Appendix 2

Support and aspiration: A new approach to SEN and disability

A consultation

Department for Education

9 March 2011

Hampshire
County Council

1. Early identification and assessment

Chapter summary:

1.1 Identifying children's support needs early is vital if they are to thrive, and enables parents and professionals to put the right approach in place quickly. Graham Allen's review of early intervention highlighted the value of intervening as soon as possible, not just for children and their families, but also for wider society.

1.2 Too often, the particular support that children and their families require is put in place needlessly late. Although some impairments are normally identified at birth or soon after, other types of need emerge as children grow up. Not knowing why children are developing differently can be tremendously stressful for the child and for their parents. And even when needs have been identified, parents tell us that it can feel like a struggle to get the right support for their family from education, health and social care services. It can be slow and complicated, with different services working in isolation and each having its own approach.

1. Early identification and assessment continued/…

1.3 We must put in place a system which works well for every child and every family. The proposals in this chapter are intended to ensure high quality early identification and intervention for all children where they need it, such as the health and development review for children aged between 2 and 2½ years, as well as effective integrated support for children with the most complex needs. Our proposals would mean that:

- professionals from health services, such as health visitors, and from early years settings work with parents to assess the development of all children to clarify where they need additional support or a different approach;
- high quality early education and childcare is accessible to all children; and

1. Early identification and assessment continued/…

1.3 continued/…

- by 2014, children and young people who would currently have a statement of SEN or learning difficulty assessment will have a single assessment process and ‘Education, Health and Care Plan’ for their support from birth to 25. The new plan will afford parents the same statutory protection as the statement of SEN. All the services on which the child and their family rely would work together with the family to agree an ‘Education, Health and Care Plan’ which reflects the family’s needs and ambitions for the child’s future covering education, health, employment and independence. The plan will be clear about who is responsible for which services, and will include a commitment from all parties across education, health and social care to provide their services.

1. Early identification and assessment continued/…

1.4 To work towards this:

- we will test how to reform radically the statutory SEN assessment and statement. Local assessment and plan pathfinders will explore the best replacement, including whether the voluntary and community sector could coordinate assessment and bring greater independence to the process; and
- before introducing the new single assessment process and 'Education, Health and Care Plan', we intend to reduce the time the current statutory assessment process takes and explore how to tackle delays in the provision of advice for the statutory assessment.

Questions from Chapter 1

1. How can we strengthen the identification of SEN and impairments in the early years, and support for children with them?
2. Do you agree with our proposal to replace the statement of SEN and learning difficulty assessment for children and young people with a single statutory assessment process and an 'Education, Health and Care Plan', bringing together all services across education, health and social care?
3. How could the new single assessment process and 'Education, Health and Care Plan' better support children's needs, be a better process for families and represent a more cost-effective approach for services?
4. What processes or assessments should be incorporated within the proposed single assessment process and 'Education, Health and Care Plan'?

Questions from Chapter 1 continued/.....

5. What is the potential impact of expanding the scope of the proposed single assessment process and plan beyond education, health, social care and employment?
6. What role should the voluntary and community sector play in the statutory assessment of children and young people with SEN or who are disabled? How could this help to give parents greater confidence in the statutory assessment process?
7. How could the proposed single assessment process and 'Education, Health and Care Plan' improve continuity of social care support for disabled children?
8. How could the arrangements for provision of health advice for existing statutory SEN assessments be improved?
9. How can we make the current SEN statutory assessment process faster and less burdensome for parents?

2. Giving parents control

Chapter summary:

2.1 Early intervention from all the services on which families rely is essential, but the effectiveness of this support is undermined if it doesn't reflect each family's unique circumstances. Parents know their child best. As well as giving their own love and care, parents rely on health services, early years settings, schools and other people to help look after their child and help him or her have a happy childhood and fulfil his or her potential. Disabled children and children with SEN may require a different approach in these health and education settings to their peers, or extra support from social care or specialist services. It is crucial to families that these services work well together and that parents are empowered to make decisions about their child. Unfortunately, this is not what many families experience.

2. Giving parents control continued/…

2.2 Children, young people and their parents have a variety of different circumstances, but many families share a concern that the system can feel impenetrable, bureaucratic and inefficient, and does not sufficiently reflect their family life. Parents may feel that their choices are limited and their options don’t always meet the basic needs of their child. This is particularly the case where a child relies on specialist services or equipment – such as incontinence pads, computer software and wheelchairs – to support their physical and communication needs to help improve the quality of their life. These problems may also be compounded by disadvantage, and some parents might have poor health, live in poverty, or have difficult family circumstances on top of juggling a range of support for their child.

2. Giving parents control continued/…

2.3 Our aim is to give parents more control over support for their child and family. This will mean ending the frustration, complexity and confrontation inherent in today's system, which in itself can undermine family life. The proposals in this chapter are intended to extend parents' influence, build their confidence in the system and minimise its adversarial nature, and would mean that:

- local authorities and other local services communicate a clear local offer for families to clarify what support is available and from whom;
- parents have the option of personalised funding by 2014 to give them greater control over their child's support, with trained key workers helping them to navigate different services;
- parents have access to transparent information about the funding which supports their child's needs;
- parents of disabled children continue to have access to a short break from caring while their child enjoys activities with their peers;
- parents have a clear choice of school; and
- if local authorities and parents disagree, they always try mediation first, to resolve problems in a less adversarial way than having to take their case to the Tribunal.

2. Giving parents control continued/...

2.4 As first steps towards this aim:

- local authorities and health services will explore how to extend the scope of personalised funding; and
- we will give parents the right to express a preference for any state-funded school, including Academies and Free Schools.

Questions from Chapter 2

10. What should be the key components of a locally published offer of available support for parents?
11. What information should schools be required to provide to parents on SEN?
12. What do you think an optional personal budget for families should cover?
13. In which ways do you think the option of a personal budget for services identified in the proposed 'Education, Health and Care Plan' will support parents to get a package of support for their child that meets their needs?

Questions from Chapter 2 continued/.....

14. Do you feel that the statutory guidance on inclusion and school choice, *inclusive Schooling,* allows appropriately for parental preferences for either a mainstream or special school?
15. How can we improve information about school choice for parents of children with a statement of SEN, or new ‘Education, Health and Care Plan’.
16. Should mediation always be attempted before parents register an appeal to the First-tier Tribunal (SEN and Disability)?
17. Do you like the idea of mediation across education, health and social care? How might it work best?

3. Learning and achieving

Chapter summary:

3.1 Parents' confidence that their child's needs are being met is vital to making the system feel less adversarial. A central piece of this jigsaw is the capacity and commitment of the education system to give every child and young person the chance to succeed. Every child, whether in a mainstream or special setting, deserves a world-class education to ensure that they fulfil their potential. Everyone who works with disabled children and children with SEN should have high expectations of them and the skills to help them to learn.

3.2 But the system doesn't always work in the way it should for disabled children and young people and those with SEN. Too many face significant barriers to their progress and achieve less well than their peers at school and in further education. Disabled children and children with SEN are more likely to be bullied or excluded than their peers. They also tell us that they want to be educated by people who understand their impairments, without fear of being stigmatised by their peers and in an environment where poor behaviour is not tolerated.

3. Learning and achieving continued/...

3.3 To provide the best opportunities for all children and young people we must confront the weaknesses of our education system. Children's needs should be picked up as early as possible, but teachers tell us that they have not always had training to identify children's needs, or to provide the right help. Head teachers have been overwhelmed with top-down initiatives rather than having the freedom to drive improvements.

3.4 Previous measures of school performance created perverse incentives to overidentify children as having SEN. There is compelling evidence that these labels of SEN have perpetuated a culture of low expectations and have not led to the right support being put in place.

3. Learning and achieving continued/…

3.5 In our Schools White Paper, The Importance of Teaching, we set out our vision to match the best education systems in the world. Building on that, our proposals in this Green Paper will mean that:

- teachers and other staff in schools and colleges are well trained and confident to: identify and overcome a range of barriers to learning; manage challenging behaviour; address bullying; and intervene early when problems emerge;
- schools will have additional flexibility to support the needs of all pupils, and will have additional funding to support disadvantaged pupils through the pupil premium;

3. Learning and achieving continued/…

3.5 continued/…

- teachers feel able to identify effectively what a child needs to help them to learn and to plan support to help every child progress well, reflecting the specific needs of children with SEN and those who may just be struggling with learning and need school-based catch-up support which is normally available;
- parents have the information they need about how the school is supporting their child;
- schools are more clearly accountable to parents, governors and Ofsted; and
- special schools share their expertise and services to support the education, progress and development of pupils in other special and mainstream schools, leading to a greater choice of specialist provision.

3. Learning and achieving continued/…

3.6 To work towards this:

- we intend to tackle the practice of over-identification by replacing the current SEN identification levels of School Action and School Action Plus with a new single school-based SEN category for children whose needs exceed what is normally available in schools; revising statutory guidance on SEN identification to make it clearer for professionals; and supporting the best schools to share their practices. This will help teachers to spot quickly and accurately any barriers to learning and provide the right support to help each child progress;
- we will introduce an indicator in performance tables which will give parents clear information on the progress of the lowest attaining pupils;
- starting with those judged by Ofsted to be outstanding, all maintained special schools will in due course have the opportunity to become Academies; and
- parents and members of local communities will be able to establish new special Free Schools.

Questions from Chapter 3

18. How can we ensure that the expertise of special schools, and mainstream schools with excellent SEN practice, is harnessed and spread through Teaching Schools partnerships?
19. How can we ensure that we improve SEN expertise, build capacity and share knowledge between independent specialist colleges, special schools and colleges?
20. How can we continue to build capacity and SEN specialist skills at each tier of school management?
21. What is the best way to identify and develop the potential of teachers and staff to best support disabled children or children with a wide range of SEN.
22. What is the potential impact of replacing School Action and School Action plus and their equivalents in the early years with a single category of SEN in schools and early years settings?

Questions from Chapter 3 continued/.......

23. How could changing the school – and early years setting – based category of SEN embed a different approach to identifying SEN and addressing children’s needs?
24. How helpful is the current category of BESD in identifying the underlying needs of children with emotional and social difficulties?
25. Is the BESD label overused in terms of describing behaviour problems rather than leading to an assessment of underlying difficulties?
26. How could we best ensure that the expertise of special schools in providing behaviour support is harnessed and shared?
27. What are the barriers to special schools and special Academies entering the market for alternative provision?

Questions from Chapter 3 continued/.......

28. What are the ways in which special Academies can work in partnership with other mainstream and special schools and Academies, and other services, in order to improve the quality of provision for pupils with SEN and disabilities?
29. What are the barriers to special Academies becoming centres of excellence and specialist expertise that serve a wider, regional community and how can these be overcome?
30. What might the impact be of opening up the system to provide places for non-statemented children with SEN in special Free Schools?
31. Do you agree with our proposed approach for demonstrating the progress of low attaining pupils in performance tables?
32. What information would help parents, governors and others, including Ofsted, assess how effectively schools support disabled children and children with SEN

4. Preparing for adulthood

Chapter summary:

4.1 By 2015, all young people will continue in education or training until the age of 18. Schools and colleges play a key role in helping young people make successful transition to adulthood, but young people also need wider opportunities and support to make the most of their future and give them the best chance of a fulfilling adulthood with employment, good health and independence. However, many young people who are disabled or who have SEN can face additional challenges during their teenage years. Too often the opportunities and support available to disabled young people and young people with SEN fall short of what they need to make a successful transition to adult life.

4. Preparing for adulthood continued/…

4.2 Like school-aged children, young people who are disabled or who have SEN and their parents tell us that to get the help they need they have to cope with disjointed and confusing assessment processes from their local authority, school or college and health providers. Too often, professionals working with these young people are not encouraged to focus on young people's ambitions for adulthood and how best to help them prepare. Such poor planning of support is exacerbated by a lack of choice and opportunities for young people: for example, a limited choice of entry-level courses in further education that do not build on what has gone before, or prepare young people for life and work; poor quality work experience; and a lack of supported employment opportunities to help them prepare for, find and retain work. In addition, the transition from children's to adult health services is often badly coordinated, which can lead to a deterioration in young people's health.

4. Preparing for adulthood continued/…

4.3 Our goal is for disabled young people and young people with SEN to have the best opportunities and support so that as far as possible they can succeed in education and their careers, live as independently and healthily as they are able to and be active members of their communities. For a small number of young people, independent living may not be possible, and their families may be anxious about their ongoing care responsibilities. For these young people, we want to ensure the best quality of life with support for them to fulfil their potential and support for their parents and carers.

4.4 We recognise the challenge of realising our ambitions, and we will take forward a programme of action across government and with local partners, setting out more detail by the end of this year, so that by 2015 disabled young people and young people with SEN will have:

- early and well-integrated support for, and advice on, their future as part of the proposed birth to 25 single assessment process and 'Education, Health and Care Plan', spanning education, health, social care, and support into employment;

4. Preparing for adulthood continued/…

4.4 continued/…

- access to better quality vocational and work-related learning options to enable young people to progress in their learning post-16;
- good opportunities and support in order to get and keep a job; and
- a well-coordinated transition from children’s to adult health services, and we will explore the feasibility of annual health checks from GPs for all disabled young people from the age of 16.

Questions from Chapter 4

33. What more can education and training providers do to ensure that disabled young people and young people with SEN are able to participate in education or training post-16?
34. When disabled young people and young people with SEN choose to move directly from school or college into the world of work, how can we make sure this is well planned and who is best placed to support them?
35. Do you agree that supported internships would provide young people for whom an apprenticeship may not be a realistic aim with meaningful work opportunities? How might they work best?
36. How can employers be encouraged to offer constructive work experience and job opportunities to disabled young people and young people with SEN?

Questions from Chapter 4 continued/.....

37. How do you think joint working across children’s and adult health services for young people aged 16 to 25 could be improved?

38. As the family doctor, how could the GP play a greater role in managing a smooth transition for a disabled young person from children’s to adult health services?

39. Do you agree that our work supporting disabled young people and young people with SEN to prepare for adulthood should focus on these areas: ensuring a broad range of learning opportunities; moving into employment; independent living; and transition to adult health services? What else should we consider?

5. Services working together for families

Chapter summary:

5.1 The reforms we set out in this Green Paper aim to provide families with confidence in, and greater control over, the services that they use and receive. For too many parents, their expectations that services will provide comprehensive packages of support that are tailored to the specific needs of their child and their family are not matched by their experiences, just as frontline professionals too often are hampered and frustrated by excessively bureaucratic processes and complex funding systems.

5.2 Rather than directing change from Whitehall, we want to make it easier for professionals and services to work together, and we want to create the conditions that encourage innovative and collaborative ways of providing better support for children, young people and families. The proposals in this chapter would mean that:

- by developing stronger local strategic planning and commissioning arrangements, local authorities and local health services will play a pivotal role in ensuring that children and young people with SEN or who are disabled receive high quality support, and that parents are able to make informed choices about what is right for their family;

5. Services working together for families continued/…

5.2 continued/…

- frontline professionals will have the freedom to work together to develop better services for children, young people and families; and
- the way in which services for children and young people with SEN or who are disabled are funded will facilitate integrated and collaborative approaches by local professionals, be more transparent to parents, and secure better value for money.

5.3 To work towards this we propose to:

- work with the health sector and with the new Health and Wellbeing Boards to consider how the needs of children and young people with SEN or who are disabled can best be taken into account through the Joint Strategic Needs Assessment, joint health and wellbeing strategies, guidelines and standards from the National Institute for Health and Clinical Excellence (NICE), and health service outcomes frameworks;

5. Services working together for families continued/…

5.3 continued/…

- work with the GP consortia pathfinders to explore the best ways of providing support for the commissioning of healthcare services for children and young people with SEN or who are disabled and their families;
- reduce bureaucratic burdens by simplifying and improving the statutory guidance for all professionals working with children and young people from birth to 25 with SEN or who are disabled so that it is clear, accessible and helpful, and withdrawing guidance that does not provide useful support to professionals;
- work with the educational psychology profession and local commissioners to review the future training arrangements for educational psychologists;

5. Services working together for families continued/…

5.3 continued/…

- encourage greater collaboration between local professionals and services and across local boundaries;
- extend the freedom and flexibility with which funding can be used locally;
- provide targeted funding to voluntary and community sector organisations that have a strong track record of delivering high quality services, and publish a national SEN and disabilities voluntary and community sector prospectus that will set out the key areas in which we will make further funding available to voluntary and community sector organisations;

5. Services working together for families continued/…

5.3 continued/…

- work with a group of local authorities to explore whether and how a national banded framework for funding provision for children and young people with SEN or who are disabled could improve transparency to parents while continuing to allow for local flexibility; and
- explore how the different funding arrangements for special educational provision pre-16 and post-16 might be aligned more effectively so as to provide a more consistent approach to support for children and young people from birth to 25.

Questions from Chapter 5

40. We have identified three core features of the role of local authorities in supporting children and young people with SEN or who are disabled and their families: strategic planning for services, securing a range of high quality provision, and enabling families to make informed choices and exercise greater control over services. Do you agree that these are the three core features of the role of local authorities in supporting children and young people with SEN or who are disabled and their families, or are there others?

41. How can central government enable and support local authorities to carry out their role effectively?

42. What would be the best way to provide advice to GP consortia to support their commissioning of services for children and young people with SEN or who are disabled and their families?

Questions from Chapter 5 continued/………

43. What would be the most appropriate indicators to include in the NHS and public health outcomes frameworks in the future to allow us to measure outcomes for children and young people with SEN or who are disabled?
44. What are the ways in which the bureaucratic burdens on frontline professionals, schools and services can be reduced?
45. In addition to community nursing, what are the other areas where greater collaboration between frontline professionals could have the greatest positive impact on children and young people with SEN or who are disabled and their families?
46. What more do you think could be done to encourage and facilitate local services working together to improve support for children with SEN or who are disabled?

Questions from Chapter 5 continued/………

47. How do you think SEN support services might be funded so that schools, Academies, Free Schools and other education providers have access to high quality SEN support services?

48. What are the innovative ways in which new models of employee-led organisations, such as mutuals and cooperatives, could improve services for children and young people with SEN and their families?

49. In addition to their role in the assessment process, what are the innovative ways in which educational psychologists are deployed locally to support children and young people with SEN or who are disabled and their families?

50. How do you envisage the role and service structures of educational psychologists evolving to meet local demands?

Questions from Chapter 5 continued/………

51. What are the implications of changes to the role and deployment of educational psychologists for how their training is designed and managed?
52. What do you think can be done to facilitate and encourage greater collaboration between local authorities?
53. What do you think are the areas where collaboration could have the greatest positive impact on services for children, young people and families?
54. How do you think that more effective pooling and alignment of funding for health, social care and education services can be encouraged?
55. What are the ways in which a Community Budget approach might help to improve the ways in which services for children and young people with SEN or who are disabled and their families are delivered?

Questions from Chapter 5 continued/………

56. What are the ways in which we could introduce greater local freedom and flexibility into the ways in which funding for services for children and young people with SEN or who are disabled is used?
57. What are the areas where the voluntary and community sector could have the greatest positive impact on services for children and young people with SEN or who are disabled and their families, and what are the ways in which we can facilitate this?
58. How do you think a national banded funding framework for children and young people with SEN or who are disabled could improve the transparency of funding decisions to parents while continuing to allow for local flexibility?
59. How can the different funding arrangements for specialist provision for young people pre-16 and post-16 be aligned more effectively to provide a more consistent approach to support for children and young people with SEN or who are disabled from birth to 25?