



Department  
for Education

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

## **Progress and next steps**

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# Foreword

Too many children and young people who are disabled or identified as having special educational needs (SEN) have poor outcomes in life and they and their families can struggle to get the support they need.

In our Green Paper, *Support and aspiration: A new approach to special educational needs and disability* we set out for consultation our plans for radically reforming the current system for identifying, assessing and supporting children and young people who are disabled or have SEN and their families.

This report responds to the consultation, sets out the progress we have made and our next steps in taking forward our plans, through legislation and in other ways. It is being published alongside a summary of the consultation responses.

I am grateful to everyone who took the time to respond to the Green Paper and for their thoughtful responses. There is strong support for the Green Paper's analysis of the problems that children, young people, families and professionals face and for our vision of a better system. Many people wanted to know more about how that vision will be achieved in practice and pointed to the challenges of doing so in a difficult financial climate and at a time of significant reform in education and health services.

The difficult financial situation we face makes it vital for us to make the best possible use of resources. The Green Paper proposals and the Government's wider reforms in education and health will support this through better planning, streamlining assessment processes, making the system less adversarial and focusing on achieving better outcomes.

We owe it to the children, young people and families who get a poor deal from the current system, and to those who work with and support them, to make these changes as quickly as possible. We intend to introduce legislation early in 2013 so that we can fulfil the commitments we made in the Green Paper. We are already testing out our reforms through local pathfinders, developing the knowledge and skills that will be needed for their successful implementation, and making sure that we have the right measures in place to hold services to account. The lessons learnt from the pathfinders will help shape the changes we make to the law.

I am grateful to all the local authorities, local health services, early years settings, schools, colleges, parents and carers, children, young people and voluntary and community sector organisations involved in the pathfinders. It is only by working together that we can make sure disabled children and young people and those with SEN get the support they deserve.

**Sarah Teather MP**

Minister of State for Children and Families

# Summary of progress and next steps

## A new system

1. In the Green Paper we set out our vision of a system in which:
  - Children's special educational needs are picked up early and support is routinely put in place quickly;
  - Staff have the knowledge, understanding and skills to provide the right support for children and young people who have SEN or are disabled wherever they are;
  - Parents know what they can reasonably expect their local school, local college, local authority and local services to provide, without them having to fight for it and are more closely involved in decisions about services;
  - Children who would currently have a statement of SEN and young people over 16 who would have a learning difficulty assessment have an integrated assessment and a single Education, Health and Care Plan which is completed in a shorter time and without families having the stress of going from pillar to post to get the support they need; and,
  - Parents have greater control over the services they and their family use with:
    - every family with an Education, Health and Care plan having the right to a personal budget for their support and
    - parents whose children have an Education, Health and Care Plan having the right to seek a place at any state-funded school, whether that is a special or mainstream school, a maintained school, Academy or Free School.
2. This report sets out our response to the consultation on the Green Paper, the progress we have made since it was published, and the next steps we will take to put the Green Paper reforms in place, including through legislation.

## **Meeting the commitments we made**

3. In the Green Paper we made commitments that by 2014 we would introduce:

- A single assessment process which is more streamlined, better involves children, young people and families and is completed quickly;
- An Education, Health and Care Plan which brings services together and is focused on improving outcomes; and
- An offer of a personal budget for families with an Education, Health and Care Plan.

4. We intend to introduce legislation through a Children and Families Bill in this session of Parliament to implement the changes to the law required for our Green Paper reforms. The legislation will draw on lessons learnt from the pathfinders. Building on the reforms to the health services and drawing on the recommendations of the Children and Young People's Health Outcomes Forum, it will include provision to ensure that services for disabled children and young people and those with special educational needs are planned and commissioned jointly and that there are clear duties on all of the agencies involved.

5. We aim to publish a draft Bill in summer 2012 for consultation and pre-legislative scrutiny. We will consider carefully any proposals which are suggested as part of that process and remain committed to introducing a Bill to Parliament during the current session.

## **A better deal for children, young people and families**

6. We are committed to securing a better deal for children, young people and families. The consultation responses revealed some misconceptions about our proposals that it is important to dispel:

- Parents will not lose the legal protections offered by the current statement of special educational needs in the new system; we plan to extend those protections to young people over 16 in further education;
- Families of children with an Education, Health and Care Plan will have the option of a personal budget for their support but will not be forced to take up that option. The support in the Plan will be provided regardless of how they choose to receive it;
- Our plans to move from two school-based categories of SEN to one will not reduce the funds for schools to support children with SEN. We are working with experts, including teachers, head teachers, Special Educational Needs Coordinators, educational psychologists and others to make sure that the

changes improve the identification of children with SEN and provide the best advice to schools.

## **Testing the best ways of achieving our reforms**

7. Achieving our ambitions for disabled children and young people and those with special educational needs and their families will mean changes in the law. We have made clear that we intend to introduce a Children and Families Bill during the second session of this Parliament to achieve that. But it will also depend on changes in the ways that education, health and social care professionals work with children, young people and families and in the ways they work with each other.

8. In 2011 we set up a pathfinder programme. Twenty local pathfinders involving thirty one local authorities and their health sector partners are testing the key reforms including:

- A local offer of services;
- Integrated assessments and Education, Health and Care Plans;
- Personal budgets; and
- Voluntary and Community Sector organisations playing a role in providing greater independence and improving parents' confidence in the assessment process.

The lessons learned from the pathfinders will help us to decide how best to change the law and will be reflected in the legislation we aim to introduce to Parliament in the current session. The pathfinders will also help us to consider what else can be done to support the reforms and enable us to share widely what works.

## **Developing the expertise to support our reforms**

9. We are working with the Council for Disabled Children as our key partner to build on and share the expertise in the voluntary sector in supporting disabled children and young people and those with SEN and their families.

10. Some £6 million a year over two years is being provided to a range of different organisations who will support local areas, including the pathfinders, in putting into practice some of the approaches we know work well in improving outcomes for children and young people. These include:

- Providing short breaks for families with disabled children;
- Extending the Early Support approach to supporting families with young disabled children to those with older children and young people and developing training for key workers to provide support for parents;
- Supporting a national network of local parent partnership services offering information and advice to parents about special educational needs;

- Helping young people with learning difficulties and disabilities prepare for adulthood;
- Helping early years professionals to identify children's language needs and improve their early language development;
- Developing approaches to early intervention in mental health support for children and young people; and
- Supporting local Parent and Carer forums in working with local authorities to help design and develop local services.

## **Making progress in taking forward the Green Paper reforms**

11. In addition to setting up the pathfinder programme and funding organisations to build expertise in supporting children and young people and their families, we have taken forward many of the specific commitments we gave in the Green Paper.

### **Early identification and assessment**

12. To identify children's needs early we have:

- Introduced a new early years progress check for children at age two and published a reformed Early Years Foundation Stage – to be introduced from September 2012. This will help to pick up problems early and support plans for tackling them; and
- Made a commitment to extend free early education to around 260,000 disadvantaged two year olds (who will include children with special educational needs) by 2014-15 and consulted on our plans for achieving this.

### **Giving parents control**

13. To give parents greater control over the support for their family we have:

- Provided over £800 million for short breaks for families with disabled children between 2011-12 and 2014-15 through the un-ringfenced Early Intervention Grant and required local authorities to provide a range of short breaks and publish a statement of the services they offer, building on the growth of short breaks in recent years (105,000 more children received breaks in 2011 than in 2008); and
- Set up trials to test direct payments to families for education support – this will

help us as we develop and test our plans to give parents of children with Education, Health and Care Plans the option of a personal budget for their support.

## Learning and achieving

14. To develop the knowledge and skills of teachers, lecturers and other staff in supporting children and young people who are disabled or have SEN we have:

- Given more schools the opportunity to convert to Academies and gain the freedom to innovate, improve standards and raise the achievement of all pupils. Twenty-eight maintained special schools have chosen to convert to special Academy status to date;
- Enabled parents, voluntary sector and other organisations to come forward with proposals for special Free Schools to increase the choices open to parents of disabled children and children with SEN. Three special Free Schools are now at pre-opening stage, with a likely opening date of September 2012 and we are considering applications for schools to open in September 2013;
- Made the highly successful *Achievement for All* model available to any school that wants it. 780 schools are already using the model and of these 164 have gained a Quality Mark award to recognise excellence in schools that improve outcomes for children with special educational needs;
- Launched a scholarship scheme for teachers which has already made awards to around 400 teachers to undertake specialist postgraduate qualifications and introduced a similar scheme for talented support staff to gain degree-level qualifications to improve their knowledge and expertise;
- Increased the number of special school placements available for trainees undertaking initial teacher training (ITT) by around 400 places to 900 in 2011/12, enabling trainee teachers to develop skills and approaches which they can use to improve their teaching throughout their initial training and induction;
- Provided funding for up to 9,000 new Special Educational Needs Coordinators (SENCOs) to complete the mandatory postgraduate SENCO award by the end of 2011/12. Funding for a further 1,000 SENCOs will be provided in 2012/13;
- Developed materials on specific impairments to support continuing professional development and developed a greater focus on special educational needs within standards for qualified teacher status and the new professional qualification for headship (NPQH);
- Published our response to the consultation on commencing a new duty requiring schools and local authorities to provide auxiliary aids and services for disabled pupils, including specialised computer programmes, hoists and sign language interpreters. We plan to introduce the new duty in September 2012 to ensure that no disabled child who requires these aids and services need miss out;



- Set up clusters of Further Education colleges, independent specialist providers and special schools across England to share their practice and their knowledge and skills in supporting young disabled people and those who have SEN;
- Started to work with experts in the education and health sectors to improve the way schools identify children with SEN, including those with behavioural, emotional and social difficulties so that children's needs are picked up and the right support is put in place;
- Funded the extension of the Improving Access to Psychological Therapies Programme to children and young people. This will drive improvements and transform services for children and young people's mental health. In addition to the £32m already committed over the next four years, we have recently upped the level of pace and ambition with additional investment of up to £22m by 2014/15; and
- Sharpened accountability for the progress of the lowest attaining 20 per cent of pupils by including specific measures in the performance tables from December 2011 (for Key Stage 2) and January 2012 (for Key Stage 4); this will give credit to those schools who do well in supporting this group of pupils.

### **Preparing for adulthood**

15. To help give young people the opportunities and support they need to succeed in education, get a job and live independent life we have:

- Developed plans for an Education, Health and Care Plan that provides statutory protections for young people over 16 and up to 25 in colleges that are comparable to those associated with SEN statements
- Consulted on proposals for a more flexible approach to programmes of study for young people over 16 so that they can follow a programme designed to meet their individual needs;
- Provided £4.5 million to colleges to test innovative ways of delivering high quality work experience placements for 4,000 young people aged 16 or 17 who are not in education, employment or training (NEET), around 400 of whom will have SEN or be disabled; and
- Developed plans for trialling supported internships, a new route into the world of work for young people with a statement or Learning Difficulty Assessment for whom an Apprenticeship is not a realistic option. Funding of £3 million is being made available to support the trials.

### **Services working together for families**

16. To improve the ways services are provided locally we have:

- Commissioned action research to consider the role of the local authority in a changing environment; this is looking specifically at how local authorities support disabled children and those with SEN;

- Introduced reforms to local authorities and health services to improve the planning, commissioning and delivery of services. The Health and Social Care Act will support improvements for disabled children and those with special educational needs;
- Published proposals for funding provision for high needs pupils and students which would bring together funding for pupils and students under 16 and over-16 and provide a clearer and more consistent basis for funding specialist provision; and
- Made arrangements to put the training of Educational Psychologists on a secure footing. We are meeting the costs of tuition fees and first year bursaries for those training to become Educational Psychologists up to 2013-14 and establishing a national group develop a new system for accrediting those providing placements for trainees.

Further details are given in the chapters that follow.

## Next steps

17. One of the key ambitions of the Green Paper was to give families greater control over the support they receive. We are already working closely with the National Network of Parent Carer Forums and supporting local parent carer forums to have an increasing role in shaping policy and the commissioning of services in their area.

18. We are very grateful for the commitment, hard work and expertise that parent carers bring to improving local services for families across their local area. We know from our pathfinders that a genuine partnership with parents and carers is essential to achieving the changes we want to see. As we take forward our reforms this means giving parents, children and young people greater influence over both decision making and policy development.

19. We want to give greater control to disabled children and young people themselves – to make them the ‘authors of their own life stories’. Currently, across the country, participation for disabled young people or those with SEN is patchy. For some areas it is a real strength and is reflected in the quality of services and the levels of confidence that young people have in them. But that is not the case everywhere.

20. We will work with existing successful groups to establish a Young People’s Advisory Group to help shape the next stages of our reforms nationally and drive young people’s participation at local level. The Group will make sure we address the issues that matter to children and young people and will be part of a broader National Advisory Group which will support us in implementing the Green Paper reforms.

21. We are committed to achieving the ambitious programme set out in the Green Paper. We have made progress in taking forward the commitments we made. But there is more to do.

22. The practice developed by the pathfinders will be shared widely with other local areas by the pathfinder support team, working with the Council for Disabled Children. An interim evaluation of the pathfinders will be published by October 2012, with a final evaluation report following in 2013.

23. We intend to introduce legislation in this session of Parliament to implement the changes to the law required for our Green Paper reforms from 2014. A draft Bill will be published in summer 2012 and will be subject to consultation and pre-legislative scrutiny. We will consider carefully any proposals which are suggested as part of that process and remain committed to introducing a Bill to Parliament during the current session. The lessons learned from the pathfinders will inform each stage of the legislative process.

# 1 Early identification and assessment

1.1 The Green Paper highlighted the importance of identifying children's support needs early so that parents and professionals can put the right approach in place quickly. We made a number of proposals to ensure high quality early identification and intervention for all children who need it, as well as effective integrated support for children with the most complex needs.

## Green Paper proposals:

- Professionals from health services, such as health visitors, and from early years settings will work with parents to assess the development of all children to clarify where they need additional support or a different approach, in particular through the health and development review for children aged between 2 and 2½ years;
- High quality early education and childcare will be accessible to all children;
- By 2014, children and young people aged from birth to 25 who would currently have a statement of SEN or learning difficulty assessment will have a single assessment process and 'Education, Health and Care Plan' for their support which will afford parents the same statutory protection as the statement of SEN. All the services on which the child or young person and their family rely will work together with the family to agree an Education, Health and Care Plan which reflects the family's needs and ambitions for the child or young person's future outcomes covering education, health, employment and independence. The plan will be clear about who is responsible for which services, and will include a commitment from all parties across education, health and social care to provide their services;
- Local pathfinders will test how to reform radically the statutory SEN assessment and statement and explore the best replacement, including whether the voluntary and community sector could coordinate assessment and bring greater independence to the process; and
- The time taken to complete the assessment process will be reduced.

## Early identification and early development

### Consultation responses

1.2 The Green Paper asked for views on how arrangements for identifying children's Special Educational Needs (SEN) and impairments in the early years and providing better support could be improved.

1.3 Nearly half (45 per cent)<sup>1</sup> of those who responded called for better trained and qualified staff. Knowledge of child development was seen as essential so that staff could identify early signs of SEN and be more aware of conditions such as autism. This would allow prompt referrals for expert assessment where needed. The Government's plans for an additional 4,200 health visitors by 2015 were welcomed but respondents stressed the need for training to enable them to fulfil the role. There were calls for improving the screening of children in early years to help professionals identify the triggers for additional support more accurately and avoid labelling children as having SEN unnecessarily.

1.4 A similar number of respondents said that the identification of SEN and impairments in the early years and support for children could be strengthened by speeding up the process.

1.5 Many parents mentioned the struggles they encountered trying to convince health and education professionals that their concerns about their children's development were not unfounded. Some suggested that information should be available to parents clarifying when children would be regarded as having SEN rather than working below the national average. A number of suggestions were made for joining up approaches across agencies to promote better identification of children's SEN. These included better liaison between pre-school settings and primary schools and better sharing of information between health and education professionals to avoid the need for parents to provide the same details to different people on numerous occasions.

### Progress

1.6 Since the Green Paper was published, Graham Allen's review of early intervention and Dame Clare Tickell's review of the Early Years Foundation Stage have both reported. Frank Field reported the findings of his review of life chances before the Green Paper was published.

1.7 Building on these three reports, we set out our vision for the foundation years in July 2011 through two complementary publications: *Families in the Foundation Years* and *Supporting Families in the Foundation Years*. These

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<sup>1</sup> Where we give a percentage figure, this is based on the total responses to a particular question. Different numbers of people responded to separate questions. A report on the consultation response is available from [www.education.gov.uk](http://www.education.gov.uk).

address some of the issues highlighted in the Green Paper consultation responses, and set out our plans to ensure timely support for young children and families from pregnancy through to age five. This includes: reforming the Early Years Foundation Stage; increasing flexibilities in the 15 hours free early education entitlement for 3 and 4 year olds (with a sharper focus on quality improvement); introducing a new entitlement for 2 year olds (extended to 40 per cent of 2 year olds by 2014); reforming the network of Sure Start Children's Centres (which will continue to be accessible to all families but offer services focused towards those in greatest need); trialling of parenting classes; and increasing the number of health visitors supporting families from birth to age five.

### **The Early Years Foundation Stage**

1.8 Early Years Foundation Stage (EYFS) reform (taking forward Dame Clare Tickell's proposals) provides for a stronger focus on those areas of learning most essential for children's healthy development and future learning (communication and language, personal, social and emotional development and physical development); and earlier intervention for those children who need extra help through the introduction of a new early years progress check at age 2 from September 2012.

1.9 We published the reformed statutory framework for the Early Years Foundation Stage (EYFS) in March 2012 which will come into effect in September 2012. It retains the requirement for settings to make reasonable adjustments to support the needs of children with SEN and disabled children. We will ensure that the guidance provided to support teacher judgements for assessment at age five, the EYFS Profile refers to the need to make reasonable adjustments for children with SEN and for the setting to develop relationships with other relevant professionals and the child's parent/carer so a clear picture is gained of the child's learning and development. The Profile report gives Year 1 teachers information about each child's stage of development and learning needs, helping them to plan activities for children starting Key Stage 1.

1.10 With the new EYFS progress check at age 2 all settings will provide parents with a written summary of their child's development, focused on the three prime areas of learning (identified in 1.8 above). This will highlight what their child can do, any areas of concern, and how the setting plans to tackle any emerging issues. Where timing allows parents will be able to share information from the check with their health visitor to support the Healthy Child Programme health and development 2 year review.

## Health and Development and Early Years Reviews

1.11 We are recruiting and training an additional 4,200 health visitors by 2015<sup>2</sup> to deliver a full service and family offer, ranging from community and family support to additional services related to SEN or disability. Identifying whether a child is disabled or may have SEN is a core part of the training for health visitors. As capacity grows, every Sure Start Children's Centre should have access to a named health visitor working with other health professionals and social workers where families have ongoing needs requiring multi-agency support. When parents have concerns about their child's development and learning, they will be offered additional support and, where appropriate, referred to another health professional such as a speech and language therapist or a paediatrician. This will be particularly important in identifying children's support needs.

1.12 We are working to bring together the early years progress check at age 2 in the new EYFS with the Healthy Child Programme health and development review at age 2 to 2½ to create a fully integrated early years and health review. We are looking at possible approaches with health and early years experts and a number of local areas. As part of this work we will look at how the new EYFS progress check can contribute to the SEN single assessment process, drawing on the findings from the Green Paper pathfinders.

### Early Language Development

1.13 The Government's recent announcement of the Early Language Development Programme for practitioners working with children up to five years old will focus on improving communication and language skills for children in the foundation years, particularly those with SEN.<sup>3</sup> The programme will help the most disadvantaged children, with a special focus on under-3s who are at risk of language delay. It will provide early language expertise for parents and family support workers. We have commissioned the Early Language Consortium, led by I-CAN the children's communication charity, to deliver a three year early language training programme through Children's Centres for people working with children up to 5 years old.

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<sup>2</sup> Health Visitor Implementation Plan – progress report, Department of Health, December 2011 <http://www.dh.gov.uk/health/2011/12/health-visitor-progress-report/>

<sup>3</sup> The Early Language Development Programme [http://www.ican.org.uk/What-we-do/Projects/Early per cent20Language per cent20Development per cent20Programme per cent20ELDP.aspx](http://www.ican.org.uk/What-we-do/Projects/Early%20Language%20Development%20Programme%20ELDP.aspx)

## Free Early Education

1.14 We have recently consulted on reforms to the entitlement to free early education for all 3 and 4 year olds, as well as a new entitlement for 260,000 disadvantaged 2 year olds<sup>4</sup> which should improve access to early education and childcare for disabled children and children with SEN. Our proposals include:

- clearer quality criteria for providers to deliver free early education places to ensure that free early education is of the highest possible quality and
- making the entitlement more flexible to meet the needs of working parents, so free hours can be taken slightly earlier in the morning, later in the evening and compressed into two days a week.

1.15 Currently around six out of ten 2 year olds from the poorest 40 per cent of families do not receive any early education. In his Autumn Statement, the Chancellor announced that we will be expanding the previous commitment to an early education entitlement for disadvantaged 2 year olds so that around 260,000 children or 40 per cent of all 2 year olds will benefit from the new early education entitlement by 2014-15, up from 20,000 in 2010. We have recently consulted on proposed criteria for the first phase of implementation for 20 per cent of 2 year olds which mirror those for free school meals, and include looked after children. Disabled children and those with SEN who meet these criteria will be eligible. We will bring forward proposals later this year for eligibility criteria that will extend that entitlement to around 40 per cent of 2 year olds in due course.

1.16 We envisage that in addition to children who meet the entitlement criteria, the funding allocated can be used by local authorities to offer places to other 2 year olds. We hope that local authorities will make the most of this flexibility. We have recently consulted on a proposal to make clear in guidance to local authorities that disabled children and those with SEN should be a first priority when considering additional free early education places.

## Childcare

1.17 We have announced plans for a new annual report to parents and elected Members on the state of the childcare market in their area. The report will include information on the sufficiency of accessible childcare for disabled children and children with SEN. This will replace the current bureaucratic three-yearly childcare sufficiency assessment process.

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<sup>4</sup> Consultation on Early Education Entitlement, DfE, 2011

<http://www.education.gov.uk/childrenandyoungpeople/strategy/laupdates/a00200670/2yo-early-education>



1.18 To support local authorities in meeting their duty to secure sufficient childcare we have published information on the Disabled Children's Access to Childcare pilots. This includes case studies which will help local authorities develop their strategies for expanding the quality, affordability and type of childcare available to families of disabled children and children with SEN.

### **The Early Years workforce**

1.19 We have asked Professor Cathy Nutbrown to lead an independent review on qualifications in early education and childcare. The Review, which is expected to report in summer 2012, will examine how best to strengthen training, qualifications and career pathways in childcare and early learning, both for people new to the early education and childcare sector and those already employed there. It is essential that staff working in the early years sector are able to recognise that children develop and learn in different ways and at different rates and have the skills to support all children. The review is considering how to ensure that qualifications for those working in the early years sector are inclusive and equip people with the skills they need to successfully support disabled children and children with SEN. Further information, including an interim report from the review, was published in March 2012, is at [www.education.gov.uk/nutbrownreview](http://www.education.gov.uk/nutbrownreview).

# A single assessment process and Education, Health and Care Plan

## Consultation responses

1.20 Our proposals for a single assessment process and 'Education, Health and Care Plan' (EHCP) were well received. Respondents supported the principles of change set out in the Green Paper, agreeing that the current system is adversarial, overly bureaucratic and not sufficiently focused on outcomes for children and young people. The majority of respondents agreed with the proposal to replace the statement of SEN and learning difficulty assessment for children and young people with a single statutory assessment process and an EHCP bringing together all services across education, health and social care. Many also felt that there should be flexibility for ongoing assessment and fast tracking at a later age for SEN which did not present in a child's early years.

1.21 41 per cent of respondents stressed that the success of the single assessment process and the EHCP depended on agencies working together. They noted the present difficulties in getting busy professionals together, establishing accountability and maintaining effective communication. Nearly a quarter (23 per cent) felt that to have the confidence of parents the EHCP would need to have the same statutory basis as the statement of SEN and a comparable legal obligation on all agencies to provide the services in the plan.

1.22 We asked how a single assessment process could improve parents' experience and offer a more cost-effective approach for services. Almost half (49 per cent) of respondents believed that it would result in a more holistic approach to determining the support needed and quicker access to services. Slightly fewer (42 per cent) thought that it would save time for parents in having to repeat information to a succession of different professionals. 29 per cent thought that there could be cost savings from a reduction in administration and bureaucracy and 24 per cent felt that a key worker for each family would be helpful in guiding them through the process, co-ordinating the various agencies involved and keeping families up to date on progress.

1.23 We asked which assessments should be incorporated into the single assessment process and EHCP. 39 per cent of respondents cited medical assessments, including assessments of the child's physical development and mobility and any related need for therapies; tests for hearing, vision and the ability to communicate and interact. 21 per cent cited speech and language assessments. 34 per cent stressed that it was essential for the views of parents and the child to be central to assessment and planning. 31 per cent said that educational assessments should establish the child's ability to learn, including the measures specified in the Early Years Foundation Stage, with 25 per cent mentioning educational psychology assessments. 27 per cent felt that social/emotional assessments were necessary, including emotional literacy, personal/social care needs, behaviour analysis, home environment and social context.

1.24 We asked about expanding the scope of the proposed single assessment process and plan beyond education, health, social care and employment. 85 per cent of respondents focused on the potential of the single assessment process to improve cross-agency working and cost-effectiveness and 24 per cent thought it would support better person-centred planning. Where respondents disagreed with expanding the scope of the process they cautioned against over-complicating the system, adding to bureaucracy, making co-ordination more difficult, and raising parents' expectations which local authorities would then struggle to meet. Housing, transport, youth work and personal mentoring to help transition to adult life, leisure and social opportunities were suggested by some as other areas to be included in the assessment and plan.

1.25 We asked about the role the voluntary and community sector in the assessment process. 68 per cent felt it should provide information and support for families, with 31 per cent suggesting that advice to parents could include explaining the assessment/planning process, making them aware of their rights and signposting to relevant organisations including parent support groups. 26 per cent thought that the voluntary and community sector was well-placed to provide an advocacy service to parents and children, ensuring that their views were fairly represented, including in appeals. Other suggestions included providing training for practitioners, conducting independent scrutiny of the assessment process and providing respite and childcare. 23 per cent believed that the voluntary and community sector should not be involved in conducting assessments because of potential problems in relation to information sharing and child protection. Some respondents felt that there were voluntary and community sector organisations which were single-interest pressure groups and this was not conducive to the impartiality needed for assessment.

1.26 27 per cent of respondents believed that the independence of voluntary and community sector organisations from the local authority would help parents to feel more confident in the assessment process. However, some felt that the trust between parents and voluntary and community sector organisations could be damaged if it resulted in a child not receiving the help the parent expected. 22 per cent voiced concern over the capacity of the sector to play a significant role given that many organisations were small, local, specialist, parent-led organisations which relied on short-term funding and grants for their survival.

1.27 59 per cent of respondents to our question about improving continuity of social care believed that the proposed single assessment process and EHCP would help, with 38 per cent identifying seamless transition as key. Collaboration between local authorities would support continuity of care if all elements of the EHCP were binding when a child moved from one authority to another. Where social care issues were predominant in a child's life it was suggested that the child's social worker should be their key worker.

1.28 74 per cent of respondents thought that the arrangements for providing health advice for existing statutory SEN assessments could be improved by agencies working together, having health professionals attending schools and children's centres, and having a single budget for multi-agency teams to

encourage better accountability and improve provision. 26 per cent identified the need for quicker access to services. Respondents believed there was no legal obligation on the health sector to provide advice and noted that health agencies were under no legal duty to quantify provision or deliver it. Lack of capacity within the health sector to conduct assessments, complete reports and administer interventions was also thought to be a contributory factor. 11 per cent highlighted difficulties for health professionals in attending meetings and reviews and advocated 'team around the child' approaches.

1.29 We asked for suggestions on how to make the current statutory assessment process faster and less burdensome for parents. 38 per cent of respondents supported the proposal to cut the time taken from 26 weeks to 20. Some parents thought it was still too long but others cautioned against reducing the timescales at the expense of getting the assessment right. We were told that time could be saved throughout the process by encouraging earlier identification of needs, accelerating decision-making and reporting processes and fast-tracking those children with the highest priority needs. 33 per cent wanted easy-to-understand, national criteria for support. 26 per cent wanted parents who needed it to have support with paperwork and form-filling. They acknowledged that the most informed and articulate parents often succeeded in gaining the provision they wanted for their child whilst those without sufficient means at their disposal did not, even though their child may have greater needs. 24 per cent wanted a reduction in the number of meetings parents had to attend, less paperwork and shorter, more parent-friendly forms, containing less jargon. 22 per cent wanted parents to be kept more closely involved in the assessment process, with many feeling that allocating a key worker to each family would provide a single point of contact to guide parents through the assessment process, rather than having to deal with a succession of different professionals. 5 per cent considered that the current assessment process worked reasonably well and that not all parents found it slow and burdensome. A similar number thought that there should be sanctions imposed for poor service.

## **Progress**

### **Local pathfinders**

1.30 We are pressing ahead with our plans to develop a single assessment process and EHCP and since publishing the Green Paper we have established 20 pathfinders involving 31 local authorities and their local health partners to test out our key reforms, including:

- The single assessment process
- The Education, Health and Care Plan
- The use of personal budgets
- The role that Voluntary and Community Sector organisations might play in providing greater independence in the assessment process
- Full engagement of children, young people and their parents in the process and

- Better arrangements for transition to adult services.

1.31 The pathfinders are also testing a range of areas they have chosen to add to their individual programmes. This covers a focus on age range, support to parents, banded funding and support to vulnerable groups including looked after children. All pathfinders are working within the existing statutory framework for SEN and parents will not lose any rights to seek assessments for statements. Pathfinders are testing reforms in a full range of contexts including urban, rural, unitary and two-tier authorities.

1.32 The pathfinders are taking different approaches, reflecting local circumstances and are developing interesting approaches to key challenges, many of which were raised in the consultation response.

#### Agencies working together

One of the core areas for pathfinders to test is how to develop the best ways for different agencies to work together in order to support the development of a single EHCP. Several pathfinders are actively moving towards formal working arrangements between local authorities and health services, including Memoranda of Understandings, shared governance and pooling or aligning budgets. Many pathfinders are using the opportunities that the education and health reforms present to ensure arrangements for improved joint working.

#### Improving understanding of statutory requirements

Core activity for all pathfinders is to develop and improve engagement with voluntary and community sector organisations and parents. Several pathfinders are taking the opportunity to hold events involving managers and frontline staff from all the leading agencies and other stakeholders, including voluntary and community sector organisations and parents, to increase knowledge of how the current systems work and make the most of local expertise to design the new single plan and assessment processes.

#### Improving processes for assessment

Pathfinders have been asked to test out several areas for improvement in assessments, reflecting many of the issues raised in the consultation, such as: how to bring together health and social care assessments together with educational assessments, taking account of issues such as continuity of social care and arrangements for health input and advice; which assessments should be in scope and included in the new EHCP; and how the voluntary and community sector might play a useful role, such as through provision of information; advocacy or key working. Some pathfinders are taking the opportunity to build on existing joint working arrangements to test how the assessment process could work for children and young people with a wide range of needs.

Currently, a child with complex needs can receive up to 32 assessments as

they grow up. The pathfinders are working to identify the need and rationale for each of the assessments, to understand the impact of change to a system which some parents describe as feeling like a "tick box" exercise as a starting point in improving local arrangements. At least one pathfinder is planning to reorganise both their local authority and health corporate structures to improve joint working, simplify assessments and deliver services more effectively.

There is common agreement across all pathfinder stakeholders that the assessment process needs to be quicker, more holistic and less burdensome for parents, recognising that the current statement process takes 26 weeks – a long time in a child's life. Pathfinders are finding ways to decrease the number of assessments by bringing multi-disciplinary teams together to develop a single assessment process. They are involving parents in key strategic roles. As part of our commitment to streamline the amount of data families have to provide to different agencies we will look at whether information gathered as part of a single assessment might be used to support a Personal Independence Payment claim, drawing on the evaluation of the pathfinder programme and working with the Department for Work and Pensions.

1.33 We have established a pathfinder support team, Mott Macdonald, to provide advice and support to the pathfinders and enable them to learn from each other. Pathfinders are developing a range of approaches and are using learning networks to develop more detailed ideas on core areas of reform such as the assessment process. They are considering detailed practical questions such as: how to determine which child or young person should have a single assessment and how this will work alongside a local offer; the details of what the new plan should look like; the time tables for completing the assessment; when the plan should be reviewed and who should be involved; and how to determine accountability arrangements across the range of services included in the plan. Further information and a full list of pathfinders is available on the pathfinder website [www.sendpathfinder.co.uk](http://www.sendpathfinder.co.uk).

1.34 Our plans for improving provision for children with SEN whose needs may be identified later than the early years are set out in Chapter 3 Learning and achieving. Our plans for supporting young people who are disabled or have SEN, including through Education, Health and Care Plans are set out in Chapter 4 Preparing for adulthood.

### **Next steps**

1.35 Following good progress by the pathfinders in setting up and developing local partnerships, many areas are starting to recruit families to trial single assessment and planning processes. We expect that in all pathfinder areas, by early autumn a significant number of children and young people will have EHCPs agreed and in place.

1.36 The practice developed by the pathfinders will be shared widely with other local areas by the pathfinder support team, working with the Council for Disabled Children. Pathfinders are being independently evaluated by SQW, and interim evaluation reports will be published in summer and late autumn 2012, with a final evaluation report following in 2013.

1.37 The learning networks on areas such as assessment and the single plan are being run as a programme to enable pathfinders to contribute to the development of national policy. The work of the pathfinders will inform the changes we make to legislation to introduce the EHCP. Those changes will maintain existing protections for parents.

1.38 The consultation responses recognise the need to complete assessments for the new EHCP as quickly as possible but to ensure that those assessments are of high quality. We will therefore look, through the pathfinders, at ways of reducing the current 26 week time limit for producing statements whilst ensuring that we get the assessments right. We will also link work to develop the Education, Health and Care Plan and the recommendations from *The Munro review of child protection: a child-centred system*.<sup>5</sup>

1.39 In the Green Paper we made clear that the new Education, Health and Care Plan will provide the same statutory protection to parents as the statement of SEN and will include a commitment from all parties to provide their services. Through the pathfinders we will explore how this commitment can best be realised. In addition we will explore ways to ensure that children, young people and families can have confidence in how to seek redress if they do not get the services set out in the Plan.

1.40 We will build on the system set out in the Health and Social Care Act with these reforms to ensure that families have confidence that all of the different local agencies, across Education, Health and Social Care are working together to meet their needs.

1.41 The Department of Health will, subject to consultation, consider how we use the Mandate to the NHS Commissioning Board to ensure that the NHS commissioning system and, in particular, clinical commissioning groups, are focused on improving outcomes for disabled children and those with special educational needs. This may include the use of personal budgets to put power into the hands of families and the integration of planning and commissioning of the care packages developed through Education, Health and Care Plans.

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<sup>5</sup> The Munro Review of Child Protection: Final Report - A child-centred system (May 2011)  
<https://www.education.gov.uk/publications/standard/publicationDetail/Page1/CMpercent208062>

1.42 We intend to legislate through the proposed Children and Families Bill to build on the framework introduced in the Health and Social Care Act and ensure that services for disabled children and young people and those with special educational needs are planned and commissioned jointly between local authorities and clinical commissioning groups.

1.43 These changes, set out in detail in chapter 5, will ensure that the reforms to education, health and social care services have the maximum impact on improving the life chances of disabled children, young people and their families.

1.44 The Department of Health will review the current National Framework for Children and Young People's Continuing Care, taking into account the experience and learning emerging from the pathfinder programme on the single assessment process and Education, Health and Care Plans.



## 2 Giving parents control

2.1 We recognised in the Green Paper that the effectiveness of support is undermined if it doesn't reflect each family's unique circumstances. It is crucial to families that services work well together and that parents are empowered to make decisions about their child and their support.

2.2 Many families share a concern that the system can feel impenetrable, bureaucratic and inefficient, and that it is not sufficiently responsive to their family circumstances. Parents may feel that their choices are limited and their options don't always meet their child's needs. This is also true for young people as they get older and increasingly want to make decisions for themselves.

2.3 We set out in the Green Paper how we proposed to give parents more control over support for their child and family, to extend parents' influence over the development of services, build their confidence in the system and minimise its adversarial nature.

### **Green Paper proposals:**

- Local authorities and other local services will communicate a clear local offer for families to clarify what support is available and from whom;
- Parents will have the option of a personal budget by 2014 to give them greater control over their child's support, with trained key workers helping them to navigate different services;
- Parents will have access to transparent information about the funding that supports their child's needs;
- Parents of disabled children will continue to have access to a short break from caring while their child enjoys activities with their peers;
- Parents will have a clear choice of school with equivalent rights to express a preference for any state-funded school, including Academies and Free Schools;
- Local authorities and parents will always try mediation to resolve problems in a less adversarial way rather than having to take their case to the First-tier Tribunal (SEN and Disability); and
- Disabled children and children with SEN will have the right to appeal to the Tribunal.

### **A local offer of support for children, young people and families**

## Consultation

2.4 The responses to consultation were very much in favour of a local offer. The majority of respondents (74 per cent) felt that it should:

- Make clear what support is available to children and young people who have SEN or are disabled and their families;
- Provide comprehensive information about local services, any criteria for accessing them and explanations of the different options open to parents; and
- Be specific to each local authority and its policy on SEN and disability.

Around 30 per cent felt that the local offer should include a local authority contact point for advice, signposting to other services and avenues of support and information on parents' legal rights and entitlements. 22 per cent suggested that access to parent support groups should be part of the local offer and 12 per cent felt that it ought to include a national core offer to help address local variations.

## Progress

2.5 Better and clearer information is central to improving parental confidence and the local offer has an important part to play in building that confidence. Taking account of the responses to consultation, we will require local authorities to set out a local offer which, in every area:

- Offers information for parents, in a single place, which helps them to understand what services they and their family can expect from a range of local agencies – including their statutory entitlements; and
- Makes clear what provision is normally available from early years settings, schools (including Academies and Free Schools), colleges and other services, including health and social care.

2.6 The local offer will:

- Cover provision for children and young people from birth to 25 and include education, health and social care services;
- Provide accessible information on services and provision that children and young people who have SEN or are disabled and their families and carers can readily access or expect (for example, special educational provision that is normally available in mainstream schools and colleges from the resources available to them, and short breaks for families of disabled children);
- Set out how families and carers and where appropriate, young people, can seek access to more specialist support than is normally available and how

decisions are made about provision of that support, for example, assessments for Education, Health and Care Plans; and

- Set out what to do if things go wrong, including how to complain or appeal against decisions.

Under these arrangements local authorities will work together with children and young people, parents and carers and with local services (including schools, colleges, health and the voluntary and community sectors) to develop their local offer. They will be able to build on the success of local parent and carer forums in contributing at a strategic level to the development of local policies.

2.7 As well as enabling parents and young people to see more clearly what services are available in their area and how to access them, the local offer will make it possible to see the differences between the services offered in neighbouring local areas. This, in turn, could support greater collaboration between local authorities in order to improve the availability of services.

2.8 We envisage that the local offer will support The First-tier Tribunal (for Special Educational Needs and Disability) and others considering redress when making their decisions since they will be able to see what provision can reasonably be expected in local schools and colleges and from local health and social care services to support children and young people with SEN and their families in each local area.

## **Next steps**

2.9 To promote a consistent approach between local areas the requirements we put in place for the local offer will set out in law the broad national framework described above. But, in line with the responses to consultation, local areas will determine the shape, scope and content of the local offer in their area in collaboration with local parents and families and local services. We will draw on the experience of the Green Paper pathfinders to build on what works well in practice.

2.10 We will slim down the statutory information requirements currently placed on schools for their SEN policies, in favour of schools providing a minimum core of information, which parents have said they found essential. This will free up schools to involve parents fully in determining the contents of their published SEN policies beyond the statutory minimum core.

2.11. We will also extend the statutory requirement for schools to produce and publish an SEN policy to support the parents and carers of children and young people attending Pupil Referral Units.

## **Short breaks for families with disabled children**

2.12. The Green Paper highlighted our commitment to short breaks for families with disabled children. Short breaks allow parents and carers to find time to do normal things that other families take for granted. There is good evidence of the

positive outcomes from short breaks from across the country. Local authorities are seeing less need for social care interventions, a decrease in costly out-of-area placements and a fall in the number of disabled children entering the care system. Disabled children and young people are experiencing increased choices, wider social networks and are growing in confidence and independence.<sup>6</sup>

2.13 In December 2010 we announced that we would continue to fund short breaks services in local areas, providing over £800 million over the period 2011-12 to 2014-15 through the un-ringfenced Early Intervention Grant. In 2011-12, local authorities also benefited from capital funding. Since April 2011, local authorities have been under a duty to provide a range of short breaks and from October 2011 they have been required to publish a short breaks service statement. The statement details the short breaks services available locally and how they can be accessed. It should be developed with parents. We see information about short breaks as a key element within the local offer.

2.14 In October 2010 an additional £400m of funding was made available to the National Health Service (NHS) between 2011 and 2015 to support the provision of breaks for carers. From 2012-13 the Government has set out in the NHS Operating Framework how it expects the NHS to work closely with local carers' organisations and councils to pool their resources and agree plans for funding carers' breaks.<sup>7</sup> The plans will identify how much of the total is being spent on carers' breaks and an indicative number of breaks available. Primary Care Trusts are required to develop and publish their plans by the end of September 2012.

## Progress

2.15. We have recruited Impact, a partnership between a voluntary sector organisation – the Short Breaks Network – and Serco, to support local authorities to deliver short breaks. Impact found that by the end of March 2012, 146 out of 152 local authorities had published a short break statement and the remainder are working towards doing so. Overall, the completed statements demonstrate a high level of compliance with the legal duty for short breaks, with 89 per cent now providing good evidence that a full range of services will be offered to children and young people in the authority. Impact will continue to support local authorities to improve the quality of short breaks services and information available to families.

2.16 A report published in January 2012 by Every Disabled Child Matters

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<sup>6</sup>Towards a more ordinary life.... A report on the progress of parent carer participation and the development of short breaks: 2008 – 2011, Together for Disabled Children, 2011

<sup>7</sup> NHS Operating Framework 2012-13  
[http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_131428.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_131428.pdf)

(EDCM)<sup>8</sup>, based on an analysis of 55 short break statements, found that 98 per cent are complying with the legal requirement under the short breaks duty and providing all the services required. The general quality of short breaks statements reviewed was high. A number of areas for improvement were identified, including on the use of eligibility criteria in statements, which has improved in some areas but needs further work in others. Impact is taking into account the findings of EDCM's report in their work with local authorities.

## Improving parents' choice of school

### Consultation

2.17 The responses to consultation all support our proposal to change the law to give parents of children with statements of SEN (and in future Education, Health and Care Plans) identical rights to express a preference for any state-funded school, including mainstream or special schools, Academies or Free Schools, and have their preferences met by the local authority unless to do so would be:

- Unsuitable to the child's age, aptitude, ability or SEN; or
- Incompatible with the education of other children with whom the child would be educated; or
- An inefficient use of resources.

23 per cent of respondents argued that parents' preferences should be met automatically irrespective of other considerations. Organisations representing independent and non-maintained special schools wanted the proposed change to be applied to parents wanting places for their children at those schools.

### Progress

2.18 Parents rightly want to have confidence that the school their child attends is welcoming, involves them fully in their child's education, has high expectations of what their child can achieve and staff with the knowledge, understanding and skills to meet their child's individual needs.

2.19 We set out in Chapter 3 how we are putting in place a range of measures to support whole school improvement and the professional development of staff. These will build capacity in schools to better support disabled children and children with SEN. And we are developing a more diverse range of schools from which parents can choose, including Free Schools and Academies and Special Free Schools and Special Academies. By April 2012 twenty-eight Special Schools had converted to Academy status. Three Special Free Schools are now at the pre-opening stage, with a likely opening date of September 2012 and we are assessing

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<sup>8</sup> Short breaks services statements: Commitment and transparency, Every Disabled Child Matters (2012)  
[http://www.edcm.org.uk/media/31295/commitment\\_and\\_transparency.pdf](http://www.edcm.org.uk/media/31295/commitment_and_transparency.pdf)

applications received from those who wish to open Special Free Schools from September 2013.

2.20 The responses to the Green Paper from parents suggest that they can face challenges in securing places at their preferred schools – whether they want a mainstream or a special school for their child.

2.21 Under the change we propose parents will be able to express their preference for any state-funded school and have it considered by the local authority on the same basis. This change will extend the provision that already exists in law for parents to express a preference for any maintained school to Academies and special Academies, Free Schools and special Free Schools. We understand the views of those parents who felt that preferences should be met automatically irrespective of other considerations. But we believe that it is important to retain the current statutory provision for local authorities to meet the parents' preferences subject to the criteria described in paragraph 2.17 above, which strike a balance between parental preference, the needs of the individual child, the needs of other children and the efficient use of resources.

2.22 Parents have the right to make representations for an independent or non-maintained special school for their child and to have those representations considered. We have considered very carefully whether to include independent and non-maintained special schools in the proposed change to the law on parental preference. A local authority is not able to name an independent or non-maintained special school in a statement unless the school agrees. If we were to give parents the same statutory rights to express a preference for an independent and non-maintained special school as they have for any state-funded school, to make it effective there would need to be a requirement for that school to admit the child where a local authority named them in the child's statement. We are discussing the implications of such a change with the sector and hope those discussions can shortly be concluded positively. Whatever the outcome of the discussions independent and non-maintained schools have an important place in the range of schools available for children with SEN.

### **Next steps**

2.23 The proposed change to the law on parental preference is part of our broad approach to improving parental choice. We intend to take forward this change through legislation introduced to Parliament in the current session.

2.24 We will continue to encourage innovative applications from parents and parents' groups and other organisations, including those in the voluntary and community sector, to open Free Schools and special Free Schools which can provide greater choice for parents and improve local provision for children and young people with SEN with and without statements.

# Inclusive schooling guidance

## Consultation

2.25 We asked whether the guidance *Inclusive Schooling* allowed appropriately for parental preferences for either a mainstream or special school.

2.26 The responses were mixed, with as many feeling that it allowed appropriately for parental preferences as feeling that it did not. The majority of respondents were unsure. Many were not familiar with the guidance. Several highlighted the need for the guidance to be updated to reflect changes made since it was published in 2001, such as the introduction of Academies and Free Schools.

## Next steps

2.27 The guidance would need to be amended to reflect the proposed changes to the law on parental preference and the development of new forms of school such as Academies and Free Schools. We were struck by the extent to which respondents were unfamiliar with *Inclusive Schooling*. Since the Special Educational Needs Code of Practice is seen as the definitive guidance on the law on SEN. We propose to amend the guidance in *Inclusive Schooling* to reflect the changes above and incorporate it in the Code of Practice.

# Personal budgets

## Consultation

2.28 We proposed that parents of children with an Education, Health and Care Plan should be given the option of a personal budget for their support. Personal budgets for families with disabled children and children with SEN will enable them to have a much greater say in the way their child is supported and give them a clear role in designing a personalised package for their support.

2.29. The responses to the consultation showed support for the concept of an optional personal budget as a means of offering more freedom of choice for parents, particularly if a range of services were available. Around 60 per cent of responses expressed concern that personal budgets could be an unwelcome extra responsibility for some parents unless support could be provided for them. A number of suggestions were made for supporting parents in managing a personal budget, including providing guidance or a key worker.

2.30 Some respondents felt that consideration would need to be given to the potential impact of personal budgets on local provision, bureaucracy and arrangements for monitoring and quality assurance of support procured with personal budgets. There were a number of suggestions for the kinds of provision that could be included within a personal budget, the most popular of which were short breaks, therapies, equipment and transport.

2.31 Around 25 per cent of respondents commented on funding. They stressed that the amount of a personal budget allocated to each family must be sufficient to meet the child's needs. Some felt that core provision should continue to be supplied as standard by the school, local authority or NHS and that the personal budget should be intended for 'add-ons' only. Some 20 per cent of respondents asked about arrangements for monitoring the use of personal budgets.

## Progress

2.32 We published a detailed evaluation of the Individual Budgets (IB) for Disabled Children pilot programme in July 2011.<sup>9</sup> The programme was commissioned to test whether a personal budget (or 'individual budget' as it was called in this programme) could work in practice for disabled children and to what extent the approach was cost-effective. The evaluation evidence provides broad support for the direction of travel set out in the Green Paper with clear evidence of an increased sense of choice and control for families, from a broad range of socio-economic backgrounds, as a result of taking part in the programme. In particular families reported:

- Improved access to social care;
- A shift in the type of services they used; and
- Greater satisfaction with the services they received.

These findings appear to occur independently of increases or decreases in a family's budget allocation. Most importantly, the report also found that these changes were beginning to feed through to improved wellbeing for families and children.

2.33 We have introduced a power in the Education Act 2011 that has allowed us to establish a pilot scheme for our Green Paper Pathfinders and the IB pilots to test the use of direct payments for educational provision. Through the debates in Parliament we have been able to consider many of the points raised in the consultation about the potential impact of personal budgets, how they will be funded and the support families might need to use them.

2.34 Personal health budgets are currently being piloted in the NHS in England. There are currently around sixty pilot sites taking part in the programme, involving around half of the Primary Care Trusts (PCTs) in the country. Many of these are in the Green Paper pathfinder areas. We will get evidence about the impact of personal health budgets from an independent evaluation due to report in October 2012.

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<sup>9</sup> Pilots of individual budgets for families with disabled children  
<http://www.education.gov.uk/childrenandyoungpeople/sen/ahdc/a0068208/ahdc-individual-budgets>



2.35 A personal health budget is an amount of money that is allocated up front to an individual to allow them to plan to meet their health and wellbeing needs in a way that best suits them. The aim of the personal health budget is to improve outcomes and patient satisfaction by giving people and families more choice and control over the care they receive.

2.36 At the heart of a personal budget is a care plan. This sets out the individual's health and social care needs and includes the desired outcomes, the amount of money in the budget and how this will be spent. Once the care plan has been agreed, the personal health budget can be managed in a number of ways. The PCT can hold the budget (a notional budget) and commission the things agreed in the plan or a third party can hold it. The third method is a direct payment, where the individual or their carer is given the money to organise the things agreed in the plan. This method is currently only legally available as part of the Department of Health approved pilot but our Green Paper pathfinders can apply to join this scheme.

2.37 The Green Paper pathfinders are enabling local authorities and their PCT partners to test out how to develop effective personal budgets for children across a wide range of services.

2.38 We appreciate that not every family will want a personal budget or that some families may want one but feel they do not have the capacity to manage it. We have commissioned the Early Support Trust and the National Children's Bureau to lead a programme of work to help develop key worker training. This will help to provide families with the support they need to take up the opportunity of a personal budget where they wish to do so.

## **Next steps**

2.39 Our Green Paper pathfinders will build on the learning from the IB for Disabled Children pilot programme and the personal health budgets programme. They will test further the practical implications of personal budgets and, using the new power established in The Education Act 2011, this will include the use of direct payments for education as well as health and social care support. Their experiences will help us to introduce, through legislation, the offer of a personal budget for families with the new Education, Health and Care Plan by 2014.

## **Mediation to resolve disagreements**

### **Consultation**

2.40 Some 70 per cent of respondents to the consultation felt that there should be compulsory mediation before a parent registers an appeal with the Tribunal. Those respondents who were either against the proposal or unsure of their view had reservations about the added cost of mediation (without a guarantee that agreement would be reached) and the capacity of the current mediation services to manage increased demand. They also had concerns about whether compulsory mediation would extend the process and cause delay. National guidelines were

suggested to ensure good practice.

2.41 Over 70 per cent of the responses felt that mediation should go across education, health and social care. On the question of how mediation might work, almost 40 per cent wanted to see an independent organisation chairing and conducting the mediation process across all services; around 30 per cent felt that parents would need support if they were to be involved in mediation with all three services; and a similar number felt that mediation across all services would only be effective if all parties were in attendance. 21 per cent felt that each representative contributing to the mediation process must be well informed about the particular child's case and 18 per cent felt that the mediation process would only be effective if each service maintained accountability by complying with decisions made and meeting deadlines.

## **Next steps**

2.42 We have no intention of removing parents' right to appeal to the First-tier Tribunal (SEN and Disability). But we do believe that it will be better for parents and a better use of public funds if disputes can be resolved through non-judicial means. We will therefore boost the role of mediation facilitated by an independent party so that parents and local authorities try mediation before a parent can register an appeal with the Tribunal. We will keep the current timescales for registering an appeal so that parents who wish to appeal to the Tribunal will not face any delay.

2.43 Exploring how mediation could improve parents' and carers' experience of the system is one of the elements which all of the Green Paper pathfinders will be testing. We will consider mediation across services and use the lessons learned from the pathfinders to inform changes we make to the law. We are keeping in close touch with the First-tier Tribunal (SEN and Disability) to make sure that the pathfinders link up with the pilot work the Tribunal is doing on introducing greater mediation once an appeal has been lodged.

## **Giving children the right to appeal**

### **Consultation**

2.44 We believe it is important to open up the right to appeal to children and young people, as recommended by the United Nations Committee on the Rights of the Child. Responses to a consultation conducted in 2009 were overwhelmingly in favour of giving children this right and that is why we made clear our intention to pilot giving children the right to appeal and make disability claims in the Green Paper.

2.45 Opportunities for children, such as looked after children, to have their cases heard by the Tribunal are restricted by their circumstances. Enabling them to have the right to appeal directly to the Tribunal will ensure they are not disadvantaged.

## Next steps

2.46 We will take forward the commitment we gave in the Green Paper to work with the First-tier Tribunal (SEN and Disability) to pilot giving children the right to appeal and make disability discrimination claims in two or three local authorities with a view to extending the right to all children across England.

2.47 Currently the Education Act 1996 and the Equality Act 2010 give parents only the right to appeal to the Tribunal and make disability discrimination claims. In order to run pilots giving children and young people the right to appeal and make claims we will need to change primary legislation. We will seek a power to conduct the pilots through a Bill to be introduced to Parliament in the current session. The pilots will test whether the right to appeal is something that children and young people would use, the best way to handle these appeals and the cost implications. In the changes we make we will take account of the arrangements in Wales where they have established similar trials.

# 3 Learning and achieving

3.1. The Green Paper made clear that all children and young people should be supported to learn well and achieve good outcomes. The capacity and commitment of the education system to give every child and young person the chance to succeed is central to this. Every child or young person, whether in a mainstream or special setting, deserves a world class education to ensure that they fulfil their potential. It is important that everyone who works with disabled children and children with SEN has high expectations of them and the skills to help them to learn.

3.2 To provide the best opportunities for all children and young people their needs should be picked up as early as possible and they should be provided with the right help. We set out in the Green Paper how we would give head teachers and college principals opportunities to develop knowledge and skills about how to get the best outcomes for pupils, through strong leadership and high quality teaching. We also set out proposals for improving the way schools identify children with SEN, removing incentives to over-identify children as having SEN as these can lead to low expectations and prevent the right support from being put in place.

## Green Paper proposals:

### Leadership and Professional Development

- We will ensure schools have access to what works well, including through the expansion of the *Achievement for All* programme, which has led to significant improvements in academic and wider outcomes for pupils with SEN;
- Teachers and other staff in schools and colleges will be trained and confident to: identify and overcome a range of barriers to learning; manage challenging behaviour; address bullying; deliver effective teaching leading to better outcomes; and intervene early when problems emerge;
- Teachers will feel able to identify effectively what a child needs to help them to learn and to plan support to help every child progress well, reflecting the specific needs of children with SEN, and those who may just be struggling with learning and need school-based catch-up support which is normally available;
- Special and mainstream schools will be able to share their expertise and services to support the education, progress and development of pupils in other special and mainstream schools, leading to a greater choice of specialist provision; and
- We will support the development of SEN and disability training for those

teaching in colleges and encourage partnership working in the FE sector to spread knowledge and expertise, build capacity and share delivery arrangements.

### **Improving the way we identify and support children with SEN and disability**

- To tackle the practice of over-identification of SEN the current SEN identification levels of School Action and School Action Plus will be replaced with a new single school-based SEN category for children whose needs exceed what is normally available in schools; statutory guidance on SEN identification will be revised to make it clearer for professionals; and the best schools will be supported to share their practices. This will help teachers to spot quickly and accurately any barriers to learning and provide the right support to help each child progress;
- Schools will have additional flexibility to support the needs of all pupils, and through the pupil premium will have additional funding to support disadvantaged pupils with SEN; and
- All maintained special schools will in due course have the opportunity to become Academies, starting with those rated as outstanding by Ofsted, and parents and members of local communities will be able to establish new special Free Schools.

### **Accountability**

- Schools and colleges will be more clearly accountable to parents, governors and Ofsted;
- Parents will have the information they need about how the school is supporting their child; and
- An indicator will be included in performance tables which will give parents clear information on the progress of the lowest attaining pupils.

## **Leadership and professional development**

3.3 In the Green Paper, we acknowledged that teachers and school leaders do not always feel equipped to recognise and meet the needs of disabled pupils and those with SEN. A well-trained workforce able to spot early and tackle barriers to learning is vital to improving outcomes for pupils with SEN. While there are some examples of excellent practice and pedagogy, we recognised a need to support school leaders to showcase and share the best practice in their classrooms and schools.

Our key proposals on leadership and professional development were to:

- Expand the *Achievement for All* programme which has led to significant improvements in academic and wider outcomes for pupils with SEN;

- Support training for teachers and other staff in schools and colleges so that they are confident to: identify and overcome a range of barriers to learning; manage challenging behaviour; deliver effective teaching leading to better outcomes address bullying; and intervene early when problems emerge;
- Support teachers to feel able to identify effectively what a child needs to help them to learn and to plan support to help every child progress well, reflecting the specific needs of children with SEN and those who may just be struggling with learning and need school-based catch-up support which is normally available; and
- Enable special and mainstream schools to share their expertise and services to support the education, progress and development of pupils in other special and mainstream schools, leading to a greater choice of specialist provision.

## Consultation responses

3.4 We asked several questions about how we might achieve these proposals, including how to maximise the expertise of special schools and Teaching Schools, how to build capacity and share knowledge amongst schools, colleges and independent specialist providers and how to develop the potential of teachers and staff to support disabled children or children with a wide range of SEN.

3.5 58 per cent of respondents thought that the best way to harness the expertise of special and mainstream schools with excellent SEN practice, and spread it through Teaching Schools partnerships was for exemplar schools to share their good practice. Other issues emphasised by respondents included:

- Recognising the importance of initial teacher training, with many feeling that placements in exemplar SEN provision should be an integral part of training;
- Securing outreach, with SEN champions visiting other schools to pass on advice, knowledge and expertise to other practitioners;
- Funding to cover the costs of training, networking and outreach;
- Providing online teaching resources;
- Increasing the number of specialist SEN units attached to mainstream provision;
- Establishing an advice/support helpline service; and
- Developing networks of schools and colleges across the independent and maintained sectors in order to share knowledge.

3.6 The majority of respondents felt that training was needed in order to build capacity and SEN specialist skills at each tier of school management. They felt that including SEN and behaviour as core elements of the National Professional Qualification for Headship, awarded by the National College, was essential. They also suggested the proposal for identifying exemplar head teachers and middle

leaders (such as Specialist Leaders of Education) to support other school leaders in the area of SEN was important.

3.7 Several respondents felt that all special educational needs coordinators (SENCOs) should be qualified to post-graduate levels as new SENCOs are now. 25 per cent believed that including SENCOs within each school's senior leadership team would help to build specialist skills with school management. Several respondents mentioned the importance of having a SEN governor on each school's board of governors.

3.8 64 per cent of respondents felt that Special Academies should work in partnership with other schools, Academies and services, in order to improve the quality of provision for disabled pupils and those with SEN by sharing their expertise, facilities and resources.

## Progress

3.9 As a first step toward building the capacity of schools consistently to improve outcomes for pupils with SEN, we contracted out the *Achievement for All* programme to a new charity Achievement for All (3As), supported by the business expertise of PwC. The final evaluation of *Achievement for All*<sup>10</sup> showed that with the right support and engagement from a school's leadership, pupils with SEN can achieve good outcomes. In the pilot, pupils with SEN made significantly greater progress in English and mathematics than both those with and, in some cohorts, without SEN nationally. In addition, the approach led to improvement in wider outcomes including improved attendance, a reduction in persistent absenteeism of 10 per cent and improved behaviour. Relationships with parents improved, particularly parents of pupils with SEN, with an increase from 12 per cent to 48 per cent in those schools reporting building excellent relationships with parents.

3.10 The *Achievement for All* model is now available to any school that wants it. 780 schools are involved in the programme and a Quality Mark has been developed and awarded to 164 schools, to recognise excellence in schools that improve outcomes for pupils who have SEN or are disabled.

From 1 May 2012 the charity Achievement for All 3As took over as the lead contractor for the *Achievement for All* programme from PwC who had been incubating and supporting the development of the programme in its initial phase. Achievement for All 3As provides a new model of delivery run by school leaders for school leaders

3.11 In addition to the development of *Achievement for All*, the Teaching Schools network will have a strong role to play in helping schools to develop best practice. Of the first 200 designated Teaching Schools 25 are special schools which have been judged outstanding. This builds on the first allocation of 100 Teaching

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<sup>10</sup> Achievement for All, National Evaluation: final report, DfE (November 2011)  
<http://www.education.gov.uk/publications/standard/publicationDetail/Page1/DFE-RR176>

Schools, mainstream and special, in which almost a quarter, 23 schools, were identified as lead schools in SEN and closing the gap.

3.12 We are committed to developing more training opportunities for teachers and school leaders. For example:

- The new standards for qualified teacher status (QTS) include a continued focus on meeting the needs of all children, including those with SEN or who are disabled
- We have launched a scholarship scheme for teachers to improve and extend their knowledge and expertise when working with pupils who are disabled or have SEN, including in specific impairments. The scholarship scheme has already awarded funding to around 400 teachers to undertake specialist postgraduate qualifications in the first round
- We have also launched a similar scholarship for the most able support staff working with disabled pupils and those with SEN. This should enable support staff to gain degree-level qualifications to build their skills and expertise, including in specific impairments, and develop their careers further
- The Teaching Agency has produced training materials on severe learning difficulties, profound and multiple learning difficulties that can be used flexibly in initial teacher training (ITT) and for continuing professional development, building on the Salt Review recommendations;
- The Teaching Agency has developed advanced level materials on autism, dyslexia, speech, language and communication difficulties and behavioural, emotional and social difficulties, building on the Inclusion Development Programme materials;
- We have increased the number of special school placements available for ITT to up to 900 in 2011/12; and
- We have provided funding for up to 9,000 SENCOs to have completed the mandatory higher level SENCO award by the end of 2011/12 and are funding a further 1,000 SENCOs in 2012/13.

3.13 We are strengthening the professional development of those working in the further education sector. For example:

- The Learning and Skills Improvement Service (LSIS) and The National Institute of Adult Continuing Education (NIACE) have launched specialist teaching and learning support qualifications<sup>11</sup> which include three specialist teaching units: Inclusive teaching and learning for disabled learners; Action

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<sup>11</sup> LSIS/NIACE Qualifications for teaching disabled learners in the FE sector in England  
<http://www.excellencegateway.org.uk/node/16899>



Learning for teaching in a specialist area of disability and; Understanding theories and frameworks for teaching disabled learners. LSIS is now encouraging providers to work with Awarding Organisations to deliver the specialist qualifications; and,

- Working with the Department for Business, Innovation and Skills the Department for Education have funded LSIS to set up clusters to encourage greater partnership working between independent specialist colleges, general FE colleges and special schools, so that they can share knowledge and expertise, build capacity and share delivery arrangements. Phase one of this work established a cluster in each of the nine English regions involving 55 providers. The clusters have been working to challenge low expectations, improve teaching and learning and improve planning for employment and independent living for disabled young people and those with SEN. Each cluster has had a specialist adviser to help to co ordinate work across the cluster and develop an action plan and a case study with supporting exemplar materials, policies and evidence. The work has been very successful and final case study material will be published during May 2012.

## Next steps

3.14 We are building lessons from *Achievement for All* into teacher and school leadership training. The Teaching Agency is developing new materials for ITT, which will be available to providers by summer 2012. In addition, the New Professional Qualification for Headship, (NPQH) will include specific modules on support for pupils with special educational needs or disabilities, including a module on headship in special schools and on raising achievement for pupils with SEN and disabled pupils.

3.15 We will be awarding, from August 2012, the second round of the SEN Teaching Scholarships and the first round of the SEN Support Scholarship for talented support staff to gain degree-level qualifications to improve their knowledge and expertise.

3.16 We will continue to expand the number of Teaching Schools and use these networks to share best practice in supporting vulnerable pupils.

3.17 We will expand the clusters of FE providers to include additional providers and are considering how to encourage the Teaching School alliance to engage with FE clusters as we take forward phase two of the work. We are also working with the Association of Colleges to develop an award for colleges to encourage progression in learning and constructive experiences of the world of work for learners with learning difficulties and disabilities. We also worked with the Association of Colleges to develop a Beacon Award which recognises excellent provision for students who are disabled or who have SEN and supports their transition to adult life. MicroLink and National Grid are jointly sponsoring the 2012/13 Beacon Inclusive Learning Award.

## Improving the way we identify and support children who are disabled or have SEN

3.18 In the Green Paper we made proposals for improving the accuracy with which pupils' barriers to learning are identified and tackling the practice of over-identifying SEN. Our aim is to help teachers to spot quickly and accurately where pupils are having difficulty in learning and provide the right support to help each child progress, leading to better outcomes for all.

3.19 To achieve this we proposed that the current SEN categories of School Action and School Action Plus should be replaced with a new single school-based SEN category. We also asked how helpful the category of Behavioural, Emotional and Social Development (BESD) is in identifying the underlying needs of children with emotional and social difficulties and ensuring the right support is put in place.

3.20 We indicated that we would revise the statutory guidance in the *Special Educational Needs Code of Practice* to promote more consistent identification of SEN and to provide clarity to professionals and families.

3.21 We also committed to ensuring better support for pupils across the spectrum of need, through a more diverse range of school provision and through additional resources for the 30 per cent of pupils with SEN who are also eligible for Free School Meals.

### Consultation responses

3.22 Overall, respondents recognised that there were difficulties with the way in which SEN is currently identified and categorised. There was recognition among respondents, that bringing the categories of 'Action' and 'Action Plus' together could lead to better outcomes for pupils. Moreover, the majority of respondents (52 per cent) judged the current category of BESD to be unhelpful in identifying and meeting the underlying needs of children, such as those with emotional and social difficulties.

3.23 42 per cent of respondents expressed some reservations over the proposal to replace School Action and School Action Plus, and their equivalents in the early years, with a single category of SEN. They expressed concerns that it could lead to SEN being missed. Some respondents expressed concern that the proposal would reduce the funding available to support pupils with SEN, should fewer pupils be identified. Other respondents suggested that combining the categories of 'Action' and 'Action Plus' would reduce the over-identification of SEN, focus support on those with the greatest need, and make schools more accountable for supporting children with lower level SEN.

3.24 The majority of respondents judged the current category of BESD as too broad and 'catch all'. It was noted that there was often too much focus placed on poor behaviour, which could be the outward presentation of deeper emotional and social problems. 38 per cent of respondents said that it was essential that the specific needs of children who were categorised as BESD were

identified so that appropriate strategies could be put in place, such as family therapy or parenting education.

## Progress

3.25 We are clear that for our proposals to be successful new categories of SEN must be developed in such a way that children's needs will not be missed, pupils will get the help they need to help them progress and schools will be clear about how to access the right support for children. This is why we propose to develop a new approach to a single school or early years setting based category and re-designate the BESD category working closely with professionals across the sector as described under *Next steps* below.

3.26 Some respondents believed that schools received additional funding specifically for individual pupils with SEN who did not have statements. However, formulae for delegating funding for SEN in schools are normally based on proxy indicators such as Free School Meals. The proposed change to a single school-based category will not affect the way resources are delegated to schools or the total SEN budget available for delegation. It should however, together with other measures described below, improve the way that children's needs are identified and better enable schools to target support on those who need it.

3.27 We have taken a number of steps to improve the range and quality of support for children, including those who may have mental health problems. For example, guidance on both behaviour and exclusions clearly reflects considerations that schools must make about children's SEN or disability. Statutory guidance for governing bodies on behaviour and discipline makes clear that a school's policy should cover when a multi-disciplinary assessment should be considered for pupils who display continuous disruptive behaviour. Advice to schools also makes clear that they should consider whether continuing disruptive behaviour might be the result of unmet educational or other needs and whether a multi-agency assessment is necessary.

Statutory guidance on exclusions, which head teachers must have regard to when deciding whether to exclude a pupil, makes clear that head teachers should consider the use of a multi-agency assessment for pupils who demonstrate persistent disruptive behaviour, and that such assessments could include seeking to identify whether a pupil has mental health or family problems.

3.28 A disproportionate number of children with SEN continue to be excluded from school and 79 per cent of children in pupil referral units have identified SEN.<sup>12</sup> While many of the Green Paper proposals should lead to early identification of SEN enabling children's needs to be met before issues escalate to the point of exclusion, we are also taking action to improve the quality of alternative provision for those pupils who are excluded.

3.29 In September 2011, the Secretary of State for Education asked the

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<sup>12</sup> DfE statistical first release for SEN, January 2011

Government's Expert Adviser on Behaviour, Charlie Taylor to conduct reviews of alternative provision and attendance in schools. The *Improving Alternative Provision* review<sup>13</sup>, published recently, recommends that:

- Alternative Provision (AP) policy and practice nationally and locally has an increased focus on effective assessment and identification of children's needs. This should take place as early as possible and before a child's behaviour has deteriorated to the extent that permanent exclusion is the only option; and,
- Information is shared between schools and providers of AP and that locally this leads to clear and realistic plans with baselines against which to measure progress (including towards reintegration into mainstream schooling, further education, or employment). Where children have SEN, these plans will link to Education, Health and Care Plans.

These recommendations will help to improve the identification of children with behavioural difficulties and the provision made to support them.

3.30 We recognise that children with emotional and mental health difficulties need better support. We have made a key public commitment to extend the Improving Access to Psychological Therapies Programme to children and young people. The development is designed to drive improvement and deliver transformational change in services for children and young people's mental health by:

- Embedding evidence based practice across all children and young people's mental health services
- Improving outcomes through session by session outcome monitoring and access to services (for example through self-referral, better training in evidenced based practice for all staff) and
- Involving children and young people in the design of services.

In addition to the £32 million already committed over the next four years, we have recently upped the level of pace and ambition with additional investment of up to £22 million by 2014-15. The additional funding will be used to extend the range of evidence based therapies offered and develop interactive e-learning programmes to extend the skills and knowledge of a range of professionals working with children and young people.

3.31 We have commissioned the BOND consortium, led by Young Minds, to work with the voluntary and community sector to develop their capacity to offer early intervention mental health support, including to schools. In line with the aims of the cross-Government mental health strategy, *No Health Without Mental Health*,<sup>14</sup> this

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<sup>13</sup> <http://www.education.gov.uk/schools/pupilsupport/behaviour/a00204776/taylor-review-of-alternative-provision>

<sup>14</sup> <http://www.dh.gov.uk/health/2011/07/mental-health-strategy/>

should create additional capacity in targeted, early intervention mental health support services.

3.32 Stigma and discrimination continues to affect significant numbers of people isolated – unable to engage in ordinary life and activities that would improve their well being. The Department of Health is funding *Time to Change*, the major anti stigma and discrimination campaign led by Mind and Rethink providing up to £16 million over the next 4 years. As well as working to change attitudes and behaviours towards people with mental health problems, this new funding will allow *Time to Change* to develop a new pilot programme that works specifically with children and young people.

3.33 We have been talking to schools and the voluntary and community sector organisations about the findings of research carried out by The Anti-Bullying Alliance, working with the University of Cambridge, into the bullying of disabled children and children with SEN<sup>15</sup> so that we can identify and share examples of effective practice in tackling this bullying and its causes.

## Next steps

3.34 In 2012 we will work with experts in the education sector, including Teacher Associations, SENCOs, head teachers and educational psychologists on replacing the current categories of School Action and School Action Plus (and their equivalents in the early years) with a single category. In doing so we will ensure a focus on outcomes rather than processes in SEN identification, and on ensuring that pupils' needs are not missed. We will then revise the Special Educational Needs Code of Practice to give clear guidance on identifying children who have SEN and on the operation of a new single category of SEN.

3.35 There was broad consensus that the current category of BESD is not helpful because it is overused and does not lead to the right support being put in place. We have been bringing together experts, including educational psychologists, psychiatrists, paediatricians, teachers and school leaders and sector representatives to look at the characteristics of the pupils currently identified under this label. They will help us to consider how the current category might be redefined, or described in a way that helps professionals to identify what underlying emotional or social issues might be present, and ensure the right help is put in place. This work will be completed in time for the definition to be updated within a new Special Educational Needs Code of Practice.

## Flexibility over resources

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<sup>15</sup> SEN and Disability – developing effective anti-bullying practice, Anti-bullying Alliance [http://www.anti-bullyingalliance.org.uk/send\\_bullying\\_project.aspx](http://www.anti-bullyingalliance.org.uk/send_bullying_project.aspx)

3.36 We believe that children benefit when schools have flexibility over the use of their resources, and evidence from the *Achievement for All* pilot has shown that targeting resources differently can lead to better outcomes for pupils. There is a strong correlation between Free School Meals and pupils with identified SEN. The new pupil premium enables schools to have additional resources to support the most disadvantaged pupils.

## **Progress**

3.37 We have given schools greater flexibility over their resources, removing ring-fences and specific grants so that schools can choose how to use their money to maximise benefits for their pupils.

3.38 Through the pupil premium we will provide £2.5 billion of funding a year on top of existing school spending by 2014-15 to help schools offer additional and targeted support for pupils from the most deprived backgrounds. This is in addition to the resources already included in school budgets through the mainstreaming of Standards Funds resources for interventions such as one-to-one tuition, Every Child a Reader and Every Child Count and extended school activity. Schools will have the freedom to use all of these resources as they choose.

## **A diverse range of schools**

3.39 In line with the Education Act 2011, we gave a commitment in the Green Paper that all maintained special schools will in due course have the opportunity to become special Academies, using the powers of the Academies Act 2010. Special Academies have the opportunity to play a leading role in transforming the educational experiences of disabled pupils and pupils with SEN. We also indicated that parents and members of local communities will be able to establish new special Free Schools.

## **Consultation responses**

3.40 We asked for views on what the impact might be of opening up the system to provide places for children without statements of SEN in special Free Schools. 35 per cent believed that opening up the system to special Free Schools so there is a wider range of provision would have a positive impact and allow more children better access to the sort of education that would meet their needs. However, there were concerns about whether new provision would have the right expertise or be able to guarantee that children would have their needs met without a statement (40 per cent) and concern about how admissions would be managed in new provision, such as Free Schools (38 per cent).

## **Progress**

3.41 By April 2012 twenty eight maintained special schools chose to convert to special Academy status and further conversions are in the pipeline. The first round of applications to open special Free Schools has been completed, and three special Free Schools are now at pre-opening stage, with a likely opening date of

September 2012. The second round is underway and we are assessing applications received from those who wish to open Special Free Schools from September 2013.

3.42 We gave a commitment that, in the most serious cases of long-term underperformance and little sign of improvement, special schools, like mainstream schools, will be converted into special Academies and partnered with a strong sponsor. One sponsored special Academy has converted, and are working with a range of potential sponsors of special Academies, including head teachers of some outstanding special schools, to ensure there is a good supply of potential sponsors.

### **Next steps**

3.43 We want parents to have a good choice of schools so that they can be confident that the system is working for them. Some parents of pupils without statements of SEN will want more specialised provision for their children. We will continue to work with parents and stakeholders to explore the opportunities to meet this need, at the same time preserving sufficient high-quality provision for pupils with statements. For those pupils with statements of SEN (or new Education, Health and Care Plans) the protections afforded by the statement will be maintained irrespective of the type of school they attend.

3.44 Free Schools offer new ways of increasing the specialist expertise available to support children with SEN. In our guidance to people who want to open Free Schools we are encouraging a range of innovative proposals, including special provision for pupils with and without statements of SEN.

We will assess all proposals very carefully to ensure that only those which offer high quality provision are approved and that appropriate admissions and funding arrangements are agreed.

### **Improving accountability for the progress children make**

3.45 Our fundamental reforms to the school system, set out in *The Importance of Teaching*, give greater freedom and flexibility to schools, teachers and school leaders, alongside sharper accountability for supporting every child to achieve their potential. In the Green Paper we indicated that in the area of SEN, we would also ensure there is sharper accountability for all pupils' progress to parents, local communities, governors and inspectors. In particular, we explored: how schools and colleges will be more clearly accountable to parents, governors and Ofsted; the type of information parents need about how the school is supporting their child; and a possible indicator in performance tables which will give parents clear information on the progress of the lowest attaining pupils.

## Consultation responses

3.46 Where respondents agreed with performance tables they saw them as a means of accountability which ensured that school staff worked to help children with SEN to reach their full potential. They were also thought to be useful for parents in helping them to assess levels of attainment when choosing a school for their child. A significant proportion of respondents saw the proposal as an improvement to the current system, which would lead schools to focus on the lowest attaining children rather than just those who were on the borderlines.

3.47 There was some support for the proposal in the Green Paper to introduce a new indicator to show the progress made by the lowest attaining 20 per cent of pupils. A uniform measure applied across schools was thought to be an improvement, which would also recognise the effort made to move pupils through the Key Stage levels.

## Progress

3.48 In December, we published Key Stage 2 results by low, medium, and high attaining pupils. This showed the progress made by the approximately 20 per cent of pupils who entered Key Stage 2 behind nationally expected levels, giving credit to those schools that do well by this group. In January 2012 a similar exercise was completed for Key Stage 4.

3.49 For the 0.7 per cent of pupils with the most complex needs, who are working below national curriculum levels at the end of Key Stage 2<sup>16</sup>, we have put in place the statutory collection of P Scale assessment data which helps teachers to track the progress of pupils who are working below level 1 of the national curriculum. This year was the first year in which that data was reported as part of the school report, in Raise Online, which detailed the performance of all children who are working below the level of national curriculum tests. This enables teachers in all schools (mainstream and special) to see the achievements of every pupil.

## Next steps

3.50 We are working on improvements to the information in future Raise Online updates, to show the progress made nationally by pupils working in the P Scales in Key Stages 1-2. We are also working with Ofsted to look at whether we can develop new average point scores for P levels to provide comparator data on the progress made by pupils working below the levels of the National Curriculum.

3.51 As set out in Chapter 4 we are introducing Key Stage 4 and Key Stage 5 destination measures for schools, colleges and other post-16 providers which will show how many young people progress into further education, employment or

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<sup>16</sup> DfE statistical first release for SEN, January 2011



training, when they leave at 16, 17 or 18. Young disabled people and those with SEN will be included in these measures and, from spring 2013 we plan to provide an analysis specifically for this group.

3.52 We propose to reform the Key Stage 5 performance tables from 2012 to enable young people, parents and the public to better hold schools and colleges to account for their 16-19 provision. We will publish information on the attainment and progress of students undertaking Level 1 and 2 as well as Level 3 qualifications, particularly in English and mathematics where students have failed to gain those qualifications by age 16. New attainment indicators and progression measures published alongside destinations measures will work in combination to promote achievement in worthwhile qualifications that allow for progression for all to further learning and employment.

# 4 Preparing for adulthood

4.1 We recognised in the Green Paper that, too often, the opportunities and support available to young people who are disabled or who have SEN fall short of what they need to make a successful transition to adult life. Young people who are disabled or who have SEN, and their parents, tell us that to get the help they need they have to cope with disjointed and confusing assessment processes from their local authority, school or college and health providers. The Green Paper recognised that too often, professionals working with these young people are not encouraged to focus on the young person's ambitions and on how best to help them prepare for adult life. Poor planning of education, health and social care support is exacerbated by a lack of choice and opportunities for young people.

4.2 The proposals in the Green Paper aim to give young people who are disabled or who have SEN the best opportunities and support so that as far as possible they can succeed in education and their careers, live as independently and healthily as they are able to, and be active members of their communities. By 2015, all young people, including those who are disabled or have SEN, will continue in education or training until the age of 18. As now, some of those young people will remain in education or training until they are 25 if they need more time to complete their education. The education or training a young person receives, and for how long, will vary according to his or her individual circumstances. Our ambition is for all young people who are disabled or have SEN to have access to improved planning and assessment; a clear local offer of services, appropriate accountabilities; and a greater range of high quality opportunities and support in further education.

## **Green Paper Proposals:**

We will take forward a programme of action across government and with local partners so that by 2015 disabled young people and young people with SEN will have:

- Early and well-integrated support for, and advice on, their future as part of the proposed birth to 25 single assessment process and Education, Health and Care Plan and support into employment;
- Access to better quality vocational and work-related learning options to enable young people to progress in their learning post-16;
- Good opportunities and support in order to get and keep a job; and
- A well-coordinated transition from children's to adult health services. We will explore the feasibility of annual health checks from GPs for all disabled young people from the age of 16.

## Early and well integrated support and advice

4.3 The Green Paper describes a system of early and well-integrated advice and support for children and young people who have SEN or who are disabled. For young people who would have a statement of SEN or a Learning Difficulty Assessment in the current system it proposes a single assessment process and an Education, Health and Care Plan, covering the period from birth to 25 and spanning education, health, social care, and support into employment. For those 19-25 year olds who need it, an Education, Health and Care Plan will allow more time for them to complete their education, and to gain the skills they need to make a successful transition to independence. For some young people that may mean continuing in further education until 20 or 21, for others it may mean continuing until they are 25. Several of the consultation questions on preparing for adulthood invited views on how the proposal to create a single assessment process and Education, Health and Care Plan could help to improve outcomes for young people with SEN

### Consultation responses

4.4 There was general agreement with the focus in the Green Paper on well integrated support and advice, access to better vocational and work related learning, good opportunities and support to get and keep a job and better support for the transition to adult services and independent living. 57 per cent of respondents felt that social and emotional well-being, for example, friendships, social skills and involvement in the community. The majority of respondents agreed with the proposal to replace the statement of SEN and the learning difficulty assessment with a single statutory assessment process and an Education, Health and Care Plan, bringing together services across education, health and social care. In response to a question about how we can help young people with SEN participate in education or training post-16, 12 per cent of respondents stressed that provision for young people who had SEN or were disabled should extend to age 25 if the Education, Health and Care Plan extended to this age, although they questioned how the needs of those without an Education, Health and Care Plan would be catered for.

### Progress

4.5 Our proposals for a single assessment process and the Education, Health and Care Plan offer an opportunity to bring coherence to a system which at the moment works differently depending on a young person's age and for packages of provision and support to be developed that meet individual needs. To achieve our objectives we have:

- Identified the main changes that would be needed to move from Learning Difficulty Assessments to Education Health and Care Plans, including legislative changes;
- Consulted on proposals to reform the funding and commissioning systems to remove perverse incentives as part of the national schools funding and national

16 – 19 funding reviews (Chapter 5 has more details about this);

- Identified ten pathfinders that are focussing on the transition to post-16 and adult life and ensured that all pathfinders areas are considering these issues as they develop their approaches to a single assessment and plan; and
- Appointed the National Development Team for Inclusion to provide expert advice and support to the pathfinders and more widely to other local authorities and agencies. This will deliver our commitment to ensure that the pathfinders build on lessons learned and good practice in improving transition to post-16 study and adulthood.

The work of the pathfinders will continue to inform our plans for the Education Health and Care Plan and the legislation we aim to introduce in the current session of Parliament to secure the commitments we gave in the Green Paper.

## **Next steps**

4.6 We are developing the Education, Health and Care Plan so that it will provide statutory protections comparable to those currently associated with a statement of SEN to young people aged 16–25 while they are in school or further education. As part of the assessment process we want young people to have the opportunity to express a preference for where they would like to be taught and for colleges to have the opportunities that schools have to be involved in that process. Although this will clearly benefit these young people, we recognise that this will have significant implications for local authorities and further education providers. We will work closely with them and other interested organisations to explore these implications and how we can ensure the Education Health and Care Plan delivers what is needed for young disabled people or those with SEN. These discussions will also help to inform changes to the statutory framework.

4.7 We will require local authorities to ensure that mediation is available to young people up to age 25 and their parents. Where mediation is not successful young people and their parents should be able to seek redress, if possible, through the Tribunal system. We will be working with the Ministry of Justice to explore this and to develop a feasible, cost-effective and efficient means of seeking redress for those who need it. We know this would be a significant change from the current system for those aged 16 – 25 in further education where currently the only right of redress is through the Local Government Ombudsman or through a Judicial Review.

4.8 Some young people may not have the disability or needs identified until after they have left the school system. We will explore how to ensure these young people get the support they need. In particular, significant proportions of young offenders in custody have some level of SEN which may not have been recognised while they were at school or in college. Where this is the case we will ensure they have the right to ask for an assessment for an Education Health and Care Plan. We will ensure that where young people with an Education Health and Care Plan enter custody, the Plan is shared in a timely way with the institutions where they are in custody so that services can prepare provision which meets their needs and

work together to enable them to make progress in their education. And we will ensure that they receive appropriate support when they return to their communities, with an updated Education Health and Care Plan, and do not have to start the process again.

4.9 Children and young people who are disabled or have SEN but do not have an Education Health and Care Plan will still be able to receive support within the mainstream system. We set out how we are working with further education (FE) providers to improve mainstream provision for all young disabled people or those with SEN later in this chapter.

## Improvements to vocational and work-related learning

4.10 The Green Paper acknowledged the need for young people to have access to better options for high quality vocational and work-related learning. It made clear that we would build on the findings of the Wolf Review of vocational education to improve vocational and work-related learning options for young people aged 14 – 25 who are disabled or who have SEN.

### Consultation responses

4.11 Just over half of those responding to our question about opportunities for disabled young people and those with SEN to participate in education and training post-16 wanted to see greater choice and more appropriate and relevant courses for young people who are disabled or have SEN. Many highlighted a lack of entry level and level 1 courses and qualifications in FE designed to prepare young people for the world of work.

40 per cent of respondents considered that education and training providers could support young disabled people or those with SEN to participate in education or training post-16 by ensuring that their offer explicitly helped to prepare them for adult life and employment. 39 per cent identified transport, specialist advice and guidance, and equipment as key factors enabling better participation post-16. 30 per cent suggested that personal advisors or key workers should play a key role in supporting young people in developing their career goals.

4.12 These responses were supported by the Ofsted review *Progression post-16 for learners with learning difficulties and/or disabilities* (August 2011)<sup>17</sup> which found that “Too few young people with learning difficulties and/or disabilities progress from school to complete programmes of learning in post-16 settings which develop greater independence; lead to further study, supported or open employment; or provide skills for independent living.”

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<sup>17</sup> Progression post-16 for learners with learning difficulties and/or disabilities, Ofsted (23 Aug 2011) <http://www.ofsted.gov.uk/resources/progression-post-16-for-learners-learning-difficulties-and-or-disabilities>

## Progress

### Developing flexible study programmes

4.13 Professor Wolf's Review of Vocational Education, published in March 2011, found that too many young people are taking low level qualifications that provide little prospect for progression, limiting their potential. Following the review, we have consulted on proposals to free providers to design coherent study programmes which stretch young people whatever their starting point. For young people studying below Level 2, a significant proportion of whom will be disabled or have SEN, we want to end a presumption of failure and enable them to progress and achieve positive outcomes. These positive outcomes include further study, employment, supported employment or greater independence as an adult. To achieve this aim we have proposed that key features of study programmes for these young people might include:

- High quality experience of the workplace to enhance their readiness for employment, which could be for a substantial period of time.
- Personal and social development, which should be an integral part of the programme and not driven by the accumulation of qualifications
- English and maths: where possible, to enable the young person to achieve a grade C or above in GCSE English and mathematics, or otherwise another qualification or whatever stretching level of learning is appropriate and
- Another qualification of substantial size, in most cases, although we recognise this may not be right for all young people.

We want study programmes to prepare young people for future study or employment and improve their life opportunities. Changes to study programmes are intended for implementation in 2013/14.

### Providing better information on the outcomes young people achieve

4.14 It is crucial that schools and colleges focus on enabling young people to progress successfully into adult life and that parents and young people can get information about how well schools and colleges are succeeding in supporting them to achieve this. The performance tables at Key Stage 4, published in January 2012, for example, set out a wide range of information, including attainment broken down by pupils of different levels of ability, including those at the lowest end of the ability range.

4.15 From this year, we are introducing destination measures which will show how many young people progress into further education or training from individual schools and colleges. From 2013, we are planning to publish destination measures showing how many young people progress into education, training or employment from individual schools and colleges. Young people with SEN will be included in these measures, and from spring 2013 we plan to provide an analysis specifically for this group. To sharpen the accountability of schools and colleges, Ofsted have

included destinations in their school inspections from January 2012 and will include them in college inspections from September 2012.

### **Improving participation**

4.16 In December 2011 the Government published, *Building Engagement, Building Futures: Our Strategy to Maximise the Participation of 16-24 Year olds in Education, Training and Work*.<sup>18</sup> This sets out how we intend to support all young people, including those who are disabled or who have SEN, to participate in education and training until age 18 by 2015 and progress into work. We want to enable young people to develop the skills, qualifications and experience they need to succeed in their careers and make a positive contribution to our society and economy. The strategy includes measures to support 16 and 17 year olds most at risk of being not in education, employment or training (NEET), a disproportionate number of whom will be young people who are disabled or who have SEN.

4.17 We have started to publish more information on participation at local authority level so that local people can hold services to account for their performance. We will continue to increase the amount of information we publish and by spring 2013, this will include data on young people who are disabled or who have SEN. Young people's participation is already supported by clear statutory responsibilities and most local areas are fulfilling these well. Where we have clear evidence that a local authority is not fulfilling these duties for young people, including those with disabilities or who have SEN, we will take action to understand the problem, provide links to additional support and where necessary, we will consider a formal improvement notice

4.18 We have set out our plans for the delivery of £126 million of additional support for 16 and 17 year olds in England through the Youth Contract.<sup>19</sup> The programme is being procured by the Young People's Learning Agency and details of the Specification and Pre-Qualification Questionnaire were published on 21 February 2012. It will focus on young people who are not in education, employment or training and have low levels of attainment, benefiting those who are disabled or have SEN who are over-represented in this group. The programme will be delivered by providers in the private, voluntary and community, and social enterprise sectors, who will be given the freedom to engage young people in ways that work best for them. From later this year, the programme will offer intensive support, with the majority of payments to providers based on their success in helping young people engage and sustain participation in education, training, or work with training.

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<sup>18</sup> Building Engagement, Building Futures (DfE, December 2011)  
[http://media.education.gov.uk/assets/files/pdf/building\\_per\\_cent20engagement\\_per\\_cent20building\\_per\\_cent20futures.pdf](http://media.education.gov.uk/assets/files/pdf/building_per_cent20engagement_per_cent20building_per_cent20futures.pdf)

<sup>19</sup> Youth Contract for disadvantaged 16 and 17 year olds (DfE, 2012)  
<http://www.education.gov.uk/inthenews/inthenews/a00203664/youthcontractprov>

4.19 We have consulted on the regulations for Raising the Participation Age<sup>20</sup>, including what the requirement should be for full-time education for 16–18 year olds who choose to participate in this way. These regulations will cover young disabled people and those with SEN. We propose flexible arrangements for those with the most severe and complex needs in Independent Specialist Providers, who, because of the barriers they face, may spend fewer hours in directed learning than the regulations may otherwise require. We will publish our response in the summer.

4.20 We have made available a further £44 million in 2012-13 for additional places for 16-19 year olds, because of demographic pressures and increased participation. This funding includes support for places for young people with learning difficulties and disabilities.

4.21 The National Citizen Service, being piloted in 2012 and 2013, will enable young people to take part in activity which makes a positive difference to their community. Emerging findings from the evaluation of the programme indicate that a significant number of young disabled people and those with health problems participated in the programme. We will analyse the March 2012 and spring 2013 data from the National Citizen Service pilots to see if we need to take any further action to improve access to the scheme for young people who are disabled or have SEN.

## **Next steps**

### **Continued improvement in provision**

4.22 We will work with stakeholders, including the Association of Colleges (AoC) and the Learning and Skills Improvement Service (LSIS), to improve provision for all young people who are disabled or who have SEN by:

- Considering how best to support providers as they design study programmes for young disabled people and those with SEN. This will be informed by the responses to the study programmes consultation which we plan to publish later in spring 2012;
- Ensuring that final material from phase 1 of the FE clusters referred to in Chapter 3 is published on LSIS's Excellence Gateway in May 2012. LSIS will also include findings in their support activities and materials for example in their leadership programmes. This will enable the FE providers who are not yet involved in a cluster to access and use the findings from the cluster work to improve their expertise;

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<sup>20</sup> Consultation on the Raising the Participation Age (RPA) regulations (DfE 2012)  
<http://www.education.gov.uk/consultations/index.cfm?action=conSection&consultationId=1694&dId=1045&slId=6517&numbering=1&itemNumber=1&menu=1>



- Developing further the FE clusters involving FE colleges, independent specialist providers and special schools working together to improve local provision. In phase 2 we will build on the lessons learnt from phase 1 and increase the number of providers involved. We will consider how we might encourage the teaching school alliance to become involved in these clusters; and
- Continuing to support the AoC Beacon Award which recognises and rewards excellent provision in the FE sector for disabled students and those with SEN and helps them prepare for adult life.

The nature and length of programmes can vary. Families have told us that sometimes a programme covering three days a week will not be appropriate for meeting a young person's individual needs. As part of our discussions with stakeholders about how provision can be improved for all young people who are disabled or have special educational needs, we will explore ways in which students might access a package of provision and support across 5 days a week where that is appropriate. This will include looking at how the Education, Health and Care Plan can identify a young person's needs across 5 days a week and identify a package of support to meet those needs.

### **Providing better information on the outcomes young people achieve**

4.23 The National Audit Office report *Oversight of special education for young people aged 16-25* published in November last year,<sup>21</sup> and the subsequent Public Accounts Committee report<sup>22</sup>, published on 24 February this year, made a number of recommendations for improving the Government's ability to assess value for money across different types of provider and improving the variable quality of assessments of young people's needs. Their recommendations support our proposals for the Education, Health and Care Plan to increase the emphasis on longer term outcomes and progression. The National Audit Office report recommended that assessments should take into account the full costs of viable placement options within the local offer. In addition, the Public Accounts Committee report stresses the importance of local authorities communicating a clear local offer for families to make clear what support is available and for whom. This supports our proposals in Chapter 2 for a local offer which includes post-16 opportunities and services.

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<sup>21</sup> Oversight of special education for young people aged 16-25, National Audit Office (November 2011) [http://www.nao.org.uk/publications/1012/special\\_education\\_for\\_young\\_pe.aspx](http://www.nao.org.uk/publications/1012/special_education_for_young_pe.aspx)

<sup>22</sup> Oversight of special education for young people aged 16-25, House of Commons Public Accounts Committee, (24 February 2012) <http://www.parliament.uk/business/committees/committees-a-z/commons-select/public-accounts-committee/news/special-ed-report/>

4.24 Improvements are in train to develop performance measures which assess student outcomes in different types of institutions on a more consistent basis and include learners below level 3. The destination measures detailed in paragraph 4.15 will provide information by individual provider which will improve national and local transparency, support better value for money judgements, inform parental choice and promote improvements in performance. Our proposals for funding reforms will improve local value for money assessments for post-16 provision for young people who are disabled or who have SEN. In Chapter 5, we set out how we plan to take forward the proposals for high needs pupils funding on which we consulted following the publication *A Consultation on School Funding Reform: Proposals for a Fairer System*, in July 2011.

### **Improving participation**

4.25 We will ensure that from the beginning of the 2012/13 academic year, students aged 16-24 who are funded by the Education Funding Agency to study at Independent Specialist Providers and who are experiencing financial hardship, will be able to apply to their college for a discretionary bursary from the Bursary fund in the same way as students aged 16-18 studying in mainstream education. Currently students aged 19-24 studying at independent specialist providers do not have access to either the 16-19 bursary or the discretionary learner support fund, which is available to adult learners in FE colleges.

4.26 We will work with stakeholders to consider what further action we can take to improve provision for young people who are disabled or have SEN, including those who do not have an Education, Health and Care Plan.

### **Improved opportunities to get and keep a job**

4.27 Young people have consistently told us that what they want once they leave school or college is to get a job. In the Green Paper, we asked how we might ensure that when disabled young people and those with SEN choose to move directly from school or college into the world of work, the transition is well planned. We also asked who would be best placed to support them. This planning and support is crucial if we want to make a real difference to young people's outcomes. We asked how employers could be encouraged to offer constructive work experience and job opportunities for disabled young people and young people with SEN.

4.28 We proposed introducing supported internships as a way of providing meaningful work opportunities for young people for whom an Apprenticeship may not be a realistic aim.

### **Consultation responses**

4.29 78 per cent of respondents identified a range of people who they felt were best placed to support disabled young people and those with SEN who chose to move directly from school or college into employment. These included key

workers, link tutors, job coaches, mentors, youth support workers and disability employment advisors.

4.30 48 per cent emphasised the need for timely transition planning, suggesting that it should start early, before Year 9 and that the plan should be person-centred, with input from all agencies involved with the child or young person and that it should cover employment, health, social inclusion, housing and independent living.

4.31 18 per cent stressed the importance of involving parents in supporting their child's move into employment and believed that all professionals involved, whether from education, health and/or social care sectors, as well as the employer, should liaise closely with parents.

4.32 There was a positive response to the proposal to set up supported internships for those for whom an Apprenticeship may not be a realistic aim, with 61 per cent of respondents supporting this approach.

## **Progress**

### **Supported internships**

4.33 Building on best practice, we have developed the principles of supported internships to fit with our proposed reforms to post-16 vocational education arising from Professor Wolf's recommendations. We will enable further education colleges and training providers to offer supported internships to young people with SEN as part of the new study programmes which we have proposed should begin from September 2013. This will ensure that best practice in supporting young disabled people or those with SEN into employment is embedded within our further education system.

4.34 The primary objective of supported internships is to better enable participants to achieve sustainable paid employment. Depending on individual needs, supported internships may provide additional support, for example through a job coach. Unlike work experience, supported internships are a programme of study based primarily at an employer's premises. They will be available for students aged 16-25 with either a statement of SEN (if in school) or a Learning Difficulty Assessment (if in further education), or an Education, Health and Care Plan once these are introduced, who want to move into employment and need extra support to do so. Decisions about which young people from within this group would benefit most from a supported internship will be made locally.

4.35 We are keen to encourage local innovation and to minimise bureaucracy and unnecessary prescription within a framework of key principles to ensure some national consistency. For the young person the internship should contribute to their long term career goal and fit with their working capabilities, such as the number of hours they are able to work. For the employer, the internship must meet a real business need. As the goal of the programme is for the young person to move into paid employment we would like to see employers who take on internees have a job available at the end of the internship should the intern meet the required standard.

4.36 Supported internships should reflect the following principles:

- The majority of the young person's time should be spent at the employer's premises;
- Young people will be expected to comply with real job conditions, such as time keeping or dress code;
- Systematic instruction, a method specifically designed to help people with complex learning difficulties learn new tasks, will be used where appropriate;
- Stretching learning goals will be set, including achievement at Level 2 in English and maths, preferably GCSE, or where this is not appropriate, another qualification or stretching level of learning; and
- Both the young person and the employer will have support through either a tutor from the provider or by a formally trained job coach.

An illustrative example of a supported internship:

Leanne has mild learning difficulties. She was studying at college and was keen to work in an office when she left college. Her college employed a job coach, who made links with local employers and found a suitable internship place with a local publishing business looking for basic administrative support. The job coach supported Leanne while she was with the employer, using systematic instruction to teach her how to do the different elements of her job. Over time the amount of support Leanne required decreased, until after nine months she was able to do the job unsupported. Alongside her work at the employer, Leanne undertook qualifications in English and maths as well as a substantial vocational qualification in business administration. At the end of her supported internship Leanne was offered a permanent post with the employer and the employer felt far more confident about taking on young people with disabilities or with SEN in future.

4.37 In line with our proposed reforms to post-16 study programmes, providers will be responsible for drawing up a supported internship study programme. Close working relationships between education providers, employers and local authorities will help to make this successful, building on the existing good links in many local areas. However we believe that there needs to be one body clearly in the lead and that education providers will be best placed to do this.

### **Work experience**

4.38 To support all young people into employment we are testing innovative ways of delivering high quality work-experience placements to 16 and 17 year olds who are not in education, employment or training as part of post-16 study programmes. As announced in *Building engagement, building futures*, we have already made funding of £4.5 million available to 25 colleges over the next two years to explore different models. We expect that around 4,000 young people will

be involved in the trials. Thirteen of the colleges will be testing approaches which will include support for young people who are disabled or have SEN. These include Sunderland College, Manchester College, City of Bristol College and Highbury College who between them will be offering work experience placements to over 200 young people who are disabled or have SEN. We will be evaluating these placements so that good practice and lessons learned will be available to other colleges, training providers and employers, enabling them to see which elements work well locally in post-16 study programmes. We plan to publish a final report in December 2013.

### **Cross-government work on disability employment**

4.39 Government Departments are working together to establish a strategic and consistent approach to improving employment outcomes for those who are disabled and who have SEN through the new Inter-Ministerial group on Disability Employment. The Government is developing a cohesive new cross-Government disability strategy, reinforcing its commitment to overcome the barriers which prevent disabled people from fulfilling their potential and playing a full role in society. This strategy includes work and career opportunities and will focus on three main areas:

- Realising aspirations;
- Individual control; and
- Changing attitudes and behaviours.

The Office for Disability Issues is working directly with disabled people and their organisations to develop the strategy. A discussion document *Fulfilling Potential*<sup>23</sup> was published on 1 December as a framework for discussions about what should be included in the strategy. It provided almost £70,000 to 58 organisations to run events to respond to the discussion document. Officials attended as many of these events as possible and held a post-discussion event in March with stakeholders to look at emerging trends and hear more ideas. The Office for Disability Issues has also set up an advisory stakeholder group which meets once a month.

4.40 Careers advice is an important aspect of preparing for adult life. The National Careers Service offers up to three in-depth face to face guidance sessions, which are free, as a priority to adults aged 19 or over (aged 18 if unemployed) who have a disability. These are provided by highly qualified careers advisers. Where the individual needs more specialist support the careers adviser will ensure they get the support needed to access it.

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<sup>23</sup> Fulfilling potential – working together to empower disabled people, Office for Disability Issues (December 2011) <http://odi.The Department for Work and Pensions.gov.uk/odi-projects/fulfilling-potential.php>

4.41 There is more to do to ensure that young people receive the right advice and support to make a smooth transition from education to the world of work. It is clear from the consultation responses that there is an appetite for this advice. Support might come from a range of sources, including key workers, link tutors, job coaches, mentors, youth support workers and disability employment advisors. Sound and early planning, good links between different agencies, and continuity of support will be vital in making this a success.

4.42 We are keen to ensure that, where possible, young disabled people and those with SEN are able to make the transition to work without first engaging with services for people who have left education and are seeking work. The Department for Work and Pensions will continue to work with colleagues across Government to source the most appropriate support for preparation for and transition to work and will develop more detailed proposals.

4.43 Accessible transport can be crucial considerations for young people who want to make the most of employment and leisure opportunities but cannot use conventional transport. Community transport groups, which are locally based and run on a not-for-profit basis, can provide tailored alternatives and are often able to cater for individual needs. In the last 2 years, the Government has distributed £20 million to 76 local transport authorities in England, outside London, to help establish and support community transport in their areas.

## **Next steps**

### **Supported internships**

4.44 We will make £3m available for around 15 colleges with a high proportion of disabled students or students with special educational needs to trial supported internships from September 2012. This will be additional funding for the colleges involved so that they can test the proposed model and explore innovative approaches.

4.45 We will ensure that the supported internships model fits with the proposed changes to study programmes, reforms to 16-19 funding, and to funding for young people requiring high levels of support. We will also explore how we can draw on the work to set out national occupational standards for job coaches, currently being consulted on by the Learning and Skills Improvement Service. These standards set out nationally agreed statements describing what a job coach needs to do, know and understand in order to carry out their role consistently and competently.

4.46 We will develop supported internships in the light of the experiences of colleges trialling this approach and make the model available to all colleges through mainstream funding routes.

### **Work experience**

4.47 To ensure that young people who are disabled or who have SEN are able to access meaningful work experience and employer based learning, we will encourage more effective engagement with employers. We will build on our initial

discussions with both the UK Commission for Employment and Skills and the Employers Forum on Disability to take forward our commitment to engage employers to make sure their views, and their support, are integral to the development of work experience and job opportunities.

### **Cross-government work**

4.48 On the 7<sup>th</sup> March 2012, the Government published *Disability employment support: fulfilling potential*<sup>24</sup>. This sets out the Department for Work and Pensions' response to the consultation on the recommendations in Liz Sayce's independent review *Getting in, staying in and getting on*. The reforms announced in the response are challenging with the ambition to support more disabled people into work within our available resources

4.49 As part of taking forward the proposals for Access to Work set out in *Disability employment support: fulfilling potential*, the Department for Work and Pensions will work with the Department for Education to ensure that Access to Work provision will be in place to support young people accessing the Supported Internship trials. This will enable young people to receive a seamless package of support as they move from education into employment where their internship results in the offer of a job. Colleges, working with Access to Work, will also be able to more effectively promote Supported Internships to employers and young people so that there is clarity about the ongoing support that is available should a job offer be made at the end of an internship period.

4.50 The Department for Work and Pensions will also work with the Department for Education to monitor the move from supported internships to employment, so that findings can inform future decisions about Access to Work, how it might support Supported Internships as they become available more widely and how it can support young people who are disabled or who have SEN as they move from education into employment. In addition, we will consider how Access to Work could support young disabled people accessing work experience opportunities within education as part of helping them make a successful transition from education into employment.

4.51 The Department for Education/Department for Business, Innovation and Skills Apprenticeships Unit has commissioned independent research to look in depth at the current state of play on disability in Apprenticeships and make practical recommendations for further action. At the same time, the National Apprenticeship Service (NAS) has supported 16 Diversity in Apprenticeships pilots, currently being evaluated for lessons learned. The findings from these two important developments will inform a forward-looking plan of action for both the Apprenticeships Unit and NAS. This will be published, along with the research and evaluation report for the pilot, later this year. We recognise that there may be instances where a supported internship or work experience, though intended for a

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<sup>24</sup> <http://www.TheDepartmentforWorkandPensions.gov.uk/docs/dis-employ-support-response.pdf>

different level of ability, enables a young disabled person to make significant progress to the point where they and their employer 'host' agree that an Apprenticeship could be a logical next step, and we will explore ways to promote and support that.

4.52 The Department for Work and Pensions will take forward their commitment to work with stakeholders, including those with expertise in SEN and disability, to make sure that welfare reforms, and in particular the development of the Universal Credit, are flexible enough to support young people with SEN or who are disabled as they attempt to find work. They will work with experts, and take their feedback and experience into account in the design of Universal Credit.

## **The role of health and social care services**

4.53 The Green Paper highlighted the need for a well-coordinated transition from children's to adult health services for disabled young people and young people with SEN and asked for views on how working across children's and adult health services for young people aged 16-25 could be improved. We also asked whether General Practitioners (GPs) could play a greater role in managing a smooth transition for disabled young people by carrying out an annual health check.

### **Consultation responses**

4.54 59 per cent of respondents highlighted the apparent 'cut-off' in services due to the child's age and the move from CAMHS to adult mental health services as particularly problematic. 53 per cent said that joint-working across child and adult health services for young people aged 16 to 25 could be improved by better communication and information-sharing, with more shared databases, use of common terminology and paperwork, and co-location of services. 17 per cent of respondents thought that the role of the child's key worker was vital in helping the family through the transition to adult health provision. Keeping the same key worker through the 16 to 25 age period was also considered important in maintaining stability and continuity throughout the child's move to adulthood.

4.55 We asked what role GPs might play in managing a smooth transition from children's to adults' services. 62 per cent of respondents thought that the generalist nature of the GP's role prevented them from playing a greater role in managing a smooth transition for a disabled young person from children's to adult health services. A third of respondents were concerned that many disabled young people did not see their GP regularly so they would be unfamiliar with their case history. Having the GP conduct an annual health check was thought to be a useful way for them to familiarise themselves with the young person. A number of respondents also considered that GPs could attend review meetings, make referrals to adult service specialists and ensure the level of support which was provided was sufficient.



## Progress

4.56 In view of the responses to consultation we have decided not to take forward at this time the idea of an annual GP health check for disabled young people over 16. Reforms to the health system set out in chapter 5 provide an opportunity to work across key transition points and to focus health and social care services on improving outcomes. They also promote greater integration between local health services and local authorities with health and wellbeing boards bringing together key local leaders to take a strategic approach to identifying and responding to local needs.

## Next steps

4.57 The Department of Health is exploring how to improve joint working across children's and adult health services for young people aged 16-25 in the context of the reforms of the health service. The new Children's and Young People's Health Outcomes Strategy will look at needs from birth through to age 19, and beyond where appropriate. It will make recommendations as to how all parts of the health and social care system can contribute to improving outcomes for children and young people, including through key transition periods (further detail is given in chapter 5).

4.58 The development of Education, Health and Care Plans spanning birth to 25 with improved arrangements for review and planning and the use of personal budgets will improve the transition from child to adult services. We will explore other ways of improving the transition from children's to adults' social care services through the forthcoming Care and Support White Paper and the links to the Education, Health and Care Plan. The White Paper will respond to the recent reports from the Law Commission, which made recommendations on the possibility of adult social services being able to assess and provide services to 16-17 year olds. We will work closely with the Department of Health to ensure that the social care reforms and our Green Paper reforms collectively deliver a significantly improved, less adversarial and less bureaucratic experience for transition between children's and adult services.

# 5 Services working together for families

5.1 The Green Paper noted that for too many parents, their expectations that services will provide comprehensive packages of support, tailored to their child and their family are not matched by their experiences. Equally, frontline professionals are too often hampered and frustrated by excessively bureaucratic processes and complex funding systems. We want to make it easier for professionals and services to work together, and we want to create the conditions that encourage innovative and collaborative ways of providing better support for children, young people and families.

5.2 The reforms set out in the Green Paper aim to provide families with greater confidence in, and more control over, the services that they use by:

- developing stronger arrangements for local strategic planning and commissioning in which local authorities and local health services will play a pivotal role in ensuring that children and young people with SEN or who are disabled receive high quality support, and that parents are able to make informed choices about what is right for their family;
- giving frontline professionals the freedom to work together to develop better services for children, young people and families; and,
- funding services for children and young people with SEN or who are disabled in ways that will facilitate integrated and collaborative approaches by local professionals, be more transparent to parents, and secure better value for money.

## **Green Paper proposals:**

We proposed to:

- Work with the health sector and the new health and wellbeing boards to consider how the needs of children and young people with SEN or who are disabled can best be taken into account through the Joint Strategic Needs Assessment, joint health and wellbeing strategies, guidelines and standards from the National Institute for Health and Clinical Excellence (NICE), and health service outcomes frameworks;
- Work with the Clinical Commissioning Group pathfinders to explore the best ways of providing support for the commissioning of healthcare services for children and young people with SEN or who are disabled and their families;
- Reduce bureaucratic burdens by simplifying and improving the statutory

guidance for all professionals working with children and young people from birth to 25 with SEN or who are disabled so that it is clear, accessible and helpful, and withdrawing guidance that does not provide useful support to professionals;

- Work with the educational psychology profession and local commissioners to review the future training arrangements for educational psychologists;
- Encourage greater collaboration between local professionals and services and across local boundaries;
- Extend the freedom and flexibility with which funding can be used locally;
- Work with a group of local authorities to explore whether and how a national banded framework for funding provision for children and young people with SEN or who are disabled could improve transparency to parents while continuing to allow for local flexibility;
- Explore how the different funding arrangements for special educational provision pre-16 and post-16 might be aligned more effectively so as to provide a more consistent approach to support for children and young people from birth to 25; and
- Provide targeted funding to voluntary and community sector organisations that have a strong track record of delivering high quality services, and publish a national SEN and disability voluntary and community sector prospectus setting out the key areas in which funding will be available to voluntary and community sector organisations.

## **Better planning by education and health services to support children with special educational needs and disabled children**

### **Consultation responses**

5.3 In the Green Paper we set out three core features of the local authority's role and asked for views:

- strategic planning for services that meet the needs of local communities: working with local partners to maintain a strategic overview of the needs of their local communities and to ensure that local services reflect these needs;

- securing a range of high quality provision for children and young people with SEN or who are disabled: as local authorities move to a more strategic commissioning role, they will need to work collaboratively with a range of providers to secure high quality provision for children and young people with SEN or who are disabled, and to identify and challenge services that are letting down families; and
- enabling families to make informed choices and exercise greater control over services: by setting out a local offer of provision for children and young people with SEN or who are disabled and their families, to help them make choices about what is right for them and exercise greater control over the services that their family receives, including through the use of personal budgets.

5.4 Respondents mostly agreed with each of these core features (85 per cent with strategic planning for services; 89 per cent with securing a range of high quality provision; and 79 per cent with enabling families to make informed choices and exercise greater control over services). Respondents noted the changing context in which local authorities were working including current funding constraints, the increase in the number of Academies and Free schools and changes in the health services. They agreed that local authorities had a role in enabling families to make informed choices. However, many felt that families might not want the responsibility of having greater control over services and questioned whether delegating control would compromise local authorities' ability to plan strategically and commission services. Some respondents (13 per cent) stressed the importance of the local authority working closely with parents to help them to make informed choices and consulting parents, as service users, to help in the monitoring and evaluation of provision and in informing strategic planning.

5.5 72 per cent of respondents suggested other features of the local authority role including ensuring services provided value for money; ensuring fair and equitable distribution of resources; promoting equality of opportunity; developing multi-agency working; and securing training for professionals.

5.6 We asked how central government could enable and support local authorities to carry out their role effectively. 68 per cent of respondents cited ensuring sufficient funding and distributing funding equitably based on the level of need within local areas. They expressed concerns about reducing capacity in local authorities and argued for long term funding rather than short term initiatives and ring-fencing for children with SEN. 37 per cent thought that central government should enforce national guidance, regulations and standards for the performance of local authorities in respect of children with SEN to help ensure consistency across local authorities.

5.7 We also asked for suggestions on ways of providing support for the commissioning of healthcare services for children and young people with SEN or who are disabled and their families. Respondents felt that the new clinical commissioning groups, developed through the health reforms, should ensure appropriate links with a range of partners, listen to parents and have access to reliable data. Suggestions were made for outcomes to be included in the NHS or Public Health Outcomes Frameworks with 50 per cent believing that wellbeing and happiness should be included. 40 per cent felt that satisfaction rates for

promptness and quality of services should also be included and that feedback from families was one of the most reliable methods of judging whether support had been effective.

5.8 There was wide support for the proposed health and wellbeing boards and the enhanced Joint Strategic Needs Assessments and new Joint Health and Wellbeing Strategies. However, many respondents questioned the capacity, willingness and appropriateness of GP consortia (now Clinical Commissioning Groups) to commission services for disabled children and children with SEN. Respondents wanted consortia to be supported through more training and to work closely with professionals with a specialism in supporting disabled children.

## Progress

5.9 The ways in which local authorities carry out their roles and responsibilities are changing rapidly as more schools convert to Academies and more Free Schools are established. We want to know better how local authorities are adapting to an increasingly diverse and autonomous schools system. We have commissioned some structured action research<sup>25</sup> with a small group of local authorities to help us to understand how different local authorities have responded to the changes and what has worked both well and less well. The research is looking at the strategic and operational implications for the role of local authorities with both a high and low proportion of Academies.

5.10 The work is being undertaken in partnership with the local government sector and Academies. A steering group to oversee the project has been set up including representatives from the local government sector, Academies, Academy sponsors and the National College for School Leaders. It will report to the Ministerial Advisory Group on the role of the LA to ensure we gain the maximum understanding and learning from the project, to inform policy development and to inform how local authorities themselves are approaching the issues. The work will cover three main areas:

- ensuring the supply of sufficient school places and provision of schools in the context of a more autonomous schools sector;
- school improvement/intervention - promoting high standards in education and tackling underperformance; and
- supporting vulnerable children - including disabled children and those with SEN, excluded children and those from disadvantaged backgrounds.

5.11 The research will answer a number of specific questions in relation to children and young people with SEN:

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<sup>25</sup> Action research into the role of the local council in education, 2012 (DfE/Local Government Association)  
<http://www.education.gov.uk/schools/leadership/typesofschools/academies/academiesfaq/a0063423/local-authorities-faqs>

- How can LAs continue to meet their duties to ensure disabled children and those with SEN can access high-quality provision that meets their needs and fund statements of SEN?
- What are the barriers to effective commissioning of alternative provision?
- What levers are or should be available to LAs to enable them to carry out their roles and duties in relation to vulnerable children effectively?
- What barriers are there, how are LAs (working in partnership with others e.g. health) addressing these and what might need to change in the future?
- How are LAs exercising their duties on safeguarding of children and are there any barriers to ensuring Academies' compliance?

ISOS Partnership has been appointed to carry out the research. An interim report was published on 29 February and a final report is expected in summer 2012.

5.12 Sir Ian Kennedy's report *Getting it right for children and young people*<sup>26</sup> published in 2010 found that the current NHS often lets children down. It echoed the frustrations expressed by parents in the consultation around the poor co-ordination of services and the low priority that children and young people can have within the NHS.

5.13 The comprehensive reform of the NHS and public health systems<sup>27</sup> presents a significant opportunity to improve the quality of services for children, young people and families. We will seize the opportunity presented by the health reforms and those set out here to improve the quality of lives for disabled children, young people and their families.

5.14 The Health and Social Care Act sets out the framework to promote far greater integration between the NHS and local government. A health and wellbeing board will be set up in each upper tier local authority area. They will bring together key people from the NHS, local government and patient and public representatives including the Director of Children's Services to take a strategic overview of local health needs.

5.15 Boards will produce a Joint Strategic Needs Assessment (JSNA), leading to a joint health and wellbeing strategy. This will set out priorities for the local area and will influence commissioning decisions across the local authority and the

<sup>26</sup> Getting it Right for Children and Young People

[www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/@dh/@en/@ps/documents/digitalasset/dh\\_119446.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_119446.pdf)

<sup>27</sup> Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies Explained

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_131702](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_131702) and JSNAs and Joint Health and Wellbeing Strategies - Draft Guidance  
<http://healthandcare.dh.gov.uk/draft-guidance/>

Clinical Commissioning Groups (CCGs). In preparing their strategy boards must under current legislation consider Health Act flexibilities such as pooled budgets and lead commissioning arrangements<sup>28</sup> where this would meet needs more effectively.

5.16 We know that there has so far been limited experience of pooling budgets, sharing assessments or joining up commissioning for disabled children and young people and those with SEN. But because of the Green Paper pathfinder programme this is beginning to change. The strengthened framework provided by the Health and Social Care Act will help embed the changes more quickly.

5.17 Local authorities will establish local Healthwatch organisations to provide a collective voice for patients and carers, Local Healthwatch will have a seat at the health and wellbeing boards, giving them a direct role in shaping local priorities. Local HealthWatch will also provide advice and access to information on health services.

5.18 The reforms focus the system on improving the outcomes achieved through health services and their partners, rather than processes used. The NHS Outcomes framework<sup>29</sup> includes measures on improving patients' experiences of treatment and improving the quality of life for carers. The Public Health Outcomes Framework includes a range of outcomes for children and young people.<sup>30</sup>

## Next steps

5.19 The Department of Health launched an engagement process to develop a health outcomes strategy for children and young people at the end of January 2012. The strategy will be published by the summer 2012 and will be the first example of an outcomes strategy as part of the health reforms model.

5.20 The strategy will be informed by an independent Children and Young People's Health Outcomes Forum, led by Christine Lenehan, Director at the Council for Disabled Children and Professor Ian Lewis, Medical Director at the Alder Hey Children's NHS Foundation Trust.

5.21 The outcomes strategy will cover the full spectrum of children and young people's health, including the needs of disabled children. The strategy will ensure that the outcomes measured are the ones that matter most to children, young people and their families and the professionals who support them and set out how all parts of the new health system, with partners, will contribute to delivery of these

<sup>28</sup> Through arrangements under section 75 of the NHS Act 2006  
<http://www.legislation.gov.uk/ukpga/2006/41/section/75>

<sup>29</sup> The NHS Outcomes Framework 2012/13  
[www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_131723.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_131723.pdf)

<sup>30</sup> NHS Public Health Outcomes Framework (January 2012)  
[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_13235](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_13235)

outcomes.

5.22 Within the Children and Young People's Health Outcomes Forum there is considerable expertise in the needs of these groups of children and young people, and frustration that services do not come together in an integrated way. We expect that the Children and Young People's Health Outcomes Forum will reflect on the NHS Future Forum's recommendations on Integrated Care, and link these with their own recommendations and outcomes for disabled children and young people and those with SEN, some of which will only be achievable through joint planning, joint commissioning and the pooling of budgets across the NHS, social care and education.

5.23 We will consider the recommendations of the Outcomes Forum and the early findings from the Green Paper pathfinders. We will use these to inform the Children and Families Bill we intend to introduce in the current session of Parliament to ensure that services for disabled children and young people, and those with special educational needs are planned and commissioned jointly. This will help to support the effective introduction of Education, Health and Care Plans from 2014.

5.24 The Department of Health will, subject to consultation, use the Mandate to the NHS Commissioning Board to ensure that the NHS commissioning system and, in particular, clinical commissioning groups, are focused on improving outcomes for disabled children and those with special educational needs. Subject to evaluation, this may include the use of personal budgets to put power into the hands of families and the integration of planning and commissioning of the care packages developed through Education, Health and Care Plans.

5.25 These changes create a clear focus on SEN and Disability in the reformed health system. They provide the framework to ensure that local Education, Health and Social Care bodies all play their part in assessing and meeting the needs of children with an Education, Health and Care Plan, contribute to the Local Offer set out in chapter 2 and work together to ensure that support services for disabled children and young people, and those with Special Educational Needs are planned and commissioned jointly.

5.26 Personal budgets are an important part of the joint commissioning landscape, and important drivers of change. They span education, health and social care, and provide for a genuine joining up of commissioning for the first time. As we set out in Chapter Two, personal budgets bring services together for the individual child or young person with resources tailored for their package of support as set out in their Education, Health and Care Plan. The budget, jointly pooled, is personal to them, and may be held by them or another organisation on their behalf.

5.27 We will ensure that all children receiving an Education, Health and Care Plan benefit from this joined up approach to resourcing packages of support, whether or not they want to take up the option of a personal budget themselves.

5.28 JSNAs are a process for identifying the needs and assets local communities. Joint Health and Wellbeing Strategies build upon this, looking at meeting these



needs through commissioning services and wider influencing. The Department of Health and the Department for Education will work with emerging health and wellbeing boards, the Green Paper pathfinders and other partners to explore what further support can be given to promote best practice. This will include the use of information from individual Education, Health and Care Plans to identify and respond to families' needs.

5.29 The Department of Health will make sure that the new system ensures the quality and effectiveness of services and outcomes achieved for children and young people, including the experience of disabled children and their families. This will include clarity for families on what to do if they have concerns about the service they will receive, with clear information on the NHS Constitution, the NHS Complaints system and the role of the NHS Ombudsman. We will also ask the Children and Young People's Health Forum to consider the effectiveness of the routes of redress available to children, young people and their families as part of their recommendations.

5.30 The Department of Health will ask the NHS Future Forum working group on the NHS Constitution to look at securing improvements for this group of children as part of its work considering how the NHS Constitution can be strengthened.

5.31 The Department of Health and the Department for Education will continue to support the National Network of Parent Carer Forums and Contact a Family to increase parent carers' ability to engage with emerging Local Healthwatch organisations and health commissioning structures.

5.32 The commissioning of highly specialised services will be a core responsibility of the NHS Commissioning Board. No final decisions have been taken on which services the NHS Commissioning Board will take responsibility for, but augmentative and alternative communication aids (AAC) are currently being considered as part of the set. The Department for Education has awarded grants of up to £150,000 in four regions (based on Strategic Health Authority cluster regions) to help sustainability and develop practice in the AAC sector.<sup>31</sup>

5.33 From April 2012, local commissioners are offering choice of provider in selected services. Patients will choose from 'any qualified provider' based on quality and individual preferences and money will follow patients' choices. Following patient engagement, local commissioners have selected service areas

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<sup>31</sup> North of England (comprising North West, North East and Yorkshire and Humber: ACE Centre North partnered with Barnsley Hospital NHS Foundation; C and E and University of Sheffield School of Health and Related Research / South of England (South West; South Central and South East Coast): Bristol Communication Aids Service (CAC) partnered with Kent CAT; Chailey Heritage Clinical Services (CHCS) and Dame Hannah Rogers Trust (DHRT) / Midlands and East (West Midlands, East Midlands and East of England); Access to Communication and Technology (ACT) partnered with Birmingham Community Health Care Trust; and West Midlands Rehabilitation Centre / London: Royal Hospital for Neuro Disability partnered with Departments of Developmental Science and Language Communication, University College London; CENMAC, Greenwich; Assistive Communication Service (ACS); Great Ormond Street Hospital for Children's NHS Foundation Trust.

for extending choice of provider according to local need. 52 Primary Care Trusts have chosen wheelchair services, and 33 have chosen continence services.

## **Reducing bureaucratic burdens**

### **Consultation responses**

5.34 The current statutory framework for SEN is complicated. Parents tell us that the bureaucracy involved can make getting the right support for their child a daunting process. Professionals tell us that they want to spend less time managing complex processes and completing paperwork and more time working directly with children, young people and families. The Green Paper made a commitment to reduce bureaucratic burdens by simplifying and improving the assessment process and the statutory guidance for all professionals working with children and young people from birth to 25 with SEN or who are disabled so that it is clear, accessible and helpful and withdrawing guidance that does not provide useful support.

5.35 We invited suggestions about how the bureaucratic burdens on frontline professionals, schools and services could be reduced. 62 per cent of respondents felt that reducing the amount of paperwork generated by the referral, assessment and statementing process would help to reduce the bureaucratic burdens on frontline professionals, schools and services and enable them to spend more time directly with children. 42 per cent thought that bureaucracy could be reduced by speeding up the process from referral to the putting in place of the support specified in a statement. A small number of respondents (14 per cent) said that funding changes would help to free up frontline professionals, schools and services from bureaucracy. 9 per cent considered that the process of change itself added to bureaucracy and wanted longer periods of stability and that increased staffing would help to release frontline staff from paperwork and allow them to focus on their work with children with SEN.

### **Progress**

5.36 We have worked with the Council for Disabled Children to find ways of reframing the information requirements on schools to focus on essential information. This work has informed our intention to slim down the statutory information requirements, currently placed on schools, in favour of schools providing a minimum core of information and working with parents to determine the contents of their published SEN policies. We will be extending the statutory requirement for schools to produce and publish an SEN policy to include Pupil Referral Units. We have also been discussing with the Government's Reducing Bureaucracy group how further reductions in bureaucratic requirements could be made.

5.37 We are committed to ensuring that the new single assessment system and the Education Health and Care Plan will reduce the bureaucracy around the SEN framework. In particular, we will consider how we can ensure that professionals' time is maximised in front-line service delivery rather than producing reports. We will be seeking to ensure strong monitoring and review processes which provide

proper safeguards for children, young people and families without over-reliance on the production of written reports. In the first instance, we are looking to the pathfinders to explore these issues.

### **Next steps**

5.38 We will be looking to slim down the Special Educational Needs Code of Practice whilst making sure that it contains the essential advice that professionals need and reflects the changes we make to the law through our reforms. The Code of Practice will incorporate guidance from *Inclusive Schooling*.

5.39 The change we propose to the current school based categories of SEN to create one school based category will help to reduce bureaucracy whilst focusing schools' attention on identifying and meeting children's SEN.

5.40 The work we are doing to better align the frameworks for identifying and making provision for disabled children and young people and those with SEN pre-16 and post-16 has the potential to reduce bureaucracy and improve outcomes for young people.

## **Supporting the development of a high quality educational psychology profession**

5.41 The Green Paper announced that we would work with the educational psychology profession and local commissioners to review the future training arrangements for educational psychologists (EPs). We asked a number of questions about the role of educational psychologists, how it might evolve in the future and the implications for their training.

### **Consultation responses**

5.42 59 per cent of respondents noted that EPs worked primarily with schools, and 47 per cent of respondents noted their work with families. Respondents wanted there to be more face to face contact: more frequent home visits, running parenting classes and parent drop-ins. 28 per cent of respondents felt there should be more EPs to reduce the time children had to wait to see them. 54 per cent of respondents thought that EPs needed to work more closely with other agencies, as part of a multi-agency support team. 23 per cent of respondents thought the EP role should have a greater focus on early intervention and preventative work. Respondents generally supported the three year doctorate course for EPs. A national funding agreement was recommended with monies being allocated by central government for training and bursaries to support those undertaking training with placements in the second and third years of the doctorate being funded by the relevant employer.

## Progress

5.43 In November 2011, we published a review of EP Training: *Developing sustainable arrangements for the initial training of Educational Psychologists*.<sup>32</sup> The review included 11 recommendations for a national training model based on the current doctorate but with a centrally managed approach to place the training of EPs on a more sustainable platform. The Department for Education has announced funding to meet the costs of tuition fees and first year bursaries up to 2015.

## Next steps

5.44 We will set up a new national steering group for the training of EPs to manage the relationship between training and placement providers. The group will include local authority employers (including Directors of Children's Services), educational psychologists, training providers, placement providers, and the relevant professional bodies. The Teaching Agency will take overarching responsibility for the running of this group.

5.45 The national steering group will lead the development of a system for the accreditation of all placement providers. This will secure consistency and quality of placements and ensure that all trainees receive equitable and broad placements. Accreditation could be part of a peer review quality monitoring and improvement process led by the steering group or managed by an external accrediting body. We will make decisions on this soon. We will monitor the effectiveness of the new training arrangements.

5.46. Work with pathfinders will help to determine the role of EPs in the new single assessment process and in the processes for reviewing the Education, Health and Care Plan and we will reflect any new role for educational psychologists in changes to legislation on assessments and in the guidance in the Special Educational Needs Code of Practice. We will also continue to encourage schools and specialist Child and Adolescent Mental Health Services to draw upon the skills of educational psychologists in relation to mental health provision in schools. This was positively referenced in the national evaluation report on targeted mental health services in schools.<sup>33</sup>

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<sup>32</sup> <http://www.education.gov.uk/childrenandyoungpeople/sen/sen/a00200017/review-of-educational-psychologist-training>

<sup>33</sup> Me and my school: Findings from the National Evaluation of Targeted Mental Health in Schools 2008-11  
<https://www.education.gov.uk/publications/standard/publicationDetail/Page1/DFE-RR177>

## **Encouraging greater collaboration between local areas**

5.47 We know that greater collaboration between local areas can help local professionals to plan, commission and deliver the best services for children and young people with SEN or who are disabled and their families, as well as helping to secure best value for money. Local authorities can also work together with their schools to develop strong models of school-to-school collaboration on behalf of disabled children and those with SEN.

### **Consultation responses**

5.48 We invited suggestions about what might be done to facilitate and encourage greater collaboration between local authorities. The majority of respondents (73 per cent) wanted to see a culture where local authorities were encouraged to share good practice and expertise.

70 per cent of respondents considered that better communication and information-sharing across local authorities would facilitate and encourage greater collaboration. Reciprocal provision and placement arrangements across boundaries were seen as helpful in encouraging stronger regional provision and better co-ordinated services, with joint-commissioning, pooling of resources and shared training opportunities offering real efficiencies.

5.49 Many respondents felt that funding was needed to support co-operation across authorities. Dedicated funding for collaborative activities was suggested, along with funding arrangements that were more equitable and transparent. Other suggestions included pooling of budgets, using a centralised funding model, or bringing greater parity to the current funding arrangements across authorities.

5.50 Several respondents thought that central government should legislate in order to make co-operation across local authorities a statutory duty, introducing set procedures and national performance indicators to ensure that all authorities knew what was expected of them.

### **Progress**

5.51 The Green Paper pathfinders, some of which involve collaborative arrangements between local authorities, will explore the best ways of encouraging collaboration and how the support in the Education, Health and Care Plan could be transferable across local authority boundaries when families move home.

### **Next steps**

5.52 We will consider what changes might be required to enable better collaboration between local areas in the light of learning from the pathfinders.

## **Extending local freedom and flexibility over the use of funding and aligning pre-16 and post-16 funding arrangements**

5.53 The Green Paper proposed extending the freedom and flexibility with which funding can be used locally and invited suggestions as to how this might be achieved. It also asked for views on how the different arrangements for funding provision for high needs pupils and students under and over 16 might be aligned more effectively.

### **Consultation responses**

5.54 There were mixed views about the introduction of greater local freedom and flexibility to the use of funding for services for children with SEN, including the ways in which specialist support services might be funded in the future. 50 per cent of respondents believed that this would be too difficult to implement and, without national guidelines, exacerbate the postcode lottery. They felt that parents of children with SEN should have a say in how local budgets were spent. Personal budgets and direct payments were seen as measures to give parents the ability to use funding in appropriate ways for their child. Respondents also wanted parents to be included in decision-making processes for local funding, through consultation and parent forums.

5.55 Almost all respondents (95 per cent) thought that improving the links between child and adult services through the Education, Health and Care Plan would provide a more consistent, more coherent, and less bureaucratic approach to supporting children and young people from birth to 25. Most questioned the rationale for the current divide in funding arrangements for learners at age 16, particularly when the participation age was rising to 18. 10 per cent of respondents felt it was important for parents to be involved in discussions about funding with agencies as they knew best the needs of their children. Respondents also agreed with the proposal to align the three different post-16 funding streams and remove any division in arrangements between young people attending school sixth forms and those opting to go to a FE college.

### **Progress**

5.56 Following the publication of the Green Paper, we published a consultation in July 2011 on the case for reforming school funding. This consultation outlined proposals for reforming education funding arrangements for pupils and students with high needs. This included pupils with high-level SEN in schools, students with LDD in further education, and pupils placed in alternative provision (AP).

5.57 Following the responses received to this consultation, we have now published *School funding reform: Next steps towards a fairer system* on 26 March 2012. This document sets out firm proposals relating to future funding

arrangements for education provision for pupils and students with high needs.<sup>34</sup> We are working towards the introduction of these reforms from the start of financial year 2013-14.

5.58 The principles of this new approach will apply to all high needs provision in the SEN, LDD and AP sectors. The new funding arrangements will bring about greater alignment of the existing pre-16 and post-16 high needs education funding arrangements. Under this reformed approach, provision for high needs pupil and students will be funded on a mixture of place- and pupil-led funding. As a result of this, we have called this new approach "place-plus".

5.59 The place-plus approach to high needs funding will support the reforms proposed in this document. In particular, the new funding arrangements will help to ensure that children and young people with SEN or who are disabled receive the best possible support that will enable them to aspire, achieve and fulfil their potential.

- a. The place-plus approach will ensure that there is clarity, through funding arrangements, as to what mainstream schools, Academies and colleges will be expected to provide for high needs pupils and students. This will support the development of the local offer, the transferability of a pupil or student support if they move from one area to another, and transparency and accountability to parents.
- b. The place-plus approach will introduce a base level of funding for specialist settings catering for high needs pupils and students that will ensure that high needs education provision is funded on an equivalent basis in mainstream and specialist settings. This will mean that there are no potential perverse incentives for commissioners to place pupils in one type of provider over another, as there are in the current funding system, which will help to improve choice for young people and their families.
- c. The new funding arrangements will bring about greater alignment of the current pre-16 and post-16 education funding arrangements so as to create a consistent high needs funding approach from birth to 25. This will support the development of an integrated approach to assessment and planning from birth to 25, as well as ensuring that young people are able to make a successful transition at 16 and to adult life.
- d. The new funding arrangements will bring together all existing education funding for high needs pupils and students in the form of a

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<sup>34</sup> School Funding Reform: Next steps towards a fairer system, 26 March 2012

[http://www.education.gov.uk/consultations/downloadableDocs/School per cent20funding per cent20reform per cent20- per cent20Next per cent20steps per cent20towards per cent20a per cent20fairer per cent20system per cent20Mar per cent202012 per cent20FINAL.pdf](http://www.education.gov.uk/consultations/downloadableDocs/School%20per%20cent20funding%20per%20reform%20-%20per%20cent20Next%20steps%20towards%20a%20per%20cent20fairer%20system%20Mar%202012%20FINAL.pdf)

notional High Needs Block. Local authorities will use funding from their notional High Needs Block to commission and fund provision for high needs pupils and students, dealing directly with the providers whom they commission. This will support the local authority's commissioning role in relation to children and young people with SEN or who are disabled, and sharpen the focus on pupil progress and attainment. The improved transparency and flexibility of funding will also facilitate the development of SEN personal budgets and the development of a national banded funding framework. It will also encourage greater collaboration between local areas and across services.

We set out in *School funding reform: Next steps towards a fairer system* a number of important consultation questions about some specific aspects of the new high needs funding approach to which we would welcome responses.<sup>35</sup>

5.60 We set out in chapter 2 (Giving parents control) our plans for giving families whose children have an Education, Health and Care Plan the option of a personal budget for their support and for ensuring that parents are involved at a more strategic level in the development of the local offer of services.

### **Next steps**

5.61 Following the publication of *School funding reform: Next steps towards a fairer system* and this document, we will continue to work with groups of stakeholders to develop in detail the practicalities of the place-plus approach to high needs funding. We will work closely with groups of stakeholders representing children and young people with SEN or who are disabled and their families, as well as providers and commissioners.

## **A national banded funding framework**

5.62 In the Green Paper we announced that we would work with a group of local authorities to explore whether and how a national banded framework for funding provision for children and young people with SEN or who are disabled could improve transparency to parents while continuing to allow for local flexibility. We invited views about how a national banded funding framework could improve the transparency of funding decisions to parents while continuing to allow for local flexibility.

### **Consultation responses**

5.63 Views were mixed on the subject of a national banded funding framework for children with SEN. Many thought that, in theory, it was a good idea but putting it into practice would be challenging. 69 per cent of respondents believed that it

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<sup>35</sup> School funding reform: Next steps towards a fairer system – consultation (March 2012)  
<http://www.education.gov.uk/consultations/>



had the potential to bring more consistency and to improve portability when families moved to a different area. 32 per cent felt that they needed more detail on the proposal in order to take an informed view and a number of respondents felt that a national banded funding framework would be too rigid a system for determining provision for children with SEN whose individual profiles of support needs varied considerably.

## **Progress**

5.64 A number of the pathfinders are developing and testing proposals for a national banded funding framework alongside Education, Health and Care Plans and the local offer. The proposals for changing the arrangements for funding high needs pupils and students in paragraph 5.51 above would allow for local authorities to operate a banded funding scheme.

## **Next steps**

5.65 We will consider the findings from the pathfinders before deciding whether and how to develop a national banded funding framework.

## **Enabling the voluntary and community sector to take on a greater role in delivering services**

5.66 We want to enable voluntary and community sector organisations to take on a greater role in delivering public services. In the Green Paper, we asked respondents to identify 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. We also asked for views on the best ways of facilitating this and about the potential for employee led organisations such as mutuals and cooperatives to improve services.

## **Consultation responses**

5.67 78 per cent of respondents considered that the voluntary and community sector could have the greatest positive impact by offering advice, guidance and support. Many felt that the voluntary and community sector organisations could provide key workers to guide families through the assessment/ statementing process and co-ordinate services on their behalf.

5.68 Over 30 per cent felt that the expertise and experience of the voluntary and community sector should be enabled to play a greater role in directly providing services for disabled children and young people and those with special educational needs. 25 per cent felt that the voluntary and community sector, particularly small, local organisations, could provide a valuable service to families by organising childcare, after-school projects, school holiday activities, day trips and family events. A few respondents (8 per cent) thought that the voluntary and community sector should not be involved in providing services for children with special educational needs and that the statutory sector should retain this responsibility. Many respondents did not comment on the potential of employee led organisations

to improve services, mostly because they felt they did not know enough about them. Where respondents did comment, some did not want them replace statutory services and others felt they could complement those services and help to improve the range of provision.

## Progress

5.69 In November 2011, we announced contracts involving voluntary and community organisations to take forward successful programmes which help support disabled children, children with special educational needs and their families. We are providing funding of around £6 million a year for two years to organisations who will support the delivery of short breaks, provide greater information and help to parents, and help disabled young people and those with SEN prepare for employment, training and independent living after they leave school. They will provide knowledge and support on the delivery and improvement of local services and help the Green Paper pathfinder areas test some of the Government's key reforms. They include:

- *The Bond Consortium (Better Outcomes, New Delivery):* Led by Young Minds and a consortia organisations and individual experts; Youth Access, Place2Be, Mental Health Foundation, the EBPU (Evidence Based Practice Unit), FPM, Cernis and CAMHS commissioning experts Lisa Williams and Dawn Rees.
- *The Early Language Development Programme:* Led by I CAN, the children's communication charity, with partners: Action for Children, The Children's Society, The Pre-School Learning Alliance, Elklan CIC and The Office for Public Management, with business development support provided by Impetus as part of their Early Years Initiative.
- *Early Support and Key Working:* Led by the Early Support Trust and the National Children's Bureau with a consortium of over 50 voluntary, community, statutory and private sector organisations.
- *Parent Participation:* Led by Contact a Family, in partnership with Serco
- *Parent Partnership Services:* Led by the National Parent Partnership Network based at the Council for Disabled Children.
- *Preparation for Adulthood:* Led by the National Development Team for Inclusion, in partnership with the Council for Disabled Children and Helen Sanderson Associates.
- *Short Breaks Delivery:* Impact, a partnership between Serco (formerly Together for Disabled Children) and Short Breaks Network (SBN, formerly Shared Care Network).

5.70 All of this builds on our grants programme worth up to a combined £6.5 million a year from 2011-13 to voluntary and community sector organisations that

provide effective advice and support to children and young people with SEN or who are disabled, their families and local professionals.

## **Next steps**

5.71 The Green Paper pathfinders will explore the impact of the voluntary and community sector locally in building parents' confidence in the development and delivery of services. Their experiences will inform legislation we will introduce during the current session of Parliament.

5.72 More generally, the Government has introduced wider opportunities for local community groups to play a more active role in running services and for public sector workers to establish mutuals to take over and deliver services, in line with the Government's commitments to develop and implement new *Rights to Provide*. Voluntary and community sector groups and public sector workers will wish to consider the opportunities these new flexibilities offer for improving the way services are provided for disabled children and young people and their families. The Cabinet Office is providing a package of support for public sector employees wishing to pursue these opportunities, including a Mutuals Information Service<sup>36</sup> and funding for those creating new, independent public service mutuals.

5.73 In chapter 3 we highlighted how the charity Achievement for All 3As took over as the lead contractor for the *Achievement for All*, providing a new model of delivery run by school leaders for school leaders.

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<sup>36</sup> Cabinet Office Mutuals Information Service <http://mutuals.cabinetoffice.gov.uk/support>



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for Education

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ISBN 978-1-78105-072-9

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