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The President's Message, by Hans Welling, ICEVI-Europe President

Dear members of ICEVI-Europe,

We live in a special time. Across Europe, we are confronted with the Coronavirus and the consequences that this entails. No one gets out of that. In the meantime, we have had to postpone our Professional Interest Group Early Intervention Conference, which was scheduled to be held on April 23 & 24 in Leuven, Belgium and are waiting for further news about Madrid.

We will undoubtedly get through this period. Just before the crisis, the Program Committee and the Board of ICEVI-Europe met in Paris. The 2021 Conference in Jerusalem with the theme, "Access to Learning and Learning to Access," was an important topic of discussion. Preparations are progressing well.

The conference remains a unique opportunity to gather new knowledge and practice experiences, meet European colleagues within the professional interest groups and of course also visit the historic city of Jerusalem.

We count on many participants. The conference fee is acceptable, but of course it is not easily affordable for everyone, especially for our colleagues from the Balkans, Eastern Europe and Central Europe. This has the attention of the host-committee and the board.

Writing this, I realize that yesterday I watched a television program about a well-known blind couple who moved from Amsterdam to a new apartment in the east of the Netherlands. The impact of such a change is profound; how to organise your home, how to orient yourself in the village, find the way to public transport and the shops, of course to build a new social environment, etc.

Such a video film also shows how important good support is. Support aimed at the independence and full participation in society of visually impaired persons, including those with multiple disabilities. That is possible and our task to contribute to these goals.

That is why participating in a conference is not a luxury but a good means of sharing your own knowledge and experience with colleagues and also gaining new insights.

Time is passing by fast. Now that the Newsletter is almost finished, I have to supplement my preface. As a result of the COVID-19 pandemic ICEVI-World has decided to suspend the General Assembly 2020 in Madrid until May 2021. As a consequence, the board of ICEVI-Europe and the Israeli Host-Committee have decided to postpone the 10th ICEVI-Europe Conference in Jerusalem, Israel, scheduled in that year.

Unfortunately, it is not possible to announce a new date of the 10th ICEVI-Europe Conference already. We are happy to keep you informed, as soon as this is possible. You will of course remain welcome as well as the Presenters during the General Assembly of ICEVI-World.

For the coming months ahead, I wish everyone good health and satisfaction in all activities.

On behalf of the Board of ICEVI-Europe,

Hans Welling
President ICEVI-Europe



A Counselling Visit to Panu's School – a single study case report from Finland

A Counselling Visit to Panu's School – a single study case report from Finland

Text and pictures: Kirsi Salonen, Consulting Teacher

Translation: Taru Poikolainen, Planning Officer

Valteri Centre for Learning and Consulting, Onerva unit.

The Valteri Centre for Learning and Consulting offers learning support for pupils with visual impairment, advice for their families and guidance and training for staff working closely with them in school. Children and young people needing general, intensive or specialist support benefit from our services and our aim is to enable as many pupils as possible to attend school in their home municipality and in their neighbourhood school.

Panu is a visually impaired pupil. The purpose of the counselling visit described in this article was to observe Panu's school day, watch his work in class, assess the functionality of his current learning devices and equipment and to clarify his equipment needs going forward. It also provided an opportunity to look at the organisation of his learning environment and the teaching materials and teaching methods used in his classes. The visit is outlined below.



Päivi Toikkanen and Panu Rätty are getting familiar with the use of iPad.

Today, at Kymintehdas School in Kouvola, fifth grader Panu Rätty, together with his teacher Marjatta Skön, are waiting for a visit from Päivi Toikkanen, a consulting teacher from the

Valteri, Onerva Unit. 'Päivi is going to see how I'm doing and how I use my devices' Panu says.

During the counselling visit, Päivi Toikkanen wants to observe Panu's school day, and make sure that the recommendations that were given at the last counselling visit and group support session have been put into operation. As well as observing Panu, Päivi will investigate the functioning of Panu's devices, the learning environment and the teaching materials in use at the school.

Panu tells Päivi:

I don't need any more devices yet, since I have my CCTV, computer, magnifying dome and my white stick. When it's too dark, I will use the white stick. At school, I use the computer for everything else except maths. If we are searching for information, I will google it. For homework and Word documents, I use the Cloud services.

Panu has a clear understanding of the purpose of the counselling visit. Together Panu and Päivi are examining the iPad and its accessibility features. Panu has expertly put into operation the strategies that were practised at the previous counselling visit. Panu reports:

'The last time with Päivi, we practised how to create files in the Cloud and how to enlarge the cursor of the mouse – those I'm able to do now,'

Planning for the counselling visit

The initiative for the counselling visit usually comes from the preschool or school, but it may also come from parents or the rehabilitation counsellor. The counselling visit typically takes six hours. The timetable and the programme is planned together with the pupil's own teacher and the content is tailored according to the needs of the pupil in question. Päivi Toikkanen describes the process:

When I start planning the first counselling visit to a pupil that I have not visited earlier, I will contact the rehabilitation counsellor of the hospital and ask for the patient documents regarding the vision of the pupil. For this, you always need the permission of the parents. We also contact the guardians of the pupil from Valteri. I will familiarize myself with the documents regarding the pupil in order to understand his or her situation. If the pupil is already familiar to me, I will check whether he or she has attended a support period at Valteri or whether someone else from our staff has paid a consultation visit there earlier. I will read the feedback and the information on the latest support period and I will ask the rehabilitation counsellor for the latest information regarding eye doctor visits.

Together with the consulting teacher, rehabilitation staff from Valteri may also attend the counselling visits. Päivi might be accompanied by a low vision specialist, an orientation and mobility specialist, an IT device specialist, an occupational therapist, a speech therapist or a physiotherapist. A co-operative visit with a psychologist is also a possibility. A

consultation visit is an interactive situation where all participants learn from each other. According to Päivi Toikkanen

The best part of the counselling visit is meeting the student and getting to know their situation in the everyday life of the school. Understanding the overall situation is important. If I can give the support and guidance needed and if it helps the pupil in the future, that is the best. The counselling visits are learning situations for me as well. I get to see how some issues are organized so well here in the school and I might be able to pass on this message to another school.

The counselling visit - supporting the teachers

During the day, Päivi Toikkanen has discussions with Panu's teacher Marjatta Skön and the special needs teacher Kirsi Pölönen. Both teachers consider the consultation visits useful and comment that during the visits, one can pick up practical tips useful in the everyday life of the school.

Marjatta has been teaching Panu for a long time and counselling visits are familiar to her. Kirsi, the special needs teacher, has not taught pupils with visual impairment before. Kirsi Pölönen has over 20 years of work experience but sensory impairments are a new issue for her. She says that:

The devices are new to me. My special know-how fields are ADHD, executive functioning, attention issues, and behaviour support. It is interesting to learn how much a pupil with visual impairment can make use of their sense of sight and whether it is stressful for him or her. I am also looking for practical tips from the consulting teacher.

Putting views together

A meeting is being held after the school day, this time the participants include Panu's mother Karita Rätty and the rehabilitation counsellor Leeni Koskinen, in addition to Panu, his teachers and Päivi Toikkanen. The issues today include Panu's school attendance record, the lighting in the school and the support of a special needs assistant. Panu's mother feels that the counselling visits have been helpful. Karita Rätty says.

We have received overall information about all the possibilities of how to make school attendance easier for Panu. And I have received support and reinforcement considering the issues of the child as well,

The rehabilitation counsellor Leeni Koskinen considers the co-operation with the consulting teacher important as well.

Our co-operation works very well. We call each other if there are any questions. I act as a link between the hospital, home and Onerva unit. At this meeting, I also provide the consulting teacher the latest epicrisis. These meetings are also a great chance to tangibly see how the child is doing,

The feedback

Written feedback is always provided from the counselling visit. The feedback is given either in the form of an appendix to the pupil's IEP or a summary of the consultation visit. Panu has familiarized himself with his own appendix in the IEP. In fact he is the top expert regarding his own issues. Panu sums up:

At the sixth grade, I will come to the support period. I read it in the appendix in the IEP. Every time there is new information in Wilma (an electronic system to pass on information between school and home) or other documents, I want to check that what is going on.

Both Panu's teachers consider the appendix to the IEP as a very helpful tool in their own work. Here is Kirsi Pölönen's view:

It has involved a great deal of information and we have been reading it very carefully. Because the situation regarding the pupil's vision might change rapidly, it is very important for us here in the school to be aware of the situation, in order to be able to organize teaching and to assess the need for a special needs assistant in different situations.

Meeting other pupils with visual impairment

According to Panu, the group support sessions organized in Valteri, Onerva unit are great. During the support period week, the pupils stay in the residential home which is next to the school. The younger pupils, as well as the pupils that are in their first support period, can come to the period together with their parents. The old hands, such as Panu, spend the week without their parents.

The support period was fun. I always stay overnight alone at the support period, which is good. I think it's very good that we can think our own issues over alone without one's own mum, dad or brother interrupting. Every time I get to go there, it's good because I need privacy from my brother.

Indeed, the school is excellent. I have visited there also at goal ball camp. At the support period I received a lot of friends. I keep in touch with them in WhatsApp. Everyone had slightly different devices. I tried different devices and the ones I now have in use were the best. I hope that my friends would come to the next support period also.

The Valteri Centre for Learning and Consulting – key facts

- The Valteri Centre for Learning and Consulting supports pupils with visual impairment for example by offering counselling visits, support periods and in-service training for the teaching staff. In addition, there are pupils with visual impairment studying in Valteri Schools. The support for pupils covers the whole school path from preschool

to the transition to the second grade. Valteri has six units of which one operates in the Swedish language. In connection with each unit, there is a Valteri School.

- The rehabilitation counsellors of hospital districts guide and support the enrolment for Valteri services. Usually this takes place when the planning of the school path of the pupil is beginning.
- Valteri is a national Centre for Learning and Consulting that operates under the Finnish National Agency for Education. Valteri supports the neighbourhood school principle by offering services for the needs for general, intensified and special support.

You can read more at www.valteri.fi/en

Is it easier to see? Visual Impairment and Irlen Syndrome

Is it easier to see? Visual impairment and Irlen Syndrome.

MSc. Nina Čelešnik Kozamernik

Center IRIS – Centre for Education, Rehabilitation, Inclusion and Counselling for the Blind and Partially Sighted, Langusova ulica 8, 1000 Ljubljana

March 2020

Is it easier to see? Visual Impairment and Irlen Syndrome

Scotopic sensitivity syndrome or Irlen syndrome

Irlen Syndrome (also referred to as Meares-Irlen Syndrome, Scotopic Sensitivity Syndrome, and Visual Stress) is a perceptual processing disorder. It is not an optical problem. It is a problem with the brain's ability to process visual information. This problem tends to run in families and is not currently identified by standardized educational or medical tests.

The researcher and founder of the Irlen method is Helen Irlen, the founder of the Irlen Institute in California, USA. She demonstrated the syndrome with her first research back in 1980–1983 in California. She is also a director of the International Irlen Institute. According to the Irlen Institute there are over 170 Irlen Clinics worldwide (USA, Canada, South and Central America, Asia, Europe, Africa, New Zealand, Australia) and over 10,000 educators have been trained in the Irlen Method. Many school districts have included screening as part of the regular test battery. More than 100,000 people use Irlen coloured filters and millions of individuals use coloured overlays. More than 200 independent scientific studies in the field of education, medicine and psychology have been conducted on the method's operation. In Slovenia, we have one Irlen clinic, 35 active screeners and 2

diagnosticians. We have over 1000 individuals with glasses with Irlen colour filters and more than 3000 of those who use Irlen colour overlays.

The Irlen assessment process is separated into two testing sessions. The first session is called the *Screening*. The screening creates an awareness of the various distortions and/or discomfort person is experiencing when reading, establishes what a page should look and feel like, and determines if symptoms are slight, moderate or severe. At this first session the colour of the overlay (plastic sheet), which provides the greatest benefit for reading, is chosen. Immediate changes and improvement when reading can be noticed in one or more of the following skills: reading rate, comfort, comprehension, sustained attention, error rate, flow and fluency, tracking, sight vocabulary, ability to skim and speed read.

Individuals that have been recognized as having symptoms consistent to moderate or severe Irlen syndrome, are referred to the second session, *Tint Assessment*. During the tint assessment different coloured lenses are introduced to find one's unique colour. By filtering only certain wave lengths of light, reading, attention, light sensitivity, headaches and other physical symptoms, that origin in Irlen syndrome, may improve or disappear.

The colour one will wear as lenses (as coloured glasses) is usually different from the overlay colour. The overlay makes the page look coloured. With the Irlen lenses, the page will still look white, regardless of the colour of the filters; and the print will be clear, stable and comfortable. Irlen lenses will not change the colour of objects or make things darker.

The project

Centre IRIS – The Centre for Education, Rehabilitation, Inclusion and Counselling for the Blind and Partially Sighted has undertaken a project on Irlen Syndrome that runs from spring 2017 to autumn 2020 and is funded by the Ministry of Education, Science and Sport of the Republic of Slovenia and the European Union, European Social Fund.

Two workers have been trained and became certified Irlen syndrome screeners, so and from March 2018, the Centre has been offering free testing for Irlen Syndrome to all partially sighted children and young people within the centre and for all children with learning disabilities involved in the project. Between March 2018 and October 2019, 24 visually impaired people were tested at the Center IRIS. All 24 were identified with Irlen syndrome and recommendations were made or adaptations in work and support methods.

The main differences in recommendations for children who are visually impaired and children who were identified as visually impaired with Irlen Syndrome are:

Visually impaired	Visually impaired with Irlen syndrome
High contrasts - best black on white – are needed.	An individual colour (sometimes even dark blue, dark purple, blue-purple ...) is needed.
Sits in the first row, directly in front of the blackboard.	Sits where classmates protects him/her from the glare of the white board. Teacher prepares board text in advance.
A white board is recommended.	A green board is recommended.
A black pen on a white blackboard is recommended.	It is recommended to use a coloured pen on a white board, if there is no possibility to avoid a whiteboard.
High contrast copies and slides are recommended.	Copies and slides on coloured sheets (as close as possible to the shade of the overlay(s)) are recommended.
Often needs additional or target lighting.	Strong light disturbs him/her, because it can be uncomfortable for him/her and can cause additional issues, distortions.
Often needs an additional table light.	Does not want extra lighting.

If children with visual impairment have Irlen Syndrome, we can often help them by using an overlay or even Irlen coloured filters, allowing individuals to read faster, more accurately and with greater concentration.

We cannot stress enough that children/adolescents themselves should be given opportunities to tell you how and what they see so ask questions like "How comfortable is it for you to look at this worksheet?" "How comfortable is it for you to read this book?"

However we need to be aware that the Irlen method is not a medical method and does not replace the standard examination of an optician, doctor. It does not restore lost vision and in addition to the Irlen method children will need other professional help.

Literature

- Centre of Expertise for holistic support to blind and partially sighted children and youth, and children and youth with special educational needs Homepage

[www.strokovnicenter.splet.arnes.si/svetovanje-in-izobrazevanje/skopticni-sindrom-irlen/ \(24/03/2020\)](http://www.strokovnicenter.splet.arnes.si/svetovanje-in-izobrazevanje/skopticni-sindrom-irlen/ (24/03/2020)).

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Editor's note

The publication of this article in our newsletter does not represent an endorsement of the Irlen approach by ICEVI Europe.

Using Virtual Reality to support Orientation and Mobility Instruction

Using Virtual Reality to support Orientation and Mobility Instruction

Timo Repo and Outi Lappalainen, Valteri Centre Finland

Virtual Reality (VR) is changing the ways people play games, watch videos and use software. Visually impaired people can use virtual reality products even if they have a severe vision loss. Our students have used VR technology to visit interesting sites on Google earth, land on the moon and of course play games! At the moment we are testing the effectiveness of using a 360° video recordings in helping individuals with visual impairment to learn new travel routes.

Orientation and mobility in virtual reality

When learning new routes, people who are visually impaired need a lot of repetition so that the details of each route can be safely memorized. Tackling a new route for the first time on your own after your Orientation and Mobility training can be exciting but scary, but opportunities to experience the journey through VR -goggles can help relieve the travellers' anxiety and build up their confidence.

After a few orientation and mobility sessions, the traveller can watch the VR- video at home or in some other safe environment. The traveller practices and memorizes the route as many times as needed and without time limitations to become confident about the twists and turns of the route. The video can be paused at any location and travellers can explore particular landmarks, turns and details at their leisure.

When the traveller feels confident enough, the route can be practised for real. After the session the orientation and mobility instructor can assess the benefits of the video and suggest areas that should be studied more.

Any everyday route can be filmed. It can be a route to work, school, interest groups or even the local convenience store. The video can be filmed by the orientation and mobility instructor, a relative or by the travellers themselves with a 360° camera. The video can be watched from a computer, a tablet, a smartphone or from VR- goggles. The benefits of watching the video from VR-goggles is that the video is seen right in front of the viewer's eyes, which helps people even with relatively low visual acuity to see the details (one individual had 0,01 visual acuity). It is also easier to focus on the video, because the goggles block everything else from the user's view and help you immerse yourself in the task at hand.

What you need in making the videos:

A 360 camera

VR- goggles. The goggles dont need to be expensive ones. For example goggles which have a head mount for a smartphone (google cardboard etc.) can be used. Just make sure the lenses are good.

A computer and a software that can convert the filmed video to 360 form.

Feel free to send us questions about this article.

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SMILE too' - an Erasmus+ Strategic Partnership for School Education Project

'SMILE too' - an Erasmus+ Strategic Partnership for School Education Project

Marija Jeraša, Centre IRIS, Slovenia

A smile is a positive message that we receive through nonverbal communication, but for a person with severe visual impairment it often represents just a lost piece of human interaction. "SMILE too" is an Erasmus+ project within Strategic Partnership for School Education and it's a follow-up to the SMILE! School Education staff mobility programme. SMILE stands for 'Social Skills Make Inclusive Life Easier.'

The project is a collaboration between professionals in six partner organisations from different parts of Europe, namely:

- Koninklijke Visio (The Royal Dutch Visio) – The Netherlands,
- Gymnazium pro zrakové postizene a Stredni odborná skola pro zrakové postizene (GOA) – The Czech Republic,
- Jordanstown School - Northern Ireland,
- The Royal Blind School – Scotland,
- Lega del Filo d'Oro Onlus – Italy and
- The Centre IRIS-Centre for Education, Rehabilitation, Inclusion and Counselling for the Blind and Partially Sighted – Slovenia, coordinator of the project.

The organisations all work in the field of education for children and young people with visual impairment, and believe that social skills represent key competences that have an important impact on the behaviour, self-esteem and acceptance in society of their target group. Education in inclusive settings or mainstream schools is becoming the prevalent form of education for children with visual impairment in most of the countries in the partnership. A main benefit of inclusive education is supposed to be social integration, but in some cases, expectations do not meet the reality. In spite of the amount of effort professionals put into this area of work we often cannot be satisfied with the results.

The process of developing social competences for children and young people with visual impairment deserves special attention. The loss of sight makes the process a considerably different one compared to their sighted peers. The most important feature is that children with visual impairment cannot easily learn through imitation and they need constant support to fill in the gaps in the social information available to them. The focus of the project is on empowering the whole system with and around the child to this end.

We professionals need strong partners and allies and we have found them in parents/guardians of children and young people with visual impairment, and in teachers and other professionals in mainstream schools/inclusive education settings.

In the project we have identified two target groups of stakeholders: parents/guardians and teachers/professionals and two key goals. The first goal is to raise awareness about the importance of developing social competences, and the second is to empower the stakeholders to be able to contribute to the process of social development using effective solution-oriented approaches.

The main outputs of the project will be two specifically designed training programmes: one for the parents/guardians and the other for teachers and other professionals in inclusive

education settings, with modules appropriately adapted to particular circumstances, e.g. the age range of children, teachers in boarding schools etc.

Materials with guidelines and videos with practical advice to support our presentations will be produced. In the future, these two training programmes will become part of the improved service partner organisations offer to support inclusive forms of education.

However, to be able to produce effective training programmes, professionals involved in the project must acquire new knowledge, especially in Growth Mind-Set Theory and Solution Oriented approaches. Essential new skills will include how to produce quality videos, which are often more illustrative than thousands of words. The participants will also will need to find answers to some of the professional dilemmas they face in their daily practice. New observation tools – an interview form and a questionnaire, started in 'SMILE!' and finalised in 'SMILE too' will be used to obtain relevant information about the state of social skills of children and young people with visual impairment and thus provide information to set goals for our work in the future.

The ultimate target group, children and young people with visual impairment, will benefit from these changes in the long term. Social competences cannot be changed very quickly, but if levels of social competences can be accurately assessed using appropriate tools of observation then individual development plans based on this assessment can be tailored to the needs of each individual child or young person to result in better social inclusion. Also if the environment is responsive to the needs of children, and stakeholders are conscious of their role in the process of social development and have the knowledge to assist it, little by little, all these activities might result in better social inclusion outcomes. For the ultimate target group this means that they might become more active participants in society, acquire better competences to enter the labour market on equal terms with their sighted peers, and have a better quality of life in general.

The project is in its first year. We have finalised the Observation Tools with all the necessary instructions and a consent form. They have been translated into Italian, Czech, Dutch and Slovene languages, and we are in the phase of testing them. Unfortunately this process is going to be delayed due to the current pandemic crisis and the fact that schools in many countries are closed. Nevertheless, professionals in the Centre IRIS, many of them dealing with children and young people with visual impairment in inclusive education settings, have acknowledged in a recent survey the need for such tools and highlighted a number of topics the programmes mentioned above should address.

To conclude, the influence of both projects, *SMILE!* and *SMILE too*, has already started to show a positive effects among the professionals of our organisation. The last few years have brought a significant change in the way of thinking, from considering socialisation issues as a problem to a seeing them as a challenge requiring a solution searching oriented approach.

Marija Jeraša, Centre IRIS, coordinator of the project

How good is our Sensory Service? (HGIOSS): A Framework for Auditing and Evaluating the Quality of our Sensory Services

How good is our Sensory Service? (HGIOSS)

A Framework for Auditing and Evaluating the Quality of our Sensory Services

This framework is based upon Education Scotland's How Good Is Our School (HGIOS4) and was created for the Scottish Sensory Centre (SSC) by Lorna Walker in collaboration with Elizabeth McCann, SSC. It aims to highlight the importance of specialist Sensory Services so that the needs of learners with sensory impairment can be met effectively; demonstrate the professionalism and accountability of the Sensory Service; and provide Local Authority Service managers (who may not have specialist experience in ASN/Sensory impairment) with the means to make a comprehensive audit of the strengths and development needs of an effective service and its essential relationship with parents, education colleagues and partner agencies.

In line with all HGIOS documents, HGIOSS will also help to answer the questions at the heart of self-evaluation: How are we doing? How do we know? and help to clarify What are we going to do now?

Launched in May 2019, this document is available from the Scottish Sensory Centre:

<http://www.ssc.education.ed.ac.uk/resources/HGIOSS/>

New materials from EchoProVip

New materials from EchoProVip

Project EchoProVip, funded by EU, Erasmus+, is now ready to publish its written results. FIRR, the project manager from Poland; Kaunas Training Centre from Lithuania and IBOS from Denmark have between Dec. 2017- 2019 been cooperating on training O&M instructors in how to use Echolocation as a method when teaching persons with a vision impairment. The results: the Curriculum, Compendium and Recommendations are now published in English, Polish and Lithuanian.

Please contact: Project manager Anna Razborska, FIRR, email: anna.rozborska@firr.org.pl for more details.

VISION PRAGUE 2020: The 8th ECPVI European Conference on Psychology and Visual Impairment

VISION PRAGUE 2020

The 8th ECPVI European Conference on Psychology and Visual Impairment

<https://www.visionprague2020.cz/>

Theme: Real life (In) dependence

The conference is organized by Primary and Low Secondary school for Children with visual impairment. The conference will take place on November 5-6

For more information please visit the website or contact the organizers: conference@visionprague2020.cz

With best regards from Stockholm,

Tina Bjork

Postponement of 10th ICEVI-Europe Conference, "Access to Learning and Learning to Access"

As a result of the Corona pandemic, ICEVI-world has decided to suspend the general assembly of ICEVI-world until May 2021. As a consequence, the board of ICEVI-Europe and the Israeli Host Committee have decided to postpone the 10th ICEVI-Europe Conference in Jerusalem, Israel, scheduled in that year.

We will inform you of a new date and place as soon as possible.

Hopefully you will all be fine in these exceptional times.

Hans Welling,
President

Tomer Rosner,
Chairperson Host Committee