



**Founded by FLSE. Enabled by FLSE and nasen**

## THE NATIONAL SEND FORUM Minutes 3rd February 2021

### Virtual Zoom Meeting

**Present:** David Bateson OBE (DB) *Chair*, Lorraine Petersen OBE (LP) *FLSE*, Rona Tutt OBE (RT) *NAHT*, Caroline Wright (CW) *RCSLT*, Stephen Deadman (SD) *NAHE*, Michelle Haywood (MH) *WMSEND*, Carol Kelsey (CK) *NNPCF*, Richard Boyle (RB) *engage*, Chris Rollings (CR) *FLSE*, Julie Walker (JW) *sen.se*, Brendan Heneghan OBE (BH) *Engage*, Clare Dorer (CD) *NASS*, Catherine Ollington (CO) *NSN*, Adam Boddison (AB) *nasen*, Malcolm Reeve (MR) *WSS*, David Canning (DC) *BATOD/NATSIP*, Kiran Hingorani (KH) *SWALSS/NASS*, Penny Barratt (PB) *SSV*, Adelaide Chitanda (AC) *NGA*, Catriona Moore (CM) *IPSEA*, Jane Carter (JC) *PDnet*, *NASS*, Jan Hatchell (JH) *FLSE*, Kim Taylor (KT) *FLSE*, Steve Cullingford-Agnew (SC-A) *Equals*, Melanie Foster (MF) *NAS*

**Guests: None**

**Minutes:** Andy Petersen (AP)

#### 1. Welcome and Introductions

**For Action**

DB welcomed and thanked everyone for joining this virtual meeting.

#### 2. Protocol for meeting

DB went through some protocols for this virtual meeting

#### 3. Apologies

None

#### 4. Minutes of last meeting and matters arising

**Minutes amended:** Item 7 Page 4, Item 8 Page 6,

**Matters arising:** Update on Thought Leadership Paper - RT commented that she had included comments received after the previous presentation, although it had not been possible to include too much detail so as to keep the paper to a reasonable length. The main difference from the previous version came in the last paragraph. DB commented that it presented a broad spectrum of views but was not necessarily a consensus. The intention of this process was to provoke thought.

The minutes were agreed

## **5. Covid 19: schools and services.**

**Proposed letter re vaccination of staff (CR)** The letter had now been sent. A group of LAs were providing vaccines to special schools. Peer pressure was being used to persuade LAs who did not provide the vaccine. KT felt there were approximately a third of LAs who were not providing the vaccine. The main driver now was to try and make sure that staff who are in mainstream schools, particularly if they're doing intimate care, and staff of nursery schools, probably were the next group, who should be focused on because their children could not socially distance.

**SEND Reference Group Update (KT/AB)** Saliva testing was another area that had arisen recently. Although some special school children would not have enough saliva to actually be able to do the test. However, people should not be sceptical about testing since it was stopping chains of transmission. The SEND Reference Group was also now giving consideration to the resumption of OfSTED inspections which needed to be respectful of the experiences of Head-Teachers. Attendance was also now becoming an issue. 33% attendance in special schools appeared to be the average, but there were some schools below that, some as low as 15%, which was hard to justify.

JW reported that she had received an email stating that as from Monday, central government had said no special school staff are eligible for the vaccine. KT requested that she be sent this email and she would investigate.

AB commented that this was a good example of one part of government not always communicating with other parts of government. The reference group was trying to point those things out. AB considered that approximately 80% of special schools had now received vaccinations.

**JW**

## **6. Policy and DfE update**

No report

## **7. DISCUSSION: Identification of SEND (MR) and subsequent Thought Leadership paper**

MR gave a presentation on this topic (see attached)

RT questioned whether based on MRs statistics it was now possible to say what the primary need for a particular pupil was particularly in the light that the majority of pupils often had co-existing conditions. She felt it was difficult to disentangle the conditions and say which was the primary need that should be focused on. In short are the 13 categories actually meaningful standing on their own? RT also commented that there was a link with RCEs which would be very useful.

KT commented that data analysis was helpful and enabled schools to decide how to map their provision, and allocate resources accordingly. Thus, if you had lots of children in your school with autism, you would make a different decision about how you allocate your staffing resources so as to ensure that you meet the needs of pupils and train staff in order to provide them.

CK commented that she appreciated the data but found it very school focused. She felt that it was important that young people understand their need and how to manage their need throughout life as they go forward. It was important that the young person, where they have the mental capacity, understand their needs throughout their life. There was often a difference between mainstream schools and special schools who tried to ensure that young people understood a bit more about themselves and how to deal with the world. This also often applied to the wider health and education system. Like RT, CK was concerned about co-morbidity which produced issues in the system that led people to be siloed when they are designing services. CK also felt it was important to track data against other useful data like social deprivation.

MR commented that there was a lack of awareness in the system due to a lack of SEND training and a good understanding of SEND by school leaders. There was a default position in the system that the SENCO was the school expert on SEND.

DB agreed that there was that conflation and felt that there needed to be more discussion about arrangements needed for a child rather than the pathology. The actual performance of the youngster, intellectually, and cognitively was important when preparing their curriculum, because otherwise the child could be pathologized and medicalised.

MF commented that the data would be useful for LAs for strategic planning and planning of placements and provision as well.

SD commented that he was optimistic that the data might bring about a change in focus for a school. He felt it demonstrated the power of this information, along with the SEND Code of Practice, to spark a conversation in schools that would really make a difference.

KH commented that if all of this data for identification was used schools should be looking at the evaluation of the outcomes for young people. For example was the Ofsted framework nuanced in terms of asking head teachers to explain what their outcomes are for different groups of young

people? Also linking identification to outcomes, was there a consensus on what meaningful outcomes are? What did brilliant outcomes look like for young people with various levels of difficulty in those different categories?

CR commented that he was interested in the extrapolation of information and accountability. There was a lot of good practice in operation but there was a lack of support to mainstream colleagues. Newcastle was launching an Inclusion Quality Framework that every single school needed to have on their website, which explained what they were doing with their funding. CR felt that DfE and colleagues in health and social care should be accountable for having a longer-term view of the success stories for children and young people.

CW commented that from the RCSLT point of view there was concern that the collection of primary need data hides a huge number of children, young people who have speech, language and communication needs alongside their other needs. This potentially impacted on the support that was provided and commissioned for them, so alongside schools and local authorities, clinical commissioning groups should also be able to use this data to plan services. However the data currently available was not fit for purpose so there was a shortfall in what was commissioned.

DB commented that with outcomes, if the process and the arrangements were not right, then some of the outcome data was futile, because the input was not put in at the right time. DB felt that organisations should major on KPIs around quality of process, as well as longer term outcomes.

RB queried who made the decision about categories and against what criteria? The largest number of young people identified with special educational needs came out of an identification of their reading and maths. RB questioned the end result of the categorisation and where this would go in the future. Most of the decisions were made in mainstream settings and he was concerned that they were made out of context. Young people were being identified against an outdated curriculum where there was no knowledge of what the outcomes of that curriculum were supposed to be.

KT commented that information should be derived from EHCPs, or from assessments. There was anecdotal evidence of schools who make their own decisions, because the quality of assessments were not as good as they used to be. Historically the information was very precise. EHCPs now sometimes do not give cognitive information and could be misleading. KT felt that there were many colleagues within primary schools that did not know how to complete the forms. KT felt that the issue was about the competency of the people that fill the form in, but it was also about also what we do with it on a practical basis.

DB questioned whether people tell the truth anymore when completing the forms. Psychologists are told not to prescribe so closely that it determines provision.

RB commented that he had looked back to 1944 figures for identification and discovered that the figure hadn't changed much since 1944. There were about 3-4% of the SEND population in specialist

provision from around about 20% of identified needs of all the children that are in mainstream schools.

CO commented that when working with local authorities, this data was really heavily relied on when it came to forecasting and future planning for the number of special places in the area.

CO felt that it might be useful to have conversations with local providers to determine what was needed in a particular area and to enhance the information available on need. People tended to forget other sources that they need to engage with when they were doing their future planning.

CK agreed with KT on cognitive assessment. She also agreed with DB that you needed to have proper conversations when you were first identifying children's needs. Nothing in teacher training helped with that problem. Practitioners need to get experience to be able to connect with parents so that they understood the impact of their child's learning disability and its impact on their future progress.

DB commented that what was a good outcome for some young people. was not somebody else's good outcome. DB related an anecdote about an eighteen-year-old with PMLD. DB suggested that the forum reflect on the presentation and send any further thoughts to MR. DB requested information about the makeup of the group – (LP later replied that as per the Minutes of the meeting 7th October - MR, MF, RB, DC and possibly CK if she had capacity). DB suggested that the group meet to consider the data presented.

## **8. Regional Centres of Excellence NSEND Research Update (RT/CD/MR/KH/DB/KW)**

DB introduced the research

RT commented that she was keen to link with the DfE SEND review and queried whether any member had a timescale for when input would be allowed. Also, AB had stated at the last meeting that there might be a link with Whole School SEND contracts and RT queried how this had progressed.

AB responded that he anticipated some form of sector consultation to take place within the next 2-3 months. This process would be bigger than that undertaken for the 2014 reforms.

RT queried whether it would be useful for NSEND to put in a paper at this stage or to wait for the consultation?

AB responded that NSEND should do both. With regard to WSS contracts the DfE had intended to go through a re-tendering process so as to align the contracts with the comprehensive spending review. However this had been suspended and a temporary extension to the budget had been given for 1 year. This had been undertaken verbally and there was no written foundation for this position. WSS were therefore in discussion as to what would be the priorities for the coming year. AB supported this

approach since this would enable future work to be aligned with the results of the review. AB had heard that the results of the review might be implemented from September 2023.

DB queried whether the RCE review should be sent again – AB responded that it should.

RT felt that the paper should be given an update in the light of the discussions at the last NSEND meeting.

DB suggested that consideration be given to the use of the researcher in other projects such as post 19 RCEs.

DB

RCE group

### **9. STEM enquiry from BT**

DB had forwarded a paper from BT

### **10. Review of Social Care**

On 15 January 2021 the government launched the independent review of children’s social care.

This review will be independently led and offer a once in a generation opportunity to tackle the

issues which affect children, young people and families with lived experience of children’s social

care. DB had received information that the government were looking for people to join their Experts by Experience Group. DB had circulated the relevant papers.

### **11. Jay George message via LinkedIn**

This was a message that DB had received – DB would be pleased if somebody in the forum thought it was worth their while going on LinkedIn to contact Jay George.

### **12. Thought Leadership – next papers**

DB suggested that papers currently in progress be completed before undertaking new topics.

### **13. Updates from Members**

DB proposed that members send in their updates by email for inclusion in the minutes. LP proposed that the deadline for these should be 10.02.21.

BH commented that he had an urgent update since on Tuesday 09.02.21, there was an Engaging Connect session from Pete Smith from the Wirral who had experienced a COVID and Ofsted inspection. BH felt their experience might of interest to members. Information about this was circulated by DB following the meeting.

### **NAHE**

1. Regular webinars being organised at the moment. Some general discussions for school leaders and others with a specific focus e.g. CAMHS inpatient units, hospital ward teaching
2. Range of network groups has increased to include – Maths, English, Science, Computing, Careers, Primary, SENCOS, Business Managers
3. Annual conference (virtual) being planned for summer 2021
4. Joint webinar between NAHE and PRUsAP took place in January
5. Some concerns over the extent to which LAs are passing on the 8% increase in hospital education funding to schools

### **IPSEA**

1. IPSEA is hosting its annual SEN Law Conference jointly with Douglas Silas Solicitors and Matrix Chambers on 2-4 March, providing the latest legal and policy updates across all aspects of SEN law.
2. We are keeping all our website pages on Covid-19 and SEN provision up to date, to reflect changes in government guidance.
3. We contributed to the England Civil Society report to the UN Committee on the Rights of the Child
4. We submitted evidence to the ongoing House of Commons Education Select Committee inquiry into home education

### **Engage**

We have continued with the Engage and Connect events, alongside NASS. The next two are:

1. Feb 23rd Rich Berry – Emotional Growth and Relationships in Children.
2. Mar 24th Barry Carpenter – Building Emotional Resilience and Re-igniting Learning and Wellbeing.
1. The National Conference is still pencilled in for July 1st and 2nd in Manchester. We have Kiran Hingorani, Charlie Taylor, Nick Whittaker and Diane Osagie lined up.
2. The National Student Awards will hopefully still be held in Manchester on June 30th.
3. The National Creative Awards for students are still currently open and accepting short stories, poems and photographs. This year's theme is Journeys.

### **pdnet**

pdnet have a number of training opportunities including:

1. pdnet Level 1 Training Raising Awareness of Physical Disability
2. pdnet Level 2 Training Supporting Learners with Physical Disability

3. Supporting Young People with a Physical Disability in the Post-16 Education and Training Sector
  4. Complete Your Accessibility Plan
  5. Transitions Toolkit
- <https://pdnet.org.uk/pdnet-training/>

## NAS

We believe that every child has the right to an education and to achieve their potential. The National Autistic Society supported an inquiry by the All-Party Parliamentary Group on Autism (APPGA) into how well the education system in England currently works for autistic children and young people.[1] The inquiry found that:

1. 70% of parents said that their child waited more than six months for support to be put in place at school, and 50% waited more than a year
2. 42% of parents said their child was refused an assessment of their special educational needs the first time it was requested
3. 40% of parents said that their child's school place does not fully meet their needs

For many families, the only way to get the support their child needs is by taking legal action. This is not how the reformed SEND system is supposed to work: the ministerial foreword to the SEND Code of Practice (2015) says that a key aim of the Children and Families Act 2014 was to make the system 'less confrontational and more efficient'.

The SEND Review needs to tackle this situation, ensuring that the system supports the early identification and support of autistic children.

Key focus areas for NAS:

1. Identifying needs and data sharing. Two key things could help in this regard:
  1. When a positive diagnosis of autism is made, this should be shared with the council so they can plan for when the child is likely to start school etc.
  2. A positive diagnosis of autism should trigger the offer of an EHC Needs Assessment.
  3. Tackling delays in support. Statutory time limits for assessments are regularly missed. This needs tackling, including by bringing in more capacity to councils. Schools are often required to co-ordinate the EHC Plan development, though the statutory duty is on the council.
  4. Getting it right first time/Avoiding disputes and appeals. The system needs to change to ensure that good, holistic assessments are carried out and that fewer parents have to fight to have the right things included. At the moment, appeals relating to autistic children are the biggest group in appeals to SENDIST. The result is in favour of the child and their parents in >90% cases.
  5. Embedding autism understanding. All school staff should be trained in autism. Autistic children and their parents both say that having a teacher that understands autism is the thing that would help them most at school.

6. Improving support in mainstream. The Government mentions this, but it is unclear to what extent it will come with the additional funding for SEN Support that is required to make a difference.
7. Post-16. There is still too often a cliff edge after school. Transition needs improving substantially.

**14. Relevant updates from other affiliations, forums, trusts, alliances and partnerships**

None

**15. NSEND Forum Operation**

No reports

**16. Any focus for actioned statements of agreement including future invitees**

NIL

**17. AOB**

DB thanked MF for her contribution to the forum, she was retiring from NAS at the end of the month. MF thanked DB and expressed her gratitude to all the members for their contributions and friendship. The person who would be attending on behalf of NAS was Matt Tiplin.

**18. Dates for 2021**

**31 Mar, 26<sup>th</sup> May, 7<sup>th</sup> July**

DB thanked everyone for attending. **Next Meeting to be held on 31<sup>st</sup> March 2021.**

