

Written evidence from Parental Submission 95

My name is [name] and I live in [town] in [county]. My son, [name], has very severe special educational needs.

I would to highlight to the Committee :

- Failing of Local Authority to provide suitable education in Special School for very severe children.
 - Tactics of Local Authority to deny suitable education
 - No SALT provided for a non verbal child
 - Local Authority not allowing parents to appeal against Statements/EHCP
 - Forced to go to Educational Tribunal
 - No suitable educational provision within our Local Authority; Our son is now thriving in an out of county residential school where is gets a 24 hour curriculum, at full cost to our Local Authority, following our victory at Educational Tribunal.
 - I have all paperwork and evidence to support all of my points and would be very happy to share this with the Select Committee and make myself available for any discussions.
1. Our son has very severe special educational needs, including Autism, Severe Learning Disabilities, ADHD and Profound Sensory Processing Disorder. He is 9 years old and in year 5.
 2. He is non verbal, double incontinent, very low functioning.
 3. Our son has and always will have total dedication and unconditional love, but he developed into a violent, unpredictable and confused child. Our family life revolved entirely around our son's needs. His needs are very complex and he was often frightened and confused by the world around him. He frequently got very tearful and cries for long periods at home, school and respite. As a family we did our best to try and keep our son at home, but we were been let down by the Local Authority and have not been adequately supported.
 4. He started [name] Special School at 5 years old which was in our Local Authority with a full Statement of Special Educational Needs.
 5. [School] was an hour's drive away and this journey was not helpful to our son's disabilities and often caused stress and aggression. The Local Authority denied this was a problem.
 6. Our son's levels of anxiety were heart-breaking. Some days at school, he would eat or drink nothing. His sensory processing disorder contributed

significantly to his challenges. His aggression was long standing, but due to his strength and size, it was dangerous. To be scared of your own son is not good. Our 11-year-old daughter was frightened of him and locked herself in her bedroom. Our son put his last two carers in hospital and in one year, put 7 members of school staff in A & E.

7. Our son received 1:1 support at [school] but was being “contained” by the school staff. No demands were placed on him to lessen the impact of his challenging behaviour and he was essentially being taught by learning support assistants. His engagement in learning was minimal.
8. [School] acknowledged that [name] had extremely challenging behaviour. One year, I went into school and was shown how staff use a large black shield to protect themselves against my son. It reminded me of a riot shield. The School also provided me with arm guards to wear. Although the school tried to implement behaviour plans and risks assessment his behaviour deteriorated and was increasing in its severity. There was no proper functional analysis of his behaviour. Advice we have verbally received from CAMHS ([name]) is that my son required residential provision to meet his needs. Unfortunately, those professionals were advised by the Local Authority that they’re not able to publicly make those recommendations because of the costs of such provision.
9. The lack of progress with helping our son to communicate was especially concerning, thus much of his aggression resulted from frustration. He hadn’t progressed from using two or three photographs as PECS picture which he learnt when he was three and four years old. The lack of Speech and Language therapy and Occupational Therapy resulted in his behaviour escalating to extreme levels of violence that prevent him from accessing the outside world and frequently leave us housebound.
10. The school continued to offer our son a generic approach, for example, the sensory circuits that he accessed were of no benefit as they were not suitable to his specific sensory extremities. The Local Authority refused to allow an OT to access our son.
11. In 2017, when our son was 8 years old, my husband and I requested a waking day curriculum for our son and for him to go to an out of county residential school. No suitable educational provision exists within our Local Authority.
12. Local authority disgusted us with their underhand tactics to deny our son a suitable education.
13. The Local Authority took a stance that our son would not be educated out of county, despite the school failing to meet his educational needs and his constant regression.
14. Our Local Authority were very hostile to us and said that his needs could be met within county.

15. We went to Educational Tribunal in January 2018 and we won. We appealed under section 326 of the Education Act 1996 against the contents of a statement of special educational needs (parts 2,3 and 4) made by the [local authority] for our son.
16. Our son now attends a residential school out of county where he receives a 24-hour curriculum at full cost to the Local Authority
17. Our son is now flourishing and making good progress and is very happy at his new school, where he is receiving an appropriate education.
18. Recently, I found out that our Local Authority were actually seeking out of county residential education provisions for our son, before we took the Local Authority to tribunal (school not of our choice). The LA were consulting out of county "cheaper" provisions to see where would take our son. In the Local Authority's communications with these schools, it was stressed that the schools mustn't contact the parents as the parents wouldn't know anything about the applications! (I have the paperwork and would be happy to share)
19. Thus, this demonstrates that our Local Authority acknowledged that they were unable to meet our son's educational needs within county, however, still made us spend in excess of £20,000 and go to an Educational Tribunal.

Educational tribunal decision:

20. I will now share with you some extracts from the Judges findings following the Educational Tribunal. These illustrate the schools failings and the arrogance and re-activity of the Local Authority approach :

First-tier Tribunal Special Educational Needs and Disability; DECISION [appeal number]:

21. "[School] is not an ASD specific school, but the local authority's autism advisory teacher was based at the school's premises. However, that person had not been made aware of [name] nor asked to advise on any strategies to meet his needs. "
22. "Currently however, the neurodevelopmental team were not having any direct involvement with the family. There had also had been past involvement from NHS speech and language and occupational therapy services, but these were no longer actively involved. In fact, the NHS SALT was suggesting [name] would be discharged from the service and he had not been seen for over a year."
23. "The school had SALT provision delivered through the local health authority and [name] agreed that it was very limited at present and in fact no therapist was available for this term."
24. "[Name] the independent Occupational Therapist, also described [name] as one of the most severe children she had seen and that his behaviour

needs were significant and severe so that if not properly identified and supported at this stage they would become potentially exponential. She explained that [name] sees things as unsafe and reacts to try and save himself, but as he is unable to make sense of the information coming into his subconscious brain he reacts with maladaptive behavioural responses. She described the close proximity of the body's sensory system and emotional system and that for [name] there was no filter so that he would become overwhelmed and then seek sensory input to try and calm him down. [Name] had observed [name] in school and felt the school were keeping him contained and that he did have a corner of the room which was a safe space. It was not in her view adequate, nor was the small area he utilised when going outside. She felt that [name] was overstimulated by the school environment but there was nothing in place to bring him down and the strategies were to allow him his own time and to be self-directive which was not working. She felt there was a need to see his thresholds throughout the day and identify when he was in a calm state to utilise learning opportunities."

25. "...that numerous behaviour plans had been prepared over the years but never properly implemented through multidisciplinary meetings and there was a tendency for the objectives in the plans to be repeated, rather than analysed as to the achievements and reviewed to set new targets. It was clear they (parents) felt they had had to make what they described as "a horrendous" decision in asking for [name] to go to a 52week provision, but they feared that unless he received appropriate help now there was a real risk in later years he would be contained by being medical tranquillised in an institution or his headbanging and violent activities would lead him to harming himself."
26. "Even though a number of children in [name's] class had an ASD diagnosis we found that the school was not suitable and could not meet [name's] needs. This was because it was not an ASD specialist school and we considered that that was necessary given the severity and complexity not only of [name's] ASD but also his severe learning difficulties. We considered that being taught separately with differentiated materials and largely with a 1:1TA was not meeting his needs as it may have contained and occupied him but did not provide the stimulus and motivation needed to help him access learning.
 - a. Further, we were not satisfied that the environment at [school] was appropriate due to its high level of stimuli. This was not the fault of the school as it was not designed specifically to meet the needs of an ASD pupil".
27. "We also felt that the school could not meet his needs as we did not consider that they had fully appreciated the extent of his difficulties and this was evidenced in part by the questionnaires completed by staff to assist [name]. It was also in our view evidenced by the fact that the school had not considered it necessary to seek advice from the attached EP until into the tribunal process, nor to make use of the authority's autism advisory teacher even though she was based on the same premises."

28. "We found that there was a lack of an effective multidisciplinary approach based in the school and this resulted in him continuing to have outbursts which had injured both himself and his TA at school."
29. "We also noted the local authority accepted that their practices had not always been "joined up" and that there were communication issues."
30. "We were concerned that so long had elapsed between holding the annual review meeting and issuing the amended statement and felt that this had impacted upon the chance to try new strategies to meet [name's] needs. We were concerned that although the local authority appeared to have made referrals so that a section 47 assessment took place because of [name's] bruising, there had only been a very limited number of multidisciplinary meetings to try and look at implementation of behavioural plans."
31. "We were also concerned that the annual review was not used to try and integrate a therapeutic approach and any recommendations seem to be general rather than specific to [name]. For these reasons we were therefore concerned about the ability of the local authority to coordinate and implement any future strategies even if it was only required to be between two settings."
32. "We also considered it was significant that the CAMHS team including, the specialist neurodevelopmental team, were not currently recommending any strategies. The absence of their involvement, together with the NHS talking of discharging [name] from the SALT service meant that we can have no confidence that therapies would be available, far less integrated."
33. "We noted that the local authority considered that any progress [name] made was likely to be slow and that strategies would be quite basic and therefore any changes would not need to be seized upon so quickly that therapists needed to be either on-site or even available weekly. We found that this attitude did not meet [name's] needs as we found that education was for him more than academic provision and was training him in preparation for life. We found that a high-level of therapeutic input was required across the waking day as being the only chance to try and make that preparation particularly as at present he was unable to generalise skills learnt in one place to another setting."
34. "It was because [name] was not necessarily receptive at particular or set times of day, that we found it was necessary for the provision and a consistent approach to go beyond the normal school day to maximise any chances of using the glimmers of being receptive to learning shown by [name]. The local authority's suggestion that the required therapy could be bought in as and when the need was identified, did not in our view show an understanding of the complexity of [name's] needs and the consequential need for a consistent approach to manage his behaviour, emotions and teaching of basic skills."

35. "For all these reasons, we felt that the past history of a lack of consistency in multiagency work did not give us confidence that the therapy would be provided, and recommendations integrated and implemented across settings. We felt that as [name] was now nine years of age, increasingly strong and difficult to handle physically, it was essential he was given the opportunity of a 52-week residential provision with a waking day curriculum to meet his needs which currently were not being met. Hopefully this would maximise his chance of improvement which in turn might lead to him being able to return to home with some better developed functional skills."

a. [name] Tribunal Judge [date]

June 2018