

Sheffield Hallam University  
School of Education  
Centre for Further and Higher Education

Unit 12 (Option). Learners with Special Needs in Post-16 Education

**Dyslexia and the NHS. The provision of support for  
health service professionals in education and practice.**

by

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## **Introduction**

The aim of this assignment is primarily to examine the policy, position and from there identify the support available for employees within my organisation, for people with specific learning difficulties (dyslexia).

Before commencing the course option 'Special Needs in Post-16 Education' I had little or no knowledge of dyslexia and had no experience in teaching learners with learning difficulties or learning disabilities. As I teach within the practice of nursing, and, as I have not yet encountered a learner with such difficulties, I assumed that I would not be required to teach learners with 'special needs'. I questioned this assumption and chose the option, partly out of interest and curiosity, but also to challenge my own belief that I would be unlikely to encounter learners with special educational needs. I considered that increased knowledge and awareness would minimise any tendency to inadvertently neglect individuals and help me to prepare for future possibilities.

Within my current teaching and clinical role it is unlikely that I will be involved with teaching students with severe learning difficulties, or even mild to moderate. It is also unlikely that I will teach emotionally or behaviourally disturbed students due to the employment specifications for nurse training. Disability, which can be viewed as the effect of any impairment upon an individual's ability to function normally, can occur in many forms (for example, damage to a limb or back may lead an individual to be temporarily disabled). Therefore I may encounter disabled learners, even if this is relatively minor, temporary and not due to neurological, genetic or organic impairment.

The reason I have chosen to focus upon dyslexia for this assignment is that although as far as I am aware I have not yet encountered a dyslexic student, given the prevalence, it is likely that I may in the future. Having decided that I would select dyslexia, I then had to decide upon a specific focus. Within my clinical and educational role, my learner group can include students training for nursing (pre-registration courses) and qualified nurses undertaking further specialist training. These may both attend Higher Educational establishments such as The University of Sheffield or Sheffield Hallam University. However, I also teach on programmes within the trust and also consider my patients referred for behavioural psychotherapy as learners (therapy has a learning focus). For the purpose of this assignment I have decided to focus upon learning and support within the organisation, that is, Doncaster Healthcare NHS Trust.

Within nursing there is now much emphasis on continual professional development, both formal through education in higher education establishments and informal within the individual's own working environment. Previous work has focused on provision for students, including nurses, within higher educational establishments to which I will refer within this assignment. I aim to take the perspective of the nurse and health professional within the health service who may wish to access training within the organisation (in this case Doncaster Healthcare NHS Trust), or to seek support and advice on professional development.

The assignment will commence with an introduction to dyslexia, providing a definition and description of the learning difficulty and the effect on individuals and learning. The information will be based upon my own knowledge gained whilst completing the course option and information gained during this time. This will be restricted to brief or summary descriptions due to the limitations and scope of this assignment. I

will then provide an overview of nationwide support available for people with dyslexia as this may have an impact for those in Doncaster before focusing in on support within the local area. This will then lead me on to the Trust itself, the policies relevant to people who may have a learning difficulty and those relevant to the education, training and development of employees.

In order to analyse the appropriateness of support and provision, comparison will be made with other known organisations such as higher education institutions and recommendations made based upon these findings.

Criteria for Assessment:

The Criteria for Assessment as detailed in the course handbook are as follows:

- Demonstration of understanding relating to the initiation, implementation and development of policies to support students with special needs.
- Identification and consideration of teaching and learning strategies to meet the special needs of learners.

### **1.1. What is Dyslexia?**

Dyslexia is often referred to as a 'specific learning difficulty' and these terms can be used interchangeably. If not confused with other more general learning difficulties, this can help to explain that learning is not affected across the whole spectrum and is not to be confused with an inability to learn or low intelligence.

The British Dyslexia Association defines dyslexia as:

Organising or learning difficulties affecting language, fine co-ordination skills and working memory skills. It is independent of overall ability and conventional teaching. When untreated, there are significant limitations in the development of specific aspects of speech, reading, spelling, writing and sometimes numeracy.

Definitions and descriptions of what dyslexia is (and what it is not), are helpful, and, with increasing research, have assisted in the understanding and recognition of dyslexia. However, there are many definitions and these may have a varying emphasis showing the wide range of effects upon the individual and the continuing debate about causes.

Most definitions include difficulties with reading or writing although perceptual problems, difficulties with organisational skills and hand-eye control problems may also be present. Problems with spelling are common and may be most noticeable but space, time and arithmetic can also present as difficulties. To summarise, the difficulties will be experienced with either

The word dyslexia derives from the Greek language, 'Dys' meaning difficulty' and 'lexis'- 'words', or more precisely, the root 'Logos' meaning 'language, speech or diction'. As the word 'lego' means 'to read', it is important not to confuse dyslexia with being simply a reading problem.

Dyslexia will present in children of an early age and often with normal or often above average intelligence. Based on government sponsored studies, the British Dyslexia Association estimates that approximately 10% of children will have some degree of dyslexia with around 4% severely affected.

## **1.2. The signs of dyslexia**

The Dyslexia Institute in their information booklet for adults, lists the problems an individual may experience in 5 main categories; reading, writing, speaking, arithmetic and confidence.

Reading can be very slow and jerky, therefore reading aloud can be particularly difficult and embarrassing if not managed appropriately. This is often due to poor visual memory, word recognition and the need to constantly check when reading.

Spelling can persist as a significant difficulty and can present in different forms and for different reasons. Words may be written phonetically (as they sound), letters can be reversed (e.g.. b/d), comprehension can be generally poor and the individual may be easily distracted or simply not be able to think what to write. Writing may also be problematic due to motor problems, for example, directing the pencil, excessive pressure on the paper, untidy writing and difficulties constructing letters or essays. Directional problems, for example, left/right confusion can also play a part in both writing and reading.

People with dyslexia may have difficulties with speaking often due to memory and sequencing problems. For example, an inability to remember and recite telephone numbers. Polysyllabic words such as 'preliminary' and 'anemone' may be difficult to repeat. They may find themselves losing the words they wanted to say or generally feeling confused when speaking in public. Mistiming their part in conversations or making mistakes such as 'saying the wrong thing' can also occur.

Remembering and reciting arithmetic tables, calculating sums and filling in forms can be difficult.

Not surprising these problems can lead to lack of confidence, for example in fears of promotion Dr new situations which may involve reading, writing etc.

## **2.0. Support for people with dyslexia**

The main purpose of this assignment is to examine the support available for employees within my own organisation who have dyslexia or suspect that they have such a difficulty. It has been necessary to outline the nature of the difficulty in order to appreciate and identify what support is required. In order to complete this assignment, I have therefore had to familiarise myself with dyslexia itself and in addition, the supporting organisations and individuals with an interest. It needs to be recognised that there may be omissions or that the information here may need to be updated or adapted according to new or additional details. There are 2 national organisations which provide information, advice and support for dyslexia:

### **The Dyslexia Institute**

Headquarters  
133 Gresham Road,  
Staines, Middlesex, TW18 2AJ  
Tel. 01784 460747.

Local Institute at Sheffield:  
53 Queen Street  
Sheffield  
S.Yorks. S1 1UG.  
Tel. 0114 272202  
(Teaching outpost at Doncaster)

### **British Dyslexia Association**

98 London Road  
Reading  
Berks., RG1 5AU  
Tel. 01734 668271 (Helpline)  
01734 662677 (Admin.)

Both organisations provide information on dyslexia and how to obtain support, assessment and teaching. Information is geared towards individuals, parents or teachers. I contacted both organisations and obtained written information and advice although I cannot be certain of whether this is representative of what is fully available. For example, the information from the BDA was more geared towards teachers and children (for example, on teaching in primary schools and conferences). However, they may have more information available for sufferers. They also gave me the contact numbers of 2 people running a local support group in Doncaster. This reflects their function as an advice/Helpline and the provision of general support and networking.

The Dyslexia Institute provided more detailed information on the institute itself and a leaflet on 'Coping as an adult: successful learning for dyslexic people'. Their mission statement is 'Dedicated to successful learning for Dyslexic People'.

They list their main functions as:

- Advice and counselling
- Educational Psychologists Assessments
- Specialist teaching for all ages
- Kingston University validated Post-graduate Diploma Teacher Training Courses.
- Talks by experienced staff.

Within their leaflet on 'Successful learning for dyslexic people', they also outline how to obtain assessments and teaching, a review of the educational acts influencing provision, and how to obtain funding.

Authority. Adults who have not previously been assessed should also be encouraged if this is indicated, however, they will have to pay for the assessment themselves. Although my focus is upon adults, the local provision for children is of importance as early detection may minimise the effect of dyslexia upon the individual, their further education and employment. I am led to believe that the provision may vary considerably depending upon which authority you are in. I have only spoken to two mothers of dyslexic children in Doncaster and both had difficulties obtaining assessment and support. The support group as outlined below formed as a result of recognising a need for advice and support.

## **2.1. Support within the local area**

The British Dyslexia Association provided information on a local support group 'Doncaster Dyslexia Support Group' (not affiliated to the BDA). The contacts are as follows:

Jane Longley (Tel. 01302 772427)

Olwen Oliver (Tel. 01302 890070)

This group has been in existence approximately 10 months and hold open meetings on a monthly basis. The meeting is open to all and talks are occasionally planned. The initiative arose due to recognition of the limited support available within the area. It seems to be largely geared towards parents with dyslexic children rather than adults.

The Dyslexia Institute has a teaching outpost at Doncaster (linked with the Sheffield Centre). However, there is a fee for any of the services, either assessment or teaching. Through the local Unemployment Centre and PACT, funding may be available for a certain number of teaching hours. However, this is becoming increasingly difficult to obtain.

In order to find out if there was any further help available in association with education in Doncaster, I also contacted Doncaster College. At Sheffield College (Loxley Centre), there are special classes for adults with dyslexia. Unfortunately, no such classes exist at the present time in Doncaster and there are no staff members with specialist training or interest in specific learning difficulties. In the past there had been a member of staff with specialist training but she had not been replaced on leaving. Students are referred to educational psychologists within the authority for assessment. Learning Support is available for all students in the form of individual 15 minute tutorial sessions for basic English and maths.

### **3.0. Doncaster Healthcare NHS Trust**

Doncaster Healthcare NHS Trust is one of 2 healthcare organisations serving the population of Doncaster. It employs approximately 2,300 staff working within both hospital and community settings. Services are provided within the following areas:

- Mental Health (acute, rehabilitation, elderly)
- Elderly
- Learning disabilities
- Community Nursing (district nursing, health visiting)
- Speciality (physical disability, wound care, head injury)
- Hospice

In order to find out what support, if any, was available for individuals with dyslexia within the trust, I arranged to speak with a member of the Human Resources (personnel) Department. I found out that there was no specific provision or support for dyslexic employees and that as far as was known, no members with a special interest in dyslexia or learning difficulties of the staff. Dyslexia was recognised as a difficulty and one which had been encountered by the person I spoke to although no support had been sought. I was provided with a copy of the trusts' Statement of Intent and policy for Equal Opportunities. This was seen to be the key document and reflection of the trusts' philosophy which would ensure that individuals with disabilities or difficulties such as dyslexia were considered and fairly supported in recruitment and support. Access to and liaison with external agencies for example within the local unemployment centres (Placement and Counselling Training [PACT] and Disablement Officers) was considered to be necessary and helpful.

Following is an outline of the Statement of Intent and then the policy document in the form of the Code of Practice. As this document is too lengthy to reproduce here I have included aspects which may have direct relevance and made comments on other issues which may impact upon individuals with disabilities or learning difficulties, particularly dyslexia.

#### **Equal Opportunities Statement of Intent**

The Doncaster Healthcare NHS Trust supports the principle of equal opportunities in employment

It is the aim of the Trust to ensure that no job applicant or employee receives less favourable treatment on the grounds of sex, marital status, age, **disability**, race, colour, nationality, ethnic origin or religious belief, nor is disadvantaged by conditions or requirements which cannot be shown to be justified in job related or operational terms.

The principle will apply to recruitment and selection, promotion, transfer, **training**, discipline and grievance and all terms and conditions of employment.

Present members of staff and applicants for appointment or promotion will be selected, promoted and treated on the basis of relevant aptitudes, skills and abilities.

Furthermore each employee of Doncaster Healthcare NHS Trust has the right to be treated fairly and with courtesy, understanding and due respect of individual differences.

Each employee also has personal responsibility for treating others in this way.

## Equal opportunities in employment

### Code of Practice

#### **A. Recruitment and Selection**

The document mainly focuses upon recruitment where discriminatory practices are likely to occur. Within the document there are sub-sections including 'Job Description', 'Specification', 'Advertising', 'Application Arrangements', 'Shortlisting', 'Interview Arrangements', 'Interview/ Final Selection Process' and 'Post Interview'.

Within the section on Job Specification skills and qualifications necessary for the job are specified and categorised according to desirable / essential attributes. A point is made on not inflating or devaluing attributes 'e.g.. asking for higher academic standards than are necessary'. Also it is suggested that the provision of training to reach optimum performance level could be considered. It is necessary that at least one member of the recruitment team has a good understanding of dyslexia in order to appropriately assess any relevance to the post and recommend training if appropriate.

With regard to the short listing criteria which are drawn from the job description and specification, the same applies. A note is made on the importance of considering what can realistically be assessed from the application form alone. In the case of an individual with dyslexia, the application may be viewed unfavourably if writing ability is poor. However, in the section on Shortlisting a note is made to warn against being influenced by factors which may not be valid indicators of ability to undertake the post such as 'handwriting, spelling, schools attended, home address'. It is also stated that;

'When considering the physical requirements of the job, Appointing Officers must think positively about whether any practical impediments to the prospective employment of disabled applicants can be overcome'

A note is then made on the availability of grants and special provisions to facilitate employment of disabled persons. On discussing the issues of recruitment with the personnel dept. staff member it was acknowledged that the provision of special considerations or needs could only be made if the individual openly states their disability or difficulty. Some individuals may prefer not to make their difficulty known or in the case of dyslexia may not even recognise the difficulty. This may therefore disadvantage their application.

With regards to the interview for employment, again it may be necessary to ensure that a member of the panel is aware of the problem of dyslexia and is able to recognise when performance in an interview is affected, particularly where the performance does not have relevance to the persons ability to do the job. For example, processing and responding to questions may be problematic as will the inclusion of written tests. As far as I am aware there has been little or no available literature on dyslexia and recruitment and few articles on dyslexia and nursing. A recent unpublished paper (Wright, 1995) focuses on dyslexia in nurse education and in his literature review found seven articles, two of which were British. I will return to these later.

## **B. Training opportunities**

It is stated that it is the managers' responsibility to assess staff members training needs through the recognised system of appraisal and to facilitate career development by allowing access to training. Further guidance can be obtained on the means of ensuring that the training is of benefit to the service. There is no reference to special needs or assistance on accessing training for people with learning difficulties.

There is a Training and Development Department within the Trust which provides a range of short courses free of charge to trust employees. There are courses available and accessed through nomination by the individual's manager or by the individual approaching and suggesting to their manager a desire to attend. From my own experience of teaching on a course within the programme, employees are not always aware of the programme. Also, I would be interested to know how many adults with dyslexia would seek training, and if they did, whether the trust would be able to support the individual. As many of the courses are time-limited, difficulties may go un-missed. However, for that individual the experience may be crucial in influencing their future learning and professional development.

The Trust also has close links with the Further and Higher Educational Institutions within the area. Nursing students who are placed within the Trust for clinical experience and training are based within one of the Universities in Sheffield. Also many of the full time employees may undertake further post-basic training at one of these centres. Particularly for the former group, the policies and support within these institutions will have a significant influence upon the student. Therefore it is necessary to consider the model of support and provision within local higher education institutions. This will be considered in the following section.

The remaining sections of the Equal Opportunity Policy centre upon 'Other Employment Issues' including promotions, transfers, maternity leave, disciplinary matters and finally on monitoring of the policy. There is no further reference to learning difficulties or disabilities.

I have briefly outlined and reviewed the Code of Conduct for Equal Opportunities, as, from an organisational point of view this forms an indicator of the Trusts' recruitment and support for employees who could be disadvantaged. However, it should be acknowledged that this will not be the only source of information or evidence of support and there may yet be other sources or individuals with information relevant to the notion of support for staff with dyslexia. But having also interviewed a member of staff from the Human Resources Dept. it is apparent that there are no formalised in-house support services (integrated with training or not) for staff with dyslexia, learning difficulties or disabilities.

The Trust does liaise with the Employment Centres, Disability Resettlement Officers, REMPLOY and PACT for funding assistance, assisted placements (help is provided for aspects of work the post holder is unable to complete due to disability) and advice on reintroduction to work following disability. I am doubtful whether any of these would be relevant to an individual with dyslexia already employed within the Trust. The availability of grants for training assistance for dyslexia seems to be restricted to those in full time education within further or higher education. [NB- information from the Dyslexia Institute indicates other possible sources of

#### **4.0. Support within Higher Educational Establishments (University of Sheffield)**

Wright (1995), a Nurse Lecturer within the School of Nursing and Midwifery, University of Sheffield, reviewed the literature on support within health education for students with dyslexia. He found that although support within higher and further education was well documented, little evidence was found on support within nurse education and training, (Wright, 1995, Nganasurian, 1994). It seems that this contrasts with the experience and literature in America where nurse education is more closely linked with higher education. This is an interesting and encouraging finding, as nursing education has recently been introduced to higher educational establishments, the the University of Sheffield being one example. Wright was able to recognise the advantage of having access to the support systems of the university. However, further guidelines and information was required. This led to the development of guidelines for both lecturers and student nurses and midwives within the university (Wright 1995).

Having earlier outlined the policies and support available within my own organisation, I will now focus on the provision of support within the university. This will provide the basis for comparison and evaluation leading to further recommendations for those concerned with continuing education within healthcare organisations such as my own in Doncaster.

#### **Policy (The University of Sheffield)**

Having reviewed the policy relating to equal opportunities within my own trust, I considered it appropriate to review the policies relevant to disabilities within the university. The university has a policy statement and procedures document specifically relating to students with disabilities. This forms a part of the Equal Opportunities Policy. This contrasts with my own organisation which does not have a separate policy statement regarding employees with disabilities.

Although I will not outline the full policy, aspects of relevance to my own organisation will be highlighted.

Within the applicant (recruitment) section of the university policy, the pre-application stage is emphasised in order for the student to discuss support requirements and possibly to visit to assess provision. The student is also encouraged to provide information on their disability in order to discuss support requirements. I am led to believe that, to a degree, both of these points apply to my own organisation, however, are less explicit. Employees are asked to state any disabilities and the personnel department is able to advice on special facilities and provision for interviews. Although informal visits in advance of any formal interviews may be arranged, these are not stated as a resource for those with a disability and appear to be more linked to the application stage (as opposed to pre-application).

Apart from the duties of the personnel department (who may have further guidelines), there are no clear responsibilities placed upon trust members to act on behalf of the applicant or employee with a disability. Within the university policy, the Graduate Admissions Office, Academic departments, and then on acceptance, all relevant services such as the Health Service, Housing Services, Library, Safety Services, Student Services and the Academic and Welfare Secretary

On-going developments and support facilities for recruited students are also outlined. These include the provision of modified methods of teaching and assessing and central support from the Disability Officer, Student Office and Student Union Advice Centre.

The University also includes details on written information for students with learning disabilities, 'Students with Disabilities: A Guide for Students and Staff. This booklet includes information on financial support, local services, special examination arrangements and all other sources of University support. Although I am not certain of how and when it was distributed, there is also a circular detailing information on dyslexia and relevant support systems.

Within my organisation there have been recent developments to ensure that staff needs are addressed, for example, in terms of professional development, supervision and personal counselling. However, there seems to be a lack of support for study skills and no service or provision for people with learning difficulties. Although I have not conducted a thorough search, I have found no information on dyslexia or formalised relevant support.

Wright (1995), despite the availability of support within the University, also had some difficulties accessing information. Also, a need was identified for additional information specifically for student nurses. The lack of information and awareness within nurse teaching schools and the specialist nature of their work (e.g.. clinical practice placements) highlights this need. Also, unfortunately, the provision of a grant for example, for special equipment, by the Local Education Authority, does not apply to student nurses as their bursary is not recognised as a grant. Having identified a need, the author above, developed guides for student nurses

midwives and lecturers within the School of Nursing and Midwifery. Therefore these now exist in addition to the general information provided by the University.

Within the guides mentioned above, information is also included on assistance and advice during clinical placements. Although geared towards lecturers based within the academic setting this type of information would be of benefit to both trained nurses supervising and teaching learners during placements, and to any nurses with dyslexia. This leads me on to the final section of this assignment.

## **5.0. Summary and Recommendations**

This assignment has provided an introduction and brief outline of dyslexia including a definition and description of the learning difficulty. For more detailed information the reader is directed to references within the bibliography.

The support services and organisations available for either individuals with dyslexia, parents and teachers, are then outlined. Support in my own local area of Doncaster is considered as this has relevance to my main population of concern, health professionals within my organisation of Doncaster Healthcare NHS Trust. Following enquiries within the Trust, the provision for employees with learning difficulties, particularly dyslexia, are then reviewed. The policy provides a basis for review and this along with information on policy and support within another allied organisation, The Sheffield University, has helped me to consider the following recommendations:

1. A more thorough review is required on both a local and national level, of support and information on dyslexia in nursing and professions allied to medicine and nursing.

2. Nursing staff responsible for supervision and support of student nurses on clinical placements should liaise with lecturers and tutors to ensure that students with difficulties are identified and the best support made available. Guidelines similar to those developed for the University (Wright, 1995) should be devised for assistance during clinical practice.
3. Support and assistance should be available within the Trust (or details provided on where to get further help) for both pre-registration and post-registration learners and should also be available to all employees.
4. In the first instance information should be collated and made available as widely as possible within the Trust. It may be relevant to have a poster display, possibly to coincide with any national 'awareness' days / initiatives.
5. The policy should be reviewed with particular consideration paid to the needs of employees with learning disabilities and difficulties. It may be appropriate to include additional sections on learning difficulties. Any guidelines could also be incorporated within Training and Development Policies.
6. Any staff within the organisation with special skills and / or interests in dyslexia could be identified.
7. Courses and support on study skills could be developed and provided in-house. If the need for specialist training, for example, for employees with dyslexia is identified, then the possibility of bringing in specialist teachers, or accessing local courses should be examined. Liaison with specialist organisations such as The British Dyslexia Association and local colleges and universities may also assist in policy development and increased awareness .

The recommendations above are based upon this work, the special needs option and my limited enquiry. Therefore it should be recognised that further investigation, literature review, liaison and the establishment of support from the organisation would be required before further development and implementation. The possible stages of development involved in the establishment of support for staff and learners with dyslexia are outlined and shown in the appendix.

Completing this assignment and considering the recommendations for supporting staff with dyslexia has implications for the overall provision of support for learning and training of employees. If there is a support system for staff with dyslexia, should this not be provided for all staff who may have other support needs? If the staff member is completing a further or higher education course, should the support be provided by the academic institution only? Should the individual staff member be provided this support by their manager through the appraisal system? Are there already sufficient potential sources of support for staff members (including those with learning difficulties)?

Although there may be many issues which need to be addressed, I believe the time invested would be worthwhile. The development of flexible learning methods, the emphasis on continual professional development in nursing, increasing academic demands and the recognition by organisations of the need for staff support makes this an ideal time to address these needs.

The British Dyslexia Association estimates that 10% of children have some degree of dyslexia. It is difficult to know how many in the nursing profession experience difficulties. Beeker, ( 1985) found that approximately 5% of nursing students were diagnosed with dyslexia. However many nurses or allied professionals there are, they will be experiencing the same professional demands with limited access to the specialist support required. The training and support requirements of learners with dyslexia are now fairly well established. It would be unfortunate to lose staff or to impede their professional development when this could be easily avoided.

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## Appendix

### POLICY DEVELOPMENT FOR SUPPORT OF STAFF WITH SPECIFIC LEARNING DIFFICULTIES IN EDUCATION AND PROFESSIONAL DEVELOPMENT WITHIN THE NHS.

MANAGEMENT /  
ORGANISATIONAL SUPPORT

IDENTIFICATION OF NEED

IDENTIFICATION OF  
RESOURCES AND  
PERSONNEL

EDUCATION AND AWARENESS

POLICY AND PROCEDURES  
(DEVELOPMENT AND MONITORING)