“No matter where they live or what their background, every single child in this country deserves the opportunity to read, to read widely, and to read well - it’s a simple matter of social justice.”

Child Literacy Campaign 2015
Foreword by the British Dyslexia Association (February 2019)

The British Dyslexia Association (B.D.A.) again welcomes the updating of this comprehensive guidance on Dyslexia and Literacy Difficulties developed by Cambridgeshire County Council, as part of their Local Offer.

- A quick guide had been developed covering the main points;
- The main Guidance has been separated from the research document making it easier to navigate or download;
- There is a new FAQ questions for schools based on feedback;
- Links to the most up to date webpages (which will automatically update as new evidence comes out) have replaced the fixed interventions section;
- There is a link to the DfE BDA neurodiversity report and training; and
- Existing links have been checked to ensure they are still valid.

With as many as one in five pupils in the classroom having literacy difficulties, early and appropriate intervention is crucial to the long-term outcomes of this huge cohort of children. Without Dyslexia as a core part of initial teacher training, teachers may lack the knowledge and skills to understand and help these children. This guidance should provide an invaluable resource for parents and teachers alike. The guidance embodies the ethos of the S.E.N.D. reforms, of working with parents, children and young people as well as teachers and other professionals to enable ‘co-production’ at all levels: from interventions for an individual child; to a dyslexia friendly classroom and school; and county wide guidance, planning and commissioning. It promotes Dyslexia friendly schools, early identification and assessment, screening and evidence-based interventions; it has F.A.Q.s, tips from parents and a moving composite ‘letter from a dyslexic pupil’ to their teacher. An extensive research document backs up the guidance, with links to resources and opportunities for further learning. A focus on dyslexic strengths and what dyslexic children can do, and not just their difficulties, can help to maintain self-esteem and motivation to learn and prevent behavioural and mental health problems.

This Dyslexia Local Offer enables parents to find out about dyslexia and what to expect if their child is, or might be, dyslexic and enables parents to feed back about local services and gaps. It provides clear guidance on dyslexia and literacy difficulties - although we would argue that the terms are not interchangeable; all struggling readers, whether dyslexic or not, should receive interventions appropriate to their individual needs. Cambridgeshire should be commended for an excellent, evidence-based Dyslexia and Literacy Difficulties Local Offer.

Helen Boden, Chief Executive Officer of BDA

Fay Dutton, Chair of Pinpoint (Cambridgeshire Parent Carer Forum) and Trustee of BDA and PaCDDA (Peterborough and Cambridgeshire District Dyslexia Association)
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Introduction

This document has been written to provide guidance to professionals and parents on the most current approaches to support the successful inclusion and attainment of children and young people with dyslexia. The document forms part of the wider Cambridgeshire Local Offer which covers information on the local provision for Special Educational Needs (SEN) and Disability. It is a working document and will be reviewed biennially, or sooner if there is significant new research.

The Cambridgeshire Dyslexia Guidance has been co-produced with parents and carers of children with dyslexia, young people with dyslexia and professionals working in the field of dyslexia\(^1\). It aims to provide easy access to information relating to dyslexia and to enable parents and schools/settings to have a common understanding of dyslexia and current best practice in order to achieve the best outcomes for children.

There is considerable evidence that dyslexia can significantly impact on a person’s life chances and outcomes, in particular in relation to, unemployment, poverty self-esteem and offending behaviour. Cambridgeshire recognises that early identification and effective support for these children is essential.

This guidance draws on recent research on dyslexia and a detailed paper presenting the research basis is available on the Cambridgeshire Local Offer.

*Throughout the document the term parent refers to parents and carers and the term schools and setting refers to all schools, early years’ settings and further education colleges.*

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\(^1\) This has been carried out through parent events organised through Pinpoint as well as the seeking of feedback on the draft document and making changes as appropriate to current research and practice. The views of children and young people with dyslexia have also been sought through a series of focus groups. Drafts of the guidance document have also been circulated through SEND Specialist Services and Cambridgeshire Learning Directorate in order to seek feedback from Specialist Teachers (including those with Level 7 OCR qualification in Dyslexia) and from Cambridgeshire Educational Psychologists. It has been distributed among selected school staff with an interest in dyslexia and discussed at SENCO briefings across the county.
What is dyslexia?

Firstly, we acknowledge that dyslexia is an emotive and often contested issue and it is recognised that there are currently many different definitions of dyslexia.

Cambridgeshire is using the current evidence-based definition, endorsed by the Government, in order to provide clarity for parents, professionals and all others with an interest in improving the outcomes of children/young people with dyslexia.

“Dyslexia is a learning difficulty that primarily affects the skills involved in accurate and fluent word reading and spelling.”

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

From Rose, J (2009) ‘Identifying and Teaching Children and Young People with Dyslexia and Literacy Difficulties: an independent report from Sir Jim Rose to the Secretary of State for Children, Schools and Families,’ DCSF.

We also accept the British Psychological Society (BPS) definition from 1999 (reprinted in 2005) “Dyslexia is evident when accurate and fluent word reading and/or spelling develops very incompletely or with great difficulty. This focuses on literacy learning at the “word” level and implies that the problem is severe and
persistent despite appropriate learning opportunities. It provides the basis of a staged process of assessment through teaching”

The Rose Report definition acknowledges current research that:

- Dyslexia occurs across the range of intellectual abilities. The definition does not rely on identifying a discrepancy between a child’s ability in one area and his/her abilities in other areas

- There isn’t one specific profile of cognitive strengths and difficulties that needs to be identified in order to classify a child as having dyslexia

- There are clear genetic and biological bases to dyslexia. There are differences in the brain functioning of those with significant reading difficulties compared to typical readers. Studies report that many parents of children identified with dyslexia also have reading difficulties

Based on current research and theory the term dyslexia can be used interchangeably with literacy difficulties (reading/spelling difficulties) at the word level

It is important to recognise that most children and young people with dyslexia can learn to read but may never attain the levels of accuracy and fluency of their peers (see the FAQ section)

Within this model we recognise that the biggest question is: What is the nature of the dyslexic difficulties and what are the most suitable interventions to support an individual’s particular needs relating to reading, spelling and some wider areas of literacy?
How do children learn to read?

- Early language and literacy (reading and writing) skills development begins in the first few years of life and are closely linked to the child’s earliest experiences with language, books, stories and nursery rhymes.

- Children usually begin to read with a whole word awareness of visual and spoken words (for example, recognising their name or a shop logo) and then tend to become aware of increasingly smaller units over time. Reading development is supported by exposure to print (regularly reading to children from a very early age, singing nursery rhymes) and vocabulary development (talking to your child).

- Being able to hear and identifying the different sounds in words (phonological awareness)* is a key skill and predictor of later reading success. As children learn to read, phonological awareness is used to work out the relationships between parts of words and what they sound like (syllables, onset-rime, phonemes)*. They learn to pronounce and identity the whole word. This may occur through breaking down the sounds in words (decoding) or through other approaches such as recognising whole words or rhyme.

- In order to begin to read fluently and efficiently in a way which allows for comprehension (understanding of what has been read), eventually words which have been decoded* will need to move into memory so that they can be identified quickly by sight.

- Skilled reading is a complex process and it is therefore not surprising that there is a great deal of individual variation in reading development.

*A glossary of less commonly used terms is available at the back of the document.
Developing early literacy skills (0-3 years)

Formal reading instruction which pushes very young children to achieve adult models of literacy (reading and writing words) is, for the vast majority of children of this age, not developmentally appropriate. Early literacy theory highlights the importance of providing young children with a language and literacy rich environment. All Early Years children should have access to the following:

- A language rich environment, where babies and toddlers are talked to and listened to from the earliest age
- A wide range of books available to suit their age.
- Regular opportunities to explore and play with books (board books, cloth books, plastic books, real books)
- Singing nursery rhymes and developing awareness of rhythm, rhyme and syllables in words
- Listening to stories and encouragement to look at favourite pictures, point to familiar objects, imitating an action seen in a book, encouraging babbling/talking in imitation of reading
- Opportunities to recognise whole words e.g. the child’s name
- Scribbling and mark making

Some strategies for developing pre-reading skills can be found on the family learning website.
What should all schools be doing to support children and young people with dyslexia?

All of the points below are covered in detail in Cambridgeshire’s Tier 1-3 Dyslexia Training, available to schools and settings.

Universal Support: A Dyslexia Friendly School

Dyslexia friendly policies in schools and settings are most effective when they form part of the whole school development plan and when progress towards the goals and targets on the plan are regularly monitored. Dyslexia friendly schools recognise that teaching staff, as individuals, are key to the success of students overcoming their difficulties.

The four key elements of good practice, identified in the Rose Report and OFSTED (2010) are:

- A whole school ethos that respects individuals’ differences, maintains high expectations for all and promotes good communication between teachers, parents and pupils
- Knowledgeable and sensitive teachers who understand the processes of learning and the impact that specific difficulties can have on these
- Creative adaptations to classroom practice enabling children with special needs to learn inclusively and meaningfully, alongside their peers
- Access to additional learning programmes and resources to support development of key skills and strategies for independent learning

Schools are also encouraged to:

- Complete dyslexia awareness training
- To regularly review their training in order to keep up to date in line with national developments. This could also be achieved through school staff attending a
course about dyslexia, whole school INSET or department INSET provided by a suitably qualified member of staff or an external agency including SEND Services 0-25

Whole school planning

- The literacy and Dyslexia-SpLD Professional Development Framework [www.thedyslexia-spldtrust.org.uk](http://www.thedyslexia-spldtrust.org.uk) is a free on-line programme providing the user with a full personalised report base on a ‘gap-analysis’ of their confidence in key areas related to dyslexia and Specific Learning Difficulties and recommending next steps for Continuing Professional Development
- The Dyslexia Inclusion Development Programme ([IDP](http://www.thedyslexia-spldtrust.org.uk)) is a free on-line programme split into 4 modules, including a self-evaluation tool

Cambridgeshire SEND Services 0-25 and Schools Intervention Service offer a range of school based training that can be tailored to schools’ needs.

[Here](http://www.thedyslexia-spldtrust.org.uk) is a link to the British Dyslexia Association, Dyslexia Friendly Schools Good Practice Guide.

Early Identification and Assessment

There is clear and consistent evidence that early identification of literacy difficulties, including dyslexia, is key to providing effective interventions and preventing difficulties from becoming worse. The focus of any assessment should be on identification of needs and the best way to respond. One recognised model of identification and assessment considers a child/young person’s Response to Intervention (RTI). This approach stands in contrast to a ‘wait-to-fail’ approach whereby assessment and identification of needs would traditionally have come following a period of not making progress and falling further behind peers. RTI involves the following stages:

- Relevant universal screening
- Progress monitoring
• High quality, evidence based instruction for all pupils
• Tiers of intervention targeting specific pupils not making progress (levels of support identified by the Special Educational Needs Code of Practice, 2015)

The Class Teacher should take responsibility for recognising the possible early indicators of literacy difficulties and putting steps in place to identify the specific nature of the difficulties the child/young person is having. The teacher, with help from within the school whenever appropriate (for example, from the SENCo or other with more detailed knowledge of dyslexia), should adapt learning and teaching approaches to ensure the child/young person’s needs are met appropriately. Teachers should involve parents and children at the earliest stage of identification, planning and intervention so that they are fully engaged in the process.

One useful toolkit is: Assessing Dyslexia - Toolkit for Schools an online tool providing guidance, assessments and strategies for subject/class teachers, support teachers and specialists.

There is no single test which will indicate dyslexia; rather there are a range of materials that can be used effectively by schools, and, for more severe and persistent difficulties, specialist practitioners. The expected procedure is that the assessment of literacy development will be ongoing. This will need to address areas of difficulty as well as ensuring that educational opportunities are not curbed by literacy difficulties. This may include the following:

• Ensuring that children and young people are grouped and/or set according to their ability in a way that allows them to achieve their best, rather than set according to literacy skills
• Ensuring that there is appropriate task differentiation
• Ensuring that there are opportunities to record ideas in a variety of ways
Universal Screening

There are a number of early screening tests available to schools that give an indication of whether children are at risk of dyslexia. Effective assessments highlight areas of strength and difficulties and this information is then used to guide interventions. This should include measures which are meaningful and relevant and reflect assessment over time.

Although there are many commercially available dyslexia screening tests, there are also assessment tools available in schools that can be effectively used by teachers to identify children who are failing to respond to high quality teaching and who are likely to need additional support.

The materials below are used to assess the progress of all children in mainstream school and can be used to identify children at risk of dyslexia:

- Early Years Foundation Stage Profile
- Letters and sounds phases
- Year 1 Phonics screening test

In addition, the following are used by some primary and secondary schools:

- Standardised reading and spelling tests
- Target Tracker Steps

Cambridgeshire SEND Specialist Services and Learning Directorate have produced an Assessments for Schools document that contains some additional recommended assessment tools.

Vision and Hearing

One of the first steps, when addressing the needs of a child with literacy difficulties is to check their hearing and vision as difficulties in these areas can impact on the development of literacy skills.
There is also some evidence that some children experience ‘visual stress’ which may be reduced by the use of coloured overlays.

**Progress monitoring**
The SEND Code of Practice (2015) for the Children and Families Act describes the process for children with SEND who are not achieving as well as their peers, as a cycle of ‘**Assess, Plan, Do, Review**’. The purpose of this is to find the most effective way to support a pupil's learning.

However support is provided, a clear date for monitoring and reviewing progress should be agreed, and the parent, pupil and teaching staff should each be clear about how they will help the pupil reach the expected outcomes. At the review, decisions should be made regarding the next step for the child, for example, continuing with an effective intervention, considering an alternative evidence-based intervention.
Progress Monitoring, Evaluating and Responding to Progress

Consider area of difficulty (e.g., see reading model)

Identify intervention and set SMART target

Review: Progress towards target(s)?

Little or no progress

Are interventions and approaches consistently in place?

yes

no

• Adapt interventions/approaches

Moving forward

• Relaunch
• Ensure consistency

Target achieved

4 – 6 weeks

Keep going

Is the difficulty still causing concern?

yes

no

Update/refine target and intervention

Discard target

Review: progress towards target(s)?

Adapt targets

4 – 6 weeks

Revisit consideration of areas of difficulty (including available information from assessments)

4 – 6 weeks

Review: progress towards target(s)?
Interventions

Once a child/young person’s strengths and difficulties have been identified, the questions that need to be asked are:

1. ‘What is the nature and severity of the dyslexia?’
2. ‘What do we need to do to support the child/young person?’

Any intervention that is put in place must reflect the needs identified through assessment.

Where evidence-based interventions are used, they must be implemented according to the way the programme was designed. Strategies for maintaining effectiveness of an intervention or programme include:

- Ensuring that all staff are committed to the fidelity of the programme or intervention.
- Taking account of cultural adaptation.
- Considering the language used in the programme or intervention.
- Staying true to the duration and intensity of the programme or intervention.
- Taking steps to avoid programme drift
- Staying up-to-date with programme revisions and new materials.

If a child/young person requires additional support there are many evidence-based interventions that can be carried out in school. Any intervention should be done alongside the universal support that school is putting in place.

Recommended Interventions

There are a number of sources that school can access to find out what evidence-based assessments are available. It is beyond the capacity of this document and the associated Guidance document to provide an exhaustive list of evidence-based literacy interventions available. However, useful sources to access include:
The 3 Tiered Dyslexia training provides additional recommendations around interventions and how to select them based on needs.

**Specialist Assessments**

For those children whose literacy difficulties are persistent and not responsive to the evidence-based interventions delivered over time, more specific assessments of strength and needs and bespoke interventions (based on these assessments) may be required.

"Where a pupil continues to make less than expected progress, despite evidence-based support and interventions that are matched to the pupil’s area of need, the school should consider involving specialists, including those secured by the school itself or from outside agencies."  **(6.58 SEN Code of Practice 2015)**

Schools may involve specialists at any point to advise them on early identification of SEN and effective support and interventions. A school should always involve a specialist where a pupil continues to make little or no progress or where they continue to work at levels substantially below those expected of pupils of a similar age despite evidence-based SEN support delivered by appropriately trained staff. The pupil’s parents should always be involved in any decision to involve specialist.  **(6.59 SEN Code of Practice 2015)**

Some schools have Specialist Literacy Teachers within their school or school cluster (group of neighbouring schools) who are able to support them in further understanding a child/young person’s strengths and difficulties in relation to dyslexia. Others may
seek the support of the Cambridgeshire County Council SEND Specialist Services which is made up of Educational Psychologists, Specialist Teachers and Specialist Practitioners. This service might become involved if:

- Schools are able to evidence that they have delivered High Quality Teaching and dyslexia friendly classrooms
- Baseline assessments are in place and universal and targeted support has been delivered and has been monitored consistently. Support has been based on evidence-based interventions which have been delivered appropriately (duration, frequency etc.)
- The child or young person is not making progress, or making only very limited progress and remains significantly behind their peers

If the child meets the thresholds for involvement from the SEND Specialist Service a Specialist Teacher or Educational Psychologist may be involved in the following:

- Have a consultation with school staff and parents to explore interventions that have been put in place, look at pupil assessment information and make further recommendations on teaching and learning strategies. They may work with the school staff (not always directly with the child) to achieve a better understanding of the factors that may be preventing the child from making progress
- Contribute to staff development by providing dyslexia training and model specific interventions relevant to the child’s needs.
- Work directly with the child to complete a detailed assessment of their strengths and difficulties and recommend targeted interventions based on the findings of the assessment. These would then be then reviewed
- Be involved in Access Arrangements at secondary school and FE colleges if a specialist assessment is required and school do not have the resources. This is part of the traded offer
- Any assessment should:
  - Include the views of the child/young person
  - Consider the child/young person’s strengths and difficulties and use this information to inform interventions
  - Include the views of the parent
- Consider the social and emotional impact of their persistent literacy difficulties/dyslexia
- Consider the persistence and severity of the reading, writing and/or spelling problems
- Investigate the main gaps in the pupil’s knowledge and skills (e.g. phonological awareness, phoneme-grapheme correspondence, writing fluency, comprehension)
- Draw, where appropriate, on the views of other professionals
- Provide recommendations, based on the assessment, to support the child to make progress
- Provide a written report
- Plan a review date

- The SEND Service 0-25 will also work at Local Authority level by contributing to research, policy development and guidance around dyslexia

The majority of children and young people with dyslexia can be supported through School SEND Support (Code of Practice 2015). For a very small minority, an Education, Health and Care Plan (EHCP) might be appropriate. Children and young people may meet the criteria if they:

• Have severe and/or complex long-term needs which affect everyday life
• Require provision and resources which are above those normally available
• Requires intensive and longer term help and support from more than one agency
• Are making limited or no progress despite high levels of support and purposeful interventions

There must be evidence that a graduated response has already been put in place by the school or setting (e.g. appropriate assessment and interventions including support and resources available through the Local Offer).

Details of thresholds for an Educational Health Care Plan (EHCP) are available here.
Co-occurring difficulties

These co-occurring difficulties\(^2\), often referred in the context of ‘neurodiversity’, are not, in themselves, markers of dyslexia, but may be seen in some people with dyslexia. As would be expected for a child with any special educational need, these should be addressed using the graduated response as outlined in the Code of Practice (2015).

Social and emotional impact
Teachers and parents need to be mindful of children and young people’s emotional levels and recognise that reduced motivation is often a consequence of the struggle they are experiencing. Adults helping children and young people with dyslexia need to be aware of this and know how to help them to overcome this. Interventions that improve self-esteem along with reading interventions can be effective.

It is important to build on a child/young person’s strengths as this is likely to improve self-esteem and engagement of learning. All children and young people need to be empowered to believe that they can and will make progress with their literacy and should be encouraged to take an active part in their learning.

Language
There is a strong link between reading difficulties and language difficulties. Many language difficulties relate to the same weaknesses that are found in significant literacy difficulties/dyslexia, for example, phonological awareness, ability to retrieve information and label something quickly.

For more information on Speech and Language needs, please refer to the Speech, language and communication needs teachers within SEND Services 0-25 or the Speech and Language Local Offer here.

\(^2\) Rose Report, 2009
Motor co-ordination
Motor co-ordination difficulties may involve fine motor co-ordination (drawing, handwriting, threading) and gross motor co-ordination (running, skipping, cycling). For some children, their difficulties are so significant that they would be identified as having a **developmental co-ordination disorder** (DCD). There is evidence to suggest that many children with dyslexia may also reach the criteria for developmental co-ordination disorder (differing research varies between 5 and 50%).

These [documents](#) are designed to help teachers and support staff to help children address motor coordination difficulties.

Maths
Some children and young people with dyslexia also have difficulties with maths (co-occurrence of significant maths difficulties and dyslexia is estimated to be between 20 and 70%).

For some, this may include difficulties memorising formulae, struggling with number symbols and operations, difficulties retrieving information from long-term memory and answering mental calculations at speed and difficulties reading written maths questions.

Concentration/attention control
Difficulties with concentration can be linked to dyslexia. In many cases appropriate interventions to support literacy can reduce difficulties with concentration. However, for some children, difficulties are more significant (research suggests that there is a co-occurrence of 5 and 35% for attention deficit/hyperactivity disorder (ADHD) and dyslexia).

Personal organisation
Some children with dyslexia may appear very disorganised e.g. forgetting homework, missing appointments with teachers, or not bringing in the correct equipment for lessons. They may have problems telling the time and poor time management.
Organisational difficulties may be a consequence of poor literacy, verbal processing or short-term memory difficulties. Older children and young people may require support to develop study skills, note taking and revision.

**Memory: Working memory and short term memory**

Some individuals with dyslexia may have difficulties with particular aspects of memory. Difficulties with short-term memory will impact on recalling/remembering what they have just heard, whilst poor working memory will impact on their ability to hold information mentally and process it at the same time. There are many classroom adaptations that can easily be made and strategies that children and young people can be taught to use to address such difficulties. Helpful guidance is available [here](#).

**Assistive Technology**

Some children and young people's dyslexia will be so severe and persistent that they will struggle to read throughout their lives and will benefit from assistive technology. This area is continually growing and improving, but here are some resources that can help children and young people.

- **Clicker** is the most widely-used reading and writing tool in the UK for young learners with dyslexia
- **Dragon dictate** used for dictation (Mac version) Dragon Naturally Speaking (Windows version)
- **Easy spelling aid** helps children independently spell words.
- **Exam pen** instantly displays scanned words on the screen and instantly says the word or line of text aloud. The exam pen is approved by Joint Council for Qualifications (JCQ)
- **Whispersync** is an app for kindles that allows you to switch between reading and listening
- **Read and write software** enables the user to read on-screen text aloud.
- **Claro-read** enables the user to read on-screen text
- Predictive text software **co-writer**
- Predictive text software **sprint-plus**
- Mind-mapping **Kidspiration**
A letter to school from dyslexic children in Cambridgeshire

This letter has been compiled from the comments received during focus groups with pupils with dyslexia in primary and secondary schools in Cambridgeshire.

Dear Teacher,

Having dyslexia can be hard, and at times we feel embarrassed and sad. Please make sure you highlight the things that we are doing well and you explain to others that having dyslexia doesn’t mean you’re stupid. You know that people with dyslexia need to work harder than others to write and spell and read, but don’t assume we are all the same. We struggle in different ways so please make sure you find out what our strengths and difficulties are and differentiate work for us according to our needs.

We may have amazing ideas, but can’t get them down on paper. Help us to find another way of sharing our ideas with you and our peers. Offer lessons where we can work with others, this helps us get our ideas across without having to write them down. If we are seated near a friend we can ask them for help, we may not feel comfortable asking students we don’t know well.

Not all of us with dyslexia see it as a disadvantage and some of us have strengths in other areas; some are better at art than our friends without dyslexia. Some of us have good creative ideas; we have noticed that peers without dyslexia don’t have ideas as ‘out of the blue’ as some of us. We may be more visual than other people and good at seeing things from a different viewpoint. Just remember that we are all different and everyone’s strengths are different.

When we are in your lesson, please ask us what help we would like (subtly!), we may not want the support of a Teaching Assistant, especially as we get older, and would prefer to try things on our own first. Don’t make us read in front of the class, in fact don’t make anyone feel they have to read in class, and please don’t read out our test scores so everyone can hear. I don’t want everyone to know what I got.

If we struggle to write quickly please help us by sending homework via email or sharing the power points from class with me. We may need extra time to complete work as some tasks take us longer to finish, don’t punish us for this, show that you understand and give us time.

Nobody likes to be labelled so please see us as who we are and not just as our dyslexia.

Yours sincerely,

A student with dyslexia
Frequently asked questions for parents

1. Are all children with reading difficulties dyslexic?

No, there are some other reasons why children may struggle to develop their literacy skills, for example, poor vision, poor hearing, early learning experiences, not having access to appropriate teaching or extended absence from school.

Reading difficulties lie on a continuum, and the most severely affected children and young people will need ongoing literacy support throughout their education. These children are likely to be described as dyslexic although at this time there is no clear or absolute cut off point where a child can be said to have dyslexia.

2. Is dyslexia hereditary?

Dyslexia has a strong hereditary influence and appears to run in families, if there is a family history of dyslexia it is important to tell your child’s teacher/SENCo.

Research suggests that individual differences in reading performance are partially accounted for by genetic variations and that the relationship is stronger for those with significant difficulties. Future work in this area should provide more information.

3. Is the involvement of a specialist teacher or educational psychologist needed in order to have dyslexia recognised?

Literacy difficulties, including dyslexia can be identified (not diagnosed) by following the Code of Practice (2015), using the Assess, Plan, Do, and Review approach. If schools have access to the appropriate screening and assessment tools it is not always necessary to have an educational psychologist or another external specialist to identify dyslexia and support the child accordingly. However, staff in schools sometimes like to discuss the difficulties with a member of the SEND Specialist Service, and seek further, in depth assessments, if a child’s difficulties appear to be significant and persistent.
Formal identification can be completed by a teacher with the appropriate qualification or an educational psychologist but they should always consider how the child/young person has responded to well-founded interventions that have been implemented. Nonetheless, a formal identification of dyslexia should not be necessary in order for a child or young person’s literacy difficulties to be identified and addressed in schools.

4. Someone has recommended I have my child assessed for Visual Stress difficulties, what do they mean?

Some children find it easier to read when using a coloured overlay, as this reduces their visual stress, and their reading speed improves, although this in itself is not an indicator of dyslexia. Speak to your school about this as they may be able to do an informal assessment using coloured overlays or recommend someone who can assess this area.

Anglia Ruskin Eye Clinic, also works with local schools

5. Does the school have to accept the findings of a private dyslexia assessment?

You can expect the school to read the report and discuss it with you. It is important to remember that a diagnosis by a specialist who does not have access to information about the learning context and response to interventions over time will only provide a snapshot of the pupil’s difficulties.

The main focus for discussion should be to acknowledge your concerns and any recommendations made in the report and for school to discuss with you how these may fit with the current support being delivered in school. If the school support is different they should be able to share with you what they are doing and why it has been selected, together with the evidence of its impact in supporting your child’s learning.

6. I have heard that people with dyslexia have particular strengths, for example, they are artistic and creative. Is this true?

It is not true that all children with dyslexia are creative, however, many are! All children have strengths in areas and it is important to find, encourage and develop these,
whatever they may be. These can have a significant impact on confidence and self-esteem. It is worth sharing with your child the many successful people in all fields who have dyslexia.

7. I have been told that my child has a ‘spiky’ profile, what does that mean?

A spiky profile may be referred to in a report when children have strengths in some areas assessed and weaknesses in others.

8. My child has a high I.Q but average literacy skills. What should school be doing to support them?

If a report states that your child has a large discrepancy between their literacy ability and cognitive ability, and their literacy scores are within the average range for a child of their age, they wouldn’t necessarily be described as dyslexic under the Rose Report and BPS definitions of dyslexia. However, this information is still important to share with school staff. In these situations schools need to consider factors such as, setting, differentiation and working with the child’s strengths to ensure that all pupils are stretched academically in order to achieve the best outcomes.

9. My child has been identified as dyslexic. What support should they be receiving and should it be delivered by a specialist dyslexia teacher?

Children with severe and persistent literacy difficulties should have received a graduated response to their needs in line with the Code of Practice 2015. If their difficulties are severe, they are likely to be accessing targeted provision. Support should include effective literacy teaching and intervention based on the needs identified during assessment, as well as high quality teaching and access to dyslexia friendly classrooms. Many children/young people with dyslexia experience feelings of low self-esteem and high levels of frustration and it is important that emotional support is also available.

Getting a formal identification may not change what is currently happening in class if schools are already putting in support. It may be that minor adaptations are needed (see dyslexia friendly classrooms section)
The research favours good quality, small group or individual catch up intervention using evidence based approaches. This can be provided by a teacher or teaching assistant trained in the intervention in school; there is no evidence to suggest that outcomes are more favourable when this is delivered by a specialist dyslexia tutor. If progress is not made in response to intervention, advice could be sought from SEND Specialist Services.

There are many training courses that teachers and teaching assistants can attend in order to support children with literacy difficulties/dyslexia. Some training courses are available from the Local Authority here and schools are encouraged to take this up in order to ensure that they are following the most up to date understanding, interventions and approaches to support children with dyslexia.

10. My child did really well in Key Stage 1 and passed the phonics screening test but is now really struggling to understand what he is reading, why is this?

There are a number of reasons why children may begin to struggle as they get older. One possible reason may be because they have difficulties with reading quickly (fluency) which affects what they can remember. It is important to discuss your concerns with their teacher.

11. I thought my child could read well but they are really struggling now they are doing their GCSE's/A'levels and they are becoming stressed. What could be wrong?

Some children find ways of coping with literacy difficulties earlier on in their education, but struggle with the amount of reading and writing expected in Key Stage 4 and beyond. Difficulties may relate to their speed of reading and writing and this may impact on their accuracy when expected to read/write for an extended length of time, particularly when under pressure. It is important to speak to their teachers about this so that support can be put in place if required.

12. What support will my child get during exams?

Support is based on the pupil’s presenting needs and is not dependent on the pupil having any formal identification of dyslexia. If your child has a history of requiring
additional support, and meets the criteria, they will be eligible for extra support. This can be extra time, a reader or a scribe. Equally, access to additional resources in school is not contingent on a formal identification of dyslexia but on a needs-led basis.

More information is available at the links below:

**Primary**

Access arrangements for Key Stage 2 can be found [here](#).

**Secondary/ FE**

For children undertaking KS4 exams (e.g. GCSE’s) and A’Levels, an assessment is required by specialist assessor with post graduate qualifications in individual specialist assessments, equivalent of an OCR Level 7 qualification or a psychologist registered with HCPC.

Exam Access Arrangements can be found [here](#)

13. **What can I do if I am unhappy with the support the school is providing?**

*If you are unhappy with the support your child is receiving request a meeting with the Form Teacher and SENCo at which you can express concerns and listen to the views of the school. Remember that pupils make most progress when schools and parents work together. If you remain concerned you could contact the SEND Governor of the school.*

*Special Educational Needs, Information, Advice and Support Service* (SENDIASS) can provide advice and support with regard to meetings in school.

14. **What can I do to help my child at home?**

*Homework can often be a stressful time and the British Dyslexia Association and dyslex.io has provided advice to support parents.*
Frequently Asked Questions for School

1. What should I say to a parent/carer who has had an independent assessment which concludes that their child is dyslexic?

Firstly, acknowledge the parents’ views and concerns. The following information may be helpful in discussion:

- There is no single assessment for dyslexia, however, an independent assessment can contribute to the overall picture of a child’s strengths and weaknesses and provide helpful information that will help you support the child in your school. It is therefore, important to read through the assessment and invite parents in to meet with you to discuss their concerns and hear how you are supporting their child.

- Professionals outside the Local Authority may be using a different definition or description of dyslexia, for example, the discrepancy model. If this is the case and the child appears to have average reading ability, reassure the parent, discuss their concerns and use the information provided in the assessment to help you support the child (for example, do they need to be stretched in some areas of the curriculum? Do you need to reconsider settings and groupings?)

- If the private assessment recommends a number of interventions to support the child, discuss these with parents, and share what you are already doing in school that may be similar to the suggestions or, if you disagree, explain why and provide your evidence. The private report may provide some very helpful new information and it is important to identify which interventions are evidence based and manageable given the available resources.

- Parents should be reassured that school are aware of their child’s needs and that appropriate support is available.

2. Do I need a specific qualification in order to identify dyslexia?

No, as a teacher, using the definition in this guidance, you will have the teaching skills needed to identify persistent literacy difficulties and dyslexia, although this is not a
formal identification. Parents/carers need to feel confident that a formal identification of dyslexia is not necessary in order for you to address their child/young person’s difficulties in this area.

A formal identification can be completed by a teacher with the appropriate qualification or an educational psychologist but they should always consider how the child/young person has responded to well-founded interventions that have been implemented.

There are also a number of training opportunities within the county that can be found here if you would like to further develop your skills in this area.

3. Should I be using the term ‘dyslexia’ with children and parents?

Consideration should always be given to whether using the term ‘dyslexia’ is helpful for the pupil. Many children and parents find it reassuring to be able to describe their difficulties in this way, however, professionals and parents should also be aware of the danger of creating low expectations from those who don’t understand the term, including the belief that the pupil is not able to make progress.

If a child has made very little progress despite following a graduated response of ‘Assess, Plan, Do, Review’ and you are confident that you have used evidence based interventions that focus on the child’s needs, then, according to the Rose Report definition and the BPS definition, you can use the term dyslexia as a description of a child’s needs. You will need to be very clear about current literacy levels and that interventions have been implemented appropriately. You will need to describe to parents and children what you mean by the term and that this is not a diagnosis but an identification of need. Sharing this guidance is one way of supporting parents.

4. If dyslexia is best thought of as a continuum, with no clear cut off points (Rose Report 2009) how can people talk about prevalence rates?

Not all those who work in the field of dyslexia use the same definition. Clinical accounts of dyslexia are likely to use a statistical cut off to measure who is dyslexic and who isn’t for research purposes, they can therefore then suggest a prevalence
level based on their criteria. However, the cut off points used in such studies are arbitrary as dyslexia is not a clear-cut diagnostic category.

These are longstanding academic arguments and we try and take a pragmatic approach that if a child/young person is struggling with literacy intervention is needed regardless of continuum or prevalence debate.

5. Why do the estimates of the prevalence of dyslexia vary so much?

Estimates of prevalence of dyslexia vary from 5% to 20% of the population. This variation tends to be due to the vagueness of the term and the diverse overlapping in understanding of dyslexia in literature. Some research may use 1 standard deviation below average as a cut off for their studies, others may use 2 standard deviations and others may use a discrepancy model – all of these would give different prevalence rates.

Again, this is an academic, theoretical issue yet to be resolved in academic research communities and not important in the day to day support of children struggling with literacy.
Useful links

The IDP materials for dyslexia were revised in line with the Rose Report and remain a useful resource:

The dyslexia/spld trust has the support of the Department of Education to provide information for parents and schools on a wide range of topics:

http://www.bdadyslexia.org.uk/services/quality-mark

CBBC video – dealing with dyslexia
https://www.youtube.com/watch?v=kMTO4JMECQI

See dyslexia differently animation https://www.youtube.com/watch?v=11r7CFlK2sc

DIE BDA Neurodiversity training
https://www.bdadyslexia.org.uk/about/projects/dyslexia-spld-support-project-2016-17

High interest/ low reading age books

The following links are books that are advertised as having a high level of interest but at a lower reading level. These books are commonly known as 'high-low', which means that the content is appropriate to chronological age but the text is adapted to suit a lower reading age. Finding more interesting books that a struggling reader can access is important to help maintain children’s interest in reading. Interesting books can be found at:
Glossary

**Analytic phonics:** In analytic phonics children are taught to analyse whole words to detect spelling patterns and then split them into the onset and rime. This decoding enables them to make a comparison with other words they may know from the same word family. For example, if the child knows ‘goat’, ‘boat’ and ‘float’, then the word ‘moat’ will be easy to read, even if it is the first time that it has been seen.

**Auditory Processing:** Auditory processing difficulties relate to a hearing or listening problem caused by the brain not processing sounds in the normal way.

**Co-occurring:** The presence of two or more difficulties at the same time.

**Decoding:** Decoding refers to the process of translating a printed word into its separate phonemes.

**Digraph:** A grapheme containing two letters that make just one sound, e.g. ‘sh’, ‘ea’

**Grapheme** - A way of writing down a phoneme. Graphemes can be made up from 1 letter e.g. p, 2 letters e.g. sh, 3 letters e.g. tch or 4 letters e.g. ough.

**Letter Sound:** The sounds that a letter makes (c as in ‘cat’).

**Onset and rime:** The "onset" is the initial phonological unit of any word (e.g. c in cat, sh in shout) and the term "rime" refers to the string of letters that follow, usually a vowel and final consonants (e.g. ‘at’ in cat, ‘out’ in shout).

**Peer reviewed research:** Peer review is used by people who write research papers to decide which research results should be published in a journal. The peer review process ensures that all the papers published have been checked and scrutinised by other qualified experts (peers) before they are made public.
**Phoneme:** the smallest unit of sound that you can hear within a word; the word phoneme refers to the sound. For example, in the word *cat*, there are three phonemes (c-a-t). There are 44 phonemes in English.

**Phonics** deals with the relationship between sounds and the letters that represent those sounds. Phonics teaching refers to a method of teaching people to read by matching sounds with letters in the alphabet. Tip for teaching phonics can be found [here](#).

**Phonological awareness** is the ability to hear sounds that make up words in spoken language. This includes recognising words that rhyme, deciding whether words begin or end with the same sounds, understanding that sounds can be manipulated to create new words, and separating words into their individual sounds. Phonological awareness deals with the sounds in the words and not the letters.

**Synthetic phonics:** A strategy for teaching word reading skills. Children are taught to read letters or groups of letters by saying the sound(s) they represent. Children can then start to read words by blending (synthesising) the sounds together to make a word.

**Syllable:** Any one of the parts into which a word is naturally divided when it is pronounced, e.g. Ho-tel, beau-ti-ful.

**Trigraph:** A grapheme containing three letters that make just one sound, e.g. ‘igh’.

**Verbal memory:** The ability to remember an ordered sequence of verbal material for a short period of time; for example, to recall a list of words or numbers or to remember a list of instructions.

**Verbal processing speed:** The pace at which you take in spoken information, make sense of it and begin to respond.
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