

Written evidence from Essex County Council

Written evidence for the special educational needs and disabilities inquiry submitted by Ralph Holloway on behalf of Essex County Council.

Executive summary

- I. The LA has a high level of SEND pupils in mainstream provision however inclusion is not being supported equally by all schools fuelled by a tension between recognised pupil outcomes and the challenges of SEND.
- II. There is still insufficient analysis of the impact of poor quality first teaching leading to misidentification of children and young people with SEND. Children are identified as SEND in some schools as a result of being behind age related expectations; pupils with SEND are significantly more likely to live in the more deprived areas of the LA.
- III. There is a lack of faith and confidence on both sides of statutory assessment process. Parents lack confidence in the amount of funding available and teacher knowledge to meet need in mainstream schools which is driving parental demand for statutory assessment. The profile of SEND is changing and schools feel that they are not always able to provide appropriate education or fund appropriate training for staff.
- IV. The transfer process has varied across LAs and indeed within LAs for families, ranging from re- badging to a full reassessment. This proved a huge challenge and had a major impact on the LAs ability to move forward with other elements of the reforms (coproduction, joint commissioning and preparing for adulthood) as effectively as planned.
- V. The cost of expensive independent school provision is a drain on the High Needs Block and restricts the opportunity for investment in SEND provision within the LA.
- VI. A wider issue is that the system is described by families as 'one where a child needs to fail first' for funding to meet the child's needs to be given to a school.
- VII. Co-operation between education, health and social care sectors is excellent on the ground but the mechanisms, systems and different driving legislations (not always streamlined) make it a challenge at a strategic level.
- VIII. The number of young people with SEND entering the workforce stands in line with national averages, but is clearly not ambitious enough. Too many young people can remain at Post 16 settings due to lack of alternative pathways

Main submission**1. The assessment of and support for children and young people with SEND**

- 1.1 The LA has a high level of SEND pupils in mainstream provision however inclusion is not being supported equally by all schools. By schools failing to share the load equally it creates extra pressure on the schools that are more inclusive, as they become victims of their own success, and are forced to carry a high burden on finances from the SEN cohort. Parents and teachers give examples of occasions where schools have openly told parents that they would not be able to support children with SEND or suggested another school would be more suitable.
- 1.2 There is a tension between recognised pupil outcomes and the challenges of SEND, and it would be welcomed to investigate how many schools with outstanding results (for example, 100% of children achieving expected or better) have significant numbers of pupils with SEND and/or EHC Plans.
- 1.3 Not all schools have confidence that the 'progress from starting point measure' will demonstrate their good performance where there is an impact of lower attaining pupils on broader outcome measures. The importance of this measure is not fully supported by DFE performance tables which do not give the full narrative behind effective learning and teaching for children and young people that have SEND. Consequently some schools are not motivated towards developing excellent practice for learners with SEND across the curriculum.
- 1.4 The LA is working on strategies to hold schools to account on inclusivity but while this is welcomed by some teachers, it is recognised that holding schools to account is far from easy, as many schools are academies where the LA has no direct influence. A SEN inclusivity award has been suggested however concerns that these awards will further exacerbate demand on inclusive schools have been raised.
- 1.5 Parents strongly believe that mainstream teachers in particular need more knowledge of SEND. There is a lack of faith in the amount of funding available to meet need in mainstream schools which is driving parental demand for statutory assessment. Parent interviews have highlighted the desirability of the legal obligations that an EHCP provides.
- 1.6 Teachers and parents believe that the EHCP system is overly favourable to the more articulate and affluent parent rather than being equitable to all. Data within the LA shows that children and young people with an EHCPs are significantly more likely to be from more affluent areas of the county than those on SEN Support, (though both groups live in more deprived areas than those without any SEN) supporting the accusation that the process does indeed favour the well-educated middle class. Pupils with SEN are significantly more likely to live in the more deprived areas of the

LA. This is even more pronounced for the majority on SEN Support, with almost 7 in 10 of them living in more deprived areas.

- 1.7 There is also a suggestion that the decision to apply for an EHCP varies from school to school, depending on the school's population (including parents) and location as well as the expertise, capacity and attitude of the school's leadership and staff. Other parents are hard to reach, do not know their rights and can be too frightened of the system.
- 1.8 There is still insufficient analysis of the impact of poor quality first teaching. Children are identified as SEND in some schools as a result of being behind age related expectations. The addition of the D has also led to children who have medical needs only being included in SEND process and systems which has led parents to consider their child to have SEN when they do not. Diabetes is a good example of this
- 1.9 The first standard universal opportunity for identification of SEND is the 2 year check. However, this is not always feeding in to anything bigger. The Code of Practice only requires schools and setting to engage in the graduated approach and as such it is hard to set up sustainable systems in the health service regarding taking the role that the SENCo will take of coordinator.
- 1.10 Pre-school staff are often low paid and part time and may not be qualified and expert enough to diagnose SEND. In the main, pre-schools are operating in a commercial sector and with the Government drive for entitlement more children are taking up places.
- 1.11 A greater number of children are being recognised as having mental health problems; they are not eligible for an EHCP but are reported to be taking up large resources. Another key increase has been around anxiety and challenging behaviours. Mainstream schools do not always feel equipped to cope with the needs of these children; the capacity and fullness of schools makes them a poor environment for children who need control over their space and may become distressed when they don't have that. Schools are using internal exclusions or reduced timetables. These children are entitled to full time, quality education and when this becomes impossible there is an impact on the whole family as well as the child themselves.
- 1.12 Professionals feel that they are not always able to provide appropriate education but are instead "holding" children until an appropriate provision can be found. Even schools who aim to excel with SEND express frustration in upskilling staff, as they do not have the budget to cover the cost of training courses, as well as the extra staff needed to cover classes whilst teachers are training. There is work within the LA to develop an outreach support model from Special Schools.
- 1.13 There are some exceptional, creative ways of working and exemplary practice in the county and work is ongoing to develop systems and processes so that where there is excellent practice in schools or

clusters, schools are able to access support from a range of experts, not just rely on the county services.

2 The transition from statements of special educational needs and learning disability assessments to Education, Health and Care plans

- 2.1 Co-production was introduced as a key element of the new reforms. Parents and practitioners understood the changes and the intention of the reforms and were hopeful to work co-productively with parents, so the child and their family were always at the centre of the system. This has been a success across the LA with new statutory assessments. However the workload created by the transfer process made this new approach a real challenge and has tarnished some family's views as numbers prevented the LA working in the way it anticipated.
- 2.2 The LA treated each transfer as a 'full new assessment' gathering advice from all partners and working in partnership with families. The amount of work this created was unmanageable against the time frames and created tension between completing the assessment in the most person centred ways and making sure all Statements of SEN were transferred to timescales. This has caused much stress within the LA workforce where dedicated staff have felt caught between the service they wish to provide to a family and the statutory time frames.
- 2.3 Transfer Reviews lacked a sense of input and joint ownership from Health & Social Care, and schools saw the EHCP transfer primarily as an educational process. All parties (Education, Health and Social Care) have expressed frustrations with the others for not sending through information, for having to repeat requests and for not providing consistent levels of service. Parents expressed frustration about speaking to multiple people who have no shared knowledge of their transfer.
- 2.4 Independent Supporters were a successful and much used service during the transfer process. Joint working with families through workshops enabled a more consistent approach to supporting families and better experiences for young people.
- 2.5 Many formats of EHCP have been trialled and subsequent improvements made over the four years. This change in format has led to a variety of EHCPs in schools and has created an ongoing piece of work to ensure that earlier forms of EHCPs can be updated over the annual review cycle to bring them into line with current practice.

3 The level and distribution of funding for SEND provision

- 3.1 The HNB is not geared towards funding early intervention, but early intervention is key to preventing the level of statutory assessments increasing. Less than 2% of the budget is solely dedicated to Early Intervention schemes. The Early Intervention Educational Psychologists represent just 0.6% of the budget. Adding in the Family Solutions team brings this to 1.3%.
- 3.2 It is impossible to determine if HNB generates value for money at this time. Most goes to schools over which the LA has no visibility of accounts.
- 3.3 Value for money can only be judged against outcomes, and outcomes data is currently not sufficient to enable a judgement.
- 3.4 The cost of expensive independent school provision is a drain on the High Needs Block and restricts the opportunity for investment in SEND provision within the LA. There is inconsistent oversight, quality assurance and monitoring of placements and a number of providers have received poor Ofsted outcomes.
- 3.5 The EHCP system is full of incentives to continue plans but no rewards for successfully progressing students away from plans. The system itself has a number of perverse incentives built in. For example, having an EHCP also makes it possible for parents to claim certain benefits, such as DLA/PIP, tax credits or housing benefit, which can be a consideration for some parents. And whilst there is nothing in the Code of Practice that means automatically providing funding for an EHCP, there is an assumption amongst all stakeholders that it does. In a time where both schools and families budgets are squeezed there is little reason not to apply.
- 3.6 There are also few incentives to cease an EHCP. If anything, ending a plan can be a disincentive, as this can result in a loss of funding or benefits. Whilst there will always be children for whom lifelong support is needed, the system means there is no way to reward the schools that assist marginal cases to make enough progress to support children at SEN support. The annual review is often conducted by the school without attendance from LA officers. This means that those who would lose the most from ending the EHCP are the ones making the decision.
- 3.7 Support in schools remains variable. There are multiple issues with the first £6,000 - namely School SENCOs do not know they have it and if they accept they do have it there is great confusion about how it is spent. As this budget is delegated and not ring fenced it is not always clearly allocated to meet needs of SEND but generally allocated to TA support. TA support remains the main model for supporting children with SEND and this is despite the weight of evidence from Blatchford *et al* at IOE which demonstrates that the more TA hours has a negative impact on outcomes. Many schools are a long way behind recognising this and willing to engage in an alternative.

3.8A wider issue is that the system is described by families as 'one where a child needs to fail first' for funding to meet the child's needs to be given to a school.

4 The roles of and co-operation between education, health and social care sectors

4.1The LA has established a SEND Strategic Group to bring education, social care and health together, but it remains a challenge to ensure that Health understands and meets the requirements of the Children's Act in relation to SEND. The COP presents the ideal for SEND to be person centred assessment and fully jointly commissioned provision. The LA is falling short of this ideal to a certain extent.

4.2The multiple Care Commissioning groups are too stretched to provide the time or personnel to commit to full EHCP outcomes meetings; at least one has refused to attend any meetings for EHCP assessment since 2015 relying only on the documentation sent through such as patient notes. It is a challenge for the LA to manage parent expectations.

4.3The graduated approach in schools lacks a sense of input and joint ownership from Health & Social Care, and Schools see EHCPs and One Plans primarily as education tools. Parents express frustration that resolving an issue involves speaking to multiple people who have no knowledge of their case.

4.4It can be difficult for schools to access therapists and inconsistency across CCGs make the system more complicate for families, for example, speech and language therapy one CCG does not accept speech and language referrals beyond the age of seven but this varies across the other CCGs in the LA.

4.5Understanding what outcomes are seems to have been a significant stalling process as part of the reforms. While progress has been made in some areas, there are significant issues in understanding 'outcomes', and the steps we can take to meet them, especially across health and social care services.

4.6There is concern about early identification at preschool age and Head Teachers are increasingly admitting children into Reception who have undiagnosed Health issues and concerns. The LA is working with providers to ensure that pre-school issues are picked up and is looking at the correlation between GLD (good level of development) data and SEND.

4.7There has been a significant increase in the numbers of children with ASD. Some of the diagnoses from paediatricians are questionable, and the LA is working with health to reach consistency in relation to diagnoses. In some cases, evidence of joint assessment is limited and schools are not contacted for their views and knowledge of the child

before a diagnosis. It is felt that the expertise and knowledge of some GPs is out of date in relation to the SEND Code of Practice, and it is essential that the Department of Health ensures that all clinicians have up to date information about SEND.

4.8 There is concern about the number of children who are falling through the net where this is a gap between the available local provision and that which is offered by EWHMS at a more critical level. This is regarded as a safeguarding issue by many Head teachers.

4.9 Delivery of therapies across the county is disjointed and impacts upon parental confidence in the local area's ability to meet their children and young people's needs. As a result parents seek provision in the non-maintained sector and use SEND tribunals to secure a place. The LA has brought all its provision under a single provider and contract and a joint review of children's therapies is underway with health, education and social care.

5 Provision for 19-25-year olds, including support for independent living, transition to adult services and access to education, apprenticeships and work

5.1. The number of young people with SEND entering the workforce stands in line with national averages, but is clearly not ambitious enough. Too many young people can remain at Post 16 settings due to lack of alternative pathways.

5.2. Work is underway but takes time to have an effect and is not yet wide reaching. Under Preparing for Adulthood the LA is creating a new service which includes 'PfA Advisors' (who help young people make suitable choices that will lead them into jobs) and a new role called 'Employment Co-ordinators' whose job is to show employers what a valuable part of the workforce young people with disabilities can be.

5.3. The LA is offering training, work experience and employment opportunities throughout our organisation and placements are already underway. We are also asking our public sector partners (NHS, Police etc.) to do the same, and also those companies that we pay to provide services to our residents, before reaching out into the wider employment market. The plan is that these training and work experience opportunities lead to real, lasting jobs. We are also developing more flexible ways of offering work and employment to young people with SEND, through job carving (creating new roles which involve just the parts of the job that the young person can do) and social enterprise (using their skills to do pieces of work and still get paid, for those whom a regular job with an employer may not be best suited)

5.4. A Shared Lives service has been created which supports young people who need support or a place to live to move in with a Shared Lives

carer, sharing family and community life which can be a great stepping stone to living more independently for some young people.

5.5. Travel training remains a strength offered by the LA.

Recommendations

6. There remains tension between recognised pupil outcomes and the challenges of SEND, and it would be interesting to investigate how many schools with outstanding results (for example, 100% of children achieving expected or better) have significant numbers of pupils with SEND and/or EHC Plans. Sharing this data regionally and nationally would be welcomed.
7. Sharing evidence of successful methods and practice to both hold schools to account on inclusivity and to encourage the notion of 'fair share' would be welcomed. Support to understand how a SEND inclusivity award could be implemented without further exacerbating demand on already inclusive schools.
8. Wider focus on early intervention to challenge the notion that children and young people need to 'fail' in order to access the support they need in education, or that their lives need to be in crisis before they can access the help they need from Social Care or Mental Health services.
9. More clarity would be welcomed on the effective and creative use of Personal Budgets.
10. Case studies and evidence from initiatives that have been developed to create local education partnerships to help drive improvements in outcomes for children and young people with SEND; how to pool and use existing resources differently and creatively in clusters and local areas?
11. The recently announced extended trial for the tribunal to rule on health and care outcomes is a welcome change; for true accountability, there has to be a process to effect change and to distribute accountability.
12. A focus on integrated team working to support the re-inclusion of SEND students back into county.
13. What scope is there for LAs to introduce social enterprises? Are there case studies out there?

June 2018