilingual child is not two monolingual speakers in one (Grosjean 1982). The SLT must therefore consider the bilingual child's language ability across both/all their languages. If the child has demonstrated sufficient progress considering the input they have received, then they are likely to be a typical language learner.

The pitfalls for the SLT evaluating a bilingual child's language skills are:

- **Incorrectly diagnosing insufficient additional language skills as an SLCD - often by considering each of the child's langauges in isolation rather than as a whole**
- **Missing a core SLCD by assigning poor overall language development to bilingualism alone. Bilingualism does not cause or contribute to SLCD and cannot therefore explain overall insufficient language skills.**

Assessment: General comments

It has been observed that bilingual children have higher rates of non-response when requested to participate in formal speech and language assessments. Stow and Pert (2006) found that bilingual children did not name all the items

on a picture based phonology assessment and several children refused to name any items at all (Stow 2006). SLTs should be aware that previous authors (Wyatt 1998, Wei, Miller, Dodd and Hua 2005) have highlighted the use of silence within some cultures to indicate politeness particularly in the presence of strangers who are viewed as having a higher social position.

SLTs may need to try alternative assessment methods including parental checklists and observation of the child in different familiar settings. Dynamic assessment (assess ± teach ± reassess cycle) is another form of non- standardised assessment which many SLTs have found useful when working with bilingual children (ASHA 2014).

Setting the scene is important when assessing bilingual children. Grice's Cooperative Principle means that speakers try to adapt to each other to maintain communication. For this reason, bilingual children try to establish which language their conversational partner speaks. Children have been observed to use ethnicity (appearance) as a cue to which language to use (Stow, Pert and Khattab 2012). When such cues are absent or unreliable, children will need to rely on the language(s) they hear in the setting. It is important to signal that both (all) languages are acceptable. The team should engage the child in general conversation and 'settling in' activities using both (all) languages.

However, when assessing the bilingual child, it is important to explain which language is going to be the focus for this particular session. By using one of the child's language, the input activates the frame of the language in the child's linguistic system (if sufficiently developed). This means that a bilingual child is more likely to use spoken sentences from the language they hear around them. This does not mean that code switching is

forbidden and it islikely that individual lexical items from the child's other language may be inserted into the frame.

By assessing each of the bilingual child's languages in separate assessment sessions, the chances of language-specific syntactic and grammatical frames are higher (see Myers-Scotton 2002). The SLT is therefore more likely to elicit a more representative sample of the child's language ability.

If the SLT speaks what is perceived to be tKH 'SUHVWLJH' language, the child is likely to attempt to respond in that language. Potentially this will lead the SLT to conclude that the child is dominant in that language. However, this may be an artefact of the cooperation principle and SLTs should assess both (all) languages to which the child is exposed (RCSLT 2006).

Assessment: Informal and formal direct assessment

SLTs are familiar with assessing aspects of a child's communication skills using convenient toy and/or picture based assessments. Frequently these assessments are compared with checklists, profiles or scoring systems in order to compare the child under examination with the typically developing population. Such assessments are convenient and often reliable, especially when normative data are based on large samples of children over a large age range. Published assessments are available in English for domains such as verbal comprehension, expression, vocabulary development, articulation and phonology. The scores from such standardised assessments are often used to provide a clinical diagnosis and also as entry criteria for different sources of support such as specialist educational provisions.

When assessing a bilingual child, the very premise of these assessments is called into question. Although a few assessments have been adapted and re- standardised on languages other than English, or even developed especially for speakers of other languages, there is still a severe dearth of standardised assessments for speakers of major languages. This situation is even worse for minority language speakers.

Many professionals point to the development of assessments in other languages and comment that when there are assessments available for a range of languages then it will be easy to assess a bilingual child. Such commentators forget that even where non-English standardised data exists, it is frequently based on monolingual speakers of a language. By definition, bilingual speakers are not monolingual speakers of either (any) of their languages.

Translating assessment materials means that much is lost or altered by the act of translation. Languages do not encode concepts and grammatical relationships in the same way. Even basic syntax may differ. Scoring a translated assessment is therefore meaningless. Speech sounds inventories will be different, as well as phoneme distribution and development.

For these reasons, and in line with professional guidelines, it is important that scores developed on a monolingual population are never used to diagnose SLCD in a bilingual chilG '... there is risk...if normative data that has been developed with monolingual

populations is applied to bilingual populations…' (RCSLT 2006:270).

In order to assess a bilingual child in an unbiased manner, materials should be used which examine speech and language skillsappropriate to the child's age and experience. Such assessments, especially for language will be descriptive and provide a language sample which will hopefully include a range of spoken sentence structures.

There is relatively little known about typical Gaelic language development, especially in the bilingual context and also little known about SLCD patterns in Gaelic speaking children (Donaldson 2014). Ultimately, the development of both monolingual and bilingual data sets for assessments developed in a culturally sensitive manner should be funded. In the meantime, as recommended by professional guidelines, 'where standardized assessments are not available SLTs should make use of informal assessments and observation' (RCSLT SIG Bilingualism 2007: 11).

Individual SLTs and services may therefore wish to develop their own informal assessments for the purposes of:

- **Gathering a language sample**
- **Compare the child's performance with any known developmental checklists / compare with typically developing bilingual children**
- **Set therapy targets based on needs and strengths**
- **Re-test the child after period of time to evaluate the child's performance against their predicated progress**
- **Re-test the child following input and compare with their own baseline.**

Assessment: Verbal comprehension

Traditionally this domain is assessed by SLTs prior to expressive language and it is widely thought that comprehension skills are a prerequisite to the development of expressive language skills. Recent research suggests that the picture is more complex and that comprehension and expression develop interactively and are not as easily separated as previously thought (Hendriks and Spenader 2006, Ambridge and Lieven 2011, McKean et al. 2012). Children may therefore be able to use constructions which they cannot yet reliably understand. The situation and context of the comprehension task is also important, as well as the child's motivation and attention at the time of testing.

Discontinuation rules for some standardised assessments may give misleading results and the child should have an opportunity to complete the full assessment procedure. It has been observed that bilingual children may fail 'easier' concepts and structures on the Test for Reception of Grammar (Bishop 2003) and yet go onto demonstrate understanding of more 'FRPSOH[' grammatical structures (Quinn 2001). This may be because they have only encountered 'easier' structures in their first language and more 'complex' structures later on in their additional language. For these reasons the SLT should be cautious of relying on simple comprehension activities as a valid measure of the child's comprehension.

Observation of the child's responses in an educational and home setting may give more insight into their ability to understand in real situations involving pragmatic as well as linguistic interpretation skills (Bishop and Adams 1992).

Should the SLT wish to assess the child's comprehension skills in a more traditional manner in a clinic setting, it is essential that the task is carried out in both (all) the languages to which the child is exposed. Objects or picture materials should be familiar to the child and consideration given to using less formal, more normal utterances in place of the often over-formalised and less frequently heard spoken requests used in many published assessments (Riches 2014).

Many of the SLTs are familiar with describing a child's comprehension skills in terms of the number of information carrying words (Knowles and Masidlover 1982). This concept relies on the very sparse morphology of English and rarely translates to other more morphologically rich languages, e.g. in Mirpuri (a Pakistani heritage language).

Table 1. Example of the translation of a morphologically impoverished language into a relatively morphologically rich language

English question:	Who's eating? (one information carrying word - action)		
Mirpuri translation:	kira	**ka**-na	pia
Literal translation:	which-one + male gender inflection	eat-ing + male gender inflection	is + male gender inflection

When translated into Mirpuri it is no longer possible to speak of one word to one piece of information correspondence. Note that the question word 'kia' is both a question and indicates that the speaker is asking about a boy or a man; the verb carries an obligatory gender ending indicating present tense and the gender of the person carrying out the action; and the auxiliary is similarly encoded with two pieces of information. In summary, the English question is a one information carrying word instruction and the Mirpuri is arguably a six information carrying morpheme instruction. In addition, in this example the SLT would have to ensure that all the action pictures used were of males in order to avoid giving away clues from the question (which obliges the use of a male or female question word).

The pitfalls of translating even this very simple question are obvious and these pitfalls are discussed, briefly, below in the section on translation.

Assessment: Expression

All expressive language assessments should include activities, objects and people wearing clothing that children recognise and are familiar with from their own daily lives. This is especially important for bilingual children who may link certain activities to one

of their languages. Thus in the context of GME a child shown a picture of a teacher in front of a class is more likely to respond in Gaelic than in their home language.

Informal picture assessments should aim to include a range of concepts and grammatical structures which are relevant to the child and which the child is likely to use on a daily basis.

SLTs are used to the concept of informal assessment. Given the dearth of assessments specifically designed for the use with bilingual children, informal assessment is essential. Informal assessment does not imply casual recording; the transcription of expressive language involves meticulous notation and a systematic translation protocol. Recording, translating and analysing spoken utterances accurately is crucial to the assessment of the bilingual child's expressive language ability.

It is strongly recommended that the original language sample is recorded where possible using a digital audio or audio-visual recorder. This will involve gaining consent from the parent(s)/carer for young children and where appropriate from the young person themselves. All recordings should be securely stored and any local and national policies and procedures carefully adhered to.

Translation is at the heart of linguistic analysis and is perhaps the most technically complex activity in the assessment of bilingual speakers. The SLT has a role in making the translation process transparent in order to ensure that artefacts of translation are not misconstrued as errors or omissions on the part of the bilingual speaker.

Translation

There is insufficient space within this chapter to discuss all the complexities of translation. However, we will highlight some key aspects.

The language sample should be transcribed by a person or persons with the following skills:

1. Native or near native language ability in both (all) of the languages used within the language sample

2. Knowledge of linguistic analysis, syntax and morphology

3. Knowledge of code switching analysis

This may be a bilingual SLT, or more commonly a monolingual SLT working alongside a bilingual translation professional such as a translator, interpreter or bilingual assistant. Within the context of GME it is likely that the translation will be provided by an education professional working in a GME school, or a parent. The role of the SLT is to assist in the translation process to gain the most accurate picture of the child's abilities.

It is suggested that a five-line translation grid (see Table 2 on the next page) is used in order to preserve the child's original utterance and to make the stages of translation transparent. The source language is the language in which the child's utterance was spoken. The target language is the language the utterance is being translated into. Note

that the words 'source' and 'target' are the terms used by linguists in the context of translation and should not be confused with 'target of thereapy' or similar terms.

Table 2. Translation protocol	
Expected utterance:	The expected sentence
Child's utterance:	Transcribe using standard orthography or preferably IPA script directly from a recording
Word-by-word (morpheme-by-morpheme) translation:	Write a direct translation of the lexical aspects and any grammatical aspects directly under each morpheme, maintaining the word/phrase order of the original utterance
Final translation:	The word/phrase order is transposed to the target language
Comments:	Notation on code switching and other aspects of note such as what the child has omitted, errors of frame etc.

Table 3 is an example from Mirpuri. This spoken utterance was produced by a 5 year old boy who was a bilingual Mirpuri-English speaker. The frame of his utterance is Mirpuri, but he is beginning to insert English verbs and nouns. The fact that he can code switch and maintain the grammar and word order of the Mirpuri frame shows that he is developing typically for a bilingual child. This child was not a candidate for speech and language therapy intervention.

Table 3. Example of an intrasentential codeswitched bilingual utterance translated using the translation protocol: Typical codeswitching					
Expected utterance:	jena man	siri ladder	cher-na climb + present progressive + male gender inflection	pija is + male gender inflection	
Child's utterance	man	ladder-s	climb	kar-na	pija
Word-by-word (morpheme-by- morpheme) translation:	(a / the) (E) man	(E) ladder-s	(E) climb	do-ing + male inflection	is + male gender inflection
Final translation:	(the) man is climbing ladders				

Comments:	1. Mirpuri word/phrase order correctly produced 2. The determiners 'a' and 'the' do not have analogues in Mirpuri and are therefore not omitted. 3. Code switching: a. Appropriate code switching of verb into English by using the dummy verb 'do' ('kar') to carry the obligatory male gender inflection ('-na') to agree with the agent ('jena' - man) b. Appropriate code switching of the nouns 'man' and 'ladders' and these code switched items didn't influence the word/phrase order 4. No syntactic or grammar errors in this utterance
Key:	(E) = produced in English in the source () = denotes an inferred word in the final translation

Table 4 is an example from a language sample provided by a 5 years 11 months old boy who attended a language unit. Although he had made progress in his mean length of utterance, he still made grammatical errors. Note that a direct translation of the utterance would not highlight the incorrect gender agreement problem as there is no analogue in English.

Table 4. Example of an utterance translated using the translation protocol: Morphological error

Expected utterance:	jenani lady	kitab newspaper/ book	par-ni read + present progressive + female gender inflection		pi is + female gender inflection
Child's utterance	jenani	kitab	par-ni		pi-ja
Word-by-word (morpheme-by- morpheme) translation:	(a / the) lady / woman	newspaper	read	ing + female inflection	is + *male gender inflection
Final translation:	(the / a) woman is reading (the / a) newspaper				
Comments:	1. Mirpuri word/phrase order correctly produced 2. The determiners 'a' and 'the' do not have analogues in Mirpuri and are therefore not'omitted' 3. Code switching: None 4. Correct gender inflection on the lexical 'read' (par) but incorrect male gender agreement on the auxiliary verb 'pi' 5. Grammatical morpheme agreement error in this utterance ± child may have learnt the use of the male auxiliary 'pija' by rote and note yet checking the agreement with the gender of the agent.				
Key:	* denotes an error in the child's utterance				

Although this procedure may appear lengthy / complex, these examples demonstrate that only keeping a record of online translation (i.e. writing down a translation of what the child said as he said it) would have lost the richness of data and the ability to discuss and consider in-depth the child's verbal output.

Research suggests that typically developing bilingual children do not make gross syntactic and grammatical errors beyond the age when most children have mastered spoken grammar skills (Pert and Letts 2006). The SLT should not make allowances for bilingual children solely on the basis that they are learning two or more languages.

O'Toole and Hickey stated that bilingual children with SLI appear to use levels of code switching that are higher than would be expected (2012), with some children adding (Irish) inflections directly to (English) verbs. They viewed this as problematic. It is important to distinguish normal codeswitching behaviours from impaired patterns. Where children maintain an acceptable monolingual frame and the grammar is maintained, verbs and nouns may be inserted from another language (with verbs often underspecified and used as nouns). In contrast, children with impairments fail to integrate two languages together satisfactorily and often violate the frame. However, the use of lexical items and their frequency is irrelevant; it is the manner of the integration that is crucial.

While educators and parents working to support and encourage the use of Gaelic are understandably concerned on hearing a high frequency of English lexical items inserted into Gaelic utterances, the SLT's role is not to encourage a child to use only Gaelic lexical items. Rather it is the syntactic and grammatical aspects which should be of concern.

Assessment: Speech

Speech assessment examines the areas of articulation and phonology. Phonology may include output and phonological awareness. For SLTs, it is the spoken and aural aspects of this domain that are of clinical interest. This section will therefore not include any comments on the orthography and links between speech sound development and literacy. The SLT does however have a role in advising on the teaching of literacy to children where they are experiencing articulation and phonological impairments.

There is increasing evidence to support the hypothesis that bilingual children have separate phonological systems for each of their languages. Vihman (1996) reported infants hearing more than one language (i.e. in a bilingual context) demonstrated language specific babbling vocalizations by 10 months. Studies of older bilingual children learning a variety of language combinations (eg. Dodd, Holm and Li Wei 1997; Holm and Dodd 1999; Holm, Dodd, Stow and Pert 1999; Monroe, Ball, Muller, Duckworth, Lyddy 2005) have reported evidence of:

- **Contradictory error patterns (for example fronting a phoneme in one language and backing it in another)**
- **A phoneme acquired in one language but not the other**
- **Phonemes specific to one language were not used in the other, evidence that the children were aware of the constraints of each language's phonological system.**

For the speech and language therapist, knowledge of both normal developmental patterns and the nature of disordered patterns is essential in order to reach a clinical diagnosis and to inform treatment decisions. In addition to having information regarding the age of acquisition of phonemes clinicians working with children with speech disorders also need to have information regarding the pattern of phonological error patterns observed as normal development occurs in a language. If no such data are available the bilingual child is at risk of being diagnosed as having a disorder on the basis of error patterns which are atypical in monolingual children but which may be normal in conditions of bilingual acquisition. Data will help facilitate application of the labels delay and disorder, which in turn can influence the type and amount of intervention. However, few norms are available for the acquisition of phonology in languages other than English and fewer still outline acquisition in a bilingual context.

There is evidence in the literature that bilingual children make phonological errors which would be viewed as atypical in monolingual children speaking the same language. Watson (1991:44) suggested that 'the bilingual may have two systems, but which differ in some way from those of monolinguists.'

The classification of speech disorders

Children with speech disorders do not form a homogeneous group. In recent years several authors have suggested differing methods for classifying children with speech disorders in to a variety of sub-groups. These differing methodologies take into account factors such as age of onset, severity, aetiology and a description of symptoms. Assignation to such a sub-group may then have implications for types of therapeutic intervention and outcome.

Dodd (1995, 2005) developed a classification system with psycholinguistic underpinnings which is based on the symptoms observed in the child's presenting speech. She proposed that children with functional speech disorder could be classified into four sub-groups:

- **Articulation disorder**
  Children with a phonetic disorder who consistently produce a target sound with the same substitution or distortion, irrespective of phonetic context
- **Phonological delay**
  The error patterns observed in a child occur during normal development but are typical of younger children
- **Consistent phonological disorder**
  Consistent use of one or more non-developmental error patterns
- **Inconsistent phonological disorder**
  the child has multiple error forms for the same lexical item. The child's phonological systems show at least 40% variability.

There is a growing body of evidence that confirms the existence of these sub-groups within groups of children who are monolingual English as well as bilingual speakers (Holm et al 1999, Broomfield and Dodd 2004b, So and Leung 2006, Yavas and Goldstein 2006) and evidence is emerging for monolingual English speakers that different therapeutic interventions and techniques are appropriate and effective for each subgroup (Crosbie, Holm and Dodd 2005). In bilingual speakers it has been noted that children with speech disorder have the same type of disorder in both languages, no child having yet been described who has a delay in one language and a disordered pattern in another. Surface error patterns reflecting this disorder may, however, differ in each language (Holm and Dodd 2001).

The increasing evidence that bilingual children develop separate phonological systems for each language has inevitable consequences for the speech and language therapist assessing a bilingual child with suspected speech disorder. It is essential to assess all the languages a child speaks and then compare the child's performance to normative data derived from bilingual children speaking the same language combination. This is reflected in professional guidelines (RCSLT 2006 270) which state 'there is also risk if normative data which has been developed with monolingual populations is applied to bilingual individuals´ but will prove challenging within the context of GME where few data are available regarding the development of Gaelic and other languages.

Therapists working within a GME context are advised to use existing assessments of English to gather data regardina child's skills in English. Caution should be demonstrated when comparing the child's performance to any normative data which may have been developed with only monolingual English speaking children.The child's skills in the other languages they speak should then be assessed following the same principles outlined above i.e. ensure that the correct language environment is set before embarking on the assessment by, for example, assessing only one language, not multiple languages in a session. It is also advised that using different pictures when attempting to elicit the word for the same item will help facilitate the child to stay in the target language: if the child sees a picture he has previously been asked to name in English when he is now being asked to name in Gaelic he may be triggered to revert to English output. SLTs have the knowledge needed to develop their own speech sound assessments when encountering a language for which there is no published assessment. The development of such an assessment is described in Stow (2006: 133-138).

Recommendations and Language Therapy

RCSLT guidelines clearly state that the SLT should provide '...intervention in the individual's mother tongue when necessary/appropriate, ie when it is the individual's preferred/dominant language. Language choice should be agreed with families. With regard to children, the evidence base demonstrates both the need for mother tongue therapy in cases of speech disorder and the efficacy of theraputic intervention in the individual's mother tongue in language delay and disorder' (RCSLT 2006: 269).

It is important not to focus on the child's current skills set and use only the areas of strength as this often presents a misleading profile of the child. For example, SLTs may argue that what appears to be the child's dominant language should be used for therapy. This decision may be incorrect if the 'dominant language' is established through assessment which has covertly or overtly signalled to the child that a particular language is favoured. This may happen if assessment has been undertaken which strongly signals that one of the languages is required (see above). In addition, children with SLCD may have missed early language acquisition opportunities (at home) and then started to acquire skills later (at school). The child's the profile merely shows that they have taken a longer time to commence expressive language use, and they wish to speak like their peers in a monolingual environment. Given sufficient support, their bilingualism will often flourish.

The child's parent(s)/carer may also feel obliged to favour a language therapy without understanding the implications of their choice. This is especially true if the language of education is different to the language of the home. Education is highly valued and parents may express a wish to use only the additional language, even if they do not speak it very well, in order to boost their child's school performance. Research shows that children with a well developed home language are better at acquiring additional languages, and so therapy should be encouraged in the home language initially.

It is also likely that the home language is the best language model for thechild, as this is the language the parent knows best. Parents attempting to use an additional language may provide less than ideal input for their child.

Parent's should be asked to consider what they wish for the endpoint of their child's care. i.e. when your child is a young adult, do you wish them to be bilingual or monolingual? Are you happy if your child is unable to speak one of their languages to members of the extended family or community? RCSLT guidelines highlight that 'Bilingual individuals may be vunerable to well-meaning, but ill-informed, professionals who advise the abandonment of mother tongue in order to facilitate the development of skills in English.' (2006 270). For English mother-tongue children in the context of GME, this means that SLTs should support the development of the child's mother tongue (English) and not recommend that English be abandoned in order to support the development of Gaelic as an additional language.

Table 5. Language of therapy - Main categories

Home language	Language of school	Recommended language of therapy sequence
Bilingual and potentially bilingual children		
Main carer Gaelic speaker English spoken by parent/family member(s)	Gaelic	Gaelic (then English where appropriate)
Gaelic	English	Gaelic (then English where appropriate)

English	Gaelic	English (then Gaelic where appropriate)
Main carer English speaker Gaelic spoken by other parent/family member(s)	Gaelic	English (consider Gaelic targets simultaneously with other parent/family member)
Main carer Gaelic speaker English spoken by parent/family member(s)	English	Gaelic (consider English targets simultaneously with other parent/family member)
Main carer community heritage language, e.g. Punjabi English spoken by parent/family member(s)	Gaelic or English	Heritage language (consider targets in the language of education simultaneously with other parent/family member)
Monolingual children in a bilingual context		
Gaelic monolingual speaking family	Gaelic	Gaelic
English monolingual speaking family	English	English
Community heritage language monolingual family (e.g. Punjabi)	Gaelic or English	Heritage language (consider targets in the language of education simultaneously with other parent/family member)
This table is a guide and language choice of therapy should beconsidered with the family in informed, shared decision-making.		

GME schools may wish the child to receive therapy input in Gaelic in the belief that this will help the child to communicate in the school environment, engage with his peers and fit in with the ethos of the school. SLTs should remember that they are not teachers of additional languages. This means that

SLTs should recommend the language of therapy that has:

- **The best evidence of success ± home language**
- **The best language model from the main carer ± home language**
- **The best long term outcome for additional language learning - establishing a strong home language**

Therapy in home language (e.g. English) does not preclude the child from engaging in everyday lessons in Gaelic.

A written care plan should be written in collaboration with the parent(s)/carer specifying the speech and/or language therapy aims. This should specify the language in which the therapy will be provided and that the child must be successful in their home language prior to attempting the same targets in their additional language. Ideally the staff expected to provide support should be agreed and named and resources identified, along with 'dose' (number of minutes per session and number of sessions per week). The agreed support is important, as the amount of input is crucial to maintaining success.

For young children, parent-child interaction (PCI) is often recommended as a way of evaluating language input and as a means of delivering therapy via guidance and modelling from the SLT. When considering bilingual children the SLT should consider:

- **If the PCI method is suitable for the family. Some cultures do not consider children to be suitable conversational partners and may have very different styles of interaction. The child may expect to remain silent and follow the adult lead and adults may be more comfortable with a directive rather than a child-led style. Although it is one of the aims of PCI to change a parent's style to be more child-led (in line with current monolingual, English child rearing practice), the strength of the**
- **cultural heritage may make this unacceptable or very difficult and other more direct therapy delivery options may prove more effective. There is evidence that clinic-based direct therapy is as effective (and less expensive) than some forms of PCI (Baxendale and Hesketh 2003)**
- **The balance of language(s) as each parent may have different languages and varying skills levels in their respective languages.**

Programme delivered by TAs and others

SLTs are responsible for any delegated practice. The SLT must therefore ensure that therapy targets and therapy support techniques are implemented correctly. Teaching assistants, translators and parents may not be aware of phonological and linguistic theory, or how to provide appropriate support such as cues and remodelling. It is therefore important that the SLT observe and supervise initial session(s) to check that the person delivering therapy has understood and can successfully apply the therapy programme.

Therapy for speech disorders: Implications of separate systems for therapeutic intervention

Intervention studies investigating therapy with bilingual children who have speech sound errors (see for example Holm, Dodd and Ozanne 1997, Holm and Dodd 1999, Holm and Dodd 2001, Stow 2006) have focussed on whether therapy delivered in one of the child's languages transferred to the other language. The studies concluded that therapy for articulatory errors (that is, errors resulting from a deficit of motor programming) delivered in one language would transfer and affect the child' production in their other

language. In contrast, therapy for surface level features of a phonological disorder did not show any cross language generalisation.

In practice within the context of GME this means that once the SLT has identified a phonological disorder in Gaelic, therapy will need to be delivered in that language. If a monolingual English speaker, the SLT will have to involve GME workers and parents, where appropriate. Having identified the sounds which need to be targeted in therapy the SLT can draw up word lists with the target phoneme occurring in different word positions. Non-SLTs can find it surprisingly hard to provide appropriate word lists, frequently confusing orthography with the spoken realisation. For example, in English parents asked to produce a word list for the sound /s/ frequently include the word 'sugar' where the written 's' is in fact pronounced 'sh'. SLTs may ask parent(s)/carers to look through a set of picture cards, naming them aloud. The SLT can then transcribe the proposed word using the International Phonetic Alphabet (IPA) notation. This will ensure that the target phoneme(s) are accurately represented within the selected word.

Summary

The overarching aim of intervention with any child with SLCD is to facilitate the child to use their speech, language and communication skills to their maximum potential. Bilingual children are no different. It is important to remember that typically developing bilingual children are on a trajectory that brings them to the endpoint of confident bilingualism. This is therefore the aim for bilingual children with SLCD.

The evidence base on bilingualism clearly shows that for both typical learners and those with SLCD, those children who have 'cracked the code' for one language are very well equipped with the phonological and linguistic skills to acquire an additional language. For this reason, there is a strong indication that home language is the best language to select for therapeutic input.

The social and cultural aspects of bilingualism are extremely important, not only for the bilingual individual but for the whole community. Bilingual communities are often misunderstood by monolingual communities, and minority language communities have to promote and keep alive their language and culture.

The aims of the bilingual community and the SLT can work together in harmony. However, the SLT must ensure that the bilingual child with SLCD and their family are supported in the best way possible over the medium to long term. This may mean supporting the family to use the home language, such as English, with the long-term aim of acquiring Gaelic as an additional language. The provision of therapy in English (or another community language such as Punjabi where appropriate) does not preclude the child from engaging in GME on a daily basis. The use of the evidence base applied correctly should mean that the bilingual child with SLCD should progress in both their home language and Gaelic as effectively and quickly as possible. RCSLTguidelines do recognise that 'bilingualism... is an advantage' (2006: 270).

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8 Guidelines on working with bilingual children

Janice Angwin

Description of the Client Group

> "Bilingualism is when a person understands and/or uses two or more languages. A person is described as bilingual regardless of their level of ability in either language. Bilingualism is not a disorder and therefore is a description of the person's language ability and not a diagnostic label. Bilingualism never causes or contributes to a communication disorder." (Afasic 2007)

In this document, the term First Language is applied to the language a child hears in his or her home environment. The term Additional Language refers to the language a child hears in addition to their first language.

Principles of Service Delivery

- **Speech and Language Therapists recognise that bilingualism in a child is an advantage.**
- **The Speech and Language Therapist will try to assess in both/all languages to facilitate differential diagnosis.**
- **Clients and carers should not be advised to give up speaking in their home (First) language in order to support language progress in English.**
- **Children with Speech, Language and Communication (SLC)**
- **Impairment in their First Language will be supported by the Speech and Language Therapy Service.**
- **Children with difficulty learning English as an additional language are supported through the Education Service**

The Role of the Speech and Language Therapist

The assessment needs of a bilingual child are essentially the same as those of a monolingual child, regardless of the languages spoken by the child. The aim of an assessment of communication abilities remains the same.

To identify those children who have inherent or acquired speech, language and communication (SLC) difficulties, that would be present regardless of whether the child is monolingual or bilingual, ie. children who have a difficulty in learning both the home (first) language and English.

To make a differential diagnosis between the above children and those who have a difficulty in learning English as a second language.

To identify children with SLC difficulties as having different needs from those children who are learning English as an additional language.

To investigate the child's communication abilities in one or more specified areas of language, ie. phonology, lexicon, syntax, semantics, pragmatics, voice, non-verbal communication.

To support children with SLC difficulties in both/all languages.

Pre-referral

If advice is sought about the referral of a potentially bilingual child find out whether parent or professionals are concerned about First Language or English/Additional Language

Referrals

- **Check surnames of all concerned and get phone number**
- **Find out what language/s are actually spoken at home and which dialect is spoken.**
- **Find out if a parent/carer is fluent in spoken English**
- **Is it language, speech or communication that is the concern?**

Responding to referral – find out from the referring agent the best way to contact the family. It is probable that there are already lines of communication which are open: you may be able to use these to arrange a first appointment.

If the family has limited knowledge of English, consider making a telephone conference call between a translator, therapist and family member, in order to arrange a date, time and place for the first appointment. (see NHS Interpretation Guidance for NHS Highland Staff, pages 5 & 6)

First Appointment

- **If the initial interview cannot be conducted satisfactorily in English (ie. where the parent/carer is not fluent in English), an Interpreter should be used. (http://highlandlife.net/interpretation - click "Summary Guidance for Staff")**
- **It is not appropriate to use a family member or friend to interpret. (NHS**

Interpretation Guidance for NHS Highland Staff page 14)

- **Plan the first session in advance. Arrange for time with the Interpreter prior to the initial interview so that they are aware of Speech and Language Therapy interests and the nature of questions to be asked. Allow extra time for the actual consultation and a debriefing. Give clear instructions and rationale.**
- **NB The Interpreter should be asked to interpret only the words the Speech and Language Therapist and the Parent/Carer say.**
- **The family should be made aware of the remit of the Speech and Language Therapy Service, and what it is that we offer, ie. Assessment and diagnosis, and support to families and school as a team approach to intervention.**
- **Use the dedicated Bilingual Case History form (along with the standard SLT Service case history form) to obtain full language information. (A copy of the Bilingual Case History form is attached)**
- **Observe the language used between parents, between parent and Interpreter, between parent and child, the quality of language used (code switching), and interaction style.**
- **Clarify whether language learning difficulties are influencing English only, or both/all languages.**

Assessment

The child should be assessed in both or all languages, and where appropriate, in all communication environments (school, home, clinic).

Observations - attention/listening, play, non-verbal communication, communication with parents, etc.

Due to the lack of appropriate formal language assessment materials in other languages in NHS Highland, informal assessment may be the best option.

In the UK there are some formal assessments available in a few languages (See London SIG in Bilingualism website for details). Tools and equipment used should be language and culture specific. Possible assessment tools:

- **Video Taping of language samples**
- **Transcription and analysis**

Other assessments can be used as a guide, eg. Derbyshire principles. The BPVS Second Edition has validity for EAL pupils.

SLTs can use diagnostic pointers (as with monolingual children) to help inform their assessment.

As language assessments do not readily translate from one language to another due to cultural bias and linguistic differences, they should only be used as part of a qualitative assessment.

English assessments should not be translated into other languages: if English assessments are used for EAL performance, results can only be given in a descriptive manner.

The Language of Intervention

Discuss with the family which language should be used in therapy. It is best that therapy is carried out in the language used by the child in their daily life at home – their First Language. If working through the parent it is best to use the language the parent knows best and is most comfortable with.

The family should be able to choose which language to work in but they should be made aware of the potential implications for the child if there is a strong preference for only one language (the majority language), and if that language is not the one recommended by the SLT. There may be cultural or prestige reasons why, for example, a family would choose English (the majority language) rather than their First Language.

Exceptions to working in the First Language might be because:

a) **Adult/adolescent stammerer or dysphonic who has a preference or dislike of a particular language**

b) **Older students may have developed more English than the home language**

c) **An English speaking SLT may give advice in English about activities to stimulate language and a bilingual care-giver will carry out activities in the child's home language.**

Gaelic

The same principles apply to children who speak or are learning Gaelic; however it may be that the First Language (of the home) is English, and the Additional or Second Language is Gaelic.

Therapy/Intervention

Setting objectives

After assessment in both languages, a decision should be made as to whether the child has a SLC need in both languages. If this is the case, intervention should be offered.

If the child's language is developing normally in their First Language, and they are experiencing the usual process of learning an additional language, then the child should be referred to the EAL Service via the school.

If support is required, a programme can be drawn up in English and the First Language. This could be explained through the Interpreter, and demonstrated by the SLT so that the parent can carry out the intervention in the First Language.

Bear in mind developmental order, functional and communicative load, strengths and weakness of the First Language (this may be a challenge) – this should inform therapy aims and objectives.

If developmental information is not available, functional and communicative load and client's profile may be main guide to setting objectives.

Therapy

- **In the absence of a SLT Bilingual Co-worker, the SLT may work through the parents/carer, giving explanations in English, either directly or through an interpreter, and by demonstration.**
- **Vocabulary learning improves when items are learned through the First Language first.**
- **Fluency programmes (eg. slowed speech) can be successful across languages/cultures.**
- **There is evidence that where children have a speech disorder, therapy in the First Language is better, and where children have language delay and disorder therapy is also more beneficial in the First Language. (RCSLT Guidelines p.270)**

- **If there is significant concern about a child, or limited input from the family, then the SLT should consider working with a Community Language Assistant: they are employed by Highland Council to help families, and work under the Community Learning and Leisure Service.**
- **If the SLT plans to work with a child and the family, then he/she should alert the EAL Service. The EAL Service may also be involved with the same child, and collaboration and discussion is in the best interests of the child and family.**

Working with Special Needs

Where a child is from a linguistic minority and has additional special needs, this presents further challenges for SLT. References are given in RCSLT Guidelines page 12 for further information and experience in this area.

Liaison

In addition to working closely with parents, liaison with school or pre-school staff is essential where child attends school.

SLT should also liaise with EAL staff from Education Department, and other ethnic minority support services.

Training and Support Resources

- **Advice and support can be sought from the RCSLT advisers in bilingualism.**
- **There is a National SIG in Bilingualism.**
- **Local support/training from EAL and ethnic minority support services.**
- **Highland Council has a Bilingual Language Assistant Service - www.highland.gov.uk/learninghere/supportforlearners/eal**
- **Highland Council information on using interpreters – http://highlandlife.net/interpretation**
- **Highland Council employs "English as an Additional Language" teachers, see The Highland Council home page – Education – learning here/support for learners/specialist services/English as an Additional Language**
- **London SIG in Bilingualism (www.londonsigbilingualism.co.uk)**
- **www.literacytrust.org.uk**
- **www.bilingualism.co.uk**

SLTs are recommended to complete the RCSLT "Working with Bilingual Children" e-learning on-line tool.

References:

RCSLT Communicating Quality 3 (p 268 - 271, 203)

Interpretation and Translation Guidance for NHS Highland Staff (NHS Intranet)

RCSLT Good Practice for Speech and Language Therapists working with clients from linguistic minority communities October 2007

Afasic Glossary Sheet 28 – Bilingualism

Providing an equitable service to bilingual children in the UK: a review. Int J Lang Comm Dis Oct-Dec 2003,Vol 38, No4, 351-377

Supporting Multilingual children – Mother Tongues. The National Literacy Trust 2007 – www.talktoyourbaby.org.uk

Speech and Language Therapy Services for Bilingual Children in England and Scotland: A Tale of Three Cities: Menne, Stansfield and Johnston, QMC. Proceedings of the 4th International Symposium on Bilingualism

www.rcslt.org/members/cpd/bilingual_children_elearning

www.bilingualism.co.uk

www.londonsigbilingualism.co.uk

www.ethnologue.com

www.literacytrust.org.uk

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Thanks to SLT colleagues in Highland for contributions in the form of suggestions and corrections to the draft.

This document will be reviewed in December 2014.

Accompanying these Guidelines:

Bilingual Case History / Information taking form

9 Managing additional support needs in Gaelic Medium Education at an authority level

Bernadette Cairns

INTRODUCTION

It is reasonable to assume that most learners will require a degree of support at some stage within the learning process - from early childhood, through their school career and further education, into lifelong learning. Many will simply experience temporary difficulties that will be easily resolved, others will require direct support and intervention for a period of time and some will require long term, ongoing and substantial support from a variety of specialist agencies and services.

While direct interventions for pupils with additional support needs are delivered at the point of contact, in the school or nursery, the local authority has a specific role in providing strategic direction, ensuring that legislative requirements are met and in the creation of policies and guidance documents that can support best practice. This includes processes for monitoring service delivery and quality assurance.

To address need at all levels, it is important to see the child or young person in a holistic way, within their family, within their school and within the communities in which they live. In so doing, the local authority requires to ensure that processes are in place to engage at all levels, not just with schools and nurseries, but also with parents, partner agencies, the voluntary sector and the children and young people themselves. For local authorities to establish processes for holistic assessment in schools and nurseries and to work collaboratively with partner agencies, while fully engaging with families, is no mean feat, given the complexity of need experienced by many children. However to focus solely on the context of the educational provision would suggest that children and young people somehow stop having additional needs at the end of the school day or that their difficulties only relate to the cognitive processes involved in academic learning. To ignore the wider aspects of the social context in which the learner lives or the physical or developmental difficulties that may be a result of disability or a medical condition the child may have, and therefore to try and address issues within an educational context without the support and specialist skills and knowledge of partner agencies, would have only limited success and would result in frustration and disappointment from families as well as less positive outcomes for the learner.

In order to consider the response, by a local authority, to meeting the needs of learners in Gaelic Medium Education, there therefore has to be consideration of how to establish a holistic process within which the needs of ALL learners can be met and then to consider the specific issues surrounding Gaelic Medium Education, that may require an additional strategic view or set of solutions.

THE GENERAL LEGISLATIVE ENVIRONMENT

The current legislative framework in Scotland both encourages and enables partnership working and integrated service delivery, supporting holistic assessment and planning through the National Practice Model, recommended as part of the process of Getting it

Right for Every Child. The most recent framework contained within the Children and Young Person's Act (2014), further emphasises the support for parents and young people through early intervention and the role of the Named Person in Health or Education, coordinating a single agency or multi-agency approach, as appropriate for each child and young person at whatever stage additional needs may be identified.

The Standards in Scotland's Schools etc Act (2000), requires local authorities to make provision which maximises the talents of each individual child and presumes provision to be in mainstream schools where possible and appropriate. This has resulted in a robust programme of continuing professional development for mainstream teachers and support staff, to enhance their knowledge and skill and to establish a pedagogy based on professional learning communities, to help them meet the needs of a wider group of children and young people with more complex needs than have previously been educated within mainstream environments. The presumption of mainstream education has also required local authorities to be more thoughtful about the needs of children and young people with disabilities and complex needs when prioritising capital expenditure on adaptations to the existing school estates and in considering resourcing and provision for additional support needs within new and replacement schools.

Adding to the core legislation of course is the Education (Additional Support for Learning) (Scotland) Act (2004) and as amended (2009), which requires local authorities to work with other agencies and service providers to meet the needs of all children and young people identified with additional support needs, within a staged approach, which is very much based on an entitlement model.

None of the above is specific to Gaelic Medium Education (GME), and nor should it be, because the responsibility of a local authority is to meet the needs of ALL constituents and within an educational context, this means ALL learners, regardless of the schools and classes they attend. While there are particular challenges to meeting needs within GME, the basic premise for all local authorities should be to take a rights based view, where children educated within GME are supported through a general inclusive approach to universal health care and education, receiving the appropriate additional support as early as possible.

The Gaelic Language (Scotland) Act (2005) requires local authorities to create a Gaelic Language Plan that both encourages and increases the use of the Gaelic Language and also promotes the Gaelic culture. While this will benefit a range of children and adults, for children and young people in particular, it also has to link very clearly with the legislation relating to educational provision, additional support and disabilities, to ensure that the plan supports improvements and ensures processes are in place to meet the needs of all children and young people within GME settings, including those requiring all levels of additional support.

PARTNERSHIP WORKING

As primary educators, parents and carers remain significant figures in the education of their children, even once a child enters preschool or school education. It is therefore in everybody's interest for good links to be maintained with individual parents and parent groups, through parent councils, support groups and networks, to ensure that a strong partnership exists between local authorities, partner agencies and parents, from the earliest stages.

In Highland, partnerships across the Community Planning Partners have been strengthened by the adoption of a Lead Agency model to service delivery, with NHS Highland now commissioning services for children, which are delivered directly by Highland Council. Health Visitors, Allied Health Professionals, School Nurses etc are now Highland Council employees and are managed within teams of staff from various disciplines within a Care and Learning Service, delivering a holistic service to children, young people and their families.

This approach to service delivery has enabled greater consistency in assessment, planning and service delivery from birth, with the same processes being followed, the same paperwork being used for planning and teams sharing information on a proportionate basis, more easily than before. This then in turn allows a focus on early intervention and support and an opportunity to deliver improvements across children's services, for the benefit of children, young people and their families.

> 'It is very helpful to be part of an integrated team. It means we can share important information promptly. A recent example was a call from an English Health Board, about a child who had moved here with a child protection plan. The school and social work did not know this. I got the background information and passed it immediately to social work colleagues, who made a home visit the next day. The school nurse also visited as the child had poorly controlled asthma, and we arranged a GP appointment that day. Staff have always had a good working relationship, but I definitely see the benefits of co-location. There is a better understanding of each other's roles and professional views. That can make for heated debate sometimes - but that's healthy!
> Child Protection Adviser (Health), Highland Council

EARLY EDUCATION

In the very early stages of learning we know that positive experiences are critical to a child's development and that early intervention and support through good childcare and pre-school provision ensures a secure foundation for learning when children transfer to

formal schooling. All local authorities therefore need to work alongside early education and care providers, with child-minders, private sector nurseries and the voluntary sector, who are often in partnership with local authorities in delivering child care and early education. The opportunities provided through recent government initiatives and support strategies such as the Early Years Framework and the Early Years Collaborative, have given a greater impetus to strengthen these partnerships and in relation to those children learning through the medium of Gaelic, it has opened up opportunities for a greater level of joint working with Gaelic play groups and nurseries that supports communication and the sharing of common processes across partnerships at an early stage.

It is therefore incumbent on local authorities to work with NHS colleagues to establish and support a coherent process of information gathering and exchange at each transition stage, from midwife to health visitor, through each of the health visitor pre-school checks and assessments, into nursery and on into formal school education. This process can ensure the developmental progress of children can be monitored as appropriate and any early issues identified and supported effectively. Such a process will also provide data on the number of children with additional support needs and the level of need they experience, to help support strategic planning within schools and across support services and partner agencies.

One clear focus of the Early Years Framework has been on the professional development of early years staff, to support the increase in their knowledge of early brain development, the importance of early positive relationships with key adults in their lives and a greater knowledge of general child development, so that unusual patterns of development or issues relating to the child's learning and progress in any area can be identified and addressed as early as possible. It is in the best interests of all, for early identification and assessment of need to be encouraged and for this to be supported through a planning and review process that supports parents to continue to be the main educators of their children, supporting their development at all ages.

Local authorities need to have a very strong link with their partners in NHS boards to enable joint interventions to be effective and in Highland Council, the adoption of the Lead Agency model of service delivery has provided a single management structure and single assessment and planning process across staff who would previously have been employed by health boards eg health visitors, speech therapists, physiotherapists etc, along-side social work staff, specialist teaching staff, nurseries and schools. This greatly supports the GIRFEC principle of getting the right help to the right child at the right time.

> 'We have always worked in collaboration with other professionals to support children and families. But integration has been a positive change and has led to children and young people's mental health needs being met more effectively. Our team are now all managed together, and our manager also leads other specialist teams within Education, Health and Social Care. This has helped raise our profile and provided more opportunities for joint working, improved communication and clarity of people's roles. Importantly, we have been able to influence early years' services and given the opportunity to input to universal early years as well as more targeted support.
> Primary Mental Health Worker, Highland Council

Close observation of children in the nursery setting will usually provide a forewarning of difficulties, whether these are specific to one area of development such as language development, or of a more general nature. If potential problems are indicated at this stage, more detailed assessment should take place. For children being educated through the medium of Gaelic, this additional assessment should ideally be administered in the language in which the child appears to be most comfortable. If the difficulty relates specifically to language, the problem should be fully investigated, usually in the home language, by an appropriate professional. Where a number of agencies have been involved in assessing a child, it is important that their assessments are drawn together. This process can be supported strategically by the local authority in the work many are undertaking on implementing a single child's plan and the use of the Named Person to coordinate the assessment and planning process. However, more challenging is the need to ensure access to a range of Gaelic speaking professionals, both within early years settings and schools and in the range of support services working with school staff. This is something that local authorities often feel they have little control over, but acknowledging a gap in resource and provision and joining together to support Government initiatives to increase Gaelic language learning for professionals and encouraging Gaelic speakers to consider careers in children's services, can all help address this need over time.

In some cases, depending on age and maturity and assuming parental consent, it may be considered in a child's best interests to defer entry to primary school for a year to allow for maturation of skills. Local authorities must however be clear about their policies on deferred school entry, to ensure this is not simply used to delay entry for a child who is unlikely to significantly benefit from this additional year in preschool, due to the complexity and nature of their additional needs. It is also important that a child with significant needs is not discriminated against at this stage and if it is their parent's wish that they continue to be educated in Gaelic Medium, that they continue to be supported in GME and to have their needs met appropriately as they enter P1.

SCHOOL EDUCATION

Learning and teaching is at the heart of education, and planning for the delivery of the curriculum is the prime responsibility of the class or subject teacher, taking account of the overall resources available, including the staff team resource. To provide guidance to schools and nurseries, the local authority provides a curricular framework based on the government's policy and guidance supporting the Curriculum for Excellence, including Gaelic within CfE. However, within this or supplementary to it, there needs to be a framework for supporting learners with additional needs.

Most local authorities in Scotland would adhere to a Staged Approach to meeting needs, with the principle of meeting need proportionately, utilising the supports and expertise within the class and within the school, before requesting assistance from external education services such as specialist peripatetic support for learning teams. Requesting assessment and intervention from specialists such as Educational Psychologists or Allied Health Professionals only where the level of need or complexity of need is such

that the school could not appropriately address the needs of the child or young person without such support from external agencies. Those learners with complex needs will require effective multi-disciplinary liaison in order that their needs are jointly assessed and the role of the local authority within this is to provide guidance and support for effective integrated planning for the child/young person.

Adhering to a Staged Approach can be difficult when resources are stretched or when the knowledge and skills of the practitioners in schools are limited. There is therefore a requirement on local authorities to have a clear model for resource allocation to schools, with expectations that these will be used to develop and ensure inclusive practice. Such a process needs to take account of the fact that for most learners in GME, Gaelic is their second language and so an enhanced allocation of support will be required in infant stages in Gaelic schools, to support their language development.

It is also incumbent on local authorities to ensure a programme of continuing professional development for school managers, teachers and support staff working in GME, to maintain and enhance their knowledge and skills in relation to supporting learners with the vast range of needs that may be expected in schools today.

While class and subject teachers have a responsibility to ensure appropriate differentiation of the curriculum to meet the individual needs of learners, for those pupils with additional support needs, it is often necessary to depart significantly from these arrangements as a response to their needs. In such situations, learning becomes a partnership between pupils, parents/carers and education staff, supported appropriately, through a Child's Plan. The Child's Planning process is of central importance in identifying and meeting needs. It provides a clear focus for the collaborative involvement of the pupil, parents/carers, colleagues in wider children's services, partner agencies and education staff. Where pupils are identified as having a long term need requiring significant additional support from a variety of agencies additional to education, they may require a Coordinated Support Plan. Head Teachers should ensure the involvement of all relevant stakeholders in this process and on an individual basis will ensure that appropriate quality assurance measures are in place to monitor the progress and outcomes for individual children. However, in terms of strategic planning and evaluation, this may often be overseen, in collaboration with senior managers and quality improvement officers within the local authority.

TRAINING AND STAFF DEVELOPMENT

The success of Support for Learning is judged on how effectively identified needs are met, and how far barriers to learning are removed, resulting in enhanced outcomes for learners. Successful support for learning is dependent on skilled, well trained staff. Support for Learning is a shared responsibility between class/subject teachers and support for learning specialists. In secondary schools Support for Learning departments are frequently the largest department. This places significant responsibilities on promoted staff to ensure the effective management and deployment of staff through a team approach and the identification of school development priorities through the self-evaluation/development planning processes.

The effective management of Support for Learning requires all staff to be aware of age appropriate child development, appropriate assessment processes, relevant legislation, inclusive practice and a range of appropriate interventions. The local authority supports school managers in relation to these issues by providing in-service programmes on various aspects of meeting additional support needs and promoting inclusion.

Current pre-service training does not necessarily include detailed training on Support for Learning issues and/or GME. The local authority therefore has a significant role in providing, through the annual staff development programme, a comprehensive programme for all staff in supporting learning and should dedicate a significant component of the probationary training to meeting additional support needs and to good practice in learning and teaching at all levels.

Team working is a key feature in supporting learning, between the child, the parent and support for learning staff within the school or pre-school centre, and also includes those partnerships with other specialist staff from appropriate agencies. It is therefore helpful if the local authority training programmes emphasise the benefits to be had from multi-agency and multi-professional training across key themes and areas for development, sharing information on professional roles and the various interventions that can work together to support an individual child or young person.

GME SPECIFIC SUPPORT

In line with the principles of Inclusive Schooling, all children are regarded as having an entitlement to Gaelic Medium Education should their parents favour this. As the curriculum is delivered wholly through the medium of Gaelic at all stages in GME, this presupposes that the local authority and other agencies involved will be able to provide the requisite support in that language. This is essential for direct teaching and differentiation of materials and is desirable for consultancy and advice. While local authorities would always expect that all those involved in providing support for pupils in GME should be fluent in Gaelic, it is often much more difficult to identify specialist support staff in external agencies who have a level of expertise in the Gaelic language such that assessments and direct interventions can be completed through the medium of Gaelic. This is an issue that all local authorities and health boards in Scotland struggle to address.

It is important that any serious difficulties being experienced by children in GME should be identified and the staged approach followed to ensure action is taken at as early a stage as possible. Any review of progress which identifies an additional need will generally result in an individualised education plan being agreed for the child, which will indicate the support to be given and a timetable for expected progress.

School staff will closely monitor each child's progress in Gaelic and from time to time, situations may arise where it is concluded that it is unlikely that a pupil will attain enough competence in Gaelic to allow him/her to function adequately in a Gaelic medium setting. This should be the exception rather than the rule and this decision will have taken into account:

- **assessments of the child's progress over a number of years;**

- **the nature of the difficulty – difficulties relating to the production of language being especially significant;**
- **the child's home/community language background;**
- **whether the local authority and the other agencies involved are in a position to provide the support required in the medium of Gaelic.**

In such situations continuation in Gaelic medium education may not be in the child's best interests. For some pupils, assessment may indicate that it would be more appropriate to transfer to an English Medium context. However, for some, to continue in GME with additional support in English, may allow continuity and for him/her to continue to be educated with his/her peer group.

A decision to develop some aspects of the curriculum, including reading and writing of a pupil in GME, largely (or wholly) in English, has implications for classroom management and for the pupils themselves, especially when they move on to secondary school. Such factors need to be taken into account when making any decision and therefore it is important that the local authority has a clear policy on the support for pupils with additional support needs in GME to ensure that decision making is consistent.

Extraction from Gaelic medium education at any stage is highly undesirable and disruptive for the pupil concerned. It may need to be considered as an option in very exceptional circumstances but the expectation is that, as far as possible, needs will be addressed and met within GME, with reasonable adjustments being made to the curriculum, the support provided and the assessments undertaken, where appropriate.

CONCLUSIONS and IMPLICATIONS

Taking an inclusive approach to children with additional support needs has a number of implications for a local authority in planning and developing Gaelic Medium Education for their children and young people. In particular, the following would be regarded as key targets within any Scottish local authority:

- **An adequate supply of Gaelic speaking support for learning staff, both teachers and support assistants, with the appropriate training.**
- **Ideally, access to Gaelic speaking professionals, such as educational psychologists and speech therapists or, where this is not yet feasible, induction training for such professionals on immersion methodology.**
- **Specialised support for learning resources, screening and assessment materials in Gaelic.**
- **Teaching materials reflecting the needs of pupils with additional support needs.**

The quality assurance role of a local authority also needs to closely monitor the effectiveness of meeting the additional support needs of children and young people in GME to ensure they have the same access to appropriate assessment, planning and

interventions as other pupils within the authority and that outcomes for them are in line with their peers who are educated in English medium classes and schools.

Above all, the focus of a local authority needs to be on meeting the needs of ALL children and young people, ensuring close links between general ASN policies and those relating to GME. This requires local authorities to maintain partnerships with national and local organisations that promote the Gaelic language and culture and also to support strong partnerships across children's services, promoting integrated working, evidence based support and inclusive practices. This will be more of a priority in those authorities where there are significant numbers of pupils being educated in GME. However, if the numbers of children and young people in GME are to be increased across Scotland, local authorities need to work in partnership with national government to try to address the resource and training issues identified above. This will in turn ensure that this area of education can be open and accepting of all children experiencing any level of additional support and provide equity and best practice in meeting needs.

March 2014

10 Partnership working in the Western Isles

Sue MacDonald and Christine Lapsley

Context

The Western Isles (population 26,000) is a chain of islands 130 miles long in the Atlantic Ocean, located 40 miles off the northwest coast of Scotland. The island group is sometimes referred to as the Outer Hebrides or officially by the Gaelic name Na h-Eileanan Siar. The population of the Western Isles is spread over 280 townships but the greatest concentration of the population is in Stornoway, the largest town within the island of Lewis.

The islands are characterised by an ageing population, a tendency for migration to the mainland and 61% of the local population speak Gaelic.

Education

There has been a 10% decline in the population over recent years and this has had an impact on the school population. During this time there have been some school closures and also some schools have joined together in new build schools. There are currently 26 schools including 4 secondary schools. In 2014 the Primary roll was 1,942 and secondary roll was 1,513, with a total school roll of 3,455.

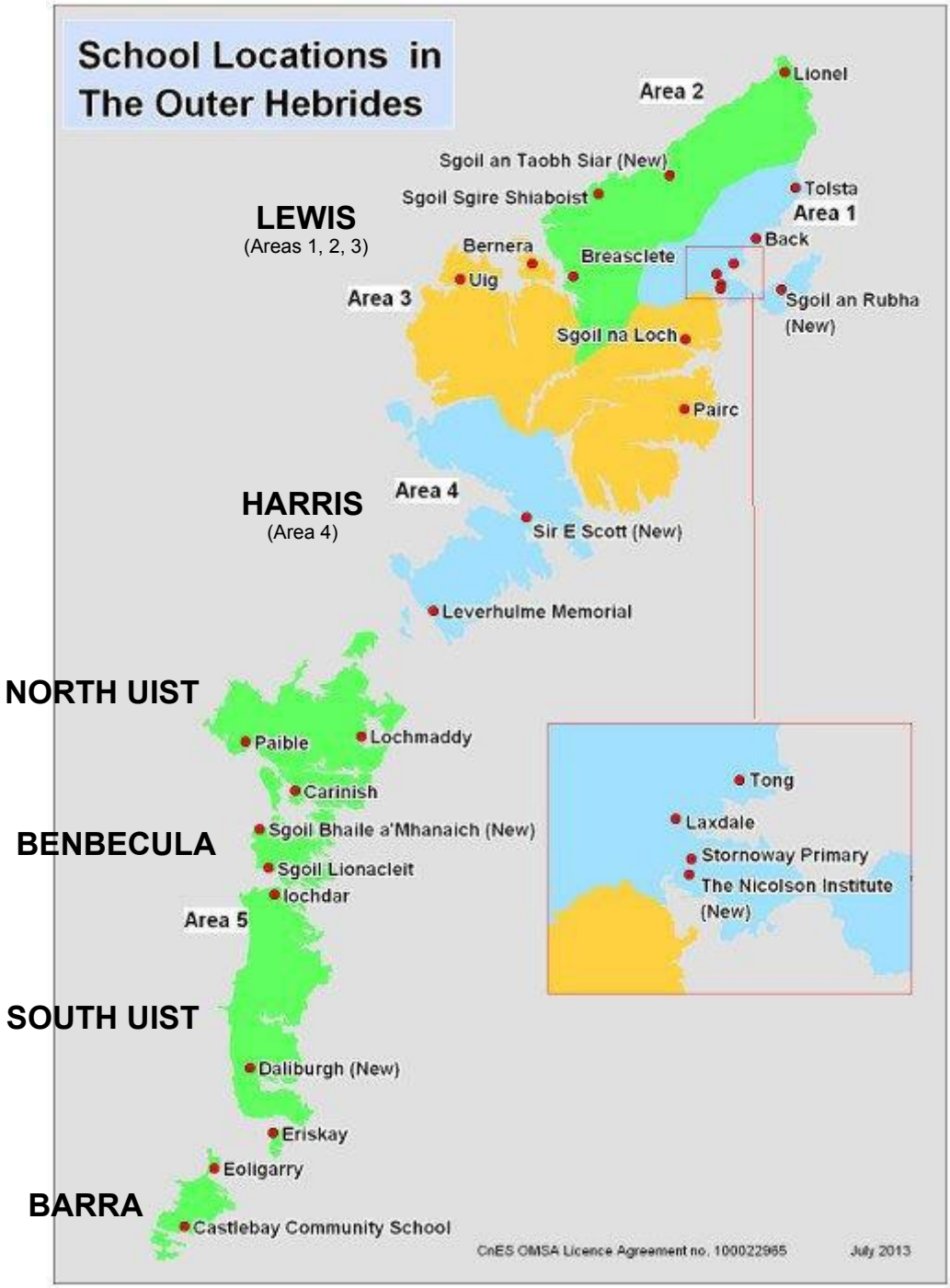
The Education Department manage and co-ordinate their services by dividing them into 5 Learning Community Areas.

All children and young people are educated in mainstream settings unless there are exceptional circumstances. However, Comhairle nan Eilean Siar (CnES, the Western Isles Council) recognises that in order to achieve their full potential a few children and young people may require access to some specialist or enhanced provision if their additional support needs [ASN] are not able to be fully supported in mainstream education.

Within the 5 Learning Communities CnES have an enhanced provision at Sgoil nan Loch [Primary] and Balivanich Primary School and also an enhanced secondary provision at The Nicolson Institute and Sgoil Lionacleit.

In addition there is a specialist authority resource providing Outreach & Inreach support based at Sandwickhill Learning Centre. This is where support can be provided to those children whose severe and complex needs cannot be met in mainstream provision.

The additional support needs of all children and young people in the Western Isles are met through the Staged Assessment and Intervention process alongside the procedure laid out in the Getting it Right for Children & Young People in the Western Isles guidance. In the Western Isles 733 pupils (21.2%) have ASNs.


School Locations in The Outer Hebrides
Area 2
Lionel
Sgoil an Taobh Siar (New)
Sgoil Sgire Shiaboist
Tolsta
Area 1
LEWIS
(Areas 1, 2, 3)
Bernera
Breasclete
Back
Uig
Area 3
Sgoil an Rubha (New)
Sgoil na Loch
Pairc
HARRIS
(Area 4)
Area 4
Sir E Scott (New)
Leverhulme Memorial
NORTH UIST
Paible
Lochmaddy
Carinish
BENBECULA
Sgoil Bhaile a'Mhanaich (New)
Sgoil Lionacleit
Iochdar
Area 5
Tong
Laxdale
Stornoway Primary
The Nicolson Institute (New)
SOUTH UIST
Daliburgh (New)
Eriskay
Eoligarry
BARRA
Castlebay Community School
CnES OMSA Licence Agreement no. 100022965
July 2013

Health Board

NHS Western Isles is the organisation responsible for providing healthcare to the population of the Western Isles. Although only a small Board, the staff at NHS Western Isles offer the same range of services for its population as the bigger, mainland Boards.

The Allied Health Professions (AHPs) include a number of distinct professional groups such as podiatrists, dieticians, radiographers, art therapists, Speech and Language Therapists (SLTs), Occupational Therapists (OTs), and Physiotherapists. However, OTs, SLTs and Physiotherapists are those most likely and most often involved with providing services to children with additional support needs in the educational setting.

Locally AHP services are delivered seamlessly, often by the same staff, across acute and community. Paediatric AHP services are delivered by a very small team [at the time of writing we had 3 SLTs, 1 OT, and 1 Physio], in a variety of health and community contexts including schools, nurseries and domiciliary settings.

Some AHP services are delivered across the islands by therapists based in the Western Isles Hospital on the island of Lewis, e.g., Paediatric Occupational Therapy (OT) based in Lewis provides services to children in Harris, North Uist, Benbecula, South Uist, Eriskay and Barra. Most paediatric AHP services necessitate a significant amount of travel.

Valuable support is also provided to children in educational settings by the Health Visitors who fulfil the role of Public Health Nurses, and by the Children and Adolescent Mental Health Services (CAMHS) staff.

Partnership Working

Partnership working between Allied Health Professionals, education staff and parents is a key principle of the Additional Support for Learning legislation. Many children with additional support needs are likely to receive support from AHPs who include Speech and Language Therapists, Physiotherapists and Occupational Therapists.

The purpose of partnership working is to improve outcomes for children and young people and success in achieving their potential. Children and their families benefit when AHPs, Education and parents come together in planning, training, assessment or when providing co-ordinated education/ therapeutic support programmes.

The literature highlights barriers to successful partnership work which include:

- **having different policies within education and health,**
- **different prioritising of cases,**
- **time for collaborating isn't built into planning or individual workloads,**
- **the location of service delivery,**
- **curriculum structures,**

- **confusing variety of ASN planning formats, e.g., action plans, IEPs, CSPs, Care Aims Plans,**
- **having different expectations from each service and a lack of clarity about each other's role.**

Recent national developments such as GIRFEC (Getting It Right For Every Child) and the Early Years Collaborative have highlighted the need for improved partnership working and structures if we are to achieve the aim of the Scottish Government which is to make Scotland the best place in the world to grow up.

In the Western Isles, partners have always worked closely together to meet the needs of our children and young people and we have put different structures in place to help us such as:

Pre-ScAT (Pre-school Assessment Team)

Historically the group developed on an informal basis when local professionals got together to plan for a specific group of children with significant needs. The group received funding a number of years ago from the Changing Children's Services Fund and a formalised process and core team of Education, Social Work and Health was established. The multi-agency team, which is jointly chaired by Health and Education members, works in partnership with parents to plan, co-ordinate, monitor and adapt the care offered to children from 0-5 years old with additional support needs. The team has evolved over the years, but the aim is still consistent.

The current Pre-ScAT Core Team consists of a Health Visitor, Speech and Language Therapist, Social Worker, Early Years Officer and the Principal Teacher of Learning Support. The Core Team meets once a term to discuss all cases; this allows professionals to share pertinent information about the families and children they are currently working with, to update other professionals and to highlight any new children who may require the co-ordinated support of the team.

Regular meetings may be required for individual cases and these will be arranged to include other professionals who may not be part of the Core Team but are involved with the child's care, e.g., Physiotherapist, nursery staff. These meetings always include the parents in order to ensure that families remain at the heart of their child's care.

Following the introduction of GIRFEC, the meetings take the form of a Child's Meeting and the child's needs are considered using the wellbeing indicators and the My World Triangle. The parents' views are central to the planning process. The team meets regularly to monitor progress and to ensure children's needs are being met. Examples of support which may be provided include transport, extra paid hours in nursery, classroom auxiliary support, specific educational or therapeutic resources, training, etc. Evaluation of the meeting and the process is gathered after each meeting and this allows the team to plan effectively. During evaluation parents have reported that they value Pre-ScAT because they are listened to, they are a key part of the planning process and their opinions are valued.

Pre-ScAT works with families and children from birth until they start school, supporting them throughout all the key transitions during that time, e.g., starting nursery, starting school, etc.

One of the benefits of Pre-ScAT has been the positive relationships which professionals develop with parents in the early years. Since we are a small authority/Board area the parents are usually dealing with the same professionals throughout their child's school years to 18. Trust, respect and a greater understanding of each other's role has developed between partners, including the parents. This trust is carried through into the school years and has proved very helpful in many cases.

The Early Years Collaborative

In more recent times the Early Years Collaborative [EYC] has provided another framework for partnership working within the Western Isles. Speech and Language Therapy, the Learning Support Manager and the Educational Psychologist are part of the "away team". Other AHPs are also supporting the work of the EYC at a local level.

Within our local EYC [work stream 3] we have worked together to develop a baseline assessment prior to school entry. As a result of that we are currently working on supporting nursery staff to develop communication opportunities within their playgroup settings.

Listening to each other

Improved partnership working at school level involves each partner having a clear understanding of the different roles each person has in supporting children and young people. In our local area (North Uist, Benbecula, and South Uist) we decided to develop and distribute a joint questionnaire to schools about meeting learning needs and evaluating the quality of our collaborative work. The questionnaire asked schools to comment on both the Learning Support provision and the Speech and Language Therapy Service. See appendix 1.

When we examined the results we were then able to discuss with individual schools their particular circumstances and to draw up actions for each service to implement. This was carried out in June 2012 and will be rolled out across the Western Isles at the end of the academic year (2014).

Training

In the Western Isles it is expensive for staff to access training, as most training is provided on the mainland and travel to and from here can be costly and time consuming.

In order to support each other, to promote good networking opportunities locally

and to encourage joint working, partners are invited to all relevant training events which are delivered locally. Examples include:

- **The Principal Teachers of Learning Support [PTLS] attended Care Aims training, organised by Health, alongside their AHP and nursing colleagues. It is hoped that by attending this training that the PTLSs will be able to help other Education staff to understand the rationale and philosophy of care being used by AHPs and to contribute to the Care Aims process.**
- **AHPs offer training at INSET days and also twilight sessions.**
- **Autism Toolbox training was organised by Education and AHP staff attended alongside their Education colleagues.**

Delivering joint training:

Local training is often delivered in a multi–disciplinary way, e.g., the Learning Support Manager and Speech and Language Therapists recently delivered joint training for pre-school staff.

HELS Group

This is a group of Health [HE] and Learning Support [LS] staff who come together on a regular basis to look at policies, plans, guidelines, protocols and procedures which are being implemented by one agency but may have an impact on other agencies. In this forum we can troubleshoot systems/processes or service delivery issues and often smooth out any problems before they escalate.

This is the local group who have been supporting the implementation of the "Guidance on Partnership Working".

Learning Support Teacher Meetings

AHPs are regularly invited to attend and contribute to these meetings. This is an excellent forum for sharing information and resources.

Head Teacher Meetings

AHPs are occasionally invited to these meetings, usually to give updates about service delivery or new procedures or service developments which may have an impact on their schools.

Communication Meetings

These occur once a term. AHP Heads of Service, the Learning Support Manager and the Head of Children's Services and Resources ensure that operational management issues are shared. This promotes better communication and

transparency. It enables us to 'fire fight' together in a supportive way and to plan together to mitigate against any obvious current or anticipated risks. It also offers the opportunity to discuss future developments and the implications of these on operational staff.

Conclusion

Partnership working in the Western Isles has been an on-going, developing process for many years. It has improved markedly during this time, but that is not to say that everything is perfect now – that would be unrealistic and untrue! However, we are moving forward, continually growing in understanding and trust and using all the tools at our disposal to ensure that TOGETHER we can provide as good a service as possible and that even in our little patch of Scotland, we can aspire to making it the 'best place in the world to grow up'.

Christine Lapsley, Speech and Language Therapy Manager, NHS Western Isles
Sue MacDonald, Learning Support Manager, Comhairle nan Eilean Siar
May 2014

Appendix 1

NHS
Eileanan Siar
Western Isles

Meeting Learner Needs

Evaluating Partnership Working
Learning Community Area 5

June 2012

Please comment on the quality of provision for Learners with ASN's within your situation.
If you wish to comment on any section or question please do in the box at the end.
Your comments will help us to evaluate the effectiveness of our collaborative working.
Thank you for taking the time to complete the questionnaire.

The Role of Specialist Staff	Yes	Partly	No
The LS teacher/LS Auxiliary have clear roles within school.			
The LS teacher/LS Auxiliary have time allocated to undertake their roles.			
The roles & responsibilities of the LS teacher/LS Auxiliary are reviewed regularly.			
The LS Teacher provides all staff with up to date information about learners with ASNs and strategies to use with these learners.			
The LS Teacher fulfils the 5 roles of a Learning Support teacher. (Tutoring & classteaching, teaching cooperatively, consultation, specialist services, staff development)			
The LS Teacher supports the Class Teacher in the process of identification, assessment, planning and provision for learners who have ASN's.			
There is an agreed system and criteria for allocating Learning Support teacher time and LS Auxiliary support and this is reviewed regularly.			
The referral procedure for LS is clear and staff know and follow it.			
The LS Teacher involves partner agencies in identifying and supporting learning needs.			
The LS Teacher uses a range of individualised assessments to support the identification & review of ASNs.			
Advice from partner agencies is used to develop effective planning and provision for learners.			
The school evaluates the effectiveness of joint working & involves partner agencies in the evaluation.			
The LS Teacher assists staff in identifying barriers to learning.			
The LS Teacher advises staff on a variety of appropriate methods to meet learning needs and promote achievement.			
The LS Teacher puts in place effective arrangements for learners who have significant difficulties with literacy.			
The LS Teacher provides training to enable staff to meet the needs of all learners.			
The training provided by LS staff has an impact on practice and outcomes.			
The LS Teacher works as part of a team within school and with agencies to meet learner need.			
There is effective communication and liaison between LS, school and partner agencies.			
The LS Teacher ensures that transition arrangements are in place for learners moving on and also joining the school.			
Transition arrangements are in line with the Code of Practice.			

Meeting & Implementing the requirements of legislation			
The school has a policy for Additional Support for Learning & staff are familiar with it.			
The LS Teacher advises school on ASN procedures & follows Comhairle guidance.			
LS Teacher uses Staged Assessment & Intervention procedures and completes the appropriate paperwork.			
Appropriate plans are in place for learners with ASN's. The plans are up to date and used to support learning.			
All plans have clear measurable learning outcomes.			
Class teachers, LS teachers & LS Auxiliaries are involved in planning for learners who have ASN's.			
All staff involved with a learner have access to the support plan & know what it contains.			
Plans provide guidance to staff on learning outcomes and the approaches they can use to help learners achieve them.			
Learning outcomes are reviewed at frequent intervals usually 2-3 times a year.			
Learning outcomes/targets reflect the identified needs of the learners and show what is additional to and different from the expected differentiation.			
All staff working with a child know what the learning outcomes or targets are, they use them & find them to be effective.			
Colleagues from partner agencies attend review meetings where appropriate.			
Parents/Carers receive copies of their child's plan (Action Plan, IEP or CSP).			
Parents/Carers are invited to attend review meetings.			
Parents/Carers views are recorded in minutes and evidence shows parents/carers views and concerns are acted upon.			
School actively seeks the views of learners.			
Learners attend review meetings.			
Procedures for medical interventions are clear, effective and reviewed regularly with the public health nurse.			
Health Plans are in place for those who require them.			
Appropriate tasks, activities & resources			
LS teacher & CT ensure curriculum is appropriate, has choice & is sufficiently challenging for learners with ASN's.			
LS teacher helps teacher's plan for differentiation by learning outcome, teaching approach & access strategy.			
LS teacher monitors & reviews the progress of learners with ASNs.			
LS teacher advises and uses a variety of appropriate teaching approaches			
LS teacher advises on adapting learning activities.			
LS teacher advises & provides range of quality learning resources			
Learners with ASNs make good progress in relation to their prior attainment.			
LS Teacher can show the impact of the intervention.			
LS Teacher advises on suitable resources to enable learners with ASNs to access the curriculum.			
Learners with ASNs participate fully in the life of the school.			

Collaboration with Speech and Language Therapists			
The SALT meets regularly with the HT/designated person.			
The SALT timetable is agreed between the school and therapist.			
A copy of the SALT's timetable is displayed in the Staffroom/noticeboard.			
The SALT is invited to Parent's Evenings.			
The SALT has a pigeon hole for mail & notices.			
The SALT receives notices of school events, parents evenings, outings etc.			
The SALT is informed in good time of review meetings.			
The reviews are organised so SALT can attend.			
The SALT informs the school of any planned absence in advance.			
The SALT informs the school when absent due to illness asap.			
The SALT has an allotted working area or space within the school.			
The SALT folder, materials, documentation is accessible to staff & upto date.			
The SALT is given the opportunity to participate in joint training.			
Joint assessment & planning is valued by all participants.			
The SALT records targets, activities and methods for implementing.			
Education staff accept responsibility for implementation of agreed speech, language and communication targets across the curriculum.			
Education staff keep a record for the SALT of when the SALT activities happen with evaluation.			
SALT accepts responsibility for joint development and delivery of an integrated programme for pupils.			
SALT provides training for staff if requested.			

Please comment below:

11 Additional support needs and speech and language therapy in Gaelic Medium Education

Archie MacLullich and Catriona Morrison

1. Background

1. The main theme of the seminar focused on the management of Additional Support Needs(ASN) in Gaelic Medium Education(GME), and the development of assessment strategies, to enhance pupil achievement and inclusion. The seminar content was designed to raise awareness of the general assessment of language. It incorporated details of the design and application of new tests in Welsh and Gaelic language, the new revised GL Assessment Reynell test and the associated Multilingual Toolkit

1.2 Further, a focus was maintained on assessment and therapeutic intervention options for speech, language and communication staff involved in GME and other bilingual situations. The seminar also included an interdisciplinary consultation exercise to elicit collaborative priorities for the staff involved and to inform contributions to consultations on elements of the Children and Young People (Scotland) Act.

1.3 This report can be aligned to the conclusions and action agenda of the audit document (http://www.storlann.co.uk/asn-slt/downloads/BnaG/Bord-na-Gaidhlig-Audit-on-ASN-in-GME.pdf), which has the organisation of a seminar on the above topic as a specific recommendation. A summary of the main conference outputs was also prepared by Donald Morrison for the meeting of the Cross Party on Gaelic on 25 – 06 – 2014 (attached) and, in the brief sections below, a number of general strategic issues are outlined for further collaborative action and application, together with a listing of possible research topics linked to the outputs of the seminar process. In due course all seminar presentations will be made available online.

2. The context of Gaelic Medium Education development

2.1 The issue of public attitudes to Gaelic language has been investigated (1,2) through various initiatives over the past decade and research has also been focused on attitudes to the general topic of bilingualism in this country and abroad(3,4). Such research frequently draws attention to the need for planners of bilingual educational services to acknowledge and address negative attitudes and misconceptions about bilingualism. There is now strong accumulated research findings on an international basis, confirming the benefits of bilingual education and renewed efforts should be made to make these findings more available through engagement with agencies such as "Bilingual Matters "

A key element that featured strongly throughout the conference was the need to provide clear information about the benefits of bilingualism: to the general public, to parents, and in the professional training of staff involved in services to children. There remains a long-standing general perception that bilingualism – at home and in the educational system – could somehow be detrimental to children's progress at school. However a wealth of psychological and pedagogical evidence indicates that this is not the case, and that bilingualism has many benefits, not just in childhood but across the lifespan.

2.2 The development of the general assessment processes associated with the substantial reform represented by the Curriculum for Excellence (CfE) was identified as a current source of stress for teaching staff coping with the changes. The demands of these changes should be acknowledged more fully by service managers and visiting professional staff during this somewhat intense period of transition and appropriate support built through mentoring and staff training.

2.3 These changes can also be viewed as an opportunity in the long term to plan, to re-examine the range of assessment processes in GME. This could be represented along a timeline, starting with the set of relevant "process, outcome and balancing" measures, which are detailed in the work of the Early Years Collaborative and extend to the later stages of secondary school. On this basis, assessment should be cumulative and underpinned by robust information-sharing policies across boundaries, and would consist of assessment data collated from a wide range of sources.

2.4 A guiding principle which emerged across the seminar setting focused on the collaborative assessment of children at the very earliest stages possible, and an intervention strategy being put in place to meet any additional support needs which were indicated. It is estimated that 20-30% of children do not meet their developmental milestones on entry to primary school (Early Years Collaborative Report 2013). It is suggested that particular attention should focus on developing a service excellence model for children in pre-school units and services feeding into GME with particular reference to speech, language and communication measures.

Such a model would include specialist training for the early years workforce in assessment and work in a bilingual context and links should be made on this basis with the early years workforce review currently being conducted by Professor Iram Siraj-Blatchford commissioned by the Scottish Government.

3. Development of test and assessment resources for ASN in GME

3.1 The description given at the seminar of several major initiatives in the development of assessment and screening materials in Wales drew attention to the following:

- **the development process for tests was guided by a substantial accumulated research base, with findings giving focus to the design of tests and also taking account of the specific characteristics of the Welsh language and its orthography;**
- **the nature and extent of Welsh language use within schools provided a large sample for robust test development;**
- **testing of bilinguals should be in both languages and should also incorporate the use of meaningful norms in both languages;**
- **the development of reliable and valid standardized language tests requires sound financial investment.**

3.2 The development of the GL Assessment Gaelic Phonological test is a major addition to the repertoire and initial work on the proposed reading test is welcomed. The following details are noted:

- **the Phonological test is the only standardised test In Gaelic and its use at late Primary 2/Primary 3 stages in GME fits very well within the range of resources and approaches available in the Dyslexia Toolkit on the Scottish Government website;**
- **the test produces a profile of the challenges faced by the child and this information is a very useful addition to the accumulation of screening and classroom management information;**
- **the development of the test was underpinned by consultation with practitioners at all stages and its use continues to be supported by in service training through Storlann events.**

3.3 The contribution on the general principles involved in the assessment of spoken language development in GME and drew attention to the following approaches:

- **comprehensive assessment should incorporate observations from as wide a range of sources as possible - curriculum based assessments, parental contributions, oral comprehension screening, performance in classroom based games, etc;**
- **language proficiency is best viewed as the combination of the child's learning ability interacting with his/her language experience. In this respect, assessment of the home language background is important;**
- **it is worth exploring whether classroom based learning activities and resource materials can be used as a basis for assessment tools in addition to tasks from research studies being adapted;**
- **as a general principle, adapting materials for language assessment is a better approach than translating English language tests due to differences in orthography;**

3.4 The Reynell Developmental Language Scales, and the Multilingual Toolkit associated with it, are valuable additions and draw on the accumulated resources on assessment of language in the European COST Action ISO804(www.bi-sli.org). The following observations on its use within GME by Speech and Language staff can be noted:-

- **the Toolkit provides very clear guidance on the need to establish sound working knowledge of the characteristics of the language being tested and to make adaptations on the basis of such knowledge;**
- **the Toolkit will be assessed for use within GME units in CNES and it is recommended that a mechanism be put in place to gather detailed recording of adaptations for use in Gaelic language testing. This data bank could then be used for future research and application;**
- **it is strongly recommended that a native speaker is used as a consultant**

to consider translation of words and vocabulary and that adaptations are trialed with children who speak the target language.

4. Contributions to policy and legislation from seminar

4.1 As stated above (1.3), the outputs from the seminar have been summarised and these have been presented as part of the briefing process to the Cross Party Group on Gaelic. The outputs will also guide contributions to the continuing consultations on the Children and Young People Act(Scotland). In addition, the outputs can form part of the presentation to the review of early years staff training conducted by Professor Siraj Blatchford, with particular reference to bilingual education and Gaelic language development in this important age span.

5. Emerging Research Options :Management of ASN in GME

5.1 It is noted that the experience of developing assessment resources in Welsh has been assisted by the substantial research bank on the language which has been accumulated at Bangor University. The audit report (1.3) also draws on research conducted in Ireland on similar topics and recommends that links should be made between researchers and language development units from these countries and Scottish initiatives, such as the seminar managed by Storlann. The European Agency for Development in Special Education and the COST Action (3.4) are viewed as valuable sources of research information on inclusive education and bilingualism.

5.2 It was also recommended from within the seminar outputs that mechanisms should be created to disseminate regular research briefings to practitioners in health and education settings. A similar output advocated the establishment of an “over–arching Scottish framework for shared knowledge and practices “

5.3.In addition, the following possible research topics which have featured in investigations covering other language groups are viewed as worthy of further exploration in relation to the management of ASN in GME;

- **investigation of sentence repetition and imitation methods for screening in the early years cohort in GME;**
- **exploration of the age of acquisition of specific language elements in children and adult learners of Gaelic;**
- **establishment of a data bank of vocabulary used by native Gaelic speaking children as a resource for test adaptation;**
- **investigation of the use of parental logs and language diaries to record the vocabulary used by their children outwith the school setting.**

6 Conclusions

To conclude, the conference was an extremely useful day, involving the enthusiastic participation of a wide range of stakeholders. There is a clear need for more resourcing and support for GME as we have detailed above. The conference informs the development of a set of initiatives and research projects that would help educators, children and their parents in the GME system. The Welsh language example illustrates the possibilities for GME and the successes in Welsh Medium education, but at the same time highlights the fact that GME is lagging some way behind. The conference proved that there is a great interest and enthusiasm in developing resources, skills and knowledge in GME and there are exciting opportunities to improve the excellent work that is already being carried out by educators and the good standards being achieved by children.

CM AML

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12 The assessment and management of Additional Support Needs (ASN) in Gaelic Medium Education (GME) and bilingual education

Archie MacLullich

This chapter is a revised version of an introductory talk given at a seminar organised by Storlann at Edinburgh University, in June 2014, on the assessment and management of Additional Support Needs (ASN) in Gaelic Medium Education(GME) and bilingual education in general. The following themes which map out a number of context issues make up the broad structure of this paper which is also cross referenced to other chapters and resources:

Attitudes: Language policy, development and research;

Audit: Outcomes and the Challenge of Inclusive Education and Assessment;

Assessment, Resource Development and Research.

1. Exploring attitudes; language and research

The distinctive Additional Support for Learning legislation represents a robust framework, based on principles of inclusion, for the management of the pupils with such additional support needs in Scotland. The Curriculum for Excellence, presented as a lifelong strategy, provides the basis for the organisation of learning experiences within schools and also carries with it commitments for the provision of assessment for all pupils. The issue of the assessment of ASN in the bilingual context of GME has to be located within this general framework for assessment and some of the challenges (1.2,3) concerning the implementation of these new approaches to general assessment should be acknowledged in considering the specific features of GME .

A number of the policy initiatives in relation to Gaelic language have been informed by the investigation of public awareness of the language, and attitudes towards it, conducted in 2011 through funding from Scottish Government,Bord na Gaidhlig (4) and Soillse (5). In other countries research (6) points to mixed attitudes towards bilingualism which appear to extend to the culture which underpins language use:

"In the United States, monolingualism, traditionally, has been the norm. Bilingualism was regarded as a social stigma and a liability...the hostility is directed not at the language, but at the culture. The bilingual represents an alien way of thinking and an alien way of thinking and alien values". A more recent comment by Pavlenko (7) suggests that bilinguals are "often viewed with suspicion either as linguistic or cultural hybrids".

One can take issue with the extent to which these somewhat pessimistic views - as overview statements on the nature of a particular society – could be applied to contemporary Scotland. The references are, however, not without relevance when the assessment of bilingual children and associated research is examined. For example, it is possible to question the extent to which the cognitive benefits of bilingualism are not given the attention they merit in the training of professions likely to be involved in the assessment of bilingual children. Negative attitudes about the nature of bilingualism

has sometimes led to parents being given advice to drop one of the two languages taken by their children on the erroneous basis that taking two languages is the cause of whatever difficulties a child may be experiencing. Accumulated evidence in relation to the latter provides a very robust case confirming the cognitive benefits of bilingualism and the Cost Action (ISO804) FAQ resource [8] and the Soillse Power Point presentation (Sorace 2014) [9], in the appendix to this Resource, cover some of the detail of research to this effect.

A further attitudinal factor is associated with the extent to which it is supposed that findings derived from research conducted in English language on dyslexia, and related language challenges, can be directly projected onto considerations about other language groups which may have quite different orthographies and other characteristics. Share [10] has argued that much of the research on reading, for example, "has been confined to a narrow Anglocentric research agenda addressing theoretical and applied issues, with only limited relevance to a universal science of reading and literacy".

The recent "Advice on Gaelic Education" [11] from Education Scotland(http://www.educationscotland.gov.uk/resources/a/advicegaeliceducation.asp) provides a summary of the combination of legislative measures, including the Children and Young People Act 2014, which underpin the delivery of educational and other services to children in GME. In focusing on the identification of learners with additional support needs, the latter document states:

"It is not appropriate to use assessments to identify needs through the medium of English at a stage when children's learning is focusing on the development of the Gaelic language. It is highly inappropriate"

Seymour(2005)[12], also draws attention to the opaque orthography of English, with more than 120 graphemes representing 44 phonemes. This characteristic contrasts with the transparent nature of languages, such as Gaelic, in which "single phonemes map consistently on to single graphemes". There is evidence to suggest that acquiring mastery of a regular orthography will enhance phonological awareness, decoding and word recognition (Zieglar et al 2005)[13].

The research challenge is to establish the basis of more universal models of reading and, in relation to Gaelic language and related orthographies, to conduct investigations which focus directly on their specific characteristics and produce findings which can be applied directly in the classroom in due course. This aspect is considered further in the last section of this paper and also in the concluding chapter, tracing out some further research and development options.

Possible Action Points:

- continue to investigate various details of attitudes towards bilingualism – in wider society and in the classroom as the Curriculum for Excellence becomes embedded – and maintain the flow of information about the positive features of bilingualism;

- incorporate more evidence based information about bilingualism into training courses through the provision of applied research digests and live briefing sessions on bilingualism to courses;

- initiate networking and information sharing on research conducted on the characteristics of languages with transparent orthographies.

2. Audit: Outcomes and the Challenge of Inclusive Education and Assessment

Additional Support Needs in Context.

The profile of ASN in GME, produced through the audit

(http://www.gaidhlig.org.uk/bord/en/our-work/gaelic-education/additional-support-needs/) and initiated by Bord Na Gaidhlig, corresponds to the national profile of ASN in the Scottish school statistics, derived from the reporting system which was current at the time the audit was conducted. Due to changes in the guidance given by Scottish Government for collecting such data, the total number of pupils with ASN recorded in 2010 was 69,587 and, in 2014, the new basis of reporting delivered a total number of pupils with ASN of 140,542.

http://www.gov.scot/Topics/Statistics/Browse/School-Education/TrendSpecialEducation .

The conclusions drawn from the above audit point to class teachers in GME dealing with the same broad distribution of categories of ASN, as depicted in the national statistics. Examination of the available literature indicates that only a limited number of investigations [14,15] conducted focused on the management of the various categories of ASN, or special educational needs in other countries, in bilingual contexts.

The above audit indicated that 15% of the sample of 1673 pupils had additional support needs and, in the rank order of reported ASN data, social, emotional and behavioural challenges, specific learning difficulties and language or speech disorder were the most significant. A major study of school children in Ireland [16] presented the conclusion that 20% of the sample would have learning difficulties at some point during their school experience; research in the Gaelscoileanna identified dyslexia at 29.9% as the main presenting category [17]. In the more recent (2012) Growing up In Scotland study (18), speech and language difficulties (46%) and Social and Emotional behavioral challenges (23%) featured prominently and this particular study concluded that 8% of Primary 1 children had ASN.

In reviewing these various earlier studies the following summary points can be extracted:

- the accumulated data from these surveys would suggest that **at least 20% of the pupils in a classroom will at some point, on average, present ASN or SEN challenges** and curriculum planning should be geared to take account of this;

- **speech and language challenges feature prominently in all the studies** reviewed although this cluster is a global term which could be usefully be broken down by **more precise recording protocols into sub categories;**

- while referral systems show considerable variation within countries, there are strong indications that **earlier identification of these needs would enhance the impact of intervention and the subsequent achievement of pupils;**

- **the recording systems currently in use could be improved by issuing more precise guidance on the recording of ASN data** – service planning and research and the eliciting of staff training options could be guided with more accuracy if sustained action was taken on this measure.

Inclusion and individualised programmes

A major review (2005)[19] of international systems of intervention involved in managing Special Education Needs located the various approaches of these systems against the backcloth of the specific legislative arrangements and policies of the countries. The conclusion of the above review in focusing on the Scottish situation at that time was presented as follows:

"Practices in careful planning and target-setting parallel mainstream developments occuring through the Assessment is for Learning (AifL) initiative which, amongst other things, emphasises the need for clearly specified, communicated and progressive learning outcomes. Thus, existing understandings of how to support the progression of pupils with SEN can be located in a national mainstream initiative – long standing good practice in SEN accords with the range of assessment strategies now current for all pupils".

This statement can be set alongside the accumulated outcomes of investigations (eg 20.21) examining the implementation of the Curriculum for Excellence and the associated approaches to assessment of, and for, childrens' learning. The earlier focus on individualised educational programmes has to be placed in the context of the development of the Curriculum for Excellence and also take account of the strong case for inclusive approaches to education and assessment to balance this; over reliance on individualised plans and programmes carries with it the risk of pupils being isolated from the main class group. The latter concept of inclusive assessment was summarised in 2009 as follows by the European Agency on Special Educational Needs:

> 'An approach to assessment in mainstream settings where policy and practice are designed to promote the learning of all pupils as far as possible. The overall goal of inclusive assessment is that **all assessment policies and procedures should support and enhance the successful inclusion and participation of all pupils vulnerable to exclusion,** including those with special educational needs" [22].

This inclusive orientation – from assessment processes to classroom and resource organization – is regarded as one of the most effective means of countering discriminating attitudes and contributes to the creation of schools as safe and welcoming communities.

The Development of the Curriculum for Excellence and Gaelic medium Education

The context within which class teachers manage ASN in the contemporary bilingual Scottish classrooms is well described in the series of research and evaluation reports, produced by Glasgow University and other bodies in relation to the Curriculum for Excellence [23].

Reference to the management of ASN in these evaluative contexts is generally understood to be subsumed under the broad frame consideration of assessment. In this respect, the research (2006)[24] concludes that the basis of assessment in schools should be led by teacher professionalism "rather than any kind of testing system". Teachers working in the GME context are currently not able to access any standardized test in

Gaelic language other than the GL Assessment Phonological Screening test.

Over the development phase of GME , teachers have had to rely on their own resources in devising screening tests and other informal measures. In so doing, they may experience some difficulties in drawing comparisons with a particular child's contemporaries. Donaldson(24) (Chap1) presents a number of suggestions in her paper regarding the gathering of information about the language competence of different categories of pupils, eg the vocabulary span of native speakers to enable comparisons to be made. Paterson(26) comments on this general issue:

> "To the extent that our assessment philosophies have moved away from norm – referencing in the last two decades, **we have lost this crucial comparative role for assessment** in encouraging worthwhile learning".

This particular observation applies directly to the challenges faced by teachers in Gaelic Medium Education in deciding to what extent a firm diagnosis of a particular ASN can be made in those circumstances in which the basic data is produced by the pupil. English language scales and questionnaire data filled in by teachers and other staff (eg for diagnostic purposes for ASD or ADHD) do not have this restriction and outcomes are usually norm referenced. Comparisons are often necessary in deciding whether it is appropriate to define the language performance of a particular pupil as deviating so much from the "norm" as to be regarded as requiring additional support . The use of dynamic assessment methods is also viewed as possible alternatives when normative data is not available with a sequence of pre test - mediation – post test used as the basic model. The primary goal of dynamic assessment is to judge or evaluate the pupil's learning potential – how support is utilized during the mediation phase (see 38 Lauchlan & Corrigan). Dynamic assessment is relevant when learning appears to be restrained and language problems are prominent - in these circumstances, classification is not the only central issue.

Possible Action Points

- focus on the evaluation of dynamic assessment approaches for the GME context;

- establish a clearing house for various banks of collated information about the development of pupils' competence in Gaelic – to lay down the basis of norms.

Staff development and training

The audit also focuses on the training needs of the staff involved in managing ASN in the distinctive GME context, and the detail of the findings are presented in Section 4 (4.11 -4.38) in the audit. The following summary themes, specific to the GME audit, are viewed as linking with some of the significant findings of the publications above under (23).

- Teachers in GME valued locally based peer networking meetings – sharing concepts, strategies and ideas – as particularly valuable contexts for CPD. This observation is echoed in the findings of Hayward and Spencer(2006) – "some teachers spoke very positively about the value of hearing about the ideas/principles and practice" (from peers).

- The latter research team also issue some caveats about the need to understand what

constitutes the basis of really good collaborative working and the general need to live with awareness of complexity in managing change while building inter professional trust. From the interviews conducted in the audit, the present writer concluded that some respondents, particularly less experienced teachers, were sometimes reticent in referring some of their pupils for assessment and possible collaborative working. This particular challenge for them should be overcome by sensitive mentoring, good practice in social moderation and supportive collaborative work.

- The research conducted on the development of the new curriculum(eg 23) refers at several points to the challenges involved in training an entire workforce in the new approaches to assessment and learning represented by the Curriculum for Excellence. A sustainable change model presented by Hayward et al 2010 suggests a comprehensive approach which is characterized by "educational, personal, professional and systemic integrity", with all stakeholders working together to support the core relationship of the teacher and the class group. In presenting this model, the tensions and challenges associated with change are fully accepted in the above paper by Hayward and colleagues and the extent of teacher stress was also encapsulated in the survey commissioned by the EIS (2014)(27) to collate views of members.

It can be argued that the measures of the "integrity" suggested above can be enhanced and staff stress can be reduced as staff (as a team) gain more control over the key set of actions associated with the new approaches to assessment and pupil learning. A further set of highly relevant measures are presented in the Donaldson report (28) such as:

"Early career teachers should continue to benefit from mentoring beyond induction. Additional support should be provided by senior managers, within schools and local authorities, to ensure appropriate progression as part of CPD and PRD process (Recommendation 31/see also 39)".

This dimension is of particular relevance to teachers in GME, given that over 30% are in the first five years of their career. The recommendations in the Donaldson report can be viewed as essential scaffolding for the development of the curriculum and corporate confidence will be an outcome as investment is made in training and support for staff, as detailed in this important document.

Possible Action Points:

- ensure that particular attention is paid to the training and support of newly qualified staff through the provision of mentoring and supervision mechanisms;

- small group locally based meetings with a training and information sharing agenda were viewed as particularly valuable and should be encouraged;

- training in mentoring should be provided on a regular basis as an aid to personal development and succession planning;

- training on a collaborative basis with colleagues from educational psychology teams and allied health professionals should be provided on a regular basis.

In concluding this section, a number of concepts from the work of cognitive psychologists can be considered in relation to the assessment of ASN in GME. Working memory is viewed as an important element in the processes involved in word

learning, reading and language comprehension (eg Gathercole & Baddley 1993)(29). Montgomerie(2010)(30) reviews accumulated research examining working memory and specific language impairment and traces out a number of possible avenues for further exploration covering both assessment and treatment. Recent developments in laying out a more comprehensive basis of understanding of relationship between memory and language in the last decade are also acknowledged by Szmalec et al (31) and a range of options for further investigation are suggested. In the next section, a number of these issues, such as the assessment of working memory, are noted as offering useful additions to screening in early years and baseline tests.

Assessment, Resource Development and Research

This final section is presented in short note form and draws on recent reviews of international research on bilingualism, the outcomes of the above audit and seminar and, also, issues raised in the series of chapters in this online Resource. In Chap 13, reference is made to current applied research initiatives which are linked to the development of resources.

The development of Gaelic Medium Education and the Curriculum for Excellence are major initiatives in Scottish education and both merit investment in research funding in their own right. The interaction of these two developments - particularly the emergent issues in relation to assessment - is also a distinctive area for investigation which is relatively uncharted. In the research and reports cited above the challenges involved in gearing a workforce to take responsibility for the various levels of assessment in the new curriculum are not denied and these challenges are further areas for investigation, as are the social moderation processes which underpin them.

Hayward (2012)(32) concludes:

" Building teacher assessment literacy to a point where they could confidently design and assess portfolio work....took two years of sustained and intensive activity".

Context of the development of Gaelic Medium Education and the Curriculum for Excellence:

- the concept of social moderation for assessment is a core idea within guidance documents and evaluation reports, particularly on the development of the new curriculum. A recent review(33) on this concept in New Zealand concluded:

"that the area of moderation as professional learning is ripe for further research and development". It is suggested that this statement could be usefully explored in the form of a research project examining social moderation within the general development of the curriculum and, also. in relation to the assessment of ASN in GME with a focus on the enhancement of staff skills.

- the term "collaboration" has a variety of meanings in the wide range of investigations covering referral and treatment in human care services. Hayward (34)states, in relation to the concept of collaboration: "it appeared that each person meant something different by the term" when the basis of formative assessment was explored. There would appear to be a strong case for further research on collaboration as an issue in referral systems on a staged intervention model in the GME setting and also in relation to staff training (eg Cordingley et al 2003(35) – Bickel et al 1995 (36)).

Assessment in GME

- the potential of the use of Dynamic Assessment in assessing various aspects of language impairment has been recognized in recent research work (Hasson et al)(37) and there are a number of publications (Lauchlan)(38) which can serve as a useful introduction. In the absence of other assessment tools at this stage in the development of GME, further comprehensive training should be provided, combined with investment

in robust evaluation of its use in educational bilingual context.

- as stated above, there are a number of assessment options suggested in Chapter 1, such as the collating of information about the characteristics of pupil competence in language at different stages in their bilingual development, (see 39/40) combined with information about the effects of the language background of the home;

- in this volume, Chapters 5,6,7 focus on different aspects of the assessment of bilingual children and these suggest a number of applied research/evaluative projects. The New Reynell Developmental Language Scales Multilingual Toolkit merits investment for a thorough evaluation of its use in the Gaelic Medium setting. An added collaborative feature would be to have a native Gaelic speaker working with the Speech and Language Therapist - as suggested in Chapter 5 and also as covered in the seminar on this topic.

- there has been limited research work conducted on the experience of pupils with ASD in the bilingual setting . There is scope to combine with related work currently under way in Edinburgh on this specific area of interest, with a focus on producing staff guidelines from early years to the management of later transitions for children with ASD.

- In chapter 13, reference is made to applied research work on transition and baseline tests and also pictorial story techniques for the oral language assessment which are still at an early stage in development and piloting. The latter draft instrument is linked to a Canadian equivalent which combines detailed methods for text analysis which could be adapted for use in Gaelic language settings.

- Section 5.1 of Chapter 13 provides summary details of research on a Gaelic Sentence Repetition Test which combines the normed Early Repetition battery with a Working Memory scale. The outputs from this study will be used to inform baseline assessment and also yield a substantial bank of language data elicited from the study which can be used for further work on error /miscue analysis and investigating non response.

- Chapter 12 also presented a listing of possible research initiatives and a number of these are already being pursued as noted above. Investigation of the use of parental language diary - logs is currently the subject of a funding bid. Investigation focused on factors influencing the age of acquisition of Gaelic remains a further research option.

- consideration is also being given to an investigation of significant factors influencing competence in numeracy in the GME setting. This study proposal is being prepared for funding application and will incorporate more intensive working memory measures with relatively large sampling and account being taken of curriculum content with age –stage factors as part of the design.

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Appendix: IMPACT STUDY

Institution: University of Glasgow

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Unit of Assessment: C25 Education

Title of case study: Shaping Assessment Policy and Professional Practice in Education

1. Summary of the impact

University of Glasgow-led research on assessment and learning directly shaped assessment policy and practice in Scotland, the UK and Norway. This included the development and implementation of the Assessment is for Learning Programme (AifL) and the Curriculum for Excellence (CfE) as well as changes to testing and monitoring under the Scottish Survey of Literacy and Numeracy (SSLN). The University of Glasgow's contribution to the internationally renowned Assessment Reform Group prompted further curricular and assessment changes both within and beyond the UK. Most recently the impact of the Glasgow research has extended to Norway where it influenced the Norwegian Directorate of Education's changes to assessment policy.

Assessment is for Learning and Curriculum for Excellence

The Scottish Government's Assessment is for Learning (AifL) Programme provides a coherent system through which Scottish schools and teachers use assessment to support and enhance pupils' learning. The Government's decision in 2001 to introduce AifL was informed by an extensive policy review and stakeholder consultation carried out by University of Glasgow staff, led by Professor Hayward (University of Glasgow, 1999-present). Hayward subsequently led numerous research projects, in collaboration with practitioners and policy-makers, which had a major impact on the development and success of the AifL Programme (e.g. Hayward et al (2005)). In her article, 'The complexities of change: formative assessment in Scotland' written with Spencer (Hon. Senior Research Fellow, 2002-present) and published in the international and peer-reviewed Curriculum Journal in 2010, Hayward examined the reasons for the success of the AifL Programme. The research provided strong evidence that the use of formative assessment had a significant impact on pupils' self-esteem, engagement with work, and attainment. Findings from the research led to the creation of a 'change model'. For educational change to be sustainable, Hayward argued, it had to be designed to have Educational, Personal and Professional and Systemic integrity. Learners, teachers, policy makers and researchers had to work collaboratively with a common aim, to improve learning (Educational Integrity). The engagement of each person and each community was crucial to the success of the innovation (Personal and Professional Integrity). Practice changed when all communities were involved in design, development and evaluation leading to future action (Systemic Integrity).

Further research undertaken by Hayward and Spencer examined reading and assessment. Hayward and Spencer (2006) summarises this research which demonstrated that the validity of reading tests in national testing and monitoring programmes was poor and that perceived policy inconsistencies at the systemic level conflicted with the promotion of formative assessment. The research concluded that teacher

professionalism, rather than any kind of testing system, should be the basis of assessment in schools.

Throughout the AiFL programme, and as the findings and recommendations from the projects were disseminated, the curriculum in Scotland was being reformed through the Curriculum for Excellence (CfE). Launched by Scotland's Minister for Education in 2004 and implemented in 2010-11, CfE radically transformed pre-school, primary, and secondary educational provision. The principles of the AifL Programme were influential in the creation and development of CfE. Reflecting this, the concept of curriculum was extended to include the totality of learning and assessment experiences and processes; the responsibility of learners has been recognised; the professional responsibilities and rights of teachers have been extended.

2. Underpinning research Impact case study (REF3b)

Assessment at Transition

Professor Hayward led the Assessment at Transition (AaT) project, funded by the Scottish Government in 2010-2012 (reported in Hayward et al 2012). The research was designed using the Educational Integrity model, developed by Hayward and Spencer in 2010 (see above), to explore how research might better support the alignment of assessment policy and practice. The context for the research was the challenge of progression in learning during the transition from primary to secondary school. However, the issues which emerged applied more generally to any point of transition, such as those within or between schools, and thus were of importance to every school and teacher in Scotland. The research used robust methodologies involving sophisticated data analysis of international research literature and Scottish policy documentation as well as extensive qualitative research with pupils and practitioners from 29 schools across 4 local authorities, meeting the international standards of originality and rigour. The research questioned the value of certain long-established transition practices and identified an alternative approach; this approach placed the use of a pupil-managed portfolio of their work designed to support dialogue between teachers and learners at the heart of the transition process. Several other key findings from the research demonstrated that:

> Teachers found it difficult to make confident judgements about the levels achieved by their pupils within CfE and would welcome more support; and
>
> Teachers recognised the importance of accountability but expressed concerns that some current practice could have negative effects on learning and teaching; there were significant problems with the ways in which schools used assessment information in their accountability systems; the report proposed new principles of accountability aligned with the principles of CfE.

Assessment Reform Group

The Assessment Reform Group, of which Hayward was a member, investigated formative assessment practices across the UK in a Nuffield Foundation-funded project (2006-8), entitled 'Analysis and Review of Innovations in Assessment' (ARIA), (Gardner at al, 2010). This research synthesised findings from analyses of assessment initiatives across the UK to produce insights to inform policy and practice. These included:

> Pedagogical changes necessary to ensure effective formative and summative

assessment by teachers;

Factors that facilitate or hinder successful uptake of assessment for improved learning by teachers; and

The need for policy change at both school and system levels to ensure a productive balance between accountability in terms of standards and the quality of pupils' learning.

Hayward made a distinctive and unique contribution to this ARIA research, based on her extensive record of research on these issues in the Scottish context.

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3. References to the research

2

Impact case study (REF3b)

4. Details of the impact

Directly Influencing national curriculum policy and practice in Scotland

University of Glasgow research as part of the AiFL and ARIA programmes, particularly the research reported in Hayward et al, (2005); Hayward and Spencer, (2010); and Gardner et. al, (2010), are clearly reflected in the Curriculum for Excellence assessment strategy and supporting guidance. Under CfE, the central importance of assessment of and for pupils' learning is now emphasised. The research shaped the new Curriculum by placing

3 key issues at the heart of CfE assessment policy and practice, namely: the emphases on self- and peer-assessment as means of developing learners' reflectiveness about their own learning; the importance of developing teachers' professional understanding of assessment matters and professional action on them; and, crucially, the need for initiatives to demonstrate educational, professional and systemic integrity.

Building the Curriculum 5: A Framework for Assessment (2011) sets out the Scottish Government's assessment policy and guidance. The Framework directly references seven research projects and publications to which Hayward was a key contributor, demonstrating a high level of influence of the research on assessment within the national curriculum guidance. Additionally, Hayward and Spencer's research on reading and assessment directly affected national assessment policy and practice. Hayward and Spencer (2006) identified a lack of provision for testing inference and evaluation skills in reading. Following meetings with the research team, Scottish Government officials agreed to evaluate these skills in the Scottish Survey of Literacy and Numeracy (SSLN), which monitors performance in literacy and numeracy at P4, P7 and S2 [1].

Two further projects, commissioned by the Scottish Qualifications Authority (SQA), Scottish Government and a local authority (Highland Council) in 2008, identified ways in which formative assessment could promote higher attainment in SQA high stakes examinations and examined the crucial contribution of the learner through self- and peer-assessment. This research for the Highland Council has informed both SQA support for practitioners and the development of policy and practice in that authority.

Shaping National Education Policy and Guidance to Teaching Professionals
Assessment at Transition (AaT), led by Hayward, influenced education policy and practice in a range of ways. The research team presented emerging research findings to representatives from Scottish Government and Education Scotland (the public body tasked with supporting quality and improvement in Scottish education) in a series of stakeholder seminars in late 2011 and 2012. These policy seminars were used as a forum to explore policy debates and build commitment amongst members of the policy community to the project findings. The Scottish Government subsequently published the findings on its website.

The final AaT report, written in a style intended to communicate clearly with different communities, was well received by education policy-makers and professionals, resulting in major impacts on policy and practitioner development in Scotland. As well as receiving positive public endorsement from Education Authorities [2], the project findings were used to influence national policy and guidance in a number of ways. For example, the AaT report demonstrated that teachers lacked knowledge and confidence about how best to assess the progress made by their pupils, in general, and how best to evidence attainment of a curricular level. These findings were directly addressed by Education Scotland's 2013 publication Assessing Progress and Achievement of Levels in the 3- 15 Broad General Education, which specifically advised schools and teachers on these matters.

The Scottish Government, following consideration of the problems of progression and of evidencing attainment outlined in the AaT report, tasked Education Scotland to identify significant aspects of learning in each curricular area, develop progression frameworks (rubrics) for these and bring together annotated exemplification of pupil work to

illustrate attainment of a curricular level in terms of these rubrics. This was a major recommendation of the research. The research team contributed to the project planning with senior Education Scotland staff; George MacBride (Hon. Senior Research Fellow 2006 –present) from the AaT team also participated in the project [3].

3 Impact case study (REF3b)

Education Scotland also used the AaT research findings in their project work with mathematics practitioners across nearly all education authorities in Scotland. In this context, the research served as an evidence base for Education Scotland's in-depth review of pupils' responses to the 2011 numeracy survey of the Scottish Survey of Literacy and Numeracy [4].

Stimulating Practitioner Debate and Influencing Strategy and Practice

The Times Education Supplement Scotland, the market-leading education publication in Scotland, reported on the AaT work in August 2012 and followed this up in September 2012 with a 4-page feature on the research which reported that the issues raised by the AaT findings were of relevance to every teacher in Scotland. The report has stimulated discussion and changes in practice in local authorities across Scotland, as exemplified by:

- Hayward presented findings to all head teachers in Glasgow; DVD of the presentation sent to every Glasgow school and screened at a 'Learning Day' to every teacher in Glasgow; all teachers required to implement the findings into their professional learning programme [5].
- Falkirk Council's Curriculum Support Officer used the report for discussions with headteachers; the Council used findings to revise advice to schools on assessment, profiling and reporting [6].
- The Quality Improvement Officer for Aberdeen City Council used the report to clarify difficulties in assessment at stages of transition; the QIO issued the report to all primary and secondary headteachers with whom she worked to inform their practice [5].
- In addition to web dissemination, more than half of Scotland's Education Authorities (17) specifically requested the full AaT Report from the University of Glasgow.

International Policy Influence: Informing Policy Developments in Norway
Policy-makers and practitioners in Norway used the assessment research findings as an evidence base to develop their Education policy [7]. Hayward presented the research to the Norwegian Education Directorate in Oslo on 23 October 2012 as part of the Norwegian Assessment for Learning 4-year programme (2010-14) involving more than 400 schools. Hayward was invited to Norway as an expert on the basis of her '... more than 20 years of expertise in assessment issues'. Reporting on the implementation of the project, the Norwegian Directorate drew on the findings of Hayward and Spencer (2010) and AaT to inspire many of the changes effected by the Norwegian programme. The related OECD Report Building Trust and Accountability: the Assessment for Learning Programme in Norway also cites the work of ARG, with which Hayward was significantly involved,

as influencing Norwegian policy direction on assessment. The DVD of Hayward's presentation in Oslo is a key feature of the Directorate's Assessment for Learning web resource designed to aid and inform the work of teachers and practitioners across Norway.

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Current Developments in the Assessment of Additional Support Needs (ASN) in Gaelic Medium Education(GME): Resources and Research

Archie MacCullich

1. The developments listed below, supported by funding from Bord Na Gaidhlig, Soillse and Scottish Government, have been guided by the following sources of information and advice :

1.1 Recommendations from the audit of ASN in GME (http://www.gaidhlig.org.uk/bord/en/our-work/gaelic-education/additional-support-needs/) which were derived from consultation with the network of 110 staff from various disciplines involved in providing services to pupils in GME;

1.2 The outcomes of the seminar (also funded by the Royal College of Speech and Language Therapists, GL Assessment and Education Scotland), held in June 2014, derived from small group discussions, seminar papers and the plenary session – as summarised in Chapter 12 in this Resource;

1.3 Recent guidance and advice distributed by Education Scotland on the general topic of assessment in the Curriculum for Excellence and also language teaching;

1.4 Discussions with teaching staff at training events over the past two years, organised by Stòrlann and Bòrd na Gàidhlig, as highlighted in section 6 of the Advice on Gaelic Medium Education (2015);

1.5 Comprehensive literature reviews of research and resource development in other language groups.

2. Resource development – guidelines and influences.

2.1 The recommendations from the above audit were set in the context of the major developments in the distinctive assessment processes associated with the ongoing development of the Curriculum for Excellence – the latter designed to encourage independence and pupils taking more responsibility in learning.

2.2 Developments in the assessment of pupils with ASN will draw on various categories of assessment – summative, formative, dynamic and the specialist collaborative measures such as those used for the diagnosis of possible Autistic Spectrum Disorders:

- in all respects, account should be taken of the nature of Gaelic language as having a transparent alphabetic orthography, in contrast to accumulated curricular and assessment resources and research findings derived from investigations in English language, which is based on an opaque writing system.

- the above Advice note on Gaelic Medium Education refers to this issue in the document "Building the Curriculum 5: the framework for assessment" in the following terms: "In translating such assessments, a check also needs to be made

on whether the assessments match the developmental stage of concepts in Gaelic".

3. Classroom Resources.

3.1 A search has been conducted of informal checklists, and resources developed by teachers for classroom use and two large folders of this material are being revised and redesigned for distribution;

3.2 In revising this material, particular attention has been focused on support material for the development of approaches to phonics and also to complement the use of the GL Assessment Gaelic Language Phonological Screening Test;

3.3 The use of computer based support resources such as Workshark, Penfriend, and Clicker 6 - which can be used with Gaelic language to support learning - has been evaluated in a number of schools;

3.4 A number of classroom support materials – selected on the basis that they are particularly suited for children with ASN and are language neutral – have featured in training sessions and will be revised , redesigned and details issued for distribution;

3.5 The content of the Special Needs Assessment Profile (Gaelic version) has been revised following evaluation of its use and the new version will be released in the near future;

3.6 The revised Reynell Test and Multilingual Toolkit, for use by speech and language therapy staff is currently being evaluated, following a presentation at the seminar at Edinburgh University in June 2014.

4. Training and Staff Development.

Storlann has been a lead agency in providing a series of training options over a number of years on the management of ASN in GME for staff attending the annual conference and also other initiatives.

The influences cited in paragraph 1 above were used to define topics, together with ongoing consultation with staff groups and the analysis of evaluation data from previous events. Training initiatives are summarised below under the following subheadings :

4.1 **Resource focused:**

- training sessions on the use of general pupil support resources, such as the Card Flipper and Magnetic Dots and related materials with a video record made of session;

- repeat sessions on the use of Word Shark and Penfriend and other online

resources, including the Dyslexia Toolkit at successive annual conferences;

- presentation on the application of Clicker 6 to the Gaelic language teaching context.

4.2 Assessment focused:

- training session on the application of Dynamic Assessment methods in the bilingual classroom;

- examining the significance of the concept of working memory in classroom management and pupil learning and the use of the Working Memory Rating Scale as an assessment tool;

- exploring the use of sentence repetition and non word repetition as screening tools in the bilingual context. This approach is the subject of an ongoing research project as summarised below;

- sessions on the general principles underpinning the assessment of ASN in bilingual education.

4.3 **Collaborative training.**

- training sessions at the Alltan on ASN in GME over recent years have been conducted by an educational psychologist and a support for learning specialist on a collaborative basis, with reference to a staged intervention model;

- training sessions at the 2014 Alltan included collaborative inputs from a speech and language therapist with experience of working in Gaelic Medium Education, in her capacity as representing the policies of the Royal College of Speech and Language Therapy on recommended practice in bilingual education;

- it is noted that collaborative training of this nature featured prominently as recommendations in the outputs from the seminar in June 2014.

4.4 **Research update and resource development focused training.**

- the development of a new reading test in Gaelic was the subject of consultation and information sharing with teaching staff at the last Alltan event and this initiative is now being actively progressed by Dr Fiona Lyon and Dr Sarah MacQuarrie;

- on the same basis, the use of the sentence repetition technique was discussed with teaching staff in training sessions and agreement established for field trials by several class teachers as co researchers utilizing this approach as a teacher initiated screening method.

In addition to the above sequence of training and staff development sessions organised by Storlann, contributions on the general topic of the management of

ASN in GME have been made to events organized by Bord Na Gaidhlig for teachers in training and other groups.

The outputs from the seminar in June 2014 identified the following target groups for training:

- "Training modules for PGDE students in collaborative working with ASN and SLT professional"

- Training modules for SLT students in approaches to supporting Gaelic Medium pupils".

5 Research.

Notes under this section will be restricted to research currently being undertaken by those directly involved in the sequence of actions which followed the publication of the audit, organisation of the seminar and the collating of the contents of this online resource. The general thrust of the applied research under this section on this basis is to provide a degree of theoretical underpinning to guide the development of assessment tools and resources. The report (Chapter 12) on the seminar concludes with a number of suggestions for further research, which were elicited from the content and subsequent consultation.

5.1 Soillse Project 2014 - 2015 (Storlann – Heriot Watt University Psychology Department). Evaluation of a Gaelic Language Sentence Repetition and Non word Battery for Gaelic Medium Education. The fieldwork for this project is nearing completion, with data collected for over 200 pupils in the first three years of primary schools in Edinburgh and CNES; measures of Working Memory and results from the Early Repetition Battery also form part of the research model. In addition, this approach will sample 50 preschool children. This project draws on international research utilizing this approach with other language groups and there is established contact with researchers covering similar initiatives.(http://www.bi-sli.org/Publications.htm).

5.2 In the next section, a number of current developments are listed and these are being informed by the results of the above project and have also generated a number of other research initiatives which are the subject of funding application at the time of writing. This includes a major proposal examining the teaching of numeracy in a bilingual context.

5.3 The development of a Gaelic Language Reading Test by the research and development team of Fiona Lyon and Sarah MacQuarrie is a very significant initiative which will contribute to assessment and intervention in general and provide a much needed focus for the management of ASN in GME. Reference to the background of this research : http://www.storlann.co.uk/asn-slt/#video.

6. Current developments: screening and assessment tools for GME

6.1 **Baseline Assessment:**

This initiative is designed to produce a number of measures in Gaelic language which can be employed by teachers in GME alongside any other measure which specific council policies utilise for early screening. The results of the preschool screening and data from the testing of the Primary 1 groups (Para 5.1) will be used to define the content of the draft evidence based test and also provide an instrument for preschool screening. In addition, a working memory element will be included along with a focus on readiness for numeracy.

6.2 **Assessment of Oral skills in Gaelic:**

Data from the Sentence Repetition Tests from the Primary 1-3 groups in the five target schools (Para 5.1) will be analysed on a miscue analysis frame of reference to guide future test development for oral skills. In addition, an investigation of the use of a language elicitation model based on story telling is ready for initial trials. Analysis will examine the language content, organization of stories and grammar through more extensive field work. It is proposed that norms will be established.

6.3 **Transition test in Gaelic:**

Consultation with secondary school staff indicates that a new test, completed by pupils in late Primary 7, and exploring various features of competence in Gaelic language, would be a useful addition to the transfer process from primary to secondary. Draft versions of such a test will be piloted in the near future and an online option is under consideration.

6.5 **Numeracy in Bilingual Education:**

Consultation with teachers in primary schools confirms that an exploration of the factors which enhance the achievement of pupils in numeracy in bilingual education would be welcomed . A number of research proposals, at pilot and longitudinal levels of investigation, are being prepared for funding application.

6.6 **Research Briefing:**

It is intended that briefings will be produced from the above research initiatives, which would stimulate direct use of the outcomes in classrooms and preschool units in enhancing assessment and intervention. The production of these research notes would be designed to encourage small scale applied research and the possible establishment of a network of teachers as co researchers in devising and revising assessment and support materials for direct classroom use.

7. Conclusions

7.1 The above summary in each section highlights current engagement with the various clusters of recommendations from the audit. There are still clear gaps in provision in relation to differentiated support materials for literacy and numeracy and research in progress is likely to produce outcomes to further substantiate the case for such materials.

7.2 The funding given by the various bodies listed in the first section has enabled the

above developments to be carried forward and further action is under way to elicit support for the research based development of assessment tools and resources for intervention.

April 2015

Antonella Sorace Power point

THE UNIVERSITY of EDINBURGH

BILINGUALISM MATTERS

GAELIC-ENGLISH BILINGUALISM: A PRIVILEGE AND AN OPPORTUNITY

Antonella Sorace
University of Edinburgh & *Bilingualism Matters*
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Soillse seminar, 2 April 2014

1

Gaelic←→bilingualism

- Bilingualism is essential to the survival of Gaelic.
- Speaking Gaelic is an opportunity to provide children with the benefits of bilingualism.
- The importance of information on the advantages of Gaelic-English bilingualism.

2

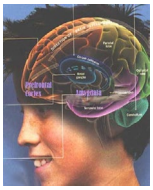
What is "bilingualism"?

Bilingual/multilingual = someone who knows two (or more) languages and uses them on a regular basis.

3

Bilingualism = a lot more than two languages

- Not only:
  - social and cultural advantages
  - job, travel advantages
- But also:
  many cognitive (mental) advantages



- Let's begin from the many misconceptions about bilingualism….

4

Many people believe that….

~~"BILINGUAL CHILDREN ARE CONFUSED, THEY DON'T SPEAK ANY LANGUAGE PROPERLY"~~

~~"BILINGUALISM SLOWS DOWN THE CHILD'S GENERAL DEVELOPMENT"~~

~~"BILINGUALISM UNDERMINES PERFORMANCE IN THE MAIN LANGUAGE AT SCHOOL"~~

~~"BILINGUALISM IS WORTHWHILE ONLY IF BOTH LANGUAGES ARE USEFUL"~~

NO BASIS FOR THESE IDEAS!

5

Why starting languages early is good

- Young children learn one or more languages naturally, without conscious effort.

6

Biographies

Janice Angwin

Janice Angwin is an experienced Speech and Language Therapist who has worked in Highland for 35 years. She has a specialist interest in child language disorder, and has worked in a Language Unit, mainstream settings and with children with speech and language difficulties from a variety of linguistic and ethnic backgrounds.

Bernadette Cairns – Head of Additional Support Services, Highland Council

Bernadette worked as an Educational Psychologist in Highland for 20 years and is now Head of Additional Support Services within the Care and Learning Service. This directorate incorporates Health, Education and Social Care professionals, working within integrated teams in a single children's service. In her current role Bernadette has responsibility for the strategic leadership and management of additional support services, including support staff in schools, specialist education services, Allied Health Professionals, Primary Mental Health Workers, Educational Psychologists and specialist preschool services.

Dr Morag Donaldson (Senior Lecturer, Psychology Department, Edinburgh University)

Morag Donaldson is a Senior Lecturer in the School of Philosophy, Psychology and Language Sciences at the University of Edinburgh. Her main research and teaching interests are in children's spoken language development. She has conducted research projects on such topics as the role of speech and language therapists in the education of pupils with additional support needs, children with language impairments' ability to produce causal explanations, and preschool children's acquisition of Gaelic grammar.

She is a Gaelic learner – learning from her mother who is a native speaker, from attending courses and through singing with Lothian Gaelic Choir.

Indra Sinka

Indra Sinka is a senior lecturer at the Open University. She worked for a number of years as an English teacher before completing Masters and doctoral degrees. Her specialism lies in child language acquisition and bilingualism. She is bilingual in English and Latvian

Marina MacLeod

Marina MacLeod holds the position of Depute Head Teacher at Condorrat Primary School and Nursery, a bi-lingual school, with a Gaelic Stream where pupils are educated through the medium of Gaelic.

Christine Lapsley

Christine is Speech and Language manager at NHS Western Isles.

Carolyn Letts

Carolyn Letts is a speech and language therapist and senior lecturer at Newcastle University. Her first clinical post was in North Wales where she developed a life-long interest in working with bilingual children. Her current research interests include assessment of children's language development in bilingual contexts.

Sue MacDonald

Sue is Manager, ASN Services, Comhairle Nan Eilean Siar. Learning Focus: to examine a model of inter-disciplinary casework in an island setting incorporating educational, speech and language therapy, and child psychiatric services.

Archie MacLullich

Archie was a Consultant Psychologist. He had a professional background in education, social work and psychology. He had direct client service experience as an educational psychologist and teacher in specialist residential care.

His management experience included 20 years at senior and directorate level at the Scottish Office Social Work Services Group and Social Work departments in Glasgow and Edinburgh. Archie trained with the Tavistock and Scottish Institutes of Human Relations and at Glasgow University.

His latest involvement was in the provision of consultancy and executive supervision.

Archie had a specialist interest in autism, bilingualism and attachment difficulties in children and adults.

He was a native Gaelic speaker with equal appreciation of the beauty of the Hebrides and of the Swiss mountains and lakes.

Catriona Morrison

Catriona Morrison has an MA from the University of Glasgow and a DPhil from the University of York. She has lectured at Cardiff University, the Robert Gordon University, the University of Leeds and Heriot-Watt University. Her research specialisms are mainly in language and memory research, including language and memory development and issues relating to changes in cognition across the lifespan. Her current work on memory includes music and memory, and, along with colleagues at City University in London, has collated a large database of memories of The Beatles. In addition, she has interests in memory accuracy and super memory. She has published on diverse topics including internet addiction and depression. She is a former Secretary and Chair of the British Psychological Society (BPS) Cognitive Section.

Sean Pert

Sean is a speech and language therapist with over 20 years' experience in the NHS. He has worked as a specialist speech and language therapist, service manager and student co-ordinator. Clinically he has worked with:

- Children with severe speech and language impairments
- Bilingual children
- Trans adults on voice and communication change

I am interested in evidence-based practice and how to apply evidence in real clinical situations.

He currently works as Senior Lecturer (Teaching Focused) Speech and Language at the University of Manchester.

Jane Reid

Jane was AHP National Lead for Children & Young People, Scottish Government and worked at national, regional and local levels to provide leadership and direction for the AHP workforce within an inter-professional and inter-agency environment and to ensure that policies and guidance are embedded and utilised in practice. She developed and supported strategic networks nationally, regionally and locally to ensure sharing of best practice and succession planning for AHPs working with children and young people.

She was also Chair of AHP Children and Young Peoples forum and worked to facilitate implementation of Government policy nationally. Jane influenced policy and operational direction for AHPs working with children and young people.

Carol Stow

Carol is a consultant speech and language therapist registered with the Health and Care Professions Council and the Royal College of Speech and Language Therapists (RCSLT). She specialises in working with bilingual children and their families. In 2009 she was appointed a Fellow of the Royal College of Speech and Language Therapists in recognition of her work with bilingual families.

Carol originally worked with both children and adults and was a specialist in adult neurology and voice for two years before focussing on work with children. She now has over 30 years clinical experience working with children with a wide range of disorders. In Rochdale, UK, she established and led the specialist team of speech and language therapists and bilingual assistants. This team specialises in working with bilingual children and their families. Where appropriate the team works in the mother tongue of the family rather than imposing the majority language (in this case English) on the family. The team have been at the forefront of clinical research which aims to develop effective therapy techniques for bilingual children.