



Dyslexia Pathway Rationale

It is the trust's aim to introduce a dyslexia pathway to support our schools, SENDCos, parents and teachers to identify and support those children in our care with Dyslexia. It is our aim that this pathway will increase teachers' level of understanding of this condition and the impact that it can have on a child's learning, attitude and self-esteem through whole school basic awareness training.

Teachers benefit from a process to follow before decision making and should be equipped with the understanding that tracking progress over time is an integral part to this process.

When this understanding is embedded in the schools' system for obtaining an identification of dyslexia, the process should feel effective whilst remaining child centred.

Identification

Our schools will use an agreed checklist of common characteristics as an initial trust tool.

Identification should centre around access to learning concerns or a lack of expected progress. Schools should continue to track and monitor pupils progress at all stages. Within Early Years and Key Stage 1 there should be a focus on wider literacy, communication and language support. During a child's time in EYFS or Key Stage 1 a SALT referral will be made to determine the child's working memory and processing outcomes when a concern is raised.

From the age of 7 (Year 3) following a continued lack of phonic progress (using the assess, plan, do, review cycle and assessments following the daily teaching of the school's phonics scheme) our schools will use an agreed screening assessment tool.

BDA training recommends from 9 years as an appropriate age for formal diagnosis as the child is able to access all areas of the assessment.

All children have their own individual picture, so if school feel they have gathered enough evidence to suggest Dyslexia is likely, they may choose to seek a formal Dyslexia Assessment earlier than 9 years.

The information gathered by a school before requesting a formal diagnosis assessment should include:

- information about interventions implemented and that have been completed and reviewed over time
- results of interventions - how much progress - this must be measurable
- assessment and tracking information completed by the school
- characteristic checklists completed by school - should be 50% or more indications
- pupil' views
- parental views
- review of other factors such as physical, affective and cognitive factors (an alternative referral may be more appropriate)
- speech and language therapy reports
- any other reports available from outside agencies