

# LEARNING DIVERSITY

DIOCESE  
OF  
BALLARAT  
CATHOLIC  
EDUCATION  
LIMITED



CATHOLIC EDUCATION BALLARAT

CEB LEARNING DIVERSITY LEADERS ~~NEWSLETTER~~  
TERM 3 2021

**MAGAZINE**

**Article 19\***  
Everyone has the right to freedom of opinion and expression; this right includes freedom to hold opinions without interference and to seek, receive and impart information and ideas through any media and regardless of frontiers.

*Source: Universal Declaration of Human Rights.*

*This term's focus...*



**SPEECH!**

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CEB LEARNING DIVERSITY LEADERS NEWSLETTER

TERM 3 2021

**MAGAZINE**

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# MEET THE CEB SPEECH PATHOLOGY TEAM

Meet the Diocesan Speech Pathology team:

- Ashleigh Freckleton – North Central region
- Chelsea Harris – Northern river region
- Jesse McCluskey – Central/ Southern regions
- Robyn Cranage – Central/North Central regions
- Miranda Pearse – Central region/ St Alipius PS, Ballarat East
- Rebecca Free – Southern region
- Sarah Macdonald – North Central region/St Michael and St John's PS Horsham
- Sally Anderson – St Mary's PS, Warracknabeal



Robyn Cranage



Miranda Pearse



Ashleigh Freckleton



Chelsea Harris



Jesse McCluskey

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Rebecca Free



Sarah Macdonald



Sally Anderson

2021  
Speech  
Pathology  
Week

Communication  
is everyone's  
right

www.speechpathologyaustralia.org.au

FROM OUR SENIOR

*Speechie...*

Our Speech team work in both primary and secondary schools across our diocese, to support students with varying communication difficulties including speech, language, reading, writing, voice and fluency problems. We work individually with students, in small groups, in boost groups, as well as in classrooms alongside class teachers. We partner with schools through consultation, teacher planning, professional learning for teachers and Learning Support Officers, parent workshops, Dynamic assessment and 'Wrap around the Learner' (WATL) meetings. We have been engaged in the Oral Language Supporting Early Literacy initiative across our diocese since its inception into the diocese over 10 years ago. Our professional association, Speech Pathology Australia (SPA), has produced a resource for speech pathologists who work in schools, which is available at this link

<https://speechpathologyaustralia.cld.bz/Speech-Pathology-in-Schools-2017>



# SPEECH PATHOLOGY WEEK

There are 1.2 million Australians with communication disability. Our diocesan Speech Pathologists work to ensure that communications is everyone's right.

"In Australia today, communication disability remains largely invisible. Unseen and out-of-sight,"

The coronavirus (COVID-19) pandemic has highlighted the challenges faced by Australians with communication disability.



That's why during Speech Pathology Week, from 22-28 August, our Diocesan Speech Pathology team is highlighting the week's theme: Communication is everyone's right. We are proud to focus on the critical importance of communication in all of our lives and its foundational role in academic, social and emotional wellbeing and learning.

Communication is a basic human right. It is fundamental to person's ability to participate fully in the social, educational, economic and sporting aspects of our community.



# SPEECH PATHOLOGY WEEK CONT...

"Many Australians with communication disability cannot maximise educational, health and social outcomes, without the support of a speech pathologist'. Only 38 per cent of Australians with communication disability are participating in the workforce, compared to 80 per cent of people without communication disability.

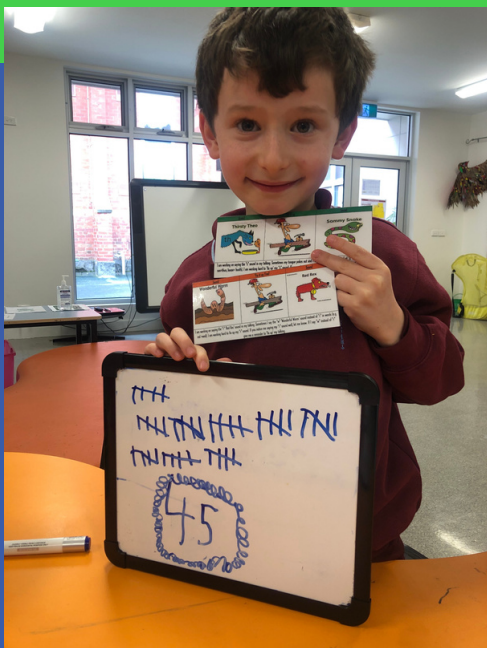
People with communication disability are also less likely to have a non-school qualification (42 per cent), than those without communication disability (61 per cent).

"Communication, by definition, involves at least two people. It is important that everyone understands that communication is more than speech.

"Australians with communication difficulties communicate with others using a variety of means, including word-based or picture-based communication boards or books, sign and gesture, and spelling.

"Technology is playing a growing and vital role in keeping Australians with communication difficulties engaged with their family, friends and those across our diocese.

Assistive technology, such as electronic communication and speech generating devices, voice amplification and computer access aids (including eye-gaze mouse control and head tracking devices) allow people with communication difficulties to communicate with those around them.



Speech Pathology Australia is the national peak body representing more than 12,000 speech pathologists.

The Association supports and regulates the ethical, clinical and professional standards of its members, as well as lobbying and advocating for access to services that benefit people with communication and swallowing difficulties.

## SPEECH PATHOLOGY WEEK CONT...

The Australian Bureau of Statistics has established that 1.2 million Australians have communication disability. Communication disability affects a person's ability to understand and be understood by others.

- Levels of limitation range from mild to profound and can be temporary or last a lifetime.
- Children and older people make up the majority of people with communication disability.
- Children are more likely to have profound/severe communication disability than older people.
- People with communication disability were less likely to have a non-school qualification (42%) than people without communication disability (61%).
- One in 7 people with communication disability need formal assistance with communication.
- Half of all people who need formal assistance with communication have an unmet need for this assistance.
- Three in 5 people who have an unmet need for formal assistance with communication were children.

**One in 7**  
Australians with  
**communication**  
**disability** needs  
formal assistance  
with communication.



For information about  
Speech Pathology Week visit  
[www.speechpathologyaustralia.org.au/week](http://www.speechpathologyaustralia.org.au/week)  
**August 22, 2021**

Contact: Your **local CEB Speech Pathologist**  
or

**Robyn Cranage**  
Senior Speech Pathologist  
Ph: 0438 564 036

# GIVING VOICE...



## Supporting social, emotional and mental health and wellbeing

**M**any children and young people with social, emotional and mental health needs have unidentified communication and interaction difficulties. Communication difficulties include problems understanding language (making sense of what people say) and with using language (words and sentences). Interaction difficulties include problems developing positive relationships. Speech and language therapy plays a crucial role in identifying and supporting communication and interaction difficulties. It promotes better outcomes for those with social, emotional and mental health needs.

### Social, emotional and mental health and communication and interaction needs

Communication and interaction needs are likely in children with social, emotional and mental health difficulties, including those children with attention deficit hyperactivity disorder, conduct disorder, social communication disorder, and attachment difficulties. Many looked after children, whether in mainstream or other schools or in residential care, also have communication and interaction needs.

#### The size of the problem

- ▶ **One in 10** children and young people aged younger than 16 have a mental health disorder.<sup>1,2</sup>
- ▶ In addition, approximately a further **15%** have less severe problems that put them at increased risk of developing mental health problems in the future.<sup>3</sup>
- ▶ **81%** of children with emotional and behavioural disorders have significant language deficits.<sup>4</sup>
- ▶ People with a primary communication impairment are at greater risk of a secondary mental health disorder, commonly anxiety or depression.<sup>5</sup>
- ▶ Between **40% and 54%** of children with behaviour problems have language impairment.<sup>6,7</sup>

▶ For more information contact: [info@rcslt.org](mailto:info@rcslt.org)

### A serious issue

Left unidentified and/or unmet, communication and interaction needs can have a range of negative consequences on a person's social, emotional and mental health.

- ▶ They can affect their emotional health and wellbeing, relationships, educational attainment, and the securing and retaining of employment.
- ▶ They can also affect behaviour. Many children with unidentified and/or unmet communication and interaction needs communicate through behaviour which can lead to exclusion from school, offending behaviour and involvement in the criminal justice system. Sixty percent of young people in the youth justice estate can have difficulties with speech, language or communication.<sup>8</sup>
- ▶ They can also prevent children and young people from accessing and benefiting from treatments and programmes that are primarily verbally delivered, such as talking therapies.

### How speech and language therapy can help

Speech and language therapy promotes better social, emotional and mental health and wellbeing. It plays a crucial role in identifying communication and interaction needs and in contributing to differential diagnosis. It promotes 'inclusive communication' by developing communication-friendly environments that remove barriers to communication. This includes providing speech and language therapy to those children and young people who need it and training others in awareness of communication and interaction needs and how to respond to them. This has a range of benefits:

- ▶ **PROMOTING POSITIVE OUTCOMES** – it helps children and young people develop their social communication skills and the language they need in everyday life, helps them form positive relationships, enhances resilience, promotes participation in education, work, and society, and enables children and young people to take an active part in making decisions about their treatment and care.
- ▶ **REDUCING THE RISK OF NEGATIVE OUTCOMES** – it reduces the risk of children and young people not understanding what is being said to and asked of them and not being able to make themselves understood. It also reduces the risk of this leading to frustration, aggressive behaviour, and behaviour that might result in involvement in the criminal justice system.



# GIVING VOICE...

## Promoting better outcomes for those with social, emotional and mental health needs

The United Kingdom's Department for Education has recognised that speech and language difficulties may be an underlying cause of disruptive or withdrawn behaviour. They have stated that 'where there are concerns about behaviour there should be an assessment to determine whether there are any causal factors such as undiagnosed learning difficulties, difficulties with speech and language or mental health issues.'<sup>1</sup>

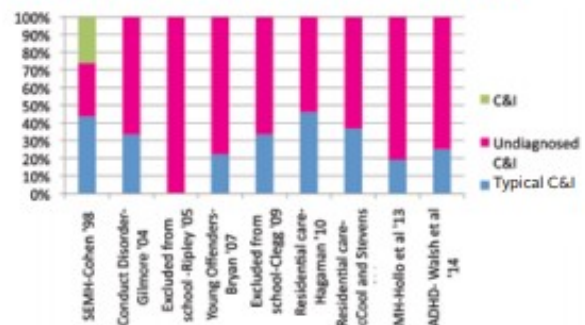
The Royal College of Speech and Language Therapists recommends that:

- the multidisciplinary health, education and social care teams supporting children and their families have access to speech and language therapy services – this would include speech and language therapists (SLTs) contributing to assessment planning and intervention where appropriate.
- those with social, emotional or mental health needs should be screened for communication and interaction difficulties.
- all staff working with children and young people should be trained in recognising and knowing how to respond to communication and interaction needs, including through making

classrooms, material and treatment programmes communication and interaction friendly to ensure they are accessible.

In addition, research is required to identify more effective interventions for children and young people with social, emotional and mental health and communication and interaction needs.

## Undetected Communication and Interaction difficulties in SEMH



## Emma's story

Emma is a 10-year-old looked after child with social, emotional and mental health needs. She had extreme social difficulties, including being highly aggressive both physically and verbally. She had very poor social communication skills, very poor ability to recognise and respond to the communications of others, emotional literacy difficulties and extreme difficulties managing her emotions. She could not make or keep friends and she had regular exclusions

from school. Parents of other children complained about her behaviour and school staff labelled her as 'the devil'.

Aged seven, she was about to move carers, geographical area, and to another mainstream school. Given concerns about her ability to continue in mainstream education, she was referred to speech and language therapy services by her social worker.

Following work with the SLT, Emma's social communication and interaction skills with other children greatly improved, as did her ability to build new

relationships as well as maintain the ones she had formed. She got better at managing her emotions when things did not go as she would like, and also at recognising what information was appropriate to speak about, depending on her audience (i.e. recognising private versus public subject matters). She learned phrases to use to negotiate and compromise. Her file has now been closed, very few difficulties have been reported since, and she has continued in mainstream education for three years.

► Also see our factsheets on 'Safeguarding' and 'Looked after children'

## REFERENCES AND RESOURCES

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- <sup>3</sup> Brown, et al (2012). Delivering effective parenting programmes to transform lives. Centre for Mental Health. Available at: [www.centreformentalhealth.org.uk/a-chance-to-change](http://www.centreformentalhealth.org.uk/a-chance-to-change)
- <sup>4</sup> Hollo A, Wehby JH, Oliver RM. Undiagnosed Language Deficits in Children with Emotional and Behavioral Disorders: A Meta-Analysis. *Exceptional Children* 2014; 80(2): 169-186.
- <sup>5</sup> Botting N, Durkin K, Toseeb U, Pickles A, Conti-Ramsden G. Emotional health, support, and self-efficacy in young adults with a history of language impairment. *British Journal of Developmental Psychology* 2016; 34: 538-554.
- <sup>6</sup> van Daal J, Verhoeven L, van Balkom H. Behaviour problems in children with language impairment. *Journal of Child Psychology and Psychiatry* 2007; 48(11): 1139-1147.
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### Graph references

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- Walsh IR, Scullion M, Burns S, MacSivily D, Brennan G. Identifying demographic and language profiles of children with a primary diagnosis of attention deficit hyperactivity disorder. *Emotional and Behavioural Difficulties. Special Issue: Language and Communication in the Child with Emotional and Behavioural Difficulties* 2014; 19: 1.

[https://www.rcslt.org/wp-content/uploads/media/docs/clinical-guidance/rcslt-social-emotional-mental-health-factsheet-\(2\).pdf](https://www.rcslt.org/wp-content/uploads/media/docs/clinical-guidance/rcslt-social-emotional-mental-health-factsheet-(2).pdf)



It's not our difference that is  
the disability



Read the full  
findings using the  
following link

[HTTPS://DRIVE.GOOGLE.COM/DRIVE/U/0/FOLDERS/1POAHM1V\\_DL5-Y\\_VQ33WT0WBGWRRY1CHW](https://drive.google.com/drive/u/0/folders/1POAHM1V_DL5-Y_VQ33WT0WBGWRRY1CHW)

Impact of COVID-19 in Australia on  
children and young people with  
disability, and their families

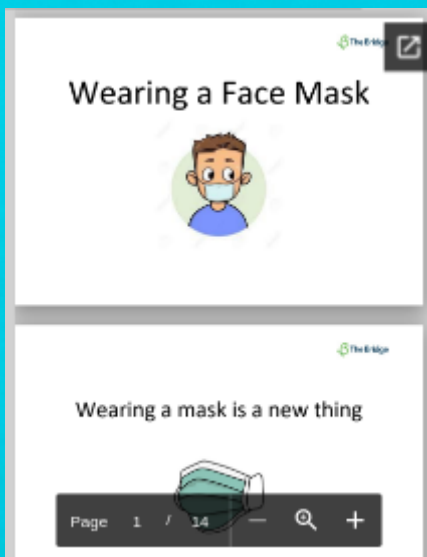


What is also clear from the research is that the COVID-19 pandemic exacerbated existing problems with support provided to children and young people with disability and their families. This includes issues that require systems change, including:

- **Inclusion** – accountability of systems to provide learning, health and social opportunities for all.
- **Adaptability** – flexibility in systems to adjust to the complexity of people's lives and their needs.
- **Knowledge** – underlying the above issues, is a lack of knowledge within systems of the lived experience of people with disability and the people that care for them.



# Mask Wearing Social Stories that may be of interest...



[HTTPS://ALKIRA.ORG.AU/WP-CONTENT/UPLOADS/2020/07/WEARING-A-FACE-MASK-SOCIAL-STORY.PDF](https://alkira.org.au/wp-content/uploads/2020/07/wearing-a-face-mask-social-story.pdf)

[HTTPS://WWW.UCUCEDD.ORG/WP-CONTENT/UPLOADS/2020/04/I-CAN-WEAR-A-MASK-SOCIAL-STORY\\_FINAL.PDF](https://www.ucucedd.org/wp-content/uploads/2020/04/i-can-wear-a-mask-social-story_final.pdf)

VIDEO - [HTTPS://WWW.YOUTUBE.COM/WATCH?V=3GYTTAQMDEM](https://www.youtube.com/watch?v=3GYTTAQMDEM)

[HTTPS://PAAUTISM.ORG/RESOURCE/WEARING-MASK-SOCIAL-STORY/](https://paaudism.org/resource/wearing-mask-social-story/)



## How to complete a quick referral!



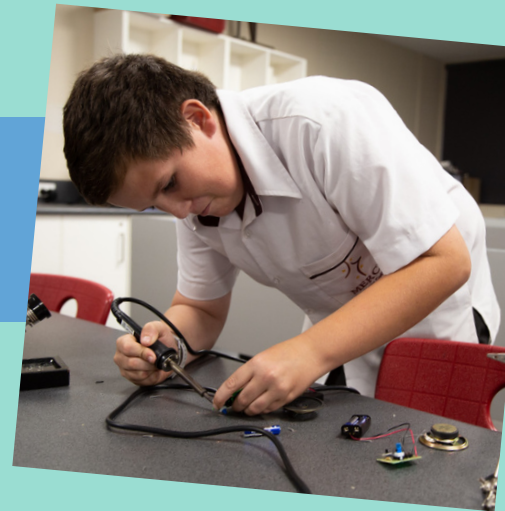
## USER B ACCREDITATION

Thank you to those who have registered for Cohort 2 of the **User Level B training: Addressing the Barriers to Learning in Education (ABLE)**. This course is a **qualification** for use of **USER B assessments** such as the **WRAT, Raven's and Peabody**.



We had a terrific 2 days of learning with our first cohort and the second is **set to commence on the 12th and 13th of OCTOBER**

Please register your interest for **2022** with **Susan Rampling** - [srampling@ceob.edu.au](mailto:srampling@ceob.edu.au)



## OTHER INFORMATION...

### ABC Vision Concern Checklist

On identification of a student requiring interventions or specialised supports, **best practice** is a vision examination by an optometrist.

Failing this, the checklist below is to be completed by the classroom teacher (Primary) or nominated teacher (Secondary) in consultation with student and their parent(s)/ guardian(s).

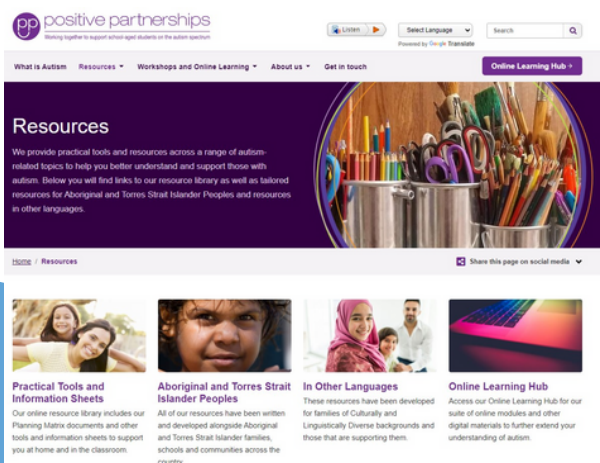
If a Consultation Request to CEB is subsequently required, this form can be uploaded as the vision screener in ROSAE.

<https://drive.google.com/drive/folders/15xFOwIc1Q5Ks0oBekyACcnIZ1meekM>



**New CEB Consultation Request CONSENT FORM coming soon!**

## POSTIVE PARTNERSHIPS UPDATE



Phase 4 Positive Partnerships begins.

Keep an eye out for **workshops** and remember the **online learning hub**.

<https://www.positivepartnerships.com.au/resources>



# CHAMPS and Space4US

## CHAMPS PEER SUPPORT GROUP

*CHAMPS is a peer support group which aims to help kids learn more about mental health and mental illness.*

### WHAT'S INVOLVED?

- ✓ 2-Day school holiday program
- ✓ Receive information & support
- ✓ Learn healthy coping strategies
- ✓ Share food and fun activities together

Fun & supportive space for children aged 8 – 12 years old who have a family member with a mental illness.

Program supported by trained facilitators.

**WHEN:** Tuesday & Wednesday during holidays  
**TIME:** 10.00am – 4.00pm  
**WHERE:** Ballarat Community Health (Cooinda)

### Referrals Required

For further information, speak to your service provider



**CHAMPS and Space4Us** are peer support programs run for children who have a parent or family member with a mental illness. Together, Ballarat Health Services and Ballarat Community Health plan to run these as school holiday programs for two days (each program) every school holidays. The aim of the programs are to support children and provide education around mental health and mental illness.

It is proposed that welfare teams in schools could identify students/families who might be keen to refer. The general flyers can be given to parents. I've attached the referral forms so that your staff or schools can refer directly to us if they wish. The deadline for referrals will be two weeks prior to the school holidays commencing, every term.

**Cheree Cosgriff** is the Coordinator of the programs. If you want some more information she can be contacted on her email or phone her on **5320 3030**.

## SPACE4US

Space4Us is a peer support group for young people between the ages of 12-18 years who have a parent or family member who is affected by a mental illness or mental health issues.

This is a great opportunity to meet other young people who have similar experiences, to learn more about mental health and illness, to explore ways of coping, and to have some time out and fun!

**When:** Tuesday and Wednesday during holidays  
**Time:** 10.00am to 4.00pm  
**Where:** Ballarat Community Health (Cooinda)

2 day  
Holiday  
Program



### REFERRALS REQUIRED

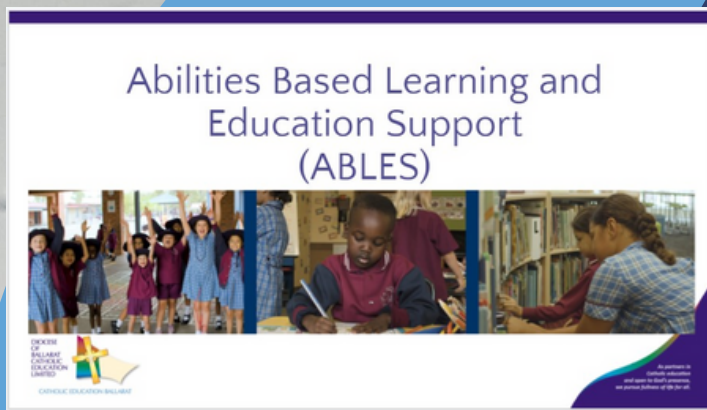
For further information, speak to your service provider.



See your  
**CHAMPS & Space4US**  
 folder in your  
**LDL Drive**  
 for  
 Fliers and Referral Form



## ABLES - RUBY



Click on the picture to head to a Power point to share with staff or head to your LDL drive!

The University of Melbourne has completed the migration process of the Abilities Based Learning and Education Support (ABLES) assessment and reporting tools from the previous ARC-OTS platform to the new platform, Ruby.

The Ruby platform has been designed to create a more robust and intuitive experience of assessment for users.

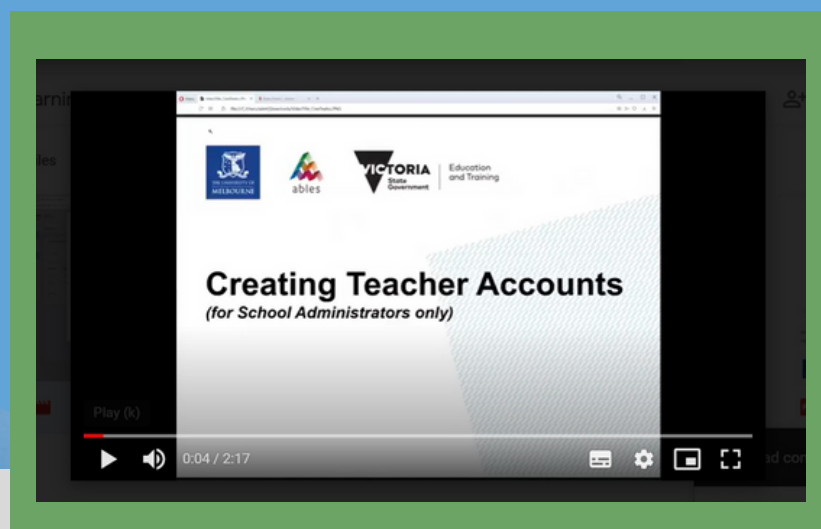
**ABLES ONLINE MODULES - ENROLMENT KEY IS ABLES\_CATH44**  
[HTTPS://DEECDVIC.TECH-SAVVY.COM.AU/LOGIN/INDEX.PHP](https://DEECDVIC.TECH-SAVVY.COM.AU/LOGIN/INDEX.PHP)

## ABILITIES BASED LEARNING AND EDUCATION SUPPORT (ABLES)

### User Guide

About this Guide:

This User Guide provides an overview on how to access ABLES, complete the assessments, generate and use reports, to better support the learning and development of students with additional learning needs.



Click on pictures or  
links to head to your  
LDL drive for details!

<https://drive.google.com/drive/u/0/folders/1hTDYWo1SXMrcztbj2ptG1xDZnakYzlOw>

## A MESSAGE FROM SCANNING PENS...

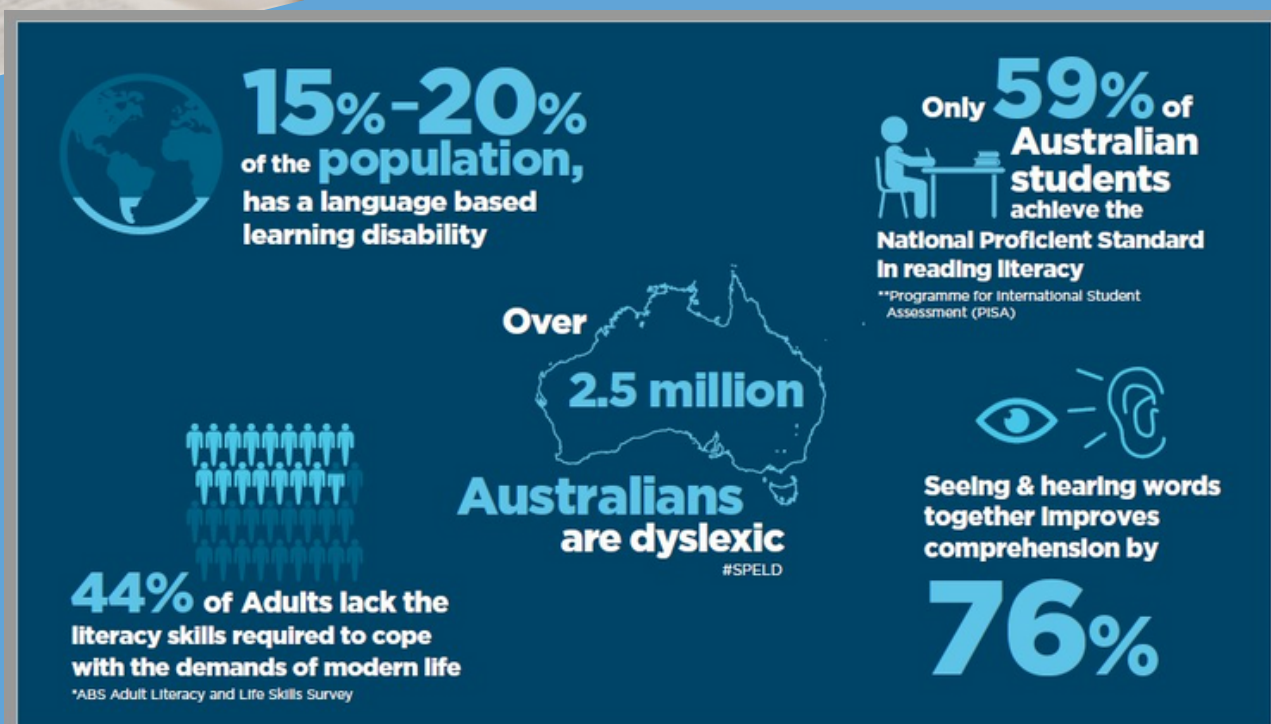
SCANNING PENS OFFERS ALL AUSTRALIAN SCHOOLS A FREE TRIAL OF THE READERPEN WHICH ARE USED BY STUDENTS WITH READING DIFFICULTIES SUCH AS DYSLEXIA, AUTISM, ADHD ETC OR STUDENTS WITH A LOW READING LEVEL.

WE WOULD LIKE TO OFFER ALL CATHOLIC EDUCATION BALLARAT SCHOOLS A FREE 30-DAY TRIAL OF 2 X READERPENS PER SCHOOL SO THAT THE LEARNING DIVERSITY TEAMS CAN EVALUATE THE PENS WITH THEIR STUDENTS.

10% OF ALL STUDENTS HAVE SOME KIND OF DYSLEXIA (OFTEN QUITE MILD) BUT MOST CASES ARE NOT FORMALLY DIAGNOSED. THE READERPEN CAN ENCOURAGE RELUCTANT READERS TO READ, WHICH IS HALF THE BATTLE.

WE OFFER FREE TRAINING SO THAT YOUR TEAMS KNOW HOW THE PENS WORK. THERE ARE MANY SETTINGS WHICH WILL ENABLE YOU TO SPEED THE PEN UP, SLOW IT DOWN, CHANGE THE ACCENT, LEFT-HAND / RIGHT-HAND SETTING ETC. THE PEN WILL READ ANY STANDARD FONT - IT WON'T READ HANDWRITING, COMPUTER SCREENS OR COMPLICATED FONTS.

**CONTACT DAVID - 0418 800 234**



# HOW AUDIO PROMOTES LITERACY

## BENEFITS OF AUDIO TO LEARNING HOW TO READ

"The single most important activity for building the knowledge required for eventual success in reading is reading aloud to children."

- *Becoming a Nation of Readers: The Report of the Commission on Reading*

INCREASES READING  
ACCURACY BY  
**52%**

IMPROVES  
COMPREHENSION  
BY **76%**

Provides context, helping  
children decide words and  
comprehend challenging text.

**TEACHES**



INCREASES  
READING SPEED

BETTER UNDERSTANDING

EXPANDS  
VOCABULARY



IMPROVES  
FLUENCY

## BENEFITS OF AUDIO TO OTHER TYPES OF LEARNING

"Children who are better listeners are also better learners."

- North University of Texas professor emeritus Sara Lundsteen



**85%**

of what we learn,  
we learn by listening.



TEST SCORES  
INCREASED  
**21%**

when engaged in  
multi-modal learning  
versus single-mode.



Combining print and audio  
increases recall **40%**  
over print alone.



**2** GRADE  
LEVELS

Students can listen and  
comprehend 2 grade levels above  
their reading level.

INCREASES  
MOTIVATION  
BY **67%**

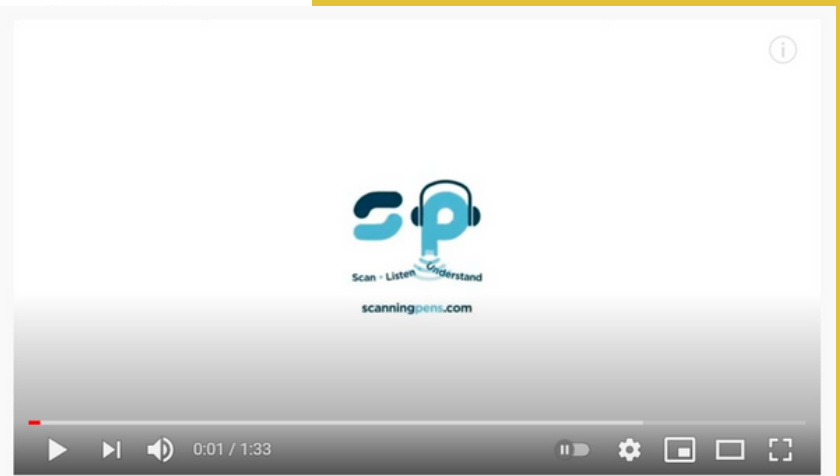


**27%**

of the K-12 population  
are auditory learners.


Sources available at [audiopub.org/uploads/pdf/sound-learning\\_Infographic\\_2016.pdf#asset:4417](http://audiopub.org/uploads/pdf/sound-learning_Infographic_2016.pdf#asset:4417)

The ReaderPen engages students through audio and therefore access the text far more effectively and efficiently. Being able to access texts as their peers promotes a student's independence and confidence.



<https://www.youtube.com/watch?v=MBPJJCG31tM>





# Anaphylaxis Training in Schools Term 3, 2021

St John Ambulance Australia (Vic) has been contracted by the Catholic Education Commission Victoria and the Department of Education Victoria to deliver training in the **Course in Verifying the Use of Adrenaline Injector Devices 22579VIC for Term 3, 2021.**

Schools that require training should contact St John Ambulance Australia (Vic) to register 2 staff per school or campus to attend. Training in this course is current for 3 years.

Registration for the Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC can be accessed from St John Ambulance Australia (Vic) by phone **1300 360 455** or by visiting the St John Ambulance Australia (Vic) DET Booking Portal **<https://www.stjohnvic.com.au/departments-of-education>**

Summary of information for Course in Verifying the Correct Use of Adrenaline Injector Devices:

- Completed by – 2 staff per school or per campus (school anaphylaxis supervisor)
- Course – Course in Verifying the Correct Use of Adrenaline Injector Devices 22579VIC
- **Provider – St John Ambulance Australia (Vic)**
- Cost – **Free from St John Ambulance Australia (Vic) (CECV Cost Covered) government schools)**  
**Accreditation – 3 years**

**Secondaries:**

26th August,

email invitation sent awaiting responses  
before confirming going ahead

**Primaries:**

8th Sept Ballarat

9th Sept Horsham

13th Sept Warrnambool

15th Sept Robinvale

**DON'T FORGET  
TO REGISTER FOR  
OUR UPCOMING  
NETWORKS!**

STAY WELL

*stay safe*

**FROM THE LEARNING  
DIVERSITY TEAM**

Catholic Education Ballarat