

Written evidence submitted by Ambitious about Autism

## **Ambitious about Autism Response to**

### **“The impact of COVID-19 on education and children’s services”**

Sarah O’Brien

Participation and Policy Officer

Ambitious about Autism

[Sobrienquilty@ambitiousaboutautism.org.uk](mailto:Sobrienquilty@ambitiousaboutautism.org.uk)

Telephone 020 8815 5441

#### **Ambitious about Autism**

Autism is a lifelong developmental disability which affects one in 100 people in the UK. It affects the way a person communicates and how they experience the world around them.

Autism is described as a spectrum condition. This means that while autistic people, including those with Asperger's Syndrome, share certain characteristics, they will be highly individual in their needs and preferences.

Ambitious about Autism is the national charity for autistic children and young people. We provide services, raise awareness and understanding, and campaign for change. Through TreeHouse School, Ambitious College and the Ambitious about Autism Schools Trust we offer specialist education and support. Our mission is to make the ordinary possible for more autistic children and young people.

#### **Introduction**

We welcome this inquiry into the impact of COVID-19 on education and children’s services which have faced extreme disruption in the pandemic and had a detrimental impact on many areas of the lives of autistic children and young people. This disruption has affected teaching, auxiliary support services, qualifications, signposting and referrals, social development, transition within and between settings and provisions outlined in Education Health and Care plans.

#### **Executive Summary**

1. Autistic children and young people have had their education and social development disrupted. For some this will cause delays in their development or progression through education and ultimately into employment - delays that will be seen in the years after this pandemic.
2. Education settings have had to provide increased levels of support and deliver education in new and creative ways when face-to-face services could not be delivered. This change has had to happen quickly and for some has enabled a shift to more accessible ways of providing education or support, but this is not a universal experience. For others the move to home learning and removal of high level in-person support has meant that children and young people are unable to access their education or support. Home education does not work for all young people due to a variety of reasons including: parents unable to teach due to working responsibilities, digital poverty, inaccessible education plans or need for specialist support.

3. Future planning and working must now think about multiple modes of education and support to ensure that the needs of all can be met from the start. Many autistic children and young people may not feel comfortable going back to education or pursuing qualifications full-time with their peers. There must be an acknowledgement of the variety of ways that education can be delivered, and how services can learn from the experiences during COVID-19.
4. The Government must put children at the heart of the recovery including providing funding for early help services and public health; supporting innovation and integrated working, particularly with charities; dedicated financial support for children; support for early years settings and schools so attainment gains are protected; and unprecedented investment in children's mental health. This must be accompanied by a commitment to protect children facing additional challenges, like those with disabilities (including autism), asylum seekers, abuse victims and those from minority communities.

### **Response**

#### **1) The implementation of the critical workers policy, including how consistently the definition of 'critical' work is being applied across the country and how schools are supported to remain open for children of critical workers**

Education and children's services have applied critical worker policies as the policy has evolved during the pandemic. For many services this has not been a simple policy to enforce due to the need to risk assess children and young people who might be vulnerable, alongside those who might be children of critical or key workers. Schools have had to undertake additional work to ensure that they were safe and hygienic environments for vulnerable children and children of critical workers.

Many schools had to take on unexpected expenses in order to fulfil their risk assessments and provide the required environments for the aforementioned children. It is likely that many schools have not had the financial support soon enough to put in place increased COVID-19 safety measures and have struggled with staffing levels due to guidelines around self-isolating and shielding.

#### **2) The capacity of children's services to support vulnerable children and young people**

'Vulnerable' is a category that includes a large variety of children and young people who face increased risks and vulnerability to the effects of COVID-19. Within this grouping is autistic children and young people who may have different and intersecting factors that make them vulnerable<sup>1</sup>. Some autistic young people may have an Education, Health and Care plan which outlines their needs for additional support to access their education, some may have an additional mental health need<sup>2</sup> or be under the care of social services. Some children may also be autistic and the child of a key worker or have needs that can only safely be met in an education setting rather than at home.

Given the diversity of needs autistic children and young people may have, meeting their needs in a personalised way, and in new delivery methods is not an easy task. Those receiving on-site education may have different support in place due to staff illness, rota systems or shielding. This disruption in capacity of staff would likely have an impact on autistic children and young people who

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<sup>1</sup> <https://www.gov.uk/government/publications/coronavirus-covid-19-guidance-on-vulnerable-children-and-young-people/coronavirus-covid-19-guidance-on-vulnerable-children-and-young-people#identification-of-vulnerable-children-and-young-people>

<sup>2</sup> Simonoff et al (2008) DOI: [10.1097/CHI.0b013e318179964f](https://doi.org/10.1097/CHI.0b013e318179964f)

rely on routines and consistency in education. Some schools and education providers may have had to triage the risk of their vulnerable children and young people attending in-person provision with the education staff they can have on-site and learner numbers. This has meant that although a child or young person may have an Education, Health and Care plan and therefore be considered 'vulnerable', it has not always been possible to deliver the education package they are entitled to.

### **3) The effect of cancelling formal exams, including the fairness of qualifications awarded and pupils' progression to the next stage of education or employment**

For autistic children and young people, as with the general pupil population, there are a wide variety of assessments and qualifications that can be undertaken from Level 1 Functional Skills through to qualifications awarded in higher education. However, autistic children and young people may find the cancellation of formal exams and the change in planned education very difficult to process. Qualifications that have been awarded without practical assessment or completion of full curriculum may enable progression to further education or employment but the children and young people may not be adequately equipped with the practical skills or knowledge they need.

It is important to understand the impact of skills not being tested and reinforced, to build upon confidence of applying learning in future education, employment, or training. This will put autistic young people who may struggle with skill generalisation at a disadvantage amongst their peers who will more easily generalise and apply skills that they may have missed during the pandemic.

Currently fewer than 1 in 4 autistic young people go onto any form of education or training beyond school, and that only 16% of autistic adults are in full-time employment – a figure that has not changed for at least a decade<sup>3</sup>. Given these statistics, this already disadvantaged group are less likely to sustain progression to the next stage of education or employment following the COVID-19 pandemic.

### **4) Support for pupils and families during closures:**

Many education and children's services have had to quickly adapt to provide support to their pupils and their families during this time by putting in place enhanced services above and beyond their typical offer. Many services have been able to do this whilst others have struggled. For autistic children and young people and their families they have needed additional support in place of respite, social care and individualised education support they may have received before the lockdown period.

The Disabled Children's Partnership, a coalition of organisations focused on improving health and social care for disabled children and their families, conducted research<sup>4</sup> that showcased the impact of changes to support on children and families. For 76% of families of disabled children their support had completely stopped and 66%<sup>5</sup> who were seeking an assessment of their child's learning needs and further support had faced delays due to COVID-19.

<sup>3</sup> <https://www.autism.org.uk/get-involved/media-centre/news/2016-10-27-employment-gap.aspx>

<sup>4</sup> Disabled Children's Partnership (2020), Left In Lockdown <https://disabledchildrenpartnership.org.uk/left-in-lockdown/>

<sup>5</sup> Left In Lockdown page 13, <https://disabledchildrenpartnership.org.uk/wp-content/uploads/2020/06/LeftInLockdown-Parent-carers%E2%80%99-experiences-of-lockdown-June-2020.pdf>

The impact of delays and or the removal of services cannot be underestimated when considering autistic young people and their families. Often, the support they are receiving has been difficult to obtain and is key to the progress of their child and maintenance of a strong family household. Without the right educational, health or care support, families are struggling to cope, with the mental health and wellbeing of the families is greatly affected. Although educational settings are putting support in place where possible, it is rarely of the same level, consistency or scope as pre-pandemic.

Charities have been ensuring that vulnerable children and their families do not slip through the net. Through Ambitious about Autism's Learner and Family Support Service, operating across our special schools and college, we have seen a huge increase in support needs and have worked directly with families to fill the gap. Some examples include supporting:

- One of our college students who has close family members who are hospitalised with COVID-19. We are putting in place additional support from the team around him at home and at college whilst he copes with the absence of his primary carer.
- A single parent family with a young person who has behaviour that challenges. Their property is unsafe and the young person had no bed to sleep in. We urgently secured a new bed and repairs to the building from the local authority, as this was a safeguarding issue.
- A family where the parent is struggling with anxiety and depression and she is reluctant to leave the house. Her child is also struggling and the family needs some support with resources on mental health, signposting for health support and regular welfare calls to ensure that she has contact with the relevant health professionals and to provide her with someone to talk to.
- A Mum of two children with special educational needs. She had been suffering from mental health problems prior to Coronavirus, and since the start of lockdown had felt too anxious to take her children out at all. Our support service has been providing her with additional learning resources and working collaboratively with the school team to help her keep the children entertained and engaged in learning. We have also supported her on managing depression and anxiety, and we are helping her to access online cognitive behaviour therapy. After a couple of weeks of our support, Mum has able to take her children out to the park for the first time in 7 weeks. We will continue to provide regular welfare calls and other support as needed.

**a) The consistency of messaging from schools and further and higher education providers on remote learning**

There has not been consistency of messaging for students accessing different providers as national guidance has been applied individually. The support and messaging has been reliant on the existing resources and ability to develop support within the existing frameworks of each education provider. Guidance was issued publicly at the same time as being made available to education providers which meant putting in place the necessary arrangements and communicating to parents and pupils in a timely way very difficult.

Although the Government protected schools' budgets and confirmed that local authorities must pay agreed fees for special school places, many schools were already running with limited or deficit

budgets with no flexibility to incur additional costs. This pandemic has highlighted an inequality amongst resources within and to the education sector.

For many within education the move to remote learning has been difficult, especially during the transitional period of face-to-face to home-based learning. This is due in part to multiple options of technology, lack of digital access and lack of access to in-person teaching, particularly for those who require additional learning support. Procurement of remote learning provision has relied on education provider choice which may not reflect the full accessibility needs of the cohort they are teaching. Not all platforms have the accessibility features that autistic or disabled people need to access their learning and teaching children and young people and their families to use technology remotely also raises barriers.

The move to remote learning has also highlighted the 'digital divide' and that many families do not have access to suitable technology in order to access online education. Although some providers have supplied technology to their pupils – for example at Ambitious about Autism by raising emergency funds to do this - many pupils across the country are still without the hardware or broadband access they need in order to benefit from remote learning. Going forward, there needs to be more thought on how remote learning can be delivered to those without equipment or funds, or there risks being a further attainment divide amongst pupils.

For many education providers this pandemic has caused them to 'step up' the support that they provide and how they talk about the support they can offer. For many schools this builds and expands upon existing resource such as family support teams and pastoral care. Within further and higher education this might be increased and explicit support about the role of wellbeing teams, student services or the support within departments themselves. There is differentiation in how communication occurs in different settings and the mode of communication that works best with different families and young people. Education services have had to step up communication methods and clarity in an ever-changing time and with very little guidance.

#### **b) Children's and young people's mental health and safety outside of the structure and oversight of in-person education**

The National Youth Agency report "Out of Sight?"<sup>6</sup> highlighted that many mental health and referral services were facing reduced referrals during the earlier parts of the pandemic and subsequent lockdown that would typically have been made by education, youth, health or social work staff. Where children and young people were typically seen by multiple professionals across domains in the time of in-person health visiting, education and visits from external agencies, the reduction in this and the inequality of access to support services have put many vulnerable children and young people further at risk.

Effectively safeguarding children and young people is much harder when they are not physically seen by any service. Local authorities and individual education providers have been calling and texting to check in on the most vulnerable young people and their families. But that has been variable across providers and those children with hidden or new vulnerabilities arising from the pandemic may have been missed. Ambitious about Autism runs special schools and colleges and every pupil or learner

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<sup>6</sup> National Youth Agency (29 April 2020), <https://nya.org.uk/covid-response-report/>

has an Education, Health and Care Plan. We have kept in regular contact with all pupils and learners, logging and acting on any concerns with the support of our Learner and Family Support Service which we expanded to respond to the pandemic.

Without the oversight of the education system or children's services, children and young people are at increased risk of adverse mental health and negative mental health outcomes due in part to professionals having less visibility of these issues as they escalate. Autistic children and young people already have greater need for support with their mental health than their peers. Four in every five autistic children and young people will experience mental health problems.<sup>7</sup>

The National Child Mortality Database report<sup>8</sup> highlights that the reduction in access to education and support services has meant for some young people there have been fatal or life-altering consequences attributed to this disruption. For many autistic children and young people, the lack of the structure and oversight that education usually provides has worsened previous mental health concerns with the withdrawal of trusted supports and routine.

Many children and young people are facing increased mental health crises due to detachment from peers, anxiety about education and progression, unavailability of mental health support and increased waiting lists in response to health service recovery.

At Ambitious about Autism we have seen this through our online peer support sessions for autistic young people aged 16-25. We introduced these as an immediate crisis response to the pandemic and have expanded them as demand has grown. Young people have reported that this service has supported positive mental health and given them a lifeline to talk to others who are experiencing similar situations. We have been able to signpost to specialist mental health services, and provide early, preventative help.

Education and children's services play a key role in supporting the mental health and wellbeing of all children and young people. but have an increased duty to those who are already vulnerable or at risk of increased vulnerability without adequate support, such as autistic children and young people.

### **c) The effect on apprenticeships and other workplace-based education courses**

Many autistic young people and those with a learning disability, or both, may undertake qualifications that are work-based and have supported teaching alongside them, such as a traditional apprenticeship or supported internship. A supported internship is an employability course focused on providing those with an Education, Health and Care plan a structured, blended work and education course which builds workplace skills, functional qualifications and the transition beyond the programme into paid work.

For workplace-based courses such as supported internships, many of these have suffered huge impacts as both teaching and working would often occur on-site in the place of employment. In London, the largest providers of supported internships are hospital trusts and hotels, both of which

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<sup>7</sup> Ambitious about Autism (2017) Know Your Normal

[https://www.ambitiousaboutautism.org.uk/sites/default/files/youth-participation/toolkit/Ambitious-about\\_autism-know-your-normal-full-report.pdf](https://www.ambitiousaboutautism.org.uk/sites/default/files/youth-participation/toolkit/Ambitious-about_autism-know-your-normal-full-report.pdf)

<sup>8</sup> National Child Mortality Database (7 July 2020), <https://www.ncmd.info/2020/07/09/suicide-covid/>

have had to either close down or lock down. Providers have had to transition quickly to home learning and adapt work placements where possible to home working. However, this is not always an appropriate replacement for those who are part of a supported internship cohort as they often need additional support as outlined in their Education, Health and Care plan. This has had a detrimental effect on those who are working to functional qualifications in English and Maths and who may graduate from supported internships without being fully equipped with the necessary skills and learning to progress into employment despite the hard work of support staff. By graduating without having accessed the full internship programme, autistic children and young people will be missing out on vital aspects of their education that will support them in their futures. For example, the cohort of supported interns through Ambitious about Autism were not able to access their third rotation in the Whittington Hospital. For a programme which lasts only a year, the interns have missed nearly five months of the proposed work and study plan.

For autistic young people undertaking apprenticeships who have had learning and work moved from their place of employment to home-learning, this has had a negative impact on their skill attainment and application, as apprenticeships are typically skill-based learning environments that cannot be equally matched by home-working. Where apprenticeships have been able to continue through home working, those undertaking the apprenticeship might be less inclined to reach out for additional support that they require if their provider cannot spot that they need help. Some autistic young people who access our online peer support sessions have confirmed that their apprenticeships were cancelled for the year as no suitable home-based alternative could be made.

##### **5) The effect on disadvantaged groups, including the Department's approach to free school meals and the long-term impact on the most vulnerable groups (such as pupils with special educational needs and disabilities and children in need)**

Children and young people with SEND have faced a mixed response to the changes that coronavirus has brought in. For many this was a reduction in anxiety and school refusal as they no longer had to physically attend the school building or navigate difficult relationships with peers. On the other hand, for many it has been harder due to the lack of access to provision outlined in the Education, Health and Care plan for accessible education or the additional provisions such as learning support, occupational therapy or speech and language therapy.

For autistic children and young people, the long-term impact of this period will have a negative impact on their education, future progression and quality of life. This is primarily due to the increased impact of change and uncertainty which autistic people are extensively noted in research literature to struggle with<sup>9</sup>. Intolerance of uncertainty has meant that autistic people are more impacted by the pandemic which is a highly uncertain situation in itself, but also the uncertainty of government guidance for children and young people with SEND. The guidance and support has been applied by each education setting separately based on the local authority, education setting, staff availability and the temporary changes to SEND legislation.

The disruption to their education and routine has had a psychological impact on autistic children and young people in a time that they are less able to access psychological or social support.

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<sup>9</sup> Boulter et al (2014) DOI 10.1007/s10803-013-2001-x

We cannot underestimate the long term scar the pandemic may leave on all aspects of autistic children and young people's lives, in particular their mental health and progression in education and employment. Ambitious about Autism is one of hundreds of organisations that have signed up to call on Government to put children at the heart of the recovery<sup>10</sup>. That should include: funding for early help services and public health; supporting innovation and integrated working, particularly with charities; dedicated financial support for children; support for early years settings and schools so attainment gains are protected; and unprecedented investment in children's mental health. This must be accompanied by a commitment to protect children facing additional challenges, like those with disabilities (including autism), asylum seekers, abuse victims and those from minority communities.

**6) What contingency planning can be done to ensure the resilience of the sector in case of any future national emergency**

The sector and individual education providers are in a vulnerable situation. This pandemic has highlighted an inequality amongst resources within and to the education sector. Continued need to respond to the ongoing pandemic, or any future national emergency, before the sector has had a chance to rebuild, and have reinvestment, will have a devastating impact on children and young people who have already had an unprecedented gap in their education and wider support. This will particularly be the case for the most vulnerable children, including autistic children and young people.

In assessing future resilience local emergencies should also be considered. Many schools, other education providers or indeed local authorities would struggle to deal with any further emergencies e.g. damage to buildings due to fire/flood, or further local outbreaks. Schools are already stretched for accommodation for all pupils given the need to maintain Covid-safe environments and losing all or part of the use of their buildings could severely impact the ongoing provision of education. Business Continuity Plans must be revised in light of the current situation.

As highlighted in our response above, the learnings from how we support the most vulnerable children and young people and how they can easily slip through the net without the universal and targeted services, must be built into future service design and delivery at all levels.

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<sup>10</sup> <https://www.ncb.org.uk/childrenattheheartofrecovery>