

CHILDREN AND YOUNG PEOPLE'S LEARNING SCRUTINY PANEL

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Special Educational Needs and or Disabilities

Caroline Cannon: Strategic Lead for Inclusion and Specialist Support Services

SUMMARY

1. The purpose of the paper is to provide:
 - a. an overview of the legal framework in which statutory agencies must work to support children and young people with SEND;
 - b. an outline of how special educational needs and disabilities (SEND) can affect a child or young person's ability to learn; and
 - c. an update on the local developments within Middlesbrough

INTRODUCTION

2. The Children and Families Act and the Special Educational Needs and Disabilities Code of Practice (2014 updated 2015) pushed forward the Government's commitment to improve services for vulnerable children and young people and support strong families.
3. The Children and Families Act transformed the system for disabled children and young people and those with Special Educational Needs, so that services consistently support the best outcomes for them. The reforms created a system from birth to 25 through the development of coordinated assessment and single Education, Health and Care Plans; improving cooperation between all services responsible for providing education, health or social care; and giving parents and young people greater choice and control over their support.
4. The principles that the **SEND Code of Practice** works to ensure that **SEND** provision has regard to the views, wishes and feelings of the child or young person and their parents, the importance of the child or young person participating as fully as possible in decisions, and the need to support the child or young person and their parents to help them achieve the best possible **educational** and other outcomes
5. The majority of statutory duties in relation to Special Educational Needs and or Disabilities rest at a local area level, predominantly with local authorities but now also with Clinical Commissioning Groups. The Children and Families Act 2014 strengthens local authorities' key duties in respect of children and young people with Special Educational Needs and or Disabilities across the 0-25 age range, regardless of where

they are educated. It places duties on health and education settings to use their best endeavours to meet the needs of children and young people with Special Educational Needs and or Disabilities; and requires local authorities and other listed bodies to have regard to the statutory guidance set out in the Special Educational Needs and or Disabilities Code of Practice: 0-25 years. See Appendix 1 SEND Code of Practice.

6. The broad duties for the Local Authority, are to:

- Ensure that children, their parents and young people are involved in discussions and decisions about their individual support and about local provision
- Ensure that children, young people and parents are provided with the information, advice and support necessary to enable them to participate in discussions and decisions about their support
- Consult children with SEND, their parents and young people with SEND in reviewing education and social care provision and in preparing and reviewing the Local Offer
- Prepare and publish a Local Offer
- Carry out their functions with a view to identifying all the children and young people in their area who have or may have SEND
- Keep their education and training provision and social care provision for children and young people with SEND under review
- Make sure that services work together where this promotes children and young people's wellbeing or improves the quality of special educational provision and work with partners to assess local needs
- Have arrangements in place to jointly plan and commission education, health and social care services jointly for children and young people with SEND
- Carry out EHC needs assessment and follow the statutory steps to issue and deliver EHCP when considered necessary
- Review EHC plans annually, including reviewing the child's support
- Consider request for personal budgets where a child or young person has an EHCP
- Ensure the availability of independent mediation services.

7 In terms of Health and CCGs they must:

- Commission services jointly for children and young people (up to age 25) with SEND, including those with Education Health and Care (EHC) plans
- Work with the local authority to contribute to the Local Offer of services available
- Have mechanisms in place to ensure practitioners and clinicians will support the integrated EHC needs assessment process, and
- Agree Personal Budgets where they are provided for those with EHC plans

- 8 Educational settings have responsibilities to support children and young people 0-25 as outlined in the SEND Code of Practice (For full details see appendix 1 SEND Code of Practice)
- 9 All early years providers are required to have arrangements in place to **identify** and **support** children with special educational needs or disabilities (SEND).
- 10 Within Early Years it is particularly important that there is no delay in making any necessary special educational provision. Delay at this stage can give rise to learning difficulty and subsequently to loss of self-esteem, frustration in learning and to behaviour difficulties. Early action to address identified needs is critical to the future progress and improved outcomes that are essential in helping the child to prepare for adult life.
- 11 Where an Early Years setting identifies a child as having SEN they **must** work in partnership with parents to establish the support the child needs. Where an Early Years setting makes special educational provision for a child with SEN they should inform the parents and a maintained nursery school **must** inform the parents. All settings should adopt a graduated approach with four stages of action: assess, plan, do and review.
- 12 For schools they must
 - a. Publish a school SEN information report
 - b. Identify children with SEN and ensure provision is in line with the SEN code of practice.
 - c. Appoint a Special Educational Needs Coordinator
 - d. Invest in whole school and targeted training for staff
 - e. Provide inclusion teaching and support practice is embed throughout the school and that all teacher understand that they are teachers of SEN
 - f. Provide information on school arrangements for SEN to parents and Governors
 - g. Consider pre-emptive arrangements for pupils present and future with a disability.
- 13 Within schools high quality teaching, differentiated for individual pupils, is the first step in responding to pupils who have or may have SEN. Additional intervention and support cannot compensate for a lack of good quality teaching. Schools should regularly and carefully review the quality of teaching for all pupils, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable pupils and their knowledge of the SEN most frequently encountered.
- 14 In deciding whether to make special educational provision, the teacher and SENCO should consider all of the information gathered from within the school about the pupil's progress, alongside national data and expectations of progress. This should include high quality and accurate formative assessment, using

effective tools and early assessment materials. For higher levels of need, schools should have arrangements in place to draw on more specialised assessments from external agencies and professionals.

15 Schools should provide support through a graduated response to meet the child's needs. A focus should move to a SEN Support Plan if greater support is identified, however if this is not sufficient in meeting the child's needs then a request for an EHC assessment should be actioned.

16 FE colleges, sixth form colleges, 16-19 academies and independent specialist colleges have the following specific statutory duties:

- a. **The duty to co-operate with the local authority on arrangements for children and young people with SEN.** This is a reciprocal duty. It means that, in carrying out their functions under this part of the Act, a local authority **must** co-operate with the named bodies who, in turn, **must** co-operate with the local authority.
- b. **The duty to admit a young person if the institution is named in an Education Health and Care (EHC) plan.** Young people have the right to request that an institution is named in their EHC plan, and local authorities have a duty to name that institution in the EHC plan unless, following consultation with the institution, the local authority determines that it is unsuitable for the young person's age, ability, aptitude or SEN, or that to place the young person there would be incompatible with the efficient use of resources or the efficient education of others.
- c. **The duty to have regard to this Code of Practice**
- d. **The duty to use their best endeavours to secure the special educational provision that the young person needs.** This duty applies to further education colleges, sixth form colleges and 16-19 academies. Its purpose is to ensure that providers give the right support to their students with SEN. It does not apply to independent specialist colleges or special schools, as their principal purpose is to provide for young people with SEN. They **must** fulfil this duty for students with SEN whether or not the students have EHC plans. This duty applies in respect of students with SEN up to age 25 in further education.

17 The impact of special educational needs and disabilities on the ability of children and young people to learn and achieve alongside their peers can be very significant. Although the range of special educational needs and disabilities that children and young people may experience is highly diverse and complex, there are issues stemming from them that are commonly seen and that are barriers to learning. Self-image and confidence can be affected from an early age and mental health can suffer, which will have a negative impact on academic progress. Anxiety occurs very frequently, often resulting in reluctance to attempt new tasks,

due to a fear of making mistakes or of being seen to fail. The child or young person may feel different from their peers and they may, for a variety of reasons, struggle to form and maintain friendships and to cope with the social aspects of life at school and college. Life chances can in some cases be adversely affected; the range of pathways into employment that are available to the young person may be reduced, their ability to be involved in community activities may be limited, aspects of their physical and mental health may be poor and they may struggle to live independently.

- 18 Early and accurate identification of need, together with carefully tailored, sensitively delivered, person-centred intervention, is therefore of vital importance in ensuring the best possible outcomes for this very vulnerable group of children and young people.
- 19 Within the SEND Code of Practice the definition of SEND is that a child or a young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her. A school age child or young person has a learning difficulty or disability if he or she:
 - a. Has significantly greater difficulty in learning than the majority of others the same age
 - b. Has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post 16 settings
- 20 There are four main areas of need that are listed within the SEND Code of Practice where learning can be affected by SEND. These areas are
 - **Cognition and learning needs**
 - **Communication and interaction needs**
 - **Physical, medical and sensory needs**
 - **Social, emotional and mental health needs (SEMH) needs**
- 21 **Cognition and learning** needs encompasses a very wide spectrum of needs. A small number of children may have profound and multiple learning difficulties, affecting all aspects of their development and functioning, some will have severe learning difficulties, while others will have mild to moderate learning difficulties. A further group will have specific learning difficulties with literacy (dyslexia, which is the most common developmental difficulty, affecting 10% of people and ranging from mild to severe) or numeracy (dyscalculia) or motor planning (dyspraxia).

The impact on learning can be that:

- The child or young person may become acutely aware of his/her areas of difficulty and may then become fearful of learning tasks and lose confidence in their own abilities.

- If dyslexic, the child or young person may be able to answer questions and express good ideas orally, but be unable to record the information. They may also dislike reading, partly because the content of books that they are able to read may not be age appropriate.
- Without direct support and/or differentiated tasks, the child or young person may lose learning time because they are unable to access the work they have been given. They may develop strategies to make it look as though they are working.
- The child or young person may mask his/her difficulties through inappropriate behaviour that is intended to prevent others from noticing their difficulties e.g. distracting other pupils, not starting a task when told to do so, leaving seat and wandering about, etc. (A pupil with SEMH will sometimes have underlying difficulties with learning.)
- The child or young person may reach adulthood without having acquired the basic levels of literacy and numeracy (and in some cases social skills and confidence and/or personal independence) that they need in order to be able to manage in adult life.

22 Communication and interaction needs includes children and young people who have difficulties with speech production, with expressing their needs, wishes and opinions, and with understanding language that they hear. There is once again a wide spectrum of need; some will be preverbal, while others will have needs that are much less obvious. Some children and young people have social communication and social interaction needs; they may struggle to understand and pick up on the conventions of social behaviour and conversation. Such needs are very typical of those diagnosed with autistic spectrum conditions. Some ways in which speech and language needs may impact upon learning are as follows:

- The child or young person may have difficulties with speech sound production that make their speech difficult to understand. This may cause them frustration and they may give up trying to make themselves understood. They may struggle to make and maintain friendships, which will have an adverse impact on their social development and confidence at school.
- The child or young person may not understand longer and more complex utterances used in the classroom, may feel stressed and frustrated and may struggle with listening and attention. This may lead others to perceive that they are misbehaving.
- The child's speech immaturities may impact upon the acquisition of literacy skills.
- Children who have receptive language difficulties but who can read fluently may be assumed to have a higher level of understanding of text than is actually the case.

- The child may struggle to acquire key vocabulary needed for learning (e.g. language relating to concepts such as time, size, shape, position).

23 Some ways in which needs in the area of social interaction and social communication may impact upon learning are as follows:

- The child or young person may not understand the turn-taking nature of conversation, and/or may find eye contact difficult, so may have difficulties with informal social interaction.
- They may have very restricted interests and may talk at length about these topics, which other children may find off-putting or disconcerting.
- They may understand language at a very literal level and struggle to make inferences. They may also be puzzled by jokes and figures of speech.
- They may prefer subjects based on facts and precision, such as science and maths and may struggle with subjects that involve 'reading between the lines' and extended writing, e.g. English.
- They may struggle with tasks involving collaboration with others.
- They may be very dependent on structure and routine and may find change (and transitions of any kind) very stressful.

24 **Physical, medical and sensory** needs includes children with medical conditions, physical disabilities and sensory impairments who form a particularly diverse group with highly individual needs. Their condition or disability may make it difficult or impossible for them to make use of the educational facilities normally provided.

25 With regard to sensory needs, as stated in the SEND Code of Practice, many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support. Children and young people with an MSI have a combination of vision and hearing difficulties.'

26 Factors impacting upon learning for children with medical conditions and physical disabilities may include:

- Mobility difficulties that may require adjustments to the curriculum and adaptations to the physical environment.
- Their requirement for support for personal care and/or daily routines and learning activities.
- Time off school for medical appointments and treatment.
- Periods of being unwell during which they are not able to access education.
- Fragile self-image and self-esteem, particularly if the child or young person has a chronic or degenerative condition, or has suffered a life-changing accident.

- Difficulties in making and maintaining peer relationships, possibly due to one or more of the above.

27 **Social, emotional and mental health (SEMH)** needs frequently become apparent through challenging behaviour that young people present in school, which must be interpreted so that the underlying need can be identified. Very often, the behaviour is rooted in early trauma, attachment issues, loss, or an undiagnosed neurodevelopmental disorder such as an autistic spectrum condition.

28 Currently, anxiety and depression seem to be more prevalent in children and young people than ever before, and this may well be linked with the Covid-19 pandemic and the social isolation and reduced learning opportunities that arose from this.

The impact on learning of SEMH can be one or more of the following:

- The child or young person may be excluded from school and lose valuable learning time, as well as being separated from peers.
- They may require targeted teaching in a dedicated space away from other pupils in order to access learning.
- They may become disaffected and refuse to attend school, thus losing out on learning opportunities and falling behind peers.
- Their social skills and confidence may be adversely impacted e.g. if their behaviour alienates peers, or if they become too anxious to interact with others.
- They may engage in self-harming behaviour.
- They may develop anxiety based school avoidance (EBSA).
- They may place themselves or others in danger.
- They may become a persistent substance abuser, affecting their ability to engage in learning.

EVIDENCE/DISCUSSION

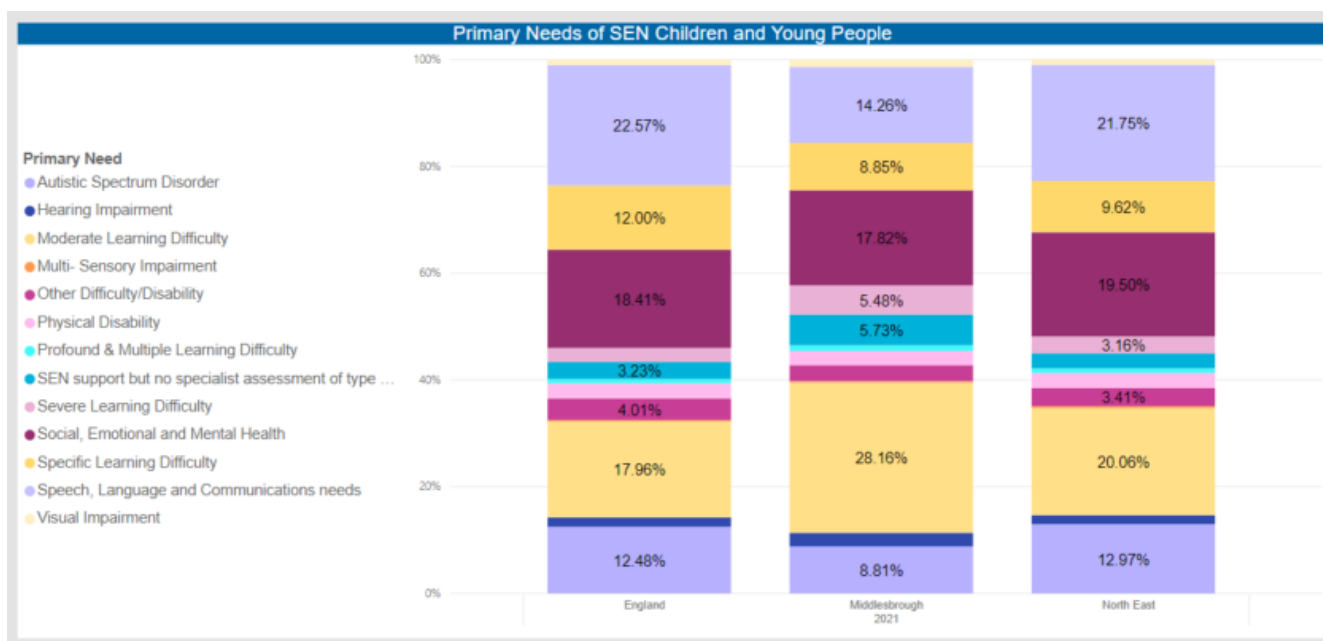
29 Nationally there are approximately 431,000 children and young people across the whole 0-25 age range with an EHCP. Within Middlesbrough, there are approx. 4800 children and young people classed as SEND, of this figure, approximately 1300 have an EHCP.

30 Nationally, of these children and young people with an EHCP there are around 325,000 children and young people who attend state-funded nursery, primary, secondary and special schools, non-maintained special schools, pupil referral units and independent schools. This represents 3.7% of the population. In Middlesbrough, this figure is 3.7% which is on par with the national figure, and slightly lower than the regional figure of 3.81%.

31 The table below shows a % breakdown of EHCPs by age range alongside the regional and national levels. There are some slight differences, but overall Middlesbrough is broadly comparable with national figures.

Age Range	Middlesbrough	North East	England
Under 5	4.6%	3.5%	3.8%
5- 10	31.9%	32%	33%
11-15	34.4%	37%	35.2%
16-19	22.7%	21.6%	21.1%
20-25	6.4%	5.9%	6.9%

32 The table below shows an analysis of the overall SEN cohort by primary need, including SEN support and those with an EHCP (around 4800 children).



From this, we can conclude that children and young people with a primary need of social, emotional and mental health needs, moderate learning difficulties and autism make up a significant proportion of the total cohort of children and young people with SEND in Middlesbrough (at around 60%).

33 As mentioned above the SEND Code of Practice was introduced to ensure that children and young people receive the support that they require through a single assessment process across Education, Health and Social Care. It is important to note that through the implementation of the SEND Code of Practice came the

creation of a new Local Area Inspection framework. This is a joint inspection across Education, Health and Social Care.

- 34 In March 2017 Middlesbrough Local Area was inspected by Ofsted and the Care Quality Commission as part of a new SEND inspection process, for the quality of our Special Educational Needs and Disabilities provision for children and young people. The inspection included scrutiny of the contribution of Education, Social Care and Health in ensuring that children and young people with Special Educational Needs and Disabilities make good progress and have their needs met in a timely manner. The outcome of the inspection in 2017 resulted in a Written Statement of Action to address significant concerns
- 35 In July 2019 the same Ofsted and CQC inspection team revisited the local area to inspect the sustained progress since March 2017 and to identify if sufficient progress had been made on each of the four areas for development. The Lead HMI Inspector explained that the inspection team observed sufficient progress in each of the four areas and that Middlesbrough (LA and Health) no longer needed formal monitoring.
- 36 The Local Area SEND Inspection Framework is currently being updated and it is anticipated that the new framework will include children and young people accessing Alternative Provision. Further news of the framework will be shared later this year.
- 37 To ensure that the local area continues to meet its requirements as outlined within the SEND Code there is in place a SEND Strategic Group. This strategic group has membership from the LA, Health, Educational Settings and Parents. There are a number of work streams focusing on key areas linked to our key priorities as identified within the SEND Strategy. The SEND Strategic group reports to the Children's Trust.
- 38 We continue to move forward with key developments to ensure that the needs of children and young people with SEND 0-25 in Middlesbrough are met. To support this work we have:
 - a. Ensured during COVID that children and young people with SEND have been supported across Education, Health and Social Care
 - b. Worked with families seeking feedback on provision and support within the local area. This work includes
 - i. working with our local parents forum Parents4Change

- ii. membership of parents on key work streams to support coproduction and key priorities
 - iii. feedback surveys
 - iv. parent virtual drop-in sessions
 - v. implementation of our parents partnership across Middlesbrough which supports the voice of all parent groups across the town.
- c. Implemented our new Outcomes Framework which was developed to collect data on progress for children and young people around softer outcomes. This is now embedded within our Annual Review paperwork and is seen as an example of good practice.
- d. In October 2019 we led on a Free School bid for a Tees Valley Free School for children and young people with Social Emotional Needs and for those with Autism. This bid was successful and the new school will be based in Redcar. Work is currently underway and we hope to see this open in October 2022. Between now and then, River Tees Multi-Academy Trust deliver an interim provision for students with these needs, and these students will join the new school when it opens. We will have 12 students attending in September, who would have needed to attend out of area independent schools without this interim arrangement.
- e. We have worked with our partners in Tees Valley Education to build a Free School on the site at Natures World which is called Discovery Special Academy and is currently based at Tees Valley Education's site at Brambles Primary Academy. This is for children with severe learning difficulties, some children who may also have needs in more than one area such as a physical disability or sensory difficulties and will be open on the new site in September 2022.
- f. We have worked with secondary colleagues to develop secondary mainstream Autism provision. A new base has been built on the Acklam Grange School site which now has 7 young people accessing this provision. This will rise to 16 over the next 3 years.
- g. We have worked with Outwood Academy Acklam to make provision for students with Autism. This will create up to 20 places for students with Autism Spectrum Conditions.
- h. Horizons Multi-Academy Trust have developed a satellite of Abbey Hill School within the campus on the Hollis Academy site. This will have 16

ASD students from September that need specialist ASD provision and would have gone to out of area independent schools instead. This is set to take on 8 new students per year, up to 40 students. This new provision has been named by the young people as Fairfax.

- i. We continue to work closely with Post-16 providers to develop a range of provision which fully supports our young people as they move into adulthood. By doing so we have increased the range of Post 16 opportunities for young people with special needs. Feedback from young people has identified that they feel listened too and are accessing the provision which they feel meets their needs and prepares them for adulthood.
- j. We have worked with our specialist settings to think of alternative ways to deliver provision, meet needs and increase capacity within the local area. This partnership work has seen more children and young people access local provision
- k. We have restructured a number of services through consultation with staff and stakeholders to provide greater support to children, young people, schools and settings at the earliest of stages. This includes our Alternative Provision Service, Inclusion, Assessment and Review Service and our Resources Team. This new service includes increased capacity and a seamless model of delivery. The new model is currently in a phased implementation.
- l. We have continued to invest in our Educational Psychologist service to ensure greater support is available to our most vulnerable children and young people. Our Educational Psychologists are providing a range of support to schools and settings as a result of COVID. The service continues to develop its traded arm to their delivery model where schools can purchase additional support through a service level agreement.
- m. Through COVID we implemented new ways of working to ensure the needs of children, young people and their families are met. This included putting in place a Lead Professional model which ensured all children and young people with an Education, Health and Care Plan had their plan risk assessed in line with government requirements. This model supported any changes to the plans and changes in agreed support.
- n. We have maintained good completion rate of Education Health and Care Plans during COVID which ensures that children and young people with SEND are assessed within the required timeframe. In the recently

published data it should that Middlesbrough's completion rate was 99% which was 9th nationally. This is a significant achievement considering the increased pressures as a result of COVID.

- o. We have worked with the new Designated Clinical Officer within Health to strengthen support systems and improve ways of working. This support has been invaluable during COVID as we have ensured those children with complex health care needs are monitored and supported.
- p. We have relocated and renamed our Early Years Specialist Support Service which was based in James Cook Hospital. This will now be called our Early Years and Primary Outreach and Inclusion Specialist Support Service. This will be based permanently at Hemlington Initiative Centre.
- q. We are currently in the process of developing a SEND/Inclusion Hub which will also be based at Hemlington Initiative Centre. The Hub will be used for families to access training and support. There will also be an accessible kitchen for young people who are visually impaired to support with independent skills as they move into adulthood.
- r. We have worked with Health to develop a new neurodevelopmental pathway which will be implemented in September 2021. This pathway will provide greater support for families of children who are on the autistic spectrum without the need for waiting for a diagnosis.
- s. We are currently working with Health to review Speech and Language support across Middlesbrough. A new model of delivery will be in place from April 2022.
- t. We have recently strengthened our SEND Strategic Leadership Group to include representation and oversight of Alternative Provision which we believe will be part of the new inspection framework.
- u. We are currently awaiting the National SEND Review which should be published later this year. This review will provide feedback regarding the impact of the SEND Code of Practice since implementation and propose some further changes.
- v. We have reviewed a number of services and strengthen our SEND Assessment Team by building in additional capacity to meet the increasing demands of EHCPs. Alongside this, we are working with the audit team to consider the quality of plans and the child's journey and impact of support across all service areas.

- w. We are currently updating our SEND sufficiency plan to ensure we have appropriate and sufficient provision within the local area which will support the increasing demands for specialist provision we have across the local area.

39 Through the ongoing improved local area strategic governance and oversight from our SEND Strategic Group which reports to the Children's Trust, alongside the regular contact with our lead SEND advisors both within the Department for Education and Health we can see that provision, opportunities and outcomes for children and young people with SEND have improved and continue to improve across the local area. There are a greater range of opportunities for children and young people and our improved data systems are supporting strategic planning arrangements.

CONCLUSIONS

40 We can see from the report that children and young people with SEND have a range of needs which need to be met on an individual basis by staff who have the skills and knowledge required across a range of partners.

41 As a local area we continue to work together to ensure that the needs of our children and young people are met and continue to develop our services in partnership with our families to meet needs and our statutory requirements.

BACKGROUND PAPERS

42 SEND Code of Practice: Appendix 1

<https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

AUTHOR: Caroline Cannon: Strategic Lead for Inclusion and Specialist Support Services