

**AGENDA MANAGEMENT SHEET**

**Name of Committee** Children and Young People Overview and Scrutiny Committee

**Date of Committee** 8 June 2011

**Report Title** SEN Green Paper

**Summary** This report details the SEN Green Paper Consultation Questions and asks for comments which will be reported to Cabinet on 16.06.11 and included in the LA response to the Department for Education.

**For further information please contact:** Jessica Nash  
Assistant Head of Service, SEN and Inclusion  
Tel: 01926 742480  
jessicanash@warwickshire.gov.uk

**Would the recommended decision be contrary to the Budget and Policy Framework? [please identify relevant plan/budget provision]** No

**Background papers**

**CONSULTATION ALREADY UNDERTAKEN:**

Details to be specified

Other Committees  .....

Local Member(s)  .....

Other Elected Members  CYP&F O&S Chair & Vice-Chair  
Cllr June Tandy  
Cllr John Ross

CYP&F O&S Spokespersons  
Cllr Peter Balaam  
Cllr Carolyn Robbins

Cabinet Member  For information:

Cllr Heather Timms

- Other Cabinet Members consulted  .....
- Chief Executive  .....
- Legal  Fay Ford "no comments"
- Finance  .....
- Other Strategic Directors  .....
- District Councils  .....
- Health Authority  .....
- Police  .....
- Other Bodies/Individuals  Jane Pollard, Overview and Scrutiny Manager

**FINAL DECISION** **NO**

**SUGGESTED NEXT STEPS:**

Details to be specified

- Further consideration by this Committee  .....
- To Council  .....
- To Cabinet  Cabinet 16.06.11  
WCC Response to SEN Green Paper
- To an O & S Committee  .....
- To an Area Committee  .....
- Further Consultation  .....

## Children and Young People Overview and Scrutiny Committee – 8 June 2011

### SEN Green Paper

#### Recommendation:

That members:

- i. consider the proposal that the Local Authority volunteers as a pathfinder with a focus on effective assessment of special educational needs and disability;
- ii. consider the issues raised in the Consultation Questions as part of a wider discussion with parents and teachers on 8<sup>th</sup> June 2011, and that the Overview and Scrutiny Committee then makes recommendations to Cabinet about the response to the Department of Education.

#### 1. Purpose

- 1.1 The purpose of this report is to consider the SEN Green Paper: 'Support and Aspiration: a new approach to special educational needs and disability' Consultation Questions, and to contribute comments which will be included in a Cabinet Report for 16.06.11, and which will then form the Local Authority (LA) response to the Department for Education (DfE).

#### 2. Introduction

- 2.1. The SEN Green Paper 'Support and Aspiration: a new approach to special educational needs and disability' provides the opportunity for national consultation up to 30 June 2011. This Green Paper outlines proposed changes to support the arrangements for children, young people and their families with special educational needs and/disability (SEN/D). There are 59 consultation questions attached as **Appendix A**.
- 2.2 The LA is collating responses from across stakeholders to submit to the DfE. This includes school based and LA professionals, as well as a sample of parent/carer and young people via established forums.
- 2.3 Some of the main areas for change include:
  - Revising the local offer to reflect overall changes in the educational landscape and to publish this information for easy access and understanding by families;

- A single school based SEN category (rather than the Code of Practice 2001 categories of School Action, School Action Plus and Statement of Educational Need);
- A single 'Education, Care and Health Plan' supported by coherent across agency involvement, as well as support from the community and voluntary sectors;
- Confirming parental preference for provision placement for SEN/D children within maintained, Academy, Free School and specialist settings;
- Practising greater mediation prior to any legal appeal processes;
- The opportunity of a Personal Budget for families, with support from a key worker.

2.4 There are two main areas for consideration: the opportunity to register our interest with the DfE as a pathfinder and the LA's response to the consultation questions.

### 3. Pathfinder Status

3.1 The DfE is inviting LAs to volunteer as pathfinders. Officers are in the process of clarifying the process for registering interest: effective assessment of SEN/D would contribute to improved learning experiences and thereby raise attainment. Effective SEN/D assessment informs specialist provision placement.

3.2 There would be minimal resource implications in pursuing this pathfinder. The model is to work with a sample of volunteer schools, and Academies if they are willing to engage. The aim is to establish what already works well in existing approaches for identifying and assessing SEN/D and to extend the effectiveness of those approaches by making any necessary changes.

3.3 This pathfinder development work can be supported by some of the current development time that exists within LA support service staff; it is likely that some additional monies would be needed to provide 'cover time' for school based staff.

3.4 Being a pathfinder requires a detailed research plan which would specify the actual resources required. This could be drafted if it is felt that it is worth pursuing. Such a project could:

- support improved pupil outcomes in participating schools/Academies, by ensuring more effective identification of need and inform provision;
- provide a clear overview of improved systems to disseminate locally;
- indicate some commissioning priorities across education, care and health (where multi agency involvement was required to support the SEN/D needs identified);
- provide Pathfinder feedback to the DfE.

### 4. Consultation questions

4.1 The questions fall into broad areas and a summary of the Consultation Questionnaire is attached as **Appendix B**:

#### 4.2 Some concurrent issues to consider may include:

- the role of governors;
- the revised Ofsted framework, being piloted: increased focus on leadership and management, focus on progress and attainment of lower 20% of pupils,
- the Pupil Premium and responsibility of schools to demonstrate the impact of the Premium;
- the revised school performance tables which will include data on progress/performance of the lowest 20% pupils and not include contextual value added information;
- the changing arrangements in health services, including the Health and Well Being Board, the GP consortia, Public Health Board;
- the implications of the Munro Report regarding the proposed Single Plan for Education, Care, Health.

#### 4.3 During meetings on the consultation questions with some school and LA colleagues the following areas have been considered:

##### 4.4 a) **The single school based SEN/D category**

- What is your experience of SEN/D Code of Practice 2011 guidance in terms of addressing pupil needs through a staged approach?
- To what extent do the stages (School Action, School Action Plus) help to assess needs of individual children and therefore plan to meet their needs?
- How easy are the current arrangements to understand for families, for staff in schools, for staff working in other agencies?
- What difference do you think it would make (for families, for school staff, for other professionals) if there is a SINGLE category?
- What difference does the current system make in terms of improving pupil outcomes? What difference do you think it would make if there was a single school based category?
- What would schools need to do in order to best establish a single SEN/D category? What do you think is required to make sure that it is workable and meets the pupil needs?
- What might be the drawbacks of such an approach?

##### 4.5 b) **The Single Plan for Education, Care and Health**

- How effective is assessment of pupil needs under current arrangements? When does it work well to improve pupil outcomes by meeting their needs appropriately? What holds it back when it does not work well?
- Which are the key services, currently, involved? What are the contributions that they offer? What, if any, are the barriers to the effective contributions by those services?
- Which other services, if any, do you think might need to be involved in a Single Plan?
- If you could change 1-3 things within the current system of planning support for pupils and their families, based on your own experiences, then what would those changes be?

## 4.6 c) Engagement of Parents

### 4.6.1 For professionals:

- How do you decide to involve families with SEN/D provision for their child?
- How easy is it to work with parents? What helps this working together? What holds it back?
- What difference, if any, do you think a revised single school based category, and all its processes will make to working with parents in order to meet their child's needs?
- Who else might be involved, engaging and supporting parents?

### 4.6.2 For parents:

- When were you invited to talk about your child's needs, to what extent have you been part of the planning and review?
- How easy is it to be involved in school planning and review to make sure that your child's needs are being met?
- What/who would help improve your involvement in planning and reviewing to meet your child's needs?
- What difference, if any, do you think a revised single school based category, and all its processes might make in terms of your involvement in order to meet your child's needs?

### 4.6.3 For both:

If you could change 1-3 things within the current system of working together (planning, discussing progress, seeking involvement of other professionals) based on your own experiences, then what would those changes be?

4.7 The SEN Green Paper reflects the trends in central government policy around education. It is clear in aiming to introduce legislation that will improve outcomes for SEN/D children and their families by changing the current system to reduce bureaucracy and make it more transparent.

4.8 Evidence demonstrates that effective practice in meeting additional needs builds on those approaches in universal practice: making sure, early on, that pupil needs are identified, and that appropriate interventions are personalised and build on their skills. This requires regular and precise assessment of progress, it requires creative solutions. Staff in schools and other settings need to be adequately skilled, to work flexibly and responsively. The focus needs to be more sharply focussed on outcomes for the individual.

**Author:** Jessica Nash

**Head of Service:** Liz Holt

**Strategic Directors:** Marion Davis

**Portfolio Holder:** Cllr Timms

24 May 2011

# Consultation Questions

**Question 1: How can we strengthen the identification of SEN and impairments in the early years, and support for children with them?**

**Question 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?**

**Question 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?**

**Question 4: What processes or assessments should be incorporated within the proposed single assessment process and 'Education, Health and Care Plan'?**

**Question 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?**

**Question 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?**

**Question 7: How could the proposed single assessment process and 'Education, Health and Care Plan' improve continuity of social care support for disabled children?**

**Question 8: How could the arrangements for provision of health advice for existing statutory SEN assessments be improved?**

**Question 9: How can we make the current SEN statutory assessment process faster and less burdensome for parents?**

**Question 10: What should be the key components of a locally published offer of available support for parents?**

**Question 11: What information should schools be required to provide to parents on SEN?**

**Question 12: What do you think an optional personal budget for families should cover?**

**116 Support and aspiration: A new approach to special educational needs and disability**

**Question 13:** In what 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?

**Question 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?

**Question 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'?

**Question 16:** Should mediation always be attempted before parents register an appeal to the First-tier Tribunal (SEN and Disability)?

**Question 17:** Do you like the idea of mediation across education, health and social care? How might it work best?

**Question 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?

**Question 19:** How can we ensure that we improve SEN expertise, build capacity and share knowledge between independent specialist colleges, special schools and colleges?

**Question 20:** How can we continue to build capacity and SEN specialist skills at each tier of school management?

**Question 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?

**Question 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 early years settings and schools?

**Question 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?

**Question 24:** How helpful is the current category of BESD in identifying the underlying needs of children with emotional and social difficulties?

**Question 25:** Is the BESD label overused in terms of describing behaviour problems rather than leading to an assessment of underlying difficulties?

**Question 26:** How could we best ensure that the expertise of special schools in providing behaviour support is harnessed and shared?

**Question 27:** What are the barriers to special schools and special Academies entering the market for alternative provision?



**Question 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?**

**Question 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?**

**Question 30: What might the impact be of opening up the system to provide places for non-statemented children with SEN in special Free Schools?**

**Question 31: Do you agree with our proposed approach for demonstrating the progress of low attaining pupils in performance tables?**

**Question 32: What information would help parents, governors and others, including Ofsted, assess how effectively schools support disabled children and children with SEN?**

**Question 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?**

**Question 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?**

**Question 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?**

**Question 36: How can employers be encouraged to offer constructive work experience and job opportunities to disabled young people and young people with SEN?**

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

**Question 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?**

**Question 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?**

**118 Support and aspiration: A new approach to special educational needs and disability**

**Question 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?**

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

**Question 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?**

**Question 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?**

**Question 44: What are the ways in which the bureaucratic burdens on frontline professionals, schools and services can be reduced?**

**Question 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?**

**Question 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?**

**Question 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?**

**Question 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?**

**Question 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?**

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

**Question 51: What are the implications of changes to the role and deployment of educational psychologists for how their training is designed and managed?**

**Question 52: What do you think can be done to facilitate and encourage greater collaboration between local authorities?**

**Question 53: What do you think are the areas where collaboration could have the greatest positive impact on services for children, young people and families?**

**Question 54: How do you think that more effective pooling and alignment of funding for health, social care and education services can be encouraged?**

**Question 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?**

**Question 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?**

**Question 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 we can facilitate this?**

**Question 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?**

**Question 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?**



# **Summary of Consultation Questions**

## ***Questions***

**1 - 9: Statutory assessment, including:**

- proposed single assessment
- coherence across education/social care/health
- manageability for parents
- early years identification

**10 - 17: Parental engagement, including:**

- information available on choices
- personal budget options
- school preferencing
- effective mediation

**18 - 21: Educational settings as system drivers for improvement, Including:**

- special and mainstream Teaching Schools
- management capacity and specialism of SEN
- building staff SEN skills

**22 - 25: Single school based SEN category, including:**

- impact of identifying and planning for SEN
- accuracy of BESD descriptor
- options for supporting challenging behaviour

**26 - 30: Role of educational settings to improve pupil outcomes:**

- Special Schools
- Academies
- regional development of resources

**31 - 32: Evidencing progress of low attaining pupils**

**33 - 39: Provision for young people with SEN/D 16 – 25 years:**

- training opportunities
- transition planning
- independent living

**40 - 41: Core role of local authorities**

**42 - 46: Services working together:**

- **GP Consortia**
- **progress indicators**
- **coherence, reduced bureaucracy**

**47: SEN funding arrangements:**

- **support services**
- **Academies, free schools, schools**

**48: New models for supporting children and their families e.g. co operatives**

**49 - 51: The role of educational psychologists**

**52 - 57: Developing local ways of working to more effectively meet needs:**

- **local authority collaboration**
- **pooled budgets**
- **increasing flexibility in funding arrangements**

**58 - 59: Changes to funding arrangements:**

- **national banding framework**
- **building consistency to maximise equality**

**LA responses to the DfE's Green Paper:  
"Support & Aspiration:  
A new approach to special educational needs and disability."**

*Extract from the document: there are 59 questions in total*

**How to get involved:**

We welcome your views on how we can put in place a radically different system to support better life outcomes for young people with SEN or who are disabled; give parents confidence by giving them control; and transfer power to professionals on the front line and to local communities.

Consultation responses can be completed online at [www.education.gov.uk/consultations](http://www.education.gov.uk/consultations), or emailed to [send.greenpaper@education.gsi.gov.uk](mailto:send.greenpaper@education.gsi.gov.uk), or by downloading a response form which should be completed and sent to:

Consultation Unit  
Department for Education  
Area 1C, Castle View House  
East Lane  
Runcorn WA7 2GJ

This consultation will run for 16 weeks between 9 March and 30 June 2011, exceeding the Government's Code of Practice on Consultation which recommends a minimum period of 12 weeks.

Following consideration of consultation responses, we will publish the Government's response on the DfE e-consultation website later this year. This will set out our next steps.

**Consultation Questions**

**Question 1: How can we strengthen the identification of SEN and impairments in the early years, and support for children with them?**

The proposed approach is flawed for the following reasons:

- It sounds too medicalised.
- There is a challenge: there is clearly a need for a constant dialogue based on clear pathways between education, social care and health. It will be problematic unless standardised assessment frameworks are developed between the agencies, a joint policy statement between DfE and DoH is the only sure way of securing it.
- The barriers to success are inevitable where teams are driven by tensions between differing priorities, and those teams may not be co located; such issues mitigate against the effective practice based on the 'team around the child' principle.
- It may be beaucratically limiting to link funding/intervention to the production of a Single Plan: consider an Early Support model. Often positive outcomes have been achieved by time limited multi disciplinary

packages, a flexible inclusion grant that may be used for substantial, one off actions such as house adaptations or equipment purchase. This could be supported via locally agreed criteria and focus on specific outcomes.

- It would be helpful to maintain funding for vulnerable groups (e.g. multiple births, young parents) via Children's Centres, to include specialist support such as speech and language, portage.
- Another issue will be the transition into pre schools, childcare provision and schools; LAs is in a position to influence the former but in the instance of Academy status schools then it is clearly not possible to influence appropriate provision.

**Question 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?**

No, where would the statutory duty lie?

- What is the criteria for determining statutory responsibility? What are the proposed changes across agencies to implement accountability in the case of lead responsibility? How will outcomes be monitored?
- What about those children who only present with educational or only present with social care needs?
- The proposal as it stands fails to take account of the fact that one presenting need may in fact mask a range of other needs over developmental stages.
- It is not clear as to the alignment between these proposals and existing practice e.g. Common Assessment Framework, Children in Need Plan.
- There is an absolute need for the DoH to improve its provision and timelines for health advice.
- There is a timescale which needs to be adhered to for applications post 16 and independent specialist providers.

**Question 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?**

The current proposal is fraught with implementation difficulties:



- Unless the relevant agencies collaboratively develop shared assessment frameworks based on pooled funding, then more time will be devoted to establishing responsibilities. What expectations/ requirements will there be of joint commissioning?
- If the Single Plan is limited to those not presenting needs in all of three areas then what is the anticipated intervention for children with severe needs e.g. Autism, Down's Syndrome, where needs present educationally but necessarily medically or within social care.
- Existing multi agency interventions for those not registering with a triad of need are supported effectively via current SEND funding arrangements, which do not represent 'Early Intervention'. These vulnerable needs to be accounted for.

**Question 4: What processes or assessments should be incorporated within the proposed single assessment process and 'Education, Health and Care Plan'?**

The effectiveness of the Single Plan is contingent on these key components:

- All those with (potential) statutory responsibility understand those duties, and work in services with frameworks that compliment partner agencies.
- There is a single point of access for parents, driven by transparent and mutual assessment processes which are more efficiently time limited than the current Statement process.
- There is a clear criteria for identifying the lead professional, and clear criteria for determining the resources allocation from across agencies. Section 139a needs to be incorporated.
- Family involvement from the outset.

**Question 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?**

There are concerns as to the scope being too big to manage under current systems and resourcing:

- Budgets need to be reconfigured to include the 19 - 25 yrs range. It makes sense to ensure appropriate support to 25 years.
- Existing protocols need to be effectively revised: quality assurance and avoiding overlap of services - resource to maintain current systems

during this change process.

- Resources to support the revised protocols.

**Question 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?**

There are a number of barriers to overcome if this proposal is to ensure positive outcomes:

- Building knowledge and skills capacity within the organisations; establishing quality assurance mechanisms in relation to intended outcomes.
- Minimising the partisan interests of some of the groups. There is more confidence, from experience, with generic groups.
- Insuring that the low incidence needs are adequately provided for in the absence of strong lobbying of decision makers.
- Guaranteeing the commitment to social inclusion for all children and their families where the ethos of current voluntary organisations advocates the opposite.

**Question 7: How could the proposed single assessment process and 'Education, Health and Care Plan' improve continuity of social care support for disabled children?**

The proposal will be limited unless cross service collaboration is effected:

- It is essential to align age thresholds: education currently 19 yrs, social care currently 18 yrs, some health agencies cease intervention at 16 yrs.
- Different services have different criteria - a single assessment process will not necessarily lead to increased access to multiple services.
- The single assessment needs to take account of differing needs over time.
- It will be important to ensure that cross LA boundaries are embraced by the revised protocols and associated resources.

**Question 8: How could the arrangements for provision of health advice for existing statutory SEN assessments be improved?**

There are significant considerations with regard to health advice for existing statutory SEN assessments if the revised timeline of 20 weeks is to be realised:

- What is the purpose of health advice, is it an umbrella requirement? Do health intervention thresholds match the resource identified as a need?
- Statutory timescales need to be applied so that health reports are submitted to support achievement of the overall timescale.
- Greater awareness of criteria for a Statement of Educational Need, of what can be provided by a mainstream educational setting, of needs that can meet without a Statement being issued.
- Compatible ICT systems.

**Question 9: How can we make the current SEN statutory assessment process faster and less burdensome for parents?**

The improvements will be limited unless there is concerted effort to change by all contributors:

- Assessment/monitoring and evaluation of outcomes are separate to commissioning of provision. This has implications for workforce reform.
- Respond to the needs of the child, rather than a uniform system for all e.g. children with Down's Syndrome could be assessed and Statemented more quickly.
- Enable the information sent to parents to set out detail including timelines more clearly.
- LAs engage more systematically with mediation services, parents encouraged to access impartial support during assessment process.
- Performance monitoring to focus on intended outcomes being planned for, rather than process timescales being the measure of effectiveness.
- Joint working across agencies to provide for a lead professional, avoiding the need of duplication with parents having to share the same information with more than one professional.

**Question 10: What should be the key components of a locally published offer of available support for parents?**

There is a need for expectations to be placed on providers:

- Sets out a single point of access. What is the criteria for this access, given the lack of clarity to date as to statutory responsibility across education, social care and health?
- Resourcing the monitoring of providers, and up dating information for parents is critical.
- All organisations and settings evidence, through outcomes data, their capacity to meet needs ( Early Years, schools, Academies, Further Education, Alternative Providers, leisure, community and voluntary sector, transport, employment services).
- It needs to be clear that it is not a quality assurance tool in itself.
- Clear accessible language, that exemplifies outcomes achieved whilst presenting parent relevant information.

**Question 11: What information should schools be required to provide to parents on SEN?**

Academies and Free Schools, Alternative Providers, Further Education institutions all need to subject to the same expectations:

- Provision mapping to address needs, that indicates both whole school arrangements for SEN/D inclusion as well as approaches to meet individual needs.
- Clear link into individual progress and achievement, based on meeting SEN/D.
- Information as to extra curricular/extended services provision.
- Overview of settings' areas of specialism.
- Detail of expenditure to support provision, historical data as to performance data and improvement planning.

**Question 12: What do you think an optional personal budget for families should cover?**

It will severely reduce the positive impact of a Single Plan if some aspects of the provision deemed as essential can only be secured via personal budgets.

There are significant misgivings as to the effectiveness of this proposal in the absence of an infra structure which addresses both aspirational outcomes and value for money:

- The need to ensure that current information about resources is accessible to support parents' decision making - how to ensure objective detail is included.
- The risk that providers will often advocate intervention, specialist professionals may preference their own discipline.
- How to provide an effective monitoring system that focuses on outcomes for children and their families, whilst avoiding being overly officious for parents and a conflict of interest between child, parent and provider.
- The dilemma where parental choice conflicts with professional advice.
- The operational costs of an effective infra structure, see 'Special Educational Needs: Reforming Provision in English Schools' Ralph Hartley, Policy Exchange.
- The need to further develop services for families to have maximum choice to purchase from them, in parallel with revising agency frameworks and thresholds.

**Question 13: In what 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?**

There are many reservations. Increasing parental responsibility to improve outcomes is not the only means of positively engaging them in their child's provision, increasing choice offers similar independence and places the responsibility for quality assurance *rather than* decision making across agency professionals:

- How to inspect, approve and monitor parental commissions.
- How to ensure equal understanding to inform decision making by parents, those who are better able/more confident will navigate the system more easily.
- How to address differences in opinion between professionals and parents.
- The risk of providers being biased toward their own specialism in terms of meeting individual child's needs.

**Question 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?**

There are many risks associated with the phrase 'removing the bias toward inclusion': current guidance does allow for parental preference:

- SEN/D children aspire for meaningful relationships, positive engagement with their community locally, prospects of employment. Statistics indicate that in failing to support their aspirations, they fall into greater need as young adults and present with greater demands as they age.
- It is essential that the Teaching School programme includes within its schools that demonstrate proficiency in mainstream SEND. The notion of 'specialism' misses the skills, approaches and outcomes that are being achieved within mainstream educational settings. The notion of excessive cost securing improved outcomes for some levels of SEND is flawed.
- How will other than maintained settings be challenged to avoid selection processes.
- What is the balance between professional evidence based opinion and parental preference; how will mediation resolve those dilemmas; how will SENDIST be instructed to view such disputes.

**Question 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'?**

The usefulness of information is contingent on a number of factors:

- Ensuring impartial advice is available to parents - strengthening and prioritising resources for Parent Partnership services.
- Maintained, non maintained schools and independent providers being required to deliver the same statutory duties.
- The 'local offer' needs to be organised in relation to need, and reflecting agency thresholds for intervention otherwise it will be misleading.

**Question 16: Should mediation always be attempted before parents register an appeal to the First-tier Tribunal (SEN and Disability)?**

There are difficulties inherent in the current system which need to be addressed:

- Where the appeal process runs parallel with the mediation and timescales are not extended to allow for mediation.
- It would undermine the principles of mediation to make it statutory, but it is not always possible to resolve differences in opinion between perspectives of parents and professionals.
- There is an adversarial system which has a vested interest in conflict between parents and other decision makers, it is likely that even if SENDIST is reviewed the instances of conflict will re emerge e.g. use of personal budgets where independent therapists advocate their own services and parents indicate a preference contrary to professional opinion.
- Parents need to be independently supported by non profit making organisations.

**Question 17: Do you like the idea of mediation across education, health and social care? How might it work best?**

Yes, it would address some of the issues raised in relation to effective across responsibility and provision. It would need to be a single service, binding on all agencies; parents would still need to avail of independent support where requested.

**Question 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?**

This approach is flawed unless it is seen as part of the continuum for improving teaching and learning:

- SEN practice does require additional knowledge and skills but they are limited unless they are practised within a whole school ethos of ambition for all, and incremental adjustments in relation to pupil progress.
- It is important to recognise that knowledge and skills are context related: approaches used in specialist settings can inform mainstream settings and vice versa, but they are not necessarily directly transferable.
- Special schools need to be identified within early cohorts of Teaching Schools.
- It is essential that capacity is developed across all schools, in order to ensure real choice for parental preference.

**Question 19: How can we ensure that we improve SEN expertise, build capacity and share knowledge between independent specialist colleges, special schools and colleges?**

- Expectation for all providers to establish networks (e.g. LLDD leads in FE with special schools) and demonstrate via self evaluation the outcomes for children and families in relation to that networking.

**Question 20: How can we continue to build capacity and SEN specialist skills at each tier of school management?**

The proposals will be severely limited unless this is a real priority: it essential if policy aims include establishing a range of quality provision to improve pupil outcomes and to offer real choice for parents:

- ITT includes significant component of developing quality teaching approaches, based on purposeful assessment of progress, to respond to individual/group needs.
- Practice is under pinned by values and beliefs! Address organisational ethos i.e. how a school/setting demonstrates collective responsibility for ALL children and families who indicate a preference to be part of their learning community.
- Build in opportunities for staff development programmes to include movement between the sectors.
- Maintain specialisms based on the premise that effective practice includes supporting professional development as well as pupils' learning.
- Establish why there was limited impact of the Inclusion Development Programme: it would be a missed opportunity not to learn from recent experience.

**Question 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?**

Unless the profession as whole recognises its responsibility for every child then the expected outcomes of our education systems will be limited (some children have restricted access to schools/settings):

- Performance management approaches for teachers need to be evaluative and formative. Clear message that poor pupil progress is not always as a result of SEND.
- Units/programmes of staff development rather than isolated presentations or generalised information.



- Maintain a register of skills base across local areas.
- ITT needs more than an optional element on SEND.
- Ask parents what they consider as a 'great teacher' for their child, their perspective can contribute to our understanding and inform planning.

**Question 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 early years settings and schools?**

It could reduce clarity of pupil need and therefore negatively impact on the approaches employed to improve progress:

- Problems with distinguishing between levels of support.
- Lack of equality in accessing support, inconsistent thresholds locally and nationally.
- Those pupils with SEND are not necessarily eligible for the Pupil Premium; schools/settings may reduce SEND expenditure on external support which may negatively impact on the arrangements made to meet individual needs.
- Ensuring a robust system for assessing needs and reviewing progress.
- Lack of clarity around who is responsible for monitoring intervention and determining its impact.

**Question 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?**

Unless there is a clear focus on effective provision delivering positive outcomes, based on assessment of need and monitoring of outcomes as a result of that effective provision then the risks are:

- Some needs remain unmet in the absence of universal screening.
- Assessment of needs continues as resource driven because identification of need means additional monies can be accessed.
- Too long to wait in Early Years settings before securing external advice and support – potential health and safety risks, inappropriate provision.

**Question 24: How helpful is the current category of BESD in identifying the underlying needs of children with emotional and social difficulties?**

It is unhelpful given current interpretations:

- It is currently used as a 'catch all' descriptor that may describe presenting indicator of need but actually masks the underlying need.
- The underlying need may be triggered by social or health needs but presents most observably in educational settings, which means education is charged with resolving issues beyond its influence.
- Personalised learning needs to be recognised as fundamental to effective universal provision, in which case some of the key messages from the Steer report including quality teaching, staff development and effective agency collaboration to support schools actually drive organisational improvement priorities in educational settings.
- It does not reflect the core purpose of educational settings which is to address the holistic development of all children in order for them to fulfil their potential and grow into citizens who make positive contributions.

**Question 25: Is the BESD label overused in terms of describing behaviour problems rather than leading to an assessment of underlying difficulties?**

Yes it is:

- More appropriate use of the descriptor needs to be supported by staff development to build understanding and thereby ensure a wider range of teaching strategies to promote 'behaviour for learning'.
- Develop 'sub groups' to support that increase understanding so that assessment actually focuses on the underlying cause(s) and thereby appropriate interventions are put into place to improve outcomes.

**Question 26: How could we best ensure that the expertise of special schools in providing behaviour support is harnessed and shared?**

The skills are not always transferable; effective partnership working will rely on:

- Both partners recognising the 'in house' skills and understanding and are willingly prepared to share knowledge and approaches.
- Special schools' capacity varies depending on their client group i.e. some pupils required intensive support beyond the specialist environment standard arrangements. Consideration of the impact of

outreach work needs to be made so that the special school can maintain its core functions.

- Consider the skills across a group of schools in a locality, link to individual school improvement planning so that all recognise the benefits to their setting.

**Question 27: What are the barriers to special schools and special Academies entering the market for alternative provision?**

The main barrier is around admissions and the LA duty to ensure a continuum of provision to meet the needs of its vulnerable children and families:

- If specialist educational organisations offer placements for those with 'manageable' needs in the context of their organisation then where will there be less/no places for those with more complex needs.
- This could be reliant on those who are the most effective promoters to users; it may be difficult for parents to reliably assess the most effective provider.

**Question 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?**

There is an absolute need for special Academies to demonstrate that they are fulfilling their core function. In this instance then:

- Engage in local protocols to establish a local offer for specialist intervention commissioned on short and medium term basis.
- Develop outreach services to be commissioned in relation to the local profile of children/families' needs.
- Develop staff development opportunities for others, capacity building that may include focussed training within their own environment as well as in other settings.
- Establish protocols for staff exchange that addresses mutual capacity building.

**Question 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?**

- Transport to the venue.

- Discrimination by other clients against SEND.

**Question 30: What might the impact be of opening up the system to provide places for non-statemented children with SEN in special Free Schools?**

The main concern is the certainty for LAs to exercise their statutory duties:

- Clear, consistent of continuum of provision.
- Evaluating of pupil outcomes in relation their entitlement.
- Risk that with resource being directed away from the maintained sector, there is reduced opportunity for the maintained sector to sustain and improve its provision. In reality this reduces parental choice.

**Question 31: Do you agree with our proposed approach for demonstrating the progress of low attaining pupils in performance tables?**

It is too limiting: some pupils will consolidate existing skills which in terms of their SEND is a considerable achievement; other make measureable progress on personalised trajectories. This progress would not feature in proposed format.

**Question 32: What information would help parents, governors and others, including Ofsted, assess how effectively schools support disabled children and children with SEN?**

This is about a balance of quantative and qualitative evidence, including progress data for curriculum skills and knowledge, personal skills and pupil voice:

- Significant improvements need to be made to ensure that the progress of all pupils, including those working below Level One, is recognised.
- Blanket reporting does not give HTs and Governors the opportunity to celebrate an inclusive policy at work: significant and measureable *small* steps are not evident within data sets; there is a disproportional reflection within small schools especially.
- Information about the progress and attainment of students with SEND: data for curriculum skills and knowledge, personal skills.
- Information about staff SEND expertise and examples of personalised learning strategies together with anonymised pupil outcomes.

- Transparency of SEN budget allocation, its intended outcomes and *whole school* improvement priorities.
- Clear evidence of successful social and peer group inclusion.
- Evidence of a “Communication Friendly Environment”.
- An Inclusion Policy which celebrates whole-school and individual achievements, e.g. training attended, expertise developed, resources implemented pupil outcomes that have improved as a consequence.
- Opportunities for parents to talk to other parents of children and young people with SEND.
- Details of when the school commissions external specialists and works with relevant agencies, pupil outcomes to date.
- Feedback from parents and students.
- Information about the processes securing parental involvement.
- Ask parents what information they want about their child – they need to be our partners!

**Question 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?**

If the aspirations are to be realised then there are some immediate steps to be addressed:

- Establish local provision with consortium of providers – either as a day offer or setting up residential.
- Provide support in unstructured times (and reduce unstructured times).
- Ensure access to education and training on for a full week (not 3 days).
- Ensure support from additional services e.g. Speech and Language, Physiotherapy, Autism, Nursing.
- Provide opportunities for a residential experience.
- If Care Plans are in place, the funding and plan should continue whilst the young person is in full-time education.

**Question 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?**

There is a need for concerted planning to resource such opportunities, as well as operational changes:

- Provide apprenticeship opportunities below level 2.
- Consider training allowances for those not in employment.
- Trained IAG workers – e.g. Connexions personal advisers.
- Provide more work experience opportunities and realistic feedback from employers.
- Provide more support through Job Centre Plus.
- Provide a Key Worker.

**Question 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?**

There needs to be a framework for this and it needs to be a national scheme:

- As per the Entry To Employment and programme led apprenticeship models.
- This needs to include financial support for employers and training allowance for young people.

**Question 36: How can employers be encouraged to offer constructive work experience and job opportunities to disabled young people and young people with SEN?**

The significant driver here is that it needs to be easier for employers to take part – less red tape and employers not burdened with administration:

- Engage employers currently working with these learners to raise the profile – i.e. REMPLOY.
- Young people need to have support so they are not a ‘burden’ to the employer. A financial incentive may help smaller employers.
- Good advice on adaptations and reasonable adjustments.

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

It is essential that strategic commitment / responsibility drives operational improvements to improve the experiences and outcomes of this group:

- An improved and extended statutory framework to 25 would give greater confidence to parents through this crucial transition period, particularly for those young adults who have not traditionally met social care and/or health thresholds.
- Establish a shared database, containing data required by the partners with responsibility.
- Each service should have a Transition Co-ordinator.
- Continuing Health Care checklist could be completed by the school nurse.

**Question 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?**

Support can be offered via commissioning further development of the Nurse Family Partnership.

**Question 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?**

Yes, and:

- Year 11 Person Centred Planning.
- Leisure skills, communication skills and personal safety.
- Life skills are not fashionable anymore, yet pupils in mainstream settings often miss out on vital skills needed for independence including travel training, driving etc.

**Question 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?**

No, it is important to also consider:

- Integrated working is vital to meeting needs for some of the vulnerable groups, therefore LAs need to demonstrate their commitment and the outcomes achieved from partnership working. An example is effecting smooth Transitions. This is a responsibility that needs to be shared.
- LAs have a duty to commission effective, quality provision that also provides value for money.
- Effective service commissioning is determined by outcomes, monitoring and evaluation of commissioning is not mentioned.
- Everything that is happening with regard to Academies etc is working against the Local Authority being able to plan strategically.

Evidence based commissioning is clearly an essential ingredient; *how is live data as to client needs to be accessed* so that the LA (and other agencies) can plan strategically?

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

- Ensuring that there is clarity as to the criteria for determining statutory responsibilities.
- Ensuring that key partners in delivering those statutory duties are also bound by statute.
- Identifying tensions in priorities across agencies e.g. intervention thresholds.
- Timely access to live performance data to inform appropriate commissioning to meet needs.
- Move funds away from external organisations e.g. YPLA and directly into LAs.

**Question 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?**

- Locate some GP representatives with the service providers, or vice-versa, ensuring that GPs are aware of the Green Paper and of the issues and context of the field of SEN/Disability.



- Clarity of the role of GPs in commissioning is needed, particularly when the needs of the few may be substantially more expensive than the requirements of the many; the outcomes of Health and Well being Boards.
- Shared Professional Development opportunities e.g. training in the changing face of SEN and disability- the increasing numbers of children surviving very premature for example.
- Shared intranet, data sets.
- Clear local pathways for GPs to find information around the needs of individual children and cohorts within a locality. The expectation for GP representation to attend meetings so that they develop an understanding of individual children for whom they need to commission services in the instance of a Single Plan.
- We need to ensure services meet the needs of those with long-term chronic conditions, as well as those with acute needs. Historically, the NHS has been better at the latter at the expense of the former. Investment in long-term, regular, high quality physiotherapy with physical needs (as opposed to short treatment blocks) can ensure children and young people remain active, healthy, independent and at less risk of falls and injury, thus avoiding more costly interventions and surgery.
- The issue is often that the children with the more complex needs are not known by and may never see their GP. Health provision is met by specialists, often the regional Children's Hospitals, or at centres of Excellence across the country. Nursing care is provided by the Children's Nursing Team, not the general community team. Children who leave hospital with identified needs may never meet their GP, Community Midwife or Health Visitor. If a child develops the needs the issue is the same and any connection with community services is lost in the plethora of hospital appointments or nursing teams visiting the home.

**Question 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?**

The measures should not necessarily differ – aspiration for all that has 'small steps' built into existing measures.

**Question 44: What are the ways in which the bureaucratic burdens on frontline professionals, schools and services can be reduced?**

- Establish intended outcomes as the focus for intervention.

- Ensure distributive leadership, through effective staff development and robust performance management: so that all staff recognise their responsibility and opportunity to push for improved outcomes. This would require additional staff time as an up front investment to deliver more effective and efficient services later.
- Single processes to report and monitor, e.g. providing measurable data in one format, rather than several formats for different audiences/managers.
- Establish internal systems / mechanisms (database) which everyone can access.
- Single processes to report and monitor, e.g. providing measurable data in one format, rather than several formats for different audiences/managers.

**Question 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?**

- Shared understanding of Early Intervention approaches and resources available.
- Effective information sharing: for example regular caseload discussion with health, e.g. palliative and continuing care meetings locally work are useful to inform next steps.
- Integration of Speech and Language Therapy Services, Physiotherapy and Occupational Therapy Services.

**Question 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?**

Improved support is contingent on statutory duties being shared to provide the impetus for building on and refining current effective practice. This would ensure:

- Co location of multi-agencies. Equal distribution of resources and management time to achieve an equitable balanced service.
- More integrated services should be provided to adults.
- Ensuring that parents and young people are involved in strategic planning and monitoring effectiveness via meaningful mechanisms e.g. Parent Forum and Steering Group offering parental perspective to the

management and governance of the LA's Integrated Disability Service, acting as a critical friend in key decisions affecting future service needs.

- Organisations expecting parents to stay with their children at activities, not providing sufficient additional staff for children with an SEND.

**Question 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?**

- There needs to be core funding to address high incidence additional educational needs, plus individual funding ring fenced for commissioning interventions specified in Statements.
- Clarity as to statutory duties so that strategic SEN planning can ensure adequate and appropriate resourcing, including its own services.

**Question 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?**

- LA support services could consider options such as co-operatives. Strategic planning would need to take account of sustainability however, for example the CPD of those professionals could be problematic because of economies of scale.

**Question 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?**

- *Support and advocacy for children:* consultation with parents and teachers to identify children's needs, develop and evaluate interventions and support, and monitor and review progress. Advocating for children and young people by gathering their views through Personal Construct Psychology or other creative uses of applied psychology.
- *Parent/carer support and advocacy:* providing opportunities for parents and carers to access psychological services and support through home visits, drop in sessions, and school based meetings Liaising with parent partnership services to maximise support offered to parents. Acting as advocates for parents and supporting home/school relationships (mediation) through consultation, discussion and attendance at review meetings.

- *Intervention for children and families:* Educational Psychologists support children, young people and their families with a wide range of needs that go beyond SEN and disability including children with emotional and mental health difficulties, adopted and looked after children, and children who are not attending school for a range of reasons. The delivery of therapeutic intervention such as Cognitive Behaviour Therapy and Solution Focused Brief Therapy or the facilitation of interventions that alter classroom or relationship dynamics such as Circle of Friends. Community drop-in sessions for parents, for example, in children's centres that enable open direct access to educational psychology services and provide opportunities for support and problem solving. The delivery of evidence based parenting programmes such as Early Bird, Triple P, Incredible Years and bespoke packages to foster carers or adoptive parents.
- *Professional support, capacity building and training:* The development and delivery of training for school staff in maintained schools and independent special schools, for other professionals such as social workers and family support workers or those based in community settings such as children's centres. Training might include areas of applied psychology such as the theory of attachment and solution focused questioning or how to understand and support particular groups of children and young people such as those with autism spectrum disorders. Project work that attempts to address widespread issues such as mental health stigma and systemic issues such as poor communication systems within a school community, and the analysis, evaluation and feedback of data that assesses the social and emotional climate of primary schools through a children's survey. Supervision and small group coaching for a range of professionals working with children and families.
- *Research and development:* Supporting local authority strategic development through representation on strategy groups such as the Virtual School, CAMHS Strategy groups or local authority work streams such as those that review SEN and Disability systems. The deployment of doctoral level research skills that review local authority systems and processes and contribute to changing policy Supporting the needs of particularly vulnerable children and young people through contribution to school placement panels, adoption panels and the development of care pathways, for example for children with Autism Spectrum Disorders.

Throughout all of these activities, educational psychologists are unique in the sense that they work at multiple levels drawing from a range of information sources such as evidence based best practice, local authority strategy/policy and local knowledge of school systems to bring about positive change for children, young people and families.

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

- The proposed changes for a Single Plan (where statutory responsibility is clear and processes for identifying the lead professional) should help to reduce the burden of statutory assessments: EPs can contribute more to capacity building in order to skill up staff to better meet pupil needs, to support schools in developing reliable assessment processes.
- Interagency work: there is a move towards more interagency working and shared decision making amongst agencies, which may break down the barriers further between health, social care and education services. This has and may continue to lead to joint policy setting and referral routes/systems. It may also lead to greater opportunities to work more closely with a wider range of professionals.
- Access: there is concern that in an increasingly traded world with less local authority funding certain groups will have disproportionately reduced access to educational psychology services, particularly where some schools may not purchase services or needs are prioritised in accordance with reduced levels of funding. Services may not be able to evolve to meet local demands as they are shaped by other external forces and pressures such as “the market place” or funding streams that determine priorities for them. Where schools do purchase services or receive greater services than previously, there may be more opportunities to respond to local need.
- Types of work: there may be greater opportunities to engage in much more in depth work with schools and other organisations if they buy in substantial amounts of time. This will enable greater facilitation of all of the five areas listed as innovative ways in which educational psychologists can work (Support and advocacy for children, parent/carer support and advocacy, intervention for children and parents, professional support, capacity building and training, research & development) and provide more opportunities for high quality work.

**Question 51: What are the implications of changes to the role and deployment of educational psychologists for how their training is designed and managed?**

There is significant concern unless the changes are managed in a way that protects professional integrity as well as ensuring robust pupil assessment and evaluation of intervention by professionals from a range of disciplines including psychology:

- Changes to the role and deployment of educational psychologists has not yet clearly emerged, however training needs to take account of the changing nature and current restructuring of local authorities.

- Educational psychologists will need to consider and seek employment in a wider work place that may include social enterprises, independent working and/or other sectors such as the voluntary sector. Other placement experiences that take account of this and can offer appropriate and diverse experiences should be considered for trainees. Trainees need to be trained in skills that will be attractive to this wider workforce, which may include therapeutic intervention.
- Educational psychologists of the present and future need to be able to maintain professional standards and ethics whilst balancing the demands of “paying clients” (such as schools). Greater attention may need to be given to these tensions in training.
- Training could helpfully consider organisational and community psychology in more depth as well as developing expertise in specialist areas of psychology or work with particular client groups.
- Consideration should be given as to whether it would be helpful to revisit joint training with other applied psychologists such as clinical psychologists.

**Question 52: What do you think can be done to facilitate and encourage greater collaboration between local authorities?**

Current arrangements are insufficient and will militate against the effective models for proposed changes emerging:

- There are no current formal arrangements for cross boundary consistencies.
- Local regional SEN partnerships have recently been disbanded, they provide a model for re establishing and strengthening.

**Question 53: What do you think are the areas where collaboration could have the greatest positive impact on services for children, young people and families?**

Statutory responsibilities / pupil needs will be problematic and expensive to achieve unless;

- Local Authorities work within transparent frameworks to provide low incidence services e.g. hearing impairment, visual impairment.
- Regional commitment to collective responsibility for resourcing needs within context of local commissioning arrangements that are mutually preferential; whilst individual LAs are focussing on respective budgets then services to other Las are seen as income generators rather than a ‘shared regional resource’.

**Question 54: How do you think that more effective pooling and alignment of funding for health, social care and education services can be encouraged?**

This will only achieve intended outcomes where:

- Cost centre managers are required to reconcile respective service priorities / thresholds.
- Where co location is structured to inform effective application of those shared budgets and the structure reflects respective thresholds.

**Question 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?**

The benefits will be undermined in the absence of appropriate skilling for those involved to build strategic and operational understanding of effective approaches.

**Question 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?**

A national banding framework accompanied by an outcomes driven matrix to inform local arrangements; this needs to be subject to annual evaluation that is monitored nationally.

**Question 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 we can facilitate this?**

Low incidence conditions present infrequently and so it is not sustainable to maintain services, this is an initial opportunity for the voluntary and community sectors.

**Question 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?**

Unless the framework is comprehensive and binding, with built local flexibility then it will limit actually meeting the evolving and sometimes complex individual need:

- It needs to reflect existing range of needs (social, medical and educational) and be clear as to the statutory duties to deliver the resource.
- The framework needs to reflect equality of access across boundaries.
- Those with physical disabilities are not a homogenous group.

**Question 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?**

It will fail in the absence of a common assessment criteria.