



Learning and Teaching

LEARNER DIVERSITY

Part of my teaching load is to work closely with the teachers in order to best support learner diversity. I would encourage you to read the following carefully as it is a concise summary of how the program works and it outlines also, avenues of assistance that may impact your child. Our *Learner Diversity Program* is a multi-layered program designed to meet the needs of specific students as well as providing collaborative support in terms of the teaching and learning class programs.

Children who are identified as having a specific learning need receive regular, ongoing 1:1 or small group support from myself as the Learner Diversity Teacher. Children, who are identified by their teacher as requiring support or extension in their learning, can be assisted in a variety of ways. They could receive 1:1 or small group support from the Teacher's Aide/Learning Support Assistant (Kerrie Powell) or the Learner Diversity Teacher (Marisa Bombardieri).

Once the class teacher has discussed this with me and the Principal, a program is written (Learning Plan) outlining the particular focus for that child and how long the intervention will last. This intervention can last from one term to more if required. The Learning Plans teachers write usually support the children in areas of Literacy or Numeracy. Learner diversity is about meeting all individual needs, so it is not just about supporting students with difficulties in learning but also about challenging and extending students who require further opportunities to expand their learning.

There are times where children will require specific support in areas such as **Occupational Therapy** or **Speech Therapy**. These areas are quite specialised and have, in recent years become a more regular avenue of therapy for primary aged school children. Teachers may suggest that (Speech or Occupational) therapy could be beneficial for your child. If this is the case, then an initial assessment by the therapist would ascertain whether therapy would be effective. Parents often aren't familiar with the assistance Speech and Occupational therapy can offer and so the following is an outline of exactly what these specialised areas are about.

Many children who are referred to **Occupational Therapy** have difficulties with handwriting or fine motor skills. It is the Occupational Therapist's task to assess the child's handwriting and identify the underlying cause of the difficulties. The therapist will need to assess the level of functioning in the following areas:

Visual Motor Integration (neural function transferring what is seen into motor expression)

Fine Motor Skills (hand dominance, bilateral and motor co-ordination, in-hand manipulation, functional pencil grip, muscle tone, hand, arm and shoulder strength).

Visual Perception (discrimination between numbers, letters and words that are similar; spacing between letters; placing letters on the writing line and using margins correctly; identifying which letters have been formed completely; letter and number reversal).

Cognition (memory; language comprehension; specific learning difficulties e.g. problem solving and reasoning).

Possible sensory processing difficulties (..that interfere with posture, attention, tactile senses)

These may all impact on handwriting, so it is important to determine and diagnose the underlying cause of the handwriting problem. There are a number of activities that a child can do to help with handwriting difficulties. An Occupational Therapist will usually provide a program of activities to be done daily alongside the school handwriting program that focuses mainly on letter formation and legibility. These activities tend to be incorporated into the child's daily routine. Most children improve

with the correct intervention and with maturity. Some issues, however, tend to persist into adolescence and could continue into adulthood if the right intervention is not given.

We do not currently have any Occupational Therapists working from our school, although if any parents needing the services of an OT aren't sure who to contact, they are welcome to contact the school.

Speech Therapy is the treatment for most children with speech and/or language disorders. A speech disorder refers to a problem with the actual production of sounds, whereas a language disorder refers to a difficulty understanding or putting words together to communicate ideas.

Speech disorders include:

Articulation disorders: difficulties producing sounds in syllables or saying words incorrectly to the point that listeners can't understand what's being said.

Fluency disorders: problems such as stuttering, in which the flow of speech is interrupted by abnormal stoppages, repetitions (st-st-stuttering), or prolonging sounds and syllables (sssstuttering).

Resonance or voice disorders: problems with the pitch, volume, or quality of the voice that distract listeners from what's being said. These types of disorders may also cause pain or discomfort for a child when speaking.

Language disorders can be either receptive or expressive:

Receptive disorders: difficulties understanding or processing language.

Expressive disorders: difficulty putting words together, limited vocabulary, or inability to use language in a socially appropriate way.

Speech Pathologists are able to identify the issue and plan a specialised program of intervention. Currently, we have one Speech Pathologist who works with identified children at school, during school times. The Speech Pathologist also sees children out of school hours. It is important to note that both Occupational Therapists *and* Speech Pathologists are specialist practitioners and are not part of the Diocesan Catholic School system. The Speech Pathologist, Rebecca Clarke who works with some of our students at St Kieran's is a private practitioner who works under her own business registration and is able to use the school premises in certain circumstances. It is neither an expectation nor custom and practice that children automatically receive Speech Therapy during school hours. This is because the child would then miss out on valuable class time. As there are **some** exceptional cases (and only very limited places) *there is a process around identifying and prioritising who receives Speech Therapy at school.*

A good plan of action is...

- Firstly, parents need to discuss the possibility of Speech Therapy with the class teacher (or the Learner Diversity teacher) in order to identify whether a child would benefit from intervention.
- If parents decide to pursue this, then the Speech Pathologist will always do an initial test and report to ascertain the child's needs.
- Parents can then decide whether or not to proceed with Speech Therapy. If they would like their child to attend Speech Therapy at school with Rebecca Clarke, they must make an appointment to see me at school. At this meeting the Speech Therapist's report will be discussed. This way, if it is a high needs case, or if there are special circumstances – we (the school) are able to prioritise availability. Parents are **not** to make private arrangements with the Speech Therapist to have sessions held during school hours. It goes without saying that private arrangements for Speech Therapy outside of school hours is something parents may organise freely although it is still beneficial for the school to know that this is occurring. This is because reports from the Speech Therapist will always contain identified concerns and strategies for teaching and learning which may be incorporated into the classroom setting.