Ofsted
raising standards
improving lives

Guidance

Supporting SEND

Updated 13 May 2021

Contents

Executive summary
Context for research
Methodology
Report structure
Pupil-centred school support
The importance of home–school relationships
Multi-agency collaboration and partnership working
Discussion
Implications
Appendix 1: Detailed methodology
Appendix 2: Data collection instruments
Appendix 3: The case study pupils

Print this page

Executive summary

Around 1.4 million pupils in English schools have an identified special educational need (SEN).[footnote 1] These range from the most severe to comparatively minor. Identified numbers have increased for the fourth consecutive year, from 14.4% of all pupils in 2016 to 15.5% in 2020.[footnote 2] Many of these pupils are in mainstream primary and secondary schools.[footnote 3] Research suggests that there are varying interpretations and practices across professionals, schools and local authorities in both SEN identification and provision.[footnote 4]

Although recent reports by Ofsted and others[footnote 5] have highlighted some strengths in the special educational needs and/or disabilities (SEND) system, there are also significant weaknesses. These include:

- gaps in external provision and training
- lack of coordination between services
- lack of accountability
- weak co-production

This study was developed to explore how the needs of children and young people are met in mainstream schools and how approaches vary between providers.

We carried out this qualitative case study before the COVID-19 (coronavirus) pandemic with 21 pupils in 7 mainstream schools. These schools are in 2 different local authorities. We asked the schools to select the children who participated, mainly so that those who took part felt confident and comfortable doing so. Consequently, this study was small scale and the children are unlikely to be representative of the population of pupils with SEND in mainstream schools. The results are therefore not generalisable, in particular, the extent of the presence or absence of particular experiences found in our sample.

Schools often took a pupil-centred approach when identifying needs and planning provision, but staff did not always know the pupils well enough to do this.

Schools worked towards building secure understandings of pupils and their needs. This appeared to support timely and accurate identification of SEND. Having positive relationships and high expectations for pupils with SEND appeared to be important features of practice. Schools also focused on pupils' strengths to build confidence and independence. Ensuring that pupils had positive relationships with staff and felt included with peers was also a feature of some schools' approach. Gaps in understanding of pupils' needs and starting points resulted in a negative impact on their experiences, learning and development. In our sample, this particularly seemed to be the case for children without education, health and care (EHC) plans and those who were less well known to their special educational needs coordinators (SENCos).

Pupils with SEND regularly spent time out of class working with teaching assistants (TAs), but there were some concerns about social exclusion and over-reliance on a single adult.

Almost all pupils who took part in the research, including those on SEND support, had TAs allocated to them. Sometimes, this was to support them in the classroom, but very often they were taken out for intervention activities. This meant that many pupils were spending some curriculum time with TAs rather than teachers. This raises concerns about pupils with SEND having full access to the high-quality teaching that they need in order to have a chance of success.

Time out of class for intervention activity meant that some pupils were not able to participate in some learning opportunities and some pupils were missing entire chunks of the curriculum. Not only does this imply that regular learning loss will occur in some areas for these pupils, but also that the curriculum that they are offered does not have the same ambition as for their peers.

The significant amounts of curriculum time that pupils with SEND are spending with TAs also raises the issue of support staff training, specifically in the subject and curriculum knowledge required to teach pupils who have struggled to learn the intended curriculum at the same rate as their peers. To deliver intervention activities successfully, TAs need good subject knowledge. Training for robust subject-specific curriculum knowledge is therefore an important element of ensuring that the TA role works effectively for children and young people with SEND.

In a small number of cases, pupils had been over-reliant on their TAs, potentially impacting on them being able to develop independence. Some parents and carers also raised some concerns around social exclusion due to the amount of time spent out of class in small-group or individual interventions. However, regardless of this, most parents and carers were generally very positive about the reassurance and facilitation of learning provided by TAs.

Occasionally, schools were teaching a curriculum to pupils that was not properly sequenced or well matched to their needs.

Some parents and school staff thought that in a few cases, pupils were being taught curriculum content that they could not easily access. Due to missed prior learning or unmet needs, these pupils did not have some of the required foundational knowledge and skills. In addition, they were not always given the chance to master basics before moving forwards. When this occurs, pupils are likely to continue to experience difficulties, gaps in their understanding will widen and they will then not have the best chance to succeed in the future. This highlights the importance of practitioners, including TAs, class teachers and SENCos, having strong subject knowledge so they can understand how best to develop and teach the curriculum to support pupils with SEND. It also shows that curriculum content needs to be prioritised effectively so that pupils with SEND can master what they most need to know before moving on.

Collaboration between practitioners and families supported schools in meeting pupils' needs more effectively.

Some schools developed positive and trusting relationships with parents and carers, treating them as partners in co-production.[footnote 6] Parents shared information about their children with schools, who then used this to more accurately identify their needs. Some schools used a range of formal and informal communication channels to encourage families to share information. Parents and carers in these schools felt well-supported by individual members of staff, such as the SENCo or a class teacher, and were more likely to be confident about the school's broader approach to inclusion.

Mechanisms for co-production with parents and carers were often in place but implementation was not always meaningful. This is likely to impact how far schools can tailor provision to children's needs.

While some parents and carers spoke about participating in decision-making for their child's special educational provision, others felt that they were not given sufficient information about their child's learning and development. Some were not given opportunities to input into support plans by, for example, expressing opinions on targets or provision plans. In some cases, pupils did not have written support plans at all. This meant that the graduated approach was not in place and, crucially, that parents and carers were not given the opportunity to co-produce support plans. A few parents and carers did not consistently take up opportunities for engagement. These factors affect how meaningful joint decision-making can be.

School SENCos were essential for mediating provision but experienced a range of challenges in carrying out their role.

SENCos fulfilled a crucial intermediary role between external agencies, schools and families. Strong and trusting relationships between SENCos, parents and carers facilitated this. However, some SENCos felt that they did not have enough time to carry out their responsibilities and access continuing professional development.

Some SENCos were doing this alongside a full-time class teacher role. This indicates that for some schools, the role of the SENCo was not strongly prioritised. Some SENCos also reported frustration with delays and bureaucracy with both referrals and EHC plan assessments. These constrained how effectively they could perform their role.

Schools employed a range of tailored strategies to meet pupils' needs, sometimes supported by multi-agency services.

Schools made adjustments to support pupils socially and emotionally helped to enable the pupils to participate in the curriculum. Staff reported adapting their teaching and providing tailored or specialised resources to enable pupils to access the curriculum. Subject-specific interventions were a strong feature. Access to quiet spaces and strong communication at transition points were also important. When required, specialised support from multi-agency services[footnote 7] complemented what was offered by schools. This input from multi-agency services was valued by families and staff. However, some pupils were not receiving help that adequately met their learning and development needs even when multi-agency services were involved.

Local authorities had strong ambitions for multi-agency collaboration, but this did not always translate into improved practice and positive experiences for schools and families.

Leaders from both local authorities had strategies to promote partnership working and collaboration between education, health and care services. However, this did not always happen in practice and many school and family experiences highlighted challenges such as long waiting times and high levels of bureaucracy with the EHC plan process. Pupils with SEND lose too much time in appropriately planned education when there are long delays in accurately identifying needs.

Some pupils received support from external services, but not always to the extent they need.

Some families and schools felt that some pupils did not have access to the full range of practitioners needed, and some did not always have timely access. In some cases, this led to pupils' targets and support plans being outdated and their needs unmet. Occasionally, families felt the need to commission or pay for services themselves to remedy the lack of timely provision from external services. This highlights the importance of a full range of multi-agency expertise being present and available for planning and providing in order to meet pupil needs.

This research raises questions about what 'success' looks like in terms of supporting children with SEND in mainstream schools.

This report has provided insight into the experiences of individual pupils, how their needs were identified and the support that was or was not put in place to allow them to learn and participate in school life. Some of the pupils in our sample appeared to be thriving at school. They were accessing the full curriculum alongside their peers, were making progress and were fully included in the wider life of their schools. Others were accessing a more limited curriculum or were excluded from particular events and activities.

As some pupils with SEND may need longer to master particular areas of the curriculum, schools and parents have difficult decisions to make about how to enable learning while also working to ensure that the pupils are included in school life. This highlights broader issues for debate about what 'success' looks like in supporting pupils with SEND in mainstream schools. The variation in support experienced by pupils in this study, even when they had a similar identified need, suggests that the SEND system relies on particular individuals performing important roles well and working together effectively.

This means that 2 pupils with similar needs, attending different schools, can have very different experiences. Absolute uniformity is unlikely when individual schools have autonomy to make provision for their pupils. However, despite individuals working hard and with care, significant variability in provision is not an indicator of a system working effectively for children with SEND.

Context for research

Around 1.4 million pupils in English schools have an identified special educational need.[footnote 8] The SEND code of practice[footnote 9] states that 'a child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made'. For pupils of compulsory school age, this means that they will have significantly greater difficulty in learning than the majority of their peers or have a disability that prevents or hinders them from making use of the facilities generally provided for their peers in mainstream settings.[footnote 10] Four broad areas of need are identified in the SEND code of practice:

- communication and interaction
- cognition and learning
- social, emotional and mental health difficulties
- sensory and/or physical needs[footnote 11]

Many children and young people who have SEND may have a disability under the Equality Act 2010. This states that a person has a disability if they have 'a physical or mental impairment that has a "substantial" and "long-term" negative effect' on their ability to carry out normal daily activities.[footnote 12] For these pupils, 'reasonable adjustments'[footnote 13] must be made to ensure that they are not at a substantial disadvantage.

Despite these official definitions, research highlights the varying interpretations and practices across professionals, schools and local authorities for identifying SEND.[footnote 14]

The code of practice also sets out a 'graduated approach' to removing barriers and supporting pupils' learning with special provision. This is designed to be a responsive, spiral system of regular and personalised assessment, targeted action and review. The code of practice also requires each local authority to publish its own 'local offer', describing the support and provision available for children and young people with an identified SEN. This means that how provision is planned and achieved is dependent on the approach of the local authority and therefore what it means to have pupils' needs met in mainstream environments varies.

During the assessment and identification process, many children and young people are given labels that describe and encapsulate their characteristics and behaviour. Research highlights the fact that diagnoses and labels link the SEND system's resources to individual pupils,[footnote 15] enabling access to improved opportunities through individualised programmes of support designed to meet needs. In addition, the shared terminology of a label offers a helpful way for practitioners to communicate what a child's strengths and needs might be.

However, the research also suggests that a label of SEN can be a burden for children, diminishing self-esteem. In addition, labels may be used inaccurately, and blanket application may mask individual differences between children, preventing them from being understood in the way that is unique to them. Labels can also potentially undermine the ambition to provide high-quality educational provision and reduce expectations for potential progress. Labelling encompasses a wide-ranging and complex debate but, ultimately, the identification of need and any assigned label should make a positive difference for individual pupils.[footnote 16]

The number of children and young people identified as having SEN has increased for the fourth consecutive year, from 14.4% of all pupils in January 2016 to 15.5% in January 2020.[footnote 17] The Department for Education's statistics for SEN show that many of these pupils (almost 82%) are placed in mainstream primary and secondary schools.[footnote 18] Most of the identified pupils are classed as requiring 'SEN support', typically provided by schools. However, those with more significant or complex needs should have a multi-agency statutory assessment and hold an EHC plan.

An EHC plan is a legal document that details the support a pupil or young person requires and stipulates what the local authority must provide to help them succeed. EHC plans were introduced through the Children and Families Act 2014,[footnote 19] which built on recommendations from the Lamb Inquiry.[footnote 20] The Act preceded a number of reforms[footnote 21] to ensure that pupils' needs could be identified in a timely fashion and to allow pupils, young people and their families to be more involved in the discussion and decision-making about the help and support they need.[footnote 22]

The number of pupils with an EHC plan (or statement of special educational needs[footnote 23] before 2014) has steadily increased each year for a decade,[footnote 24] rising to 3.3% of the pupil population currently.[footnote 25] Data from the school census published in January 2020 details the number of pupils with EHC plans in different school types. This shows that almost half of pupils with EHC plans are educated in mainstream primary and secondary schools.[footnote 26] In addition, 68% of all new EHC plans finalised for the first time in 2019 were for children and young people in mainstream schools.[footnote 27]

It is clear that teaching pupils who have an identified SEN is likely to be a feature of most mainstream teachers' daily practice. Understanding how to effectively meet the needs of these pupils is therefore a vital element of high-quality education. This is particularly important given that evidence shows that pupils with SEND have poorer outcomes than other pupils,[footnote 28] which can lead to some restrictions in subject choice at secondary school stage.[footnote 29]

A decade on from the publication of the Lamb Inquiry's findings, the 2019 House of Commons Education Select Committee report found that many of the concerns it had raised still remained.[footnote 30] The report stated that:

- there was a lack of accountability, particularly for the bodies responsible for delivering health and social care support to families
- there were serious gaps in external provision and training[footnote 31]
- parents, children and young people were often not meaningfully involved in decision-making and reviews

The report highlighted a range of important issues that influence the way in-school support, therapies and other multi-agency services for children and young people with SEND are provided.

SEND provision is a major concern for Ofsted. We inspect it:

- through area SEND inspections, which look at the provision that children and young people with and without EHC plans receive from education, health and social care providers
- as part of inspections carried out under the education inspection framework (EIF), where investigations into the curriculum and behaviour management policies and practices include an examination of how well the needs of pupils with SEND are identified, assessed and met
- through our framework for inspecting local authority children's services (ILACS)

In addition to the findings detailed by the House of Commons Education Select Committee (2019), both the National Audit Office[footnote 32] and Ofsted have also underlined areas of strength and weakness of the SEND system in England and variations in provision across the country. Ofsted's recent annual report highlighted the fact that in the most successful local areas, parents and carers had been given meaningful involvement in planning and decision-making, for example through parent-carer forums. However, the report also pointed to a lack of coordination between education and health services that resulted in delays in assessing and meeting children and young people's needs.[footnote 33] These findings built on a previous report that highlighted the fact that identification of complex SEND was generally successful in the early years. It also highlighted that strong leadership and joint working was evidenced in some local areas but that there were concerns about a poor focus on outcomes for pupils with SEND and difficulties for families accessing services, and that effective practices for co-production with parents and pupils had not been established in some local authorities.[footnote 34]

Given the many challenges that these findings present, understanding the features of effective current models of SEND practice is important as Ofsted and Care Quality Commission (CQC) local area inspections continue. In addition, Ofsted has recently reported concerns about fractures in some elements of the SEND system. We have found that some leaders do not have deep enough insight into the experience of children and young people with SEND to commission services effectively.[footnote 35]

In response to all of these challenges, we developed the following research questions for this study:

1. How are the needs of children and young people met in mainstream schools?
2. To what extent does the approach schools take to identifying, assessing and meeting these needs vary between providers?

Since we started this piece of research, the Department for Education has announced a cross-government review into SEND provision to understand how to ensure that the 2014 reforms are fully delivered.

Methodology

Based on the questions above, our aim was to understand the experiences of children and young people with SEND in mainstream schools. New understandings developed through this research will inform what we do on inspection and the framework for area SEND inspections.

A qualitative, case study research design was used. We explored, in depth, the experiences of 21 pupils from 7 different mainstream primary and secondary schools (see appendix 1 and appendix 2 for a more detailed explanation of the methodology).

Interviews were carried out with the pupils,[footnote 36] their parents or carers and their teachers and support staff. We also interviewed the school headteachers and SENCos. To develop rich understandings of the local context of the areas visited and the strategic oversight for SEND, we also held group interviews with representatives from the 2 local authorities and clinical commissioning groups (CCGs).

Table 1 below details the identified SEND of the pupils who took part in the study and the level of support they receive. The language used to describe each pupil's SEND has been taken from the parents, carers and school staff who participated in the research. All names are pseudonyms.

Table 1: Characteristics of the case study pupils

See appendix 3 for pen portraits of the case study pupils.

School and local authority	Pupil	SEND (as described by research participants)	Support level
School 1, primary, local authority 1	Ethan	Autism	EHC plan
School 1, primary, local authority 1	Ava	Listening and attention, dietary	School SEND support
School 1, primary, local authority 1	Jackson	Lung disease	School SEND support
School 2, primary, local authority 1	Matthew	Behavioural, social, emotional and mental health	EHC plan
School 2, primary, local authority 1	Ian	Behavioural and sensory processing	School SEND support
School 2, primary, local authority 1	Amelia	Cancer	School SEND support
School 3, primary, local authority 1	Jordan	Cerebral palsy	EHC plan
School 3, primary, local authority 1	Ryan	Sensory processing	School SEND support
School 3, primary, local authority 1	Nathan	Social, emotional and mental health	School SEND support
School 4, primary, local authority 2	Matteo	Autism and attention deficit hyperactivity disorder, dietary	EHC plan
School 4, primary, local authority 2	Jakob	Behavioural	School SEND support
School 4, primary, local authority 2	Aaron	Speech and language	School SEND support
School 5, primary, local authority 2	Thomas	Autism	EHC plan
School 5, primary, local authority 2	Connor	Sensory processing, dietary	School SEND support
School 5, primary, local authority 2	Harper	Academic progress	School SEND support
School 6, secondary, local authority 2	Robert	Academic progress in mathematics, writing, reading and comprehension	EHC plan
School 6, secondary, local authority 2	Maria	Hearing, reading comprehension, cognition	School SEND support
School 6, secondary, local authority 2	Faizan	Hearing	School SEND support
School 7, secondary, local authority 2	Isaac	Genetic syndrome which affects behaviour, cognition and development	EHC plan
School 7, secondary, local authority 2	Cameron	Speech and language, dyslexia, hypermobility, information processing	EHC plan application denied; exceptional funding allocated
School 7, secondary, local authority 2	Madison	Social, emotional and mental health, information processing	School SEND support

Limitations

The findings of this report are about a small number of pupils with SEND. As such, they are not generalisable to the wider population of those with SEND.

The aim of this research was to build on our understanding of pupils' experiences. Although the sample is small, we can still develop hypotheses about the factors that may influence the experiences of pupils with SEND who are educated within mainstream schools.

The pupils were selected by their schools. We asked schools to select pupils who would not find it difficult to discuss their lives with unfamiliar adults as well as being dissimilar to one another in terms of characteristics like gender, age and their types of need. Making this methodological decision may have limited the breadth of the sample. It should also be noted that the data collected from the pupils was less rich than that gathered from adult participants (see appendix 1 and appendix 2 for a more detailed explanation of the methodology).

There was limited evidence of social care input for the 2 pupils who were in care at the time of the study. However, it should be noted that this relates to a very small number of respondents and that social care professionals working with these children and young people were not included in this research.

It is important to recognise that this research was carried out early in the spring term of 2019/20, with fieldwork completed before the COVID-19 pandemic resulted in schools being closed to most pupils.

Report structure

This report presents findings from our research. Each section explores a different facet of the experiences of pupils with SEND and the provision offered by their mainstream schools. Broadly, these cover pupils' school-led support, home–school relationships and multi-agency involvement. The conclusion considers the findings in relation to the research questions and any implications for future inspection practice.

Pupil-centred school support

Introduction

Schools described using strategies that are part of a pupil-centred approach to education in which the staff intended to understand the strengths and needs of the pupil and make tailored adaptations to the whole curriculum. This helped several schools to include pupils, enabling them to participate in the varied aspects of mainstream school life alongside their peers. Previous research has found that this kind of inclusion helps achieve a positive school experience for all pupils.[footnote 37]

Schools differed in the ways in which they worked to ensure that pupils could be included in classroom learning and social activities. This section addresses the first research question by examining how schools facilitated learning, with a focus on the extent to which pupils are included. We explore the pupils' day-to-day experiences of school provision, focusing on 3 main aspects of professional practice:

- understanding the pupil
- having high expectations for pupils with SEND
- providing tailored support

In addition, we explore some challenges for inclusive practice that help to address the second research question.

Understanding the pupil

In accordance with previous research that suggests that school staff should develop their understanding of each pupil with SEND to promote inclusion, all the schools that took part in this research described building strong relationships with pupils. They did this in order to understand the pupils' unique strengths and needs, help tailor support and provide interventions. This understanding was often bolstered by SEND-focused training and opportunities for continuing professional development for staff.

For example, the importance of developing a deep understanding of Isaac's behavioural needs was referred to by his teacher and TA. They said that this had enabled them to defuse outbursts with reasoned, calm discussion.

When talking about what made her feel included, Madison said that she had a positive relationship with staff and was able to rely on them:

> "…if I need help, I just tell them [the teachers] that I need help and then they help me."

Madison , school 7, secondary, local authority 2

Parents said strong and positive staff–pupil relationships were an important element of an inclusive approach. For example, Faizan's parent said:

> "I know he's able to speak to the teachers himself about any issues he faces… they've been really good with him."

Faizan's parent, school 6, secondary, local authority 2

Cameron's parent also highlighted the valuable relationship that had developed between Cameron and the school. When staff explained their approach to working with Cameron, they described focusing on his academic learning to help him become confident and relaxed but also on building relationships. The SENCo commented on this:

> "…he [Cameron] knows that he's supported by all. I mean […] the things that he jokes about and he's telling the teaching assistants on a daily basis, he obviously does have a really good relationship with them."

SENCo, school 7, secondary, local authority 2

Staff appeared to have built a strong connection with Cameron. They knew and understood his needs and strengths, partly through daily informal coaching sessions. They proudly described a breakthrough lesson where Cameron read his own poem aloud and allowed himself to be recorded. They felt that the focus on relationships had paid off:

> "…it's lovely to see him having got to this development stage isn't it now, it's great to have him come in and have a chat in the morning."

Cameron's form tutor, school 7 secondary, local authority 2

A few parents and carers also told us that empathy was important. For example, with regards to his mental health, Nathan's parents said:

> "…he didn't need somebody to say you'll be OK, you'll be OK. They knew his fear was real and they took the time to make him feel reassured, so he could carry on with their tasks in school."

Nathan's parent, school 3, primary, local authority 1

When schools focused on building positive relationships to understand a pupil's strengths and what they **could** achieve, there appeared to be a positive impact on pupil progress. For example, Matthew's foster parents recalled how his previous primary school had reported disruptive and sometimes combative behaviour and that Matthew found it difficult to concentrate on learning. At times, he was sent to a separate room or sent home, eventually being excluded. Matthew's headteacher recalled receiving reports from his previous school about his behaviour and was told, 'you won't be able to do anything with him'.

On Matthew's arrival at the school, staff focused on being positive, helping Matthew feel safe and building trusting relationships with others. The school allocated a learning

mentor and provided play therapy to help Matthew regulate his emotions, as well as one-to-one intervention to help him catch up on missed learning. This had helped Matthew to adjust to his new school. His headteacher reported, ‘He smiles now. He didn’t smile when he arrived.’ His foster parents also noted the positive change.

Research has highlighted the importance of social inclusion for pupils with SEND.[footnote 38] Some schools’ understanding of individual pupil needs allowed them to promote social inclusion. For example, Matthew’s teacher recognised that he had needed his own personalised reward system before he could progress to the system used by the rest of his class. This meant he was then treated the same as his peers and included more fully in his classroom. The TA remarked, ‘he was quite happy to do that as well. It was [the] right package choice… to go ahead with that’.

Similarly, Ian’s teacher and SENCo provided structured activities to help him develop positive relationships with his peers. For example, the learning mentor recognised Ian’s interests and helped him bond with other pupils over a shared hobby.

In another example, Amelia’s teacher and TA provided discrete help that did not mark her out as being different from her peers:

> “ …there’s someone in the background should she require that support, and I think they’ve done that amazingly… but that’s not noticeable and that’s what I wanted really because I don’t want her to be singled out or stand out.”

Amelia’s parent, school 2, primary, local authority 1

School staff also mentioned that Amelia took part in play-based activities and challenges in groups, so she did not ‘feel like the only one that needs help’. In this way, Amelia could feel included with her peers while still receiving the support that she needed. In all these instances, staff used their understanding of the pupils to ensure that provision was as inclusive as possible.

Gaps in understanding

One of the barriers to including pupils holistically in school life was gaps in understanding of pupils’ strengths and needs. For example, Harper’s teacher spoke of trying to tailor tasks in order to encourage and maintain greater interest in curriculum goals and maintain progress with reading. However, they were also unsure of whether or not he had passed the phonics screening check and, when asked to describe his SEND, they identified it as his ‘ability in class’, indicating some uncertainty around his needs. Similarly, Connor’s teacher could not recall his specific needs.

Ava’s parent suggested that she could not keep friends for very long and Ava herself mentioned that her peers ‘play without me’ and that sometimes, if they annoyed her, she ‘[beat] them up’. In contrast, Ava’s teacher and class TA felt she got on well with her peers. They had therefore not implemented any strategies to help her to form friendships. In this case, not developing a deep understanding of the pupil potentially had an impact on Ava’s experiences of social inclusion.

Similarly, staff at Aaron’s school, although aware he had difficulties with verbal communication,[footnote 39] were unclear on the extent of his needs, saying he could communicate with family and peers. However, Aaron’s mother mentioned that sometimes he found communicating at home difficult and instead used actions to convey his meaning to her. It appeared that this signing system was not used in school. In Aaron’s case, the school’s understanding of his needs was apparently limited.

Sometimes, staff faced challenges in developing their understanding of pupils with SEND and this influenced the accurate and timely identification of needs. These challenges related to staff knowledge and pupils adopting coping strategies that masked the difficulties they were experiencing.

Staff knowledge

Several primary schools reported that they had only identified needs once the pupil had reached upper key stage 1 or the start of key stage 2, rather than when the needs initially emerged. The SENCo for school 1 talked about this being a long-standing trend, with pupils’ needs not identified until later in their primary school education. This SENCo had consequently carried out specific work with early years foundation stage (EYFS) staff to promote early identification.

There may be a range of reasons why identification is not timely. Some needs can be complex, making it challenging for schools to understand and identify. For example, although Maria’s parent and the school had worked together and identified a general area of need, staff did not have a clear or consistent understanding of her needs. Maria’s TA and form tutor felt her main barriers to learning were comprehension, writing and cognition. The SENCo defined her need as a working memory difficulty. In contrast, the headteacher felt her needs were attention-based. In this case, multi-professional involvement would likely have facilitated accurate identification, but it is also important to consider the importance of school professionals sharing their insights with each other to build a strong common understanding.

Pupils who were receiving SEND support but did not have an EHC plan were less likely to have their needs identified accurately. This may be because pupils with an EHC plan have a multi-professional assessment of need, while those without EHC plans typically have their needs identified and assessed at school-level.

For some pupils, this meant that staff did not always seem certain of the nature of their SEND, possibly due to a lack of specialist SEND knowledge. For example, Jackson’s class teacher and SENCo talked about the challenges in identifying his needs, describing how he ‘was always one of those pupils who was on the borderline. He made progress, but it was never enough progress’. It was only when the SENCo started teaching Jackson directly in Year 2 that his level of need was fully recognised. In the case of Aaron, when describing his needs and what was in place to help him learn and develop, the class teacher reported feeling that it was ‘out of our skills set to be able to teach him’.

These examples suggest a need for continuing professional development for SEND and greater access to staff or practitioners with specialist SEND expertise.

Pupils’ coping strategies

We also saw examples of pupils adopting coping strategies that could potentially mask needs, making clear and timely identification harder.

For example, Faizan had developed strategies to cope with his hearing problem. In describing his difficulties and needs, Faizan’s parent did mention that he had received some speech therapy in another country during pre-school due to ‘delayed speech’, but said he was ‘was fine after that’. Subsequent teachers did not pick anything up until Faizan reached Year 6, when his teacher identified potential hearing difficulties because he appeared to struggle when there was a lot of noise in the classroom. Faizan’s parents then took him to a doctor, who felt the issue was not with his hearing but related to blocked nasal cavities. Following treatment for this, his parent said they still felt there was ‘something more as well’. His hearing needs were finally identified by an audiologist, but Faizan did not receive speech and language therapy until secondary school. Faizan’s mother mentioned that were some delays with referrals during the transition period from secondary to primary and the SENCo reported that speech and language therapy began in Year 8.

The parent reported that the speech and language therapist had noticed that Faizan could lip-read. It is therefore possible that Faizan’s need was not identified earlier because of this self-taught strategy. Additionally, his positive behaviour and attitude to learning likely made his need less apparent:

> “ Faizan, he was late identification with his hearing difficulties and I don’t know if he became more apparent because – very late actually – it was Year 8… Faizan is just one of those dedicated students who applies himself, and I shouldn’t say this but you could sit back and do nothing for Faizan and he would still succeed because that is his attitude to learning.”

SENCo, school 6, secondary, local authority 2

Because Faizan developed strategies to cope well with school life and learning, there were missed opportunities to identify his needs. These were perhaps in part due to a lack of efficient information-sharing between education, health and care professionals but also perhaps because of potential weaknesses with staff knowledge, leading to hearing difficulties not being noticed until the end of primary school. One impact of late identification and assessment was that Faizan was doing additional vocabulary work with a sensory support worker[footnote 40] in preparation for his GCSEs.

After identifying ‘quite mild needs’ with Ian, the school provided play therapy in Year 1. According to staff, Ian made good progress so the school agreed with Ian’s parents that play therapy would stop in Year 2. As he progressed towards Year 4, at times, Ian began to have frustrated outbursts. Ian’s parent referred to writing as a potential ‘trigger’. Working closely with parents, school staff developed a range of strategies to support Ian with writing tasks across the curriculum but also in regulating his emotions, forming stronger peer relationships and building self-esteem. They reported that he was now making progress. Ian’s parent referred to the identification process:

> “ …they missed… they believe they picked up on Ian in Year 1 and they said that they thought Ian had some additional needs. But they said he, within sort of a few months he adjusted a lot better. Within 6 months they thought it was fine. They said he fell off the radar because, [SENCo]s sort of theory is that maybe his home life was managed and controlled quite well, he has good support around him and it didn’t get picked up until Year 4 again.”

Ian’s parent, school 2, primary, local authority 1

It is possible that initial improvements in Ian’s behaviour occurred because he developed strategies through play therapy and at home to regulate emotions. This may have meant that staff missed signs of continuing need for support and his learning needs manifested differently as he progressed through the school.

Having high expectations for pupils with SEND

In addition to developing full understanding of the pupil, having high expectations for pupils with SEND was an important aspect of inclusive practice for members of school staff. For example, some school staff described how they focused on a pupil’s strengths to build confidence, while also setting expectations and specific targets for pupils to work towards. Some parents and staff also spoke more generally about the importance of having strong aspirations for pupils with SEND:

> “ …we tried to identify strengths… so that we could really build on his strengths. So he didn’t see himself as a pupil with difficulties… What I expected him to do was very clear. One of his targets is be ready, which means get your resources out. Listen. And complete tasks. Does he always do that? No. Is that the intention and are we improving on it? Yes.”

Nathan’s teacher, school 3, primary, local authority 1

> “ Just because he’s got a need and he’s been diagnosed with ASD[footnote 41]… It doesn’t hold us back.”

Ethan’s teacher, school 1, primary, local authority 1

In some schools, aspirations for pupils with SEND included focusing on their strengths to build on expectations for behaviour and learning. For example, Jakob’s teachers aimed to add 3 positives in his home–school book every day to emphasise his progress rather than only mention his behaviour. Alongside this, they spent time modelling their expectations through repetition. His teacher felt that, as a result, Jakob was now ‘aware of expectations which is a big step forward’. Some parents and carers liked the fact that their children’s schools focused on strengths and positives in this way. They felt that this encouraged their child to achieve more stretching academic targets:

> “ …he’s just a good kid and he really tries, and he wants to achieve and I think that’s why they’ve been brilliant because they’ve just seen that in him and they’ve pushed to help him.”

Cameron’s parent, school 7, secondary, local authority 2

In a few instances, pupils appeared to be reticent about the aspirations their schools had for them. For example, although Ethan’s parents were satisfied with the school’s planning and inclusion (staff even assigned a role in the school play to the parent in order to make Ethan feel comfortable), his teachers found it difficult to include him. His parent reported that he liked to ‘take himself away’ and that ‘it’s Ethan himself that doesn’t want to be included’. His TA also echoed this: ‘he’s actually included by the teacher, by everything, but it’s what he will let himself be included in’. In this instance, the aspiration for Ethan to be a full participant in school life was constrained but remained part of a strong vision for what staff wanted him to achieve in the future.

Developing pupil independence

Some schools also described aspirations to develop the independence of their pupils with SEND. Many schools worked towards this through the flexible use of TAs, as part of a broader strategy to promote inclusion and build the confidence and skills of pupils with SEND. Ian’s teacher and TA talked about how he took part in all class learning but received additional one-to-one help with writing, particularly spelling, which could cause him intense frustration and sometimes led to angry and disruptive outbursts. They talked about giving him praise and constant reassurance to build confidence, and they had also provided him with a mood board to help him express how he was feeling. This helped staff to know when to prompt him to use agreed strategies to self-regulate his emotions.

Other pupils, such as Madison, also received targeted subject TA help with work tasks, which she really valued. She explained that the TA helped her to understand a concept or find other ways of solving a problem in mathematics: ‘…she helps find me another way of […] doing something if I don’t get it.’ When describing working with Madison, the TA referred to providing a model for approaching problem solving tasks and encouraging her to work with peers:

> “ I will move away, and I just keep going back to her… she knows where I am […] and she’ll put her hand up.”

Madison’s TA, school 7, local authority 2

In this way, the TA could provide Madison with reassurance but was also aiming to encourage greater independence. However, this example raises the issue of support staff subject knowledge and curriculum training. Robust knowledge of the curriculum is necessary for all school practitioners around a child – TAs, teachers and the SENCo – in order for them to understand and work within the teacher’s plan for progression when supporting pupils’ knowledge development.

Cameron’s support from the TA was adapted over time to reflect his needs. For example, initially, the TA working with Cameron used thumb signals to enable him to communicate his feelings about his work as Cameron was uncomfortable with speaking. However, over time, Cameron started to ‘come out of himself’ and began to speak with school staff. The focus then moved to learning strategies: for example, how to manage his feelings when he was not successful with tasks and how to be resilient, move forward with problems and improve. Cameron’s parent mentioned that his learning and confidence had improved and that he had ‘turned around’ since starting at the school, ‘because she’s [the TA] now there, she can help him along the way’.

Matthew’s TA provision also shifted over time to support growing independence. Staff reported that when he first joined the school, ‘he was struggling to do any academic work at all’. The TA recalled having to work individually with him outside of the classroom, break content down into small chunks and provide learning breaks. This was adapted over time as Matthew became more confident and able to engage with the curriculum. This meant that intervention could be provided in a more inclusive way. His headteacher reported that the progress he made had led to him being ‘reintegrated’ back into his class.

For a few pupils, there were signs that they were becoming over-reliant on TA support, an issue explored in greater depth in a later section of this report. Ryan’s class teacher described how he would ‘just sit and wait for an adult to come and do things for him’. The teacher reported that for writing tasks, Ryan sometimes used a whiteboard to create sentences that an adult would check before he recorded them in his book. However, Ryan did not always need to use this strategy. The teacher described how they had started to take a more hands-off yet encouraging approach to curriculum activities with him:

> “ The approach we’ve had… is that we’re here if you need us but we’re not first and foremost going to jump in and do it for you.”

Ryan’s teacher, school 3, primary, local authority 1

Instead, staff talked about monitoring his progress to decide where and when more specific help was appropriate. Staff felt Ryan had responded well to this approach and appeared more independent and confident:

> “ …[he has] realised now, that he can write. I think he probably had a block on himself and obviously his emotional issues have impacted on his learning. And so I think now he realises that things are attainable. He can do them.”

Ryan’s teacher, school 3, primary, local authority 1

In the examples above, staff shared aspirations and expectations for pupils’ independence[footnote 42] and worked to support this as part of their approach. However, for other pupils, although staff had an intent to help pupils become more independent, their implementation of this ambition was unclear. For example, staff at Harper’s school agreed that he needed more help to improve his independence but did not know how this would be achieved. Both Maria’s TA and staff at Jackson’s school were concerned that the pupils were losing confidence but did not describe specific or individualised strategies to help prevent this.

Providing tailored support

Schools provided tailored support to help pupils access the curriculum and wider school life, including for transition. These elements are explored in the following section, alongside some attendant challenges for inclusive practice.

Accessing the curriculum

As part of their approach to including pupils with SEND, schools enabled the pupils to access the curriculum in a range of ways – through adapted lesson activities, additional resources and in-class TA support. In particular, schools seemed to consider interventions to be a useful tool for supporting access to the intended curriculum and they were frequently used for pupils with SEND. Many of the pupils received intervention sessions in core areas such as phonics, mathematics and reading. Some of the secondary-aged pupils received additional mathematics or English sessions from external subject specialists.

Adaptation and resourcing for inclusion

Staff reported using a range of adaptations to teach the planned curriculum for pupils with SEND: for example, writing frames, chunking material, questioning and adaptation of resources:

- Ethan’s teacher helped him engage with the planned curriculum content by using his interests as a context for learning, for example trains or fictional characters
- Jackson’s teachers created a personalised dictionary for him to refer to and help him recall vocabulary and spelling during writing tasks
- for Isaac, who was working on entry level qualifications in a range of subjects, the school supported him to access this complementary curriculum alongside his classmates who were working towards GCSEs

Most of the pupils and their families were happy with these approaches.

When describing elements of their provision, many pupils often referred to the resources provided.[footnote 43] Teachers reported using physical and visual materials for their pupils with SEND. For example, Ian had a personalised work chart, while Isaac’s teachers adapted the size and resolution of all of his resources on account of his sensory needs. To manage Ethan’s anxiety at classroom transition points, teachers used timers for activities, visual timetables and ‘now and next’ charts. Because Harper struggled to apply sounds to his writing and form letters correctly, he was provided with a sound map. Other pupils were provided with sensory breaks, ear defenders or other adjustments, such as Faizan sitting near the front of the class to accommodate his hearing needs. These examples illustrate a range of basic legally protected reasonable adjustments[footnote 44] made by staff as part of their standard practice.

Curriculum support from Tas

The deployment of a TA is a useful, frequently used strategy to support children with SEND.[footnote 45] TAs are a flexible resource who can be deployed in a range of ways – to support pupils within class, through the delivery of small group or individual intervention activity, or through direct support to the teacher.[footnote 46] The benefits of TA deployment for pupils’ confidence and motivation have been highlighted,[footnote 47] as have significant concerns about reliance on TAs. A landmark study found a negative relationship between the amount of TA support received and the progress made by pupils in mainstream schools.[footnote 48] These results were explained by the way TAs were deployed and prepared, factors that are outside their control. A follow-up study exploring the teaching and support of pupils with SEN highlighted the high degree of separation and TA support they experienced.[footnote 49] It also found that, compared with their peers, pupils with SEN received less appropriate and lower quality pedagogical provision. In addition, TAs often had more responsibility than teachers for pupils with SEN and insufficient opportunities to prepare with the teacher. A recent report has also pointed out that TAs are often put in positions that demand much more than a supplementary role and that this can lead to lower quality learning.[footnote 50] Based on this evidence, it is clear that the appropriate deployment of TAs requires careful consideration in order that resources are used effectively.

All but one of the pupils received interventions or task-based input from a TA in some or all areas of the curriculum. Some pupils were allocated a one-to-one TA. Planned out-of-class intervention for core areas such as mathematics, reading and phonics was almost always provided by TAs. TAs were also deployed less directly to pupils, using differentiated class-based group work. This meant that some pupils received class-based TA input, alongside some one-to-one intervention. For example, Jackson received one-to-one intervention in mathematics and also intervention group work for spelling. Isaac was the only pupil in this group to have a one-to-one TA at all times of the school day, including during breaktimes.

It is clear that many pupils within our sample were spending large amounts of time with TAs, and therefore away from the attention of qualified teachers. This raises 2 significant issues. Interventions are only useful if intended curriculum goals are clear. Therefore, strong collaboration between teachers and TAs is vital to ensure clarity of learning intention for pupils. In addition, it is vital that TAs who supervise the learning of children and young people with SEND have the requisite subject and curriculum knowledge to support these pupils who need the best teaching[footnote 51] or the close supervision of someone who does. One headteacher highlighted related concerns over the deployment of TAs and underlined the central importance of teachers retaining clear oversight of and responsibility for the learning of pupils with SEND in their classroom:

> “ I also want our teaching staff to be a bit more proactive with the children and instead of the TA being in the room so that’s kind of the TA’s responsibility. Staff know that it’s quality first teaching, and they are responsible for those children. They recognise that, but the actual action isn’t necessarily always there… I want the teacher to be able to pass on that subject knowledge. Because they are the person that’s in charge of that subject knowledge.”

Headteacher, school 6, secondary, local authority 2

As part of their roles, most TAs had received SEND training through INSET days. A smaller number had also been given the opportunity to complete training or courses for specific needs, such as autism or speech and language. However, TAs have not had initial teacher training or the ongoing professional development opportunities that include understanding the components for teaching a curriculum, subject-specific knowledge and how to ensure that learning is remembered so that interventions in areas such as mathematics, speech and phonics is effective. Training for special needs is an important element of ensuring effective TA support but subject-specific training to facilitate pupils’ learning of curriculum content should also be crucial for support staff.

Wider support from TAs

Within the participating schools, in addition to curriculum interventions and classwork input, TAs were frequently allocated to pupils for a range of other activities. For example, Matteo received some time to work through a physical and sensory exercise circuit that had been devised by an occupational therapist. Jordan’s TA carried out physiotherapy exercises with him during physical education (PE) and provided practical help with his wheelchair. Amelia received allocated TA hours for work on concentration, some aspects of personal care and developing gross motor skills in PE. Jakob’s TA modelled turn-taking and participating in activities using timers. This had led to Jakob beginning to take part in small group phonics work and carpet sessions.

Some pupils had different TAs working with them at different times. For example, Matteo had 2 TAs allocated for his morning activities, while a range of adults were deployed in a relay-style approach to stay with Jakob throughout the day. His teacher reported that Jakob had difficulties regulating his attention and his emotions with adults and peers and that his significant needs required a very intensive approach. The school had found that support from a small team of TAs was beneficial, with everyone being less overwhelmed.

Parents and carers referred to the strong relationships between pupils and TAs as being beneficial for their pupils. Madison’s parent spoke very highly of the consistent encouragement provided by TAs who were ‘always there to help her’. In fact, Madison’s teacher described her TA support as an important ‘prop’. Thomas’s parent referred to the EHC plan and its role being ‘to keep his one to one and I can’t imagine how we would be if we didn’t have someone’. When parents and carers referred to TAs, they often showed appreciation for the social emotional support they provided. Their responses did not focus on the effectiveness or quality of education.

Environmental support

Staff and pupils referred to environmental strategies that could be used inclusively. The pupils who were asked knew about quiet spaces provided by the school. Isaac talked about the room in his school helping him to feel relaxed. Ian’s teacher encouraged the use of the book corner tent as ‘his quiet space where he can just calm down’. Ryan and Ava were also able to independently access a quiet space when they needed it. Ryan appreciated the fact that the school has provided ‘lots of places where there’s not many people – so you can calm down really easily’. Some of the pupils reported not needing these kinds of spaces.

Transition points

Some school staff spoke about the need to provide smooth transitions for pupils with SEND at certain points in their education. This was particularly important for key stage 2 pupils whose move to secondary school was upcoming. School staff talked about the processes they used to try and make sure that pupils and their families were ready for this, using practices such as parent visits to begin the transition process earlier in the school year:

> “ I tend to have a phone conversation with any of our pupils who were moving up who might have specific needs, as in Jordan’s needs, physical needs. I would be speaking to the SENCo anyway and saying what would your normal practice [be] and what we’ve done historically is they’ve come in and had a meeting with parents to allay any worries anyway, before we’ve even started.”

SENCo, school 3, primary, local authority 1

Although most parents and carers felt involved in their child’s transition, many were still anxious. This was the case even where they felt informed and had a good relationship with their child’s school. Their anxiety was even greater when they felt uninformed:

> “ So, what I’m really scared about at the moment, is that he’s in Year 4 now and I’m thinking about Year 6, I’m thinking about high school. And I’m going to have to start thinking where is he, what’s going to be appropriate for him? I’ve got no support in that.”

Matteo’s parent, school 4, primary, local authority 2

It should be noted that some school staff were also anxious about primary–secondary transition:

> “ …making it clear I am concerned about Matthew going to high school obviously because although he is doing so well in our school, high schools are just a completely different environment and a completely different set of rules aren’t they?”

SENCo, school 2, primary, local authority 1

Interestingly, the pupils did not appear to share the same concerns about moving to new environments. However, the experiences of participants do highlight the importance of collaborative working between parents and schools.

Collaboration between schools was also important. The 2 secondary schools in our sample discussed using information from primary schools to inform pupil transition, including speaking with primary staff and parents or carers. In both secondary schools, this information was brought together using pupil passports:

> “ …as soon as we know which students will be coming to join us we start collecting information… I do then go out and visit their SENCos or the class teacher and we go through student by student, sometimes parents… and we get a lot of our information.”

SENCo, school 6, secondary, local authority 2

> “ …we get given the passports and get told which students are coming into Year 7 for the taster day when they are in Year 6.”

Madison’s TA, school 7, secondary, local authority 2

The 2 secondary schools also talked about working with parents and carers to identify future post-16 pathways. This included going to college or working towards alternative qualifications. Parents and carers with pupils attending secondaries suggested that this approach had led to a positive working relationship with the schools.

Sometimes, a pupil’s needs were not communicated effectively between education phases due to a lack of collaborative working. This mainly concerned the primary to secondary transition, but also early years to primary:

> “ When I went to the nursery, it was evident that Jakob had issues, but the nursery didn’t tell me how severe the issues were so when he came we weren’t ready for him. […] a big thing, one of my bugbears, especially in reception is pupils coming from nursery and we don’t know what we’re getting until they come, despite me going to visit.”

SENCo, school 4, primary, local authority 2

This lack of information-sharing led to some parents and receiving schools having to complete extra work to fill gaps or repeat processes. For example, Cameron’s parent said that although Cameron had been assessed by a doctor as having dyspraxia and hypermobility after one of his primary teachers raised concerns, his primary school had not told his secondary school. The parent reported that when they had contacted the primary school about this, staff had said they did not have any information. This led to the parent returning to the doctor to get the relevant reports again so they could be given to the secondary school. Cameron’s parent felt that the secondary school not having this information had set him back when he started secondary school. Lack of information-sharing at transition therefore sometimes led to some pupils missing out on provision or experiencing unnecessary delays.

Challenges with support

Tensions with the use of Tas

This section has already explored some of the ways in which TAs provided support for pupils with SEND. The curriculum and subject knowledge of support staff has emerged as a crucial concern because, very often, the pupils who need access to the best teaching spend large amounts of curriculum time with TAs – staff who have not had the same training as teachers. This obviously raises questions about how effective intervention support can be.

The evidence shows that some of the pupils spent significant periods of time working with TAs outside of the classroom. For example, Connor missed assemblies, Harper missed afternoon lessons and Robert missed Spanish, religious education and sometimes other lessons to attend reading and writing support sessions as well as additional mathematics sessions. Maria and Madison were also both taken out of class for subject interventions. Ava’s parent and teachers reported that she needed help with core subjects, especially reading, and also needed support to remain focused. Ava spent every morning out of class in small group interventions for English and mathematics, returning to the main classroom in the afternoons. Additionally, she sometimes went to the year below for her mathematics lessons.

Missing chunks of lesson time without the opportunities to access the same full curriculum as their peers has implications for pupils with SEND. As previously highlighted, they are not only not getting the high-quality teaching they need from teachers, but are also likely to miss some key content with which to build their knowledge, skills and understanding. In addition, they will have less time to repeat and remember knowledge. This suggests that they may be being offered a curriculum that does not have the same ambition as that taught to peers.

In addition to concerns over learning loss, this is an issue for social inclusion. Existing research suggests that segregating pupils through TA-led intervention work can create challenges to including them.[footnote 52] Some parents and carers in this study expressed concerns about this. For example, Jackson’s parent felt that although the TA interventions Jackson received outside of class were beneficial, they were also concerned about possible social exclusion from his peers:

> “ I’ve always asked does he go into class now and then? And does he sit with his friends? Because I don’t want it where they take him out and then he’s not included with his friends.”

Jackson’s parent, school 3, local authority 1

In addition to the potential for weak inclusion from intervention sessions, for a few pupils, TA provision had created an over-reliance on a single adult, with some negative consequences for pupils’ experiences. For example, Thomas could remember how upset he had been when his TA left in Reception year, though he was currently in key stage 2. Similarly, Matteo’s parent recognised that he had become over-reliant on his one-to-one TA, who had worked with him since Reception. On advice from the educational psychologist, the school subsequently allocated 2 TAs at different times of day. Despite the change, Matteo’s parent reported that he became worried if he did not have an adult with him. Matteo also voiced anxiety about this:

> “ The only thing I would change is to get another person for [TA2] because she is always leaving me for 5 seconds and for that 5 seconds, I basically need her because then I don’t cope on my own. I feel kind of alone. Then when she comes back, I’m coping again.”

Matteo, school 4, primary, local authority 2

This dependence on adults can constrain pupils’ independence and confidence and reduce the likelihood of full and meaningful inclusion.

Alongside this, some school staff expressed concerns that there was not enough

Alongside this, some school staff expressed concerns that there was not enough funding to hire all the TAs they felt they needed to support pupils with SEND.[footnote 53] For example, one of the schools had recently cut the number of support staff due to budget constraints. Other schools described similar worries around restructuring:

> "…we're currently about […] to restructure stuff which is going to be really difficult because that will have a knock-on effect with the additional adults that we use and utilise… the people that are working with pupils day in day out, they will have less access to them."

Headteacher of school 2, primary, local authority 1

Some TAs described balancing the provision for pupils with SEND with other roles. For example, Robert received help from a TA in core subject lessons, but this was not as consistently available for other subjects, where staff were shared between more pupils. Robert's TA reported, 'We are pulled every which way.' This suggests that, at times, the TAs allocated to Robert were not able to fully focus their attention on his learning across the wider curriculum to the extent they should have.[footnote 54] The evidence suggests that, while schools view TAs as an important part of their provision for pupils with SEND, there are associated challenges with this model.

Support not meeting needs

There were some examples of concerns about provision and the extent to which it met or was perceived to meet pupils' needs. For example, some participants raised concerns over curriculum coverage. Aaron had one-to-one intervention for reading and phonics. His TA used sound flashcards and word-wheels to practise phonemes. However, she reflected that he could quickly become frustrated or disengaged: 'I can't push him too much as I've got to just keep moving on'. This suggests this intervention or the method of delivery was not working for Aaron, highlighting potential tension between the additional provision, curriculum coverage and progress.

Another example was Robert, who was reportedly struggling in reading. He was significantly behind age-related expectations. His carer said that he also struggled with handwriting and spelling. His carer felt that there was too much for him to cover across the curriculum and wanted him to have more intervention and tailoring of learning to tackle the gaps in his knowledge:

> "I know it's singling them out but sometimes you have to go backwards before you can go forwards and he knows himself that his handwriting is really bad, and his spelling."

Robert's foster parent, school 6, secondary, local authority 2

The examples of Robert and Aaron suggest that the curriculum or teaching provided was not fully matched to their needs and could potentially be causing cognitive overload.

Other parents, carers and pupils commented that they felt current provision did not sufficiently meet needs. For example, Connor received weekly intervention for spelling, but his parent reported that this had little impact. They expressed serious concerns about his lack of progress in English and mathematics. They said they would like 'someone else just to help him a bit more'. In contrast, his teacher felt that his needs were being met:

> "I think his educational needs are being met and I think his emotional needs are being met within the classroom with the level of support that we give him… I think that… we're covering most of the bases with him."

Connor's teacher, school 5, primary, local authority 2

Connor himself was unsure of the help he received. He felt unsupported in mathematics, despite his teacher reporting additional help with concrete resources and detailed explanations. This example also suggests that when teachers do not prioritise the curriculum content that pupils with SEND most need to master, this can prevent their ability to deliver support effectively.

Matteo's parent felt that their school did not always adopt an approach that was tailored to his needs. They had made suggestions to the school for reasonable adjustments to help manage his needs. However, although school staff referred to a range of strategies that were in place to support Matteo and said these were enabling some progress, the parent felt the school had not taken all suggestions on board and were not always flexible in adapting to meet Matteo's needs:

> "We are trying to help you, help him and you're not allowing [it]… I understand there have to be rules, but if you've got a kid with a different need and it's a genuine strategy that works, you should be flexing those rules."

Matteo's parent, school 4, primary, local authority 2

In these examples, it seems that support was not planned appropriately to meet needs. There were also concerns from some parents and carers that the schools had not made reasonable adjustments. These examples highlight the importance of strong collaboration between parents, pupils and schools to co-produce provision. Without this, there will be barriers to inclusion of pupils with SEND and also a potential risk of them continuing to experience difficulties.

Summary

This section has discussed the principal ways in which schools worked to meet the needs of pupils and meaningfully include them in the classroom and wider school life. This involved developing deep understandings of the strengths and needs of each pupil, making clear and well-thought-through adjustments to the curriculum and having high expectations for the outcomes they can achieve, academically and across their wider school life. Schools also aimed to ensure that pupils felt included with their peers while receiving interventions or other forms of support. Where staff did not understand pupils well, those pupils' needs were identified less readily. The curriculum was therefore not planned appropriately and help could therefore not support pupils' learning as effectively. Sometimes, staff faced challenges developing their own understanding of pupils with SEND. Factors such as staff knowledge and pupils' coping mechanisms affected accurate and timely identification of needs.

Alongside intervention programmes for pupils with SEND, schools used TAs, tailored resources and adapted teaching. In addition, schools considered environmental factors and the challenges of transition points. In some cases, intervention programmes and other work with TAs saw pupils taken out of their classroom, sometimes for significant amounts of time. Inevitably, this meant that pupils were not being given full access to the learning opportunities offered by teachers to their peers. Some pupils were missing out on whole chunks of the curriculum due to time out of class. A few others received teaching that parents, carers and staff felt did not meet their needs. This highlights the risk of significant learning loss, which will compound over time and mean that pupils with SEND may not be well enough prepared for the next steps in their education.

The regular use of intervention sessions also raises the important issue of curriculum and subject training for TAs to allow their role to be effective for pupils' learning. TA deployment was also noted by some parents, carers and school staff to hinder pupils' independence and social inclusion.

The importance of home–school relationships

Introduction

The quality of relationships between home and school has an impact on the way schools plan and provide support for pupils with SEND. This relationship is critical for ensuring that schools accurately identify and meet the needs of children and young people.[footnote 55] A significant component of this relationship is the extent to which schools work to develop co-production with families, a way of working that brings together pupils, parents or carers and education, health and care services when making decisions about how best to support a pupil.

This section presents evidence with a focus on the second research question. It looks at how the home–school relationships can influence the timeliness and accuracy of identifying needs, and explores features of more and less effective co-production with families.

Identifying need

Research suggests that early identification of SEND is crucial. Timely, effective provision can help to narrow the educational gaps between pupils with SEND and those without.[footnote 56] It can also help pupils with SEND to adjust to school positively.[footnote 57]

Most pupils had their SEND identified soon after starting formal education. Identification of needs most frequently occurred in Reception, key stage 1 or lower key stage 2 in primary school. We saw in the main 2 different approaches of how schools and families worked together to identify the needs of pupils with SEND:

- separately, with parents and carers and the school working independently initially
- together, where the 2 parties collaborated with each other

This section explores how identifying need can be a collaborative process. It will also examine how this impacts on the timeliness and accuracy of the identification. In addition, it will highlight that even when there is good collaboration and positive home–school relationships, there are some additional factors that may influence the effectiveness of identification.

Collaboration for identification of need

The SEND code of practice[footnote 58] highlights the importance of practitioners listening to parents and carers in order to understand their concerns and to help with their analysis of pupils' needs. Some schools talked about identification as a collaborative process between school staff and parents and carers:

> "…it would be around class teachers and teaching assistants, all members of staff really, being aware of how pupils are behaving, is anything out of the ordinary, are parents pointing out anything that they've seen at home… if that's then becoming a pattern."

SENCo, school 5, primary, local authority 2

We heard of examples of home–school collaboration that enabled the identification of need and provision being put in place swiftly. For example, Ryan's parent referred to sharing perspectives with the school to enable them to develop a good understanding his needs: 'we worked out together what some of his triggers are'.

At the time of the research, Ava's parent had an active role in the ongoing identification process alongside school staff. Ava's parent described speaking to the SENCo after their daughter joined the school towards the end of Year 1:

> "…it was noted at parents evening she wasn't keeping up with the other pupils. So I said to SENCo she can't keep still, she's just a bouncing, bouncing ball all the time… you're seeing the same things as me she said, we need a meeting… and then things have started being put in place."

Ava's parent, school 1, primary, local authority 1

The school had carried out a speech assessment and a receptive language assessment to follow up on concerns. They also made sure they built on the parent's knowledge and experiences to inform the preparation of documents for the referral to a multi-agency panel.

Another example of collaborative identification leading to a rapid, positive impact can be seen in the experiences of Nathan's parent. Nathan suddenly developed social, emotional and mental health difficulties after an illness, which resulted in him developing an intense fear of sickness. His parent immediately spoke to the school, which put some provision in place for Nathan's severe anxiety. His parent described working with the school to see what they could do together. The school subsequently introduced books about anxiety and a 'brave book' for him to record small achievements throughout the day, which his parents felt had been very effective. Nathan was also referred to an educational psychologist and subsequently to the child and adolescent mental health service (CAMHS). The parent felt the CAMHS sessions had helped Nathan to better manage his phobia, 'I think he's got the skills now to cope with it [and] uses strategies that we use, and the school and CAMHS have put into place'.

In this case, the collaboration and sharing of ideas between Nathan's parent and his school led to specialist practitioner involvement that had a significant positive impact on Nathan's social and emotional mental health.

Missed opportunities for collaboration

We also found some evidence of weak information-sharing between home and school affecting the identification of need. For example, Harper's school did not consult his parent during the identification process. In fact, his parent was unaware that the school had placed him on their SEND register (see 'Insufficient information-sharing'). As previously discussed, at the time of interview, Aaron's needs had not been accurately identified. Aaron was said by school staff to have difficulty expressing himself verbally but could still communicate well with his friends. However, although he understood the questions and could communicate with the interviewer using nods and other signs, he struggled to speak when participating in the research. Aaron's parent said they could not always understand what he was trying to say, and that Aaron sometimes used signs to communicate at home. School staff appeared to be unaware of Aaron trying to use signs. School staff also did not appear to know that Aaron had experienced multiple problems with his larynx and ears when young and that he had had several operations as a result.

In addition, problems with partnership working and collaboration were apparent. At the time of the study, Aaron was receiving speech and language therapy in school but staff felt that it was not meeting his needs. His teacher also reported that 'even speech and language have said they are at a loss as to where to go next with him'. Despite the SENCo reportedly expressing these views to the local authority education support service, mentioning that his needs were possibly in 'medical realms', at the time of research no changes to Aaron's provision had been planned. This suggests that information may not have been shared effectively between practitioners.

A combination of factors meant that Aaron was not receiving sufficient provision to enable him to communicate effectively. Weaker collaboration between home and school meant that his parent did not have a firm understanding of his school experiences and staff did not have a good enough understanding of his needs. Evidence of weak information-sharing and collaboration between education, health and care professionals suggests that they missed opportunities to accurately identify, assess and provide for Aaron's needs (see 'Multi-agency collaboration'). In addition, despite health service involvement, it seems that there was a lack of further action for developing the support package, including referral to additional expert practitioners. The impact of this on Aaron's learning and development highlights the importance of a full range of services being involved.

Co-production

Co-production is a way of working in which children and young people, families and those that provide services work together. The aim is that professionals listen to, understand and learn from the views of children and families, and, in the fullest possible way, involve them in decisions about the plans for support that will enable the child to achieve their goals. This approach is widely seen as allowing more effective provision to be made for children and young people with SEND.[footnote 59] Co-production is advocated in the SEND code of practice.[footnote 60] Its principles are embedded within the Children and Families Act.[footnote 61] Research indicates that there are a range of factors related to the meaningful involvement of families in decision-making. These focus on schools listening to and learning from families, in order to build collaborative understandings of individual children's strengths and needs.[footnote 62] Forming positive relationships with families, nurturing trust, communicating clearly and sharing information have all been found to be vital elements of practice for co-production.[footnote 63]

This section explores how and the extent to which schools have collaborated with parents and carers to develop provision for children and young people with SEND.[footnote 64] This often meant that a careful balance had to be struck between the things that were important to the pupil and family – their hopes and ambitions for the future – and what professionals knew was important for the pupil to learn and do in order to achieve these ambitions.

We saw different examples of co-production. Some parents and carers felt that they were encouraged to work with schools on the things that might benefit their son or daughter. This included making suggestions about provision:

> "It was a case of working closely with the school to just try and help him and do different things."

Ryan's parent, school 3, primary, local authority 1

Jordan's school encouraged his parents to share beneficial exercises they could do in school for his cerebral palsy. Ian's parents suggested a class move after an escalation in his behaviour. The school acted on this suggestion and both Ian's parents and school staff felt that this had a rapid, positive effect on his behaviour.

Connor's parent reported emerging behaviours of crying and feeling sick in the morning before coming to school. After discussion with the teacher, they felt this was due to the school's move from ability grouping to mixed groups: 'I think that actually just threw him off and he then realised then that he just couldn't do it'. After consultation with parents, the teacher and TA then began meeting Connor at the door, so 'if he has been a little bit anxious about coming in, he knows he's going to see us'. Connor also showed anxiety with eating different foods during lunchtime. School staff noticed this and spoke to Connor's parent, who reported that Connor had similar difficulties at home. After this discussion, a member of staff began sitting with Connor during lunches to encourage him to try different foods. This strategy was successful, and his teacher reported, 'he now eats school dinners and eats something different every single day'.

For co-production to be effective, pupils, parents and carers should be involved as fully as possible in decision-making about new provision and adaptations to existing support plans and packages. The examples above demonstrate the beneficial effect of co-production on meeting needs and enabling progress.

The role of communication in co-production

Good levels of communication between families and schools play an important role within the process of co-production. To support this, some schools set up regular, sometimes daily, methods of communication with parents to share any changes or concerns. Schools also used formal and informal communication channels to encourage parents and carers to contribute to decision-making about their child. Parents and carers were largely positive about the level of communication with schools. Formal channels included, for example:

- transition meetings
- EHC plan reviews
- parent evenings

Informal channels could include:

- regular end-of-day catch ups with class teachers and TAs
- home–school communication books
- families calling schools to discuss concerns

Informal communication channels provided opportunities for parents or carers to discuss concerns that may not immediately relate to their child's support plan as well as highlighting emerging needs. This allowed the school to prepare accordingly and put appropriate provision in place. Ethan's parent described speaking daily with the school to discuss his 'meltdowns'. They communicated with the school and discussed strategies to prevent these from reoccurring.

Some schools offered 'drop ins' where parents could discuss things that formal meetings may not cover:

> "I do speak to the school a lot. If I've got a problem, [staff member] – I email her or leave a message and she'll ring me back or if I've a problem or if I want to know something. So they are good like that."

Robert's foster parent, school 6, secondary, local authority 2

> "They've always consulted me and asked me to come in and speak to them. And we've always […] come in and had a chat."

Cameron's parent, school 7, secondary, local authority 2

Some parents or carers used home–school communication books to maintain regular contact. These were used to share concerns, information and observations between home and school. This could, at times, result in the co-production of new provision. For example, Harper was refusing to read at home and his parent used his home–school communication book to express their concerns about this. The school created a reward system for Harper using a bookmark, which led to an increase in his reading at home. Written communication channels were also helpful for the family of one pupil who had some difficulties with memory:

> "Mum wanted a note of what he's done each day so she could talk about it when he gets home because obviously it's not always clear and he sometimes forgets so the communication between us and mum is like a daily thing as well, isn't it?"

Thomas's TA, school 5, primary, local authority 2

Almost all schools spoke about the importance of maintaining communication with parents and carers. Some staff described how it helped them deliver appropriate provision, update the provision when required or keep parents involved and informed throughout the EHC plan process. Regular communication was considered to be essential for maintaining a 'holistic view' of a pupil and their needs:

> "The times we'd meet parents are if there was a cause for concern, [we] would ring, we would ask to meet parents and sit down and discuss that holistic view… because there may be some issues that we don't know about that are impacting on whatever the difficulty is in school and they may be able to give us an insight into something. But then look at planning together how we might move forward, whether it's from a learning point of view, SEMH [social, emotional and mental health], or whatever the difficulty might be."

SENCo, school 6, secondary, local authority 2

Schools that provided multiple means of communication created more opportunities for parents and carers to share information or concerns. The school was then better able to respond to these flexibly than might have been possible through more formal channels. By maintaining open and frequent communication, schools were able to build trust and strong relationships with families and develop the culture of collaboration needed for effective co-production.

The role of the SENCo in co-production

In common with previous research, we found that in some schools, the SENCo played an important mediating and sense-making role for school leaders and their colleagues but also for parents and carers.[footnote 65] Most parents and carers valued their relationship with the SENCo, who was often the first port of call when they wanted to discuss their child's needs. One SENCo described how these discussions were valued and carefully considered:

> "If parents get in touch, I'll talk to them about what it is that they perceive. And I'll speak to all the teachers… we always want to obviously take the parents' concerns on board and do whatever we can to support the pupil and the parents."

SENCo, school 7, secondary, local authority 2

At times, the SENCo also played a mediating role in helping parents and carers engage with external practitioners. For example, Ethan's parent discussed how their SENCo had been looking into 'finding us something to help with Ethan after school'. Another SENCo described helping families with visits to the doctor (general practitioner (GP)) regarding pupils' needs:

> "…what I always do is I ask parents if they would like me to write a letter to back up what they're going to the GP for… if I give that letter they do tend to refer, so it's just to help them."

SENCo, school 4, primary, local authority 2

When parents and carers described a positive relationship with their school SENCo, they appeared to be more satisfied with their child's provision. They also appeared to be more certain that their views would be taken into consideration by other school staff.

> "I think [the SENCo] does have a plan of action with her… I could ask, I've never asked for one but I've put my whole trust in [the SENCo]… I rely on [the SENCo] to inform me."

Ava's parent, school 1, primary, local authority 1

> "I know that if I had something that I wanted to feedback then obviously I can speak to [the SENCo] or any member of the team to put my views across."

Amelia's parent, school 2, primary, local authority 1

The trust that many parents and carers had in their child's schools may therefore have been influenced by their relationship with the SENCo, who appears to play an important role in the building of relationships between parents, carers and schools. Developing these relationships seems to be integral to ensuring that parents and carers are listened to and able to participate in the planning and review of provision. Ultimately, this should encourage greater levels of co-production and a sense of partnership between home and school. This relationship-building role of the SENCo is therefore one essential element of delivering provision for pupils with SEND. This has implications for school leaders, who should ensure that they allocate sufficient time for it, enabling the SENCo to work effectively.

Challenges for co-production

While almost all school staff acknowledged the importance of co-production with parents and carers, this practice was not evident in the experiences of all families. The extent to which schools appeared to fully implement a process of co-production and view parents and carers as partners varied. Some of the factors negatively impacting co-production were:

- parents and carers having insufficient information about their child's needs and provision
- limited opportunities for input into support plans and reviews from parents and carers
- lack of parent and carer engagement

However, even in schools where the process of co-production appeared to be weaker, staff still seemed to be aware of its importance:

> "I think certainly tightening up the process really around the processes within school, so support plans making that more of a set thing and just trying to involve parents as much as possible. That will make the most difference really, in terms of pupils within school."

SENCo, school 5, primary, local authority 1

Insufficient information-sharing

Some parents and carers experienced inconsistent levels of communication about their child's needs and provision. In one significant example of a school failing to keep parents and carers informed, Harper's parent was unaware that the school considered their child to have SEND until they were asked, by the school, if they would take part in this research:

> "It was a bit of a shock. It was like being told that everything's fine, nothing's wrong, he's just a little bit behind, to, your pupil's now been put on a register and we want you to speak to these people."

Harper's parent, school 5, primary, local authority 2

Harper's parent was not aware of the extent of his needs at school and how much they were affecting his learning. His parent described how they had previously asked the school about Harper's progress because they 'had an idea that there was something' but were told that it was 'nothing to worry about'. The lack of open information-sharing between the school and the parent likely contributed to the fact that Harper's needs had not been accurately identified at the time of the study and effective provision did not appear to have been put in place. Harper's parent was not given enough opportunity to share their concerns and the school did not draw on his parent's knowledge to inform their understanding of Harper's needs. This approach is inconsistent with the principles of co-production, with the parent not being valued or involved. The SENCo acknowledged that this aspect of the school process was something that could be improved.

> "Actually, I probably could do with being a bit more, bit clearer around where, what the communication would look like at different stages, so stuff is not a surprise."

SENCo, school 5, primary, local authority 2

Some parents and carers who felt involved suggested that this was driven by their own proactive approach to information-sharing rather than collaboration between home and school. For example, although Ryan's parent spoke of 'working closely' with the school, they also felt that they were left to find out any useful information themselves and then share this with the school, rather than working together with staff to reach a shared understanding of needs and any provision that might benefit him:

> "I feel like a lot of it was left to me and you do it because it's your child and you want the absolute best for them. And talking to school… I tried to be really proactive in terms of, if I learned something I'd come and share it with school."

Ryan's parent, school 3, primary, local authority 1

Another example of a parent feeling like they needed to take the initiative with gathering information and organising provision was Thomas's parent, who said they had to 'concentrate on fighting for him to get help' before he started primary school.

In a few instances, parents or carers contacted external services themselves. For example, Connor's parents discussed contacting CAMHS when he was having problems with his diet and how they felt they were the ones pressing 'to get an answer to his eating'. These illustrations perhaps suggest that in some cases, parents and carers felt the need to fill perceived gaps in services in order to gain access to the health support their pupil needed.

Limited opportunities for meaningful co-production

The degree to which parents and carers were given opportunities to provide input into decision-making was inconsistent. These differences partly depended on whether the pupil had an EHC plan or not, with most parents and carers of pupils with EHC plans tending to be more involved in dialogue and decision-making. In a few cases, no written school-level support plan existed, limiting the scope of any co-production. In some schools, staff shared plans and targets but did not give parents and carers the opportunity to provide input beyond approving the plan:

> "We share the targets with the parents so it does come from the school but parents can have their view as well, so if they feel well, actually, I don't feel this is right, I'll say well, actually, this is the evidence that we've got."

SENCo, school 1, primary, local authority 1

A few parents spoke about positive communication with the school, but said that this did not lead to action. Matteo's parent was given the opportunity to contribute in EHC plan meetings to share their insights but felt that the school did not always listen and act on that information:

> "Whether it'll be heard or captured is a different matter. Because we have discussed some of these things in previous meetings. And then it's 'oh right, we don't need to change the plan – we'll do that in the IEPs [individual education plans]. But then it doesn't happen."

Matteo's parent, school 4, primary, local authority 2

Alongside this, some parents and carers had less understanding of the processes in place for reviewing and updating support plans. For example, Thomas's parent felt confused and thought that the review was in place to just confirm the allocation of the TA, rather than to discuss his provision in more depth:

> "So, to be honest I'm still a bit confused about… I know what there is in place to help him and when we do the review it takes […] 2 hours, when we do his review. It's to keep his one on one…"

Thomas's parent, school 5, primary, local authority 2

In Ethan's case, the parent had a very good relationship with the school and fully appreciated the work they were doing. This led to strong feelings of trust but the parent's involvement was limited to agreeing to the plans that school staff had created. This left the responsibility for decisions entirely with the school:

> "They just go above and beyond for Ethan… whatever school say I'll agree with because obviously they're spending the time with him and trying to get the work out of him and what he needs and stuff."

Ethan's parent, school 1, primary, local authority 1

These examples demonstrate that in some cases, although schools were consulting with and engaging with parents and carers and therefore working collaboratively, the opportunity for involvement in decision-making was sometimes limited. This raises concerns for how well understood the concept of co-production is and therefore how much parents and carers are really viewed as partners.

In schools where there was less evidence of co-production, some parents were dissatisfied with the school's approach but also appeared to blame themselves, rather than the school:

> "I think the school can do some more. But I could do more, do you know what I mean?"

Connor's parent, school 5, primary, local authority 2

However, even where co-production was inconsistent, most parents and carers still felt that the school would listen to them if needed and that their child's school experiences were generally positive.

> "I just feel like now I feel like I'm getting somewhere with Madison and they are helping her. It's been a long time coming but [I] feel like […] she's now being helped."

Madison's parent, school 7, secondary, local authority 2

Parental engagement

On occasion, school staff talked about difficulties with engaging parents and carers in discussion about additional or different provision for their child. These schools reported that some parents and carers did not take up the opportunities offered to understand what their child received or participate in reviews. This could relate to specific interventions put in place or to communication more broadly. For example, Jakob's teacher and TA talked about how they had set up a home–school communication book that the parents had 'never written in'. Aaron's parent talked about the school providing them with speech and language work for Aaron to do at home, but they chose to 'keep it in school' because Aaron was often tired when he got home. They also discussed being invited to listen in on the meetings and to observe the speech therapy sessions but said they did not normally attend because Aaron was 'giddy' when they were present. This perhaps explains why Aaron's parent appeared to be uncertain of how much progress he had made over the year, the extent to which he was struggling at school and the potential issues with his current speech and language programme.

Sometimes, relationships between parents and individual school staff influenced engagement with a school. For example, Thomas's parent's feelings of trust decreased when he moved year groups and had a different class teacher:

> "…he had a teacher last year that never really communicated with me and I felt a bit like, I was trying to get stuff out of her all the time, but she won't even come to the door to speak to me. I had a bit of a battle with her all the time."

Thomas's parent, school 5, primary, local authority 2

Summary

This section shows how positive relationships and strong collaboration between home and school are crucial for accurate and timely identification of needs. Most of the schools had some mechanisms in place to allow families to communicate with them. This included formal channels such as parents' evenings, support plan meetings and contact with the SENCo, but also informal processes such as daily check-ins and home–school books. Some schools used information from families to inform decisions about support packages and, in this way, treated parents and carers as partners in decision-making. In our small sample, collaboration with families, including strong relationships with the SENCo, supported schools in meeting pupils' needs more effectively. Parents and carers were also more likely to have high levels of trust in the school and feel able to share information with them. The relationship-building element of the SENCo's role is crucial for delivering effective provision through co-production. This has implications for the time allocated to the SENCo by school leaders.

Weak information-sharing resulted in parents, carers or school staff being unclear about pupils' needs. This meant that support for pupils was less likely to be effective. In some schools, co-production was discussed, but in reality, opportunities for parents and carers to contribute to planning and decision-making were limited. In a few cases, there were no written support plans, nor was a graduated approach to identifying, assessing and meeting pupils' needs in place. This raises questions about some schools' understanding of the concept of co-production and what it encompasses, including how parents and carers should be involved in decision-making. In a few cases, parent and carer engagement with the school was not strong and this presented challenges for working collaboratively.

Multi-agency collaboration and partnership working

Introduction

The Children and Families Act[footnote 66] states that the task of planning and evaluating provision for children and young people with SEND should be, as far as possible, a partnership between schools, local authorities, health, care and any commissioned service providers. When schools work in isolation, some types of support are less likely to be available to a pupil or young person with SEND.[footnote 67] However, research and Ofsted's area SEND inspections suggest that putting in place effective multi-agency collaboration can be challenging.[footnote 68] This was the case for most of the schools in this study. They described frustrations with bureaucracy in the SEND system that could lead to challenges for collaboration and partnership working.

This section first explores local authority leaders' ambitions for collaborative working and the ways it is facilitated. We will then consider the experiences of families and schools and highlight some challenges of working with multi-agency partners. The evidence presented therefore sheds light on the first 2 research questions by illustrating how pupils' needs are met and how approaches to practice may vary.

In addition to interview data from school and family participants, this section draws on further data from focus group representatives from 2 local authorities and their respective CCGs.[footnote 69]

Ambitions for collaborative working

Local authority and CCG staff in both local areas emphasised the importance of collaborative working. Some staff described a 'team effort' approach to providing services and recognised the importance of this in enabling schools to meet pupils' needs:

> "…a joint service… with the council, public health and our colleagues in quality and safeguarding… It's very collaborative working… And we're going in there with a very open mind, saying, this is who we are, this is a team. We go in as a team effort."

Assistant director for community and transformation, CCG, local authority 2

> "Decisions made about the pupils it's a multiagency process… it's more than just what happens in the classroom, it's ensuring that we act in a multiagency way and I think our role is to coordinate that support so that class teachers can deliver the best outcomes for those pupils."

Head of service education and SEND, local authority 1

Both local authorities promoted a quality mark for inclusion in their areas that suggested a broader commitment to collaboration and partnership working with schools. The mark was awarded to schools if they met certain criteria and attended training sessions. Some local authority officers felt that this encouraged schools to develop their practice in a meaningful way and described how they tried to make sure it wasn't superficial:

> "…it was taking things to a […] lengthier extension rather than it being very formulaic, so if you turned up to 6 training sessions you can get the kite mark, actually that's not inclusive practice because I could turn up to the 6 training sessions. So we have just been pushing the boundaries a bit and one of the merits of [local authority 1], school leaders want to work with us to do that so they push back at us and they also push each other as well."

Behaviour and exclusions lead, local authority 1

Leaders in both local areas felt that it was important that the ambition for their inclusion work with schools drew strongly on the principles of partnership working. This meant that they took steps to facilitate a cohesive partnership approach between education, health and care services.

Facilitating collaborative working between schools

Leaders in both local authorities discussed multiple mechanisms that were in place to promote collaboration with schools in the area. This included facilitating opportunities for school staff to share good practice or discuss this with local authority leaders. For example, in local authority 2, borough-wide meetings for headteachers and SENCos were organised regularly which local authority staff also attended. One SENCo who attended these kinds of meetings said that they found them 'really useful' for professional development.

> "I've just come away from a meeting with all of our secondary and college leads this morning, working on some of our specific areas of concern around inclusion… and looking at different ways that we can support those young people and their families moving forward."

Assistant director for education, local authority 2

Local leaders in both areas felt that school networks provided opportunities for them to share and develop inclusive approaches. The SEND lead in local authority 2, for example, said that meeting with other leads allowed 'real champions of inclusion' to push for best practice. This was echoed by the lead for behaviour and exclusions in local authority 1, who also commented that school leaders who took part in similar types of collaborative groups challenged each other to be more inclusive.

The role of the SENCo in collaborative working

As noted in the previous section, the SENCo could be especially important when building relationships between schools and families. However, we saw that they also played an important role coordinating provision from external education, health and care services and helping school staff and families to make sense of this. This involved, at times, taking the lead in communication between services, schools and families:

> "I'm very fortunate to have a superb SENCo… She works very closely with the parents. She's always on the end of the phone… to communicate with parents, communicate with the [local authority], communicate with external agencies, work with the teachers, work with TAs and the pupils."

Headteacher of school 3, primary, local authority 1

Some of the SENCos facilitated their own professional development by engaging with networks provided by local authority meetings, multi-academy trusts (MATs) and partnership work with special schools. This could be through training opportunities, knowledge sharing, or pupil and staff visits to settings. This appeared to have a beneficial impact on SEND provision in schools.

> "…we've got a link with our local special school that we've got staff going there on a Friday… They've done a TA swap in the local area where staff spend a couple of weeks there. As headteachers, as part of our group, we all went and spent a day there and had a look round."

Headteacher of school 5, primary, local authority 2

> "We've looked at consistency and progress and the things that you want to talk about as a SENCo, for 5 or 6 of us [from the MAT] get together, maybe once every 6weeks and we set an agenda. So last time we met we were looking at Dyslexia-friendly and that was something that came up across the board for our schools that we felt wasn't a strength."

SENCo of school 2, primary, local authority 1

Not all the SENCos had the same amount of time to dedicate to the role. Some had fixed time set aside each week specifically for SEND, while others had a full-time teaching role or had other leadership responsibilities in addition to their SENCo duties. This situation is well documented in other research[footnote 70] and is likely to impact on the extent to which SENCos can develop networks and relationships with external partners. The extent to which SENCos can access training, such as that offered by the local area school networks, may also influence how well they can draw on up-to-date knowledge and fulfil their role.

Collaboration for improvement

In local authority 2, council staff also discussed working with health providers to improve services. For example, the director of the community's family centres discussed how they had worked with CAMHS to improve waiting times for autism assessments. CCG leaders also reported that their work with the local authority had significantly reduced waiting times. They said that virtual meetings were used to allow health and care professionals in the borough to consider whether pupils had SEND and to seek each other's advice. This was said to 'work well'.

In local authority 1, school staff spoke positively about multi-agency panels, which involved different practitioners across local health services and educational psychologists in identifying needs. The SENCo for school 3 noted that a recent referral they had made to this panel had 'been picked up quite quickly' and commented that the parent had already received dates for an assessment, concluding that things seemed be 'moving a little bit better'. One teacher felt this multi-agency approach improved professionals' understanding of a pupil as well as collaborative practice:

> "I've found it a better route because they're looking at the whole pupil as well… their needs are getting addressed more efficiently and I feel that there's more communication between professionals that way than [when] we do separate referrals."

Ava's teacher, school 1, primary, local authority 1

School staff also spoke of the beneficial impact of recent changes by some health services, leading to improved levels of collaboration.

> "CAMHS have now changed the way that they work in [local authority] which has been good. So [safeguarding lead], she can go to reflective practice meetings, so it might not be direct work with the pupil, but it is an opportunity to sit down and speak to that specialist and say right now I've got this pupil who's presenting like this."

SENCo, school 2, primary, local authority 1

Although it was not clear whether this collaboration had developed between partners independently or as a result of local authority involvement, it demonstrates the benefit that partnership working can have for children and young people with SEND.

In addition to these mechanisms for facilitating collaboration and partnership working, local authority 1 introduced a funding agreement whereby it and the CCG agreed to equally share costs for SEND. Some respondents felt that this approach had brought about increased collaboration between the 2 parties:

> "We've got really good relationship with the local authority… we've got [an] arrangement on funding which I think is really it's really helpful, it just stops all those arguments."

Commissioning manager, CCG, local authority 1

Some members of the CCG in local authority 1 discussed carrying out 'quality audits' of local area paediatric services and special schools. However, engagement with the mainstream school sector at the time of interview was much less established in both local authorities. In local authority 1, the CCG described plans to carry out an audit with mainstream providers. In local authority 2, however, the CCG did not appear to have any direct engagement with mainstream schools.

> "We don't necessarily work directly with mainstream schools… there's a SEND partnership board which has representatives from education and from schools. I suppose we would get our input from the schools via that."

Assistant director for commissioning and transformation, CCG, local authority 2

Partnership working with health providers was said to be 'patchy' in local authority 1. This led to it challenging some elements of its practice. However, although there were concerns over partnership working with health providers, these were felt to be developing well – in fact, more strongly that those with social care:

> "…we've done a lot of work with health colleagues' annual review processes… They know the quality of what we need for them and actually it's not alright just to say they didn't turn up for 3 appointments we've discharged them and that's it. I would say we are further into a journey with health than with social care but that's just been a time thing. There's still some way to go."

Head of service education and SEND, local authority 1

Location of services

Some representatives from both the local authority and CCG discussed how the location of services could have an impact on the strength of collaboration. The physical proximity of different teams, either within the same buildings or through the creation of multi-team meetings or working groups, was felt to have a beneficial impact. Representatives saw this as a way of enabling staff to access each other and of building trust between partners.

> "It helps that I sit in an office with heads of service for [other departments working with pupils with SEND]… so there are "across the table" discussions when we are talking about pupils."

Head of service education and SEND, local authority 1

Staff from the local authority and CCG in the other local area were situated in the same building, but they did not explicitly mention any benefits this brought in terms of collaboration. However, CCG leaders did note that communication processes had changed following a previous area SEND inspection. The director of children's services had subsequently brought the CCG into a formal relationship with the local authority. CCG staff had also been formally added to the attendee list of management meetings:

> "…one of the really good things about the SEND inspection was that out of that [the director of pupils' services] included me in that wider management team with his staff, so that was a really good way of finding out what was happening across all pupils' services."

Director for commissioning and transformation, CCG, local authority 2

The data showed that local authorities and CCGs were employing a range of mechanisms with the aim to promote partnership working among education, health and care professionals. Schools and local area representatives felt that some of these were successful. Ambitions for strong collaborative working were also evident. However, the experiences of families did not always match these ambitions, and some respondents felt that there were significant challenges to collaboration in current practice. These will be explored in further detail below.

Home and school experiences of multi-agency collaboration and partnership working

Accessing multi-agency provision

Some of the pupils in the study received education, health and care service input from outside of the school as part of their provision. This included, for example:

- speech and language therapy
- physiotherapy
- children and adolescent mental health services (CAMHS)
- educational psychologists
- local authority SEND teams

A smaller number received treatment from other health professionals, such as doctors and paediatricians.

Leaders in both local authorities discussed ways of making themselves available to schools for help and advice. For example, local authority 2 had an education support service[footnote 71] that visited schools. They worked with SENCos throughout the year to provide advice and guidance about pupils with more significant needs. They also provided subject-specialist teachers for some pupils and other specialist educational practitioners. SENCos and headteachers in local authority 2 who spoke about this approach were very positive. School staff felt that the services provided them with valuable input:

> "…the agency that has the most input with us really is our [education support service]. So they're brilliant at providing extra support and then they'll come in and do some assessments for us if we need their support. They'll give us advice. They'll attend meetings with parents… So there's people who have their specialties…"

SENCo for school 7, secondary, local authority 2

Some specific examples of positive impact of support and advice from external services are the speech and language therapist team working with Thomas and an educational psychologist working with Matteo. Thomas's family had received home visits from a speech and language therapist to help them develop new communication strategies. The therapist worked with his family to improve his ability to communicate using PECS (Picture Exchange Communication System). This had a significant impact and, at the time of the study, Thomas no longer required this system. Matteo's parent explained how external services had previously collaborated with them and the school after identifying his over-reliance on his TA. The school listened to these concerns and employed a second TA to work with Matteo for half of the day to develop his independence and inclusion:

> "…it was ed psych and outreach and they could see how reliant he was. And when [TA] was off sick or anything, his day was horrendous… they said maybe we need to swap it around a little bit, have some time with somebody else. So, it was very much like a joined-up conversation between us, the outreach and school."

Matteo's parent, school 4, primary, local authority 2

Challenges for timely access to external specialist services

Information about the pupils in this study suggested that the way in which the external professionals involved in their care worked with them, their families and their schools varied. Of course, provision differed based on each individual pupil's need, but one main challenge emerged from participants' experiences of working with external professionals. This related to variations in access to specialist services. Specific issues were concerns about delays and waiting lists, and frustrations with bureaucracy. This section explores families and schools' experiences of these issues.

Delays and waiting lists

Even when there was agreement about the need for assessment or appointments, several families and schools felt they did not have sufficient or timely access to local authority and health service provision. This was often attributed to waiting lists for appointments or services not being provided frequently enough. Issues related to a variety of health services, including speech and language therapy, occupational therapy and CAMHS.

> "…waiting lists for CAMHS are horrific. So especially with the more higher-level interventions and we had a pupil who ended up going to special school that was turned away from CAMHS."

SENCo, school 5, primary, local authority 2

Delays for assessments were also mentioned by some participants. For example, Ian's parent said that they had been waiting for 6 months for a paediatric assessment of his needs despite receiving a letter confirming his referral to this service. School staff also talked about assessment delays being a source of frustration:

> "I have a pupil in my class in year 2, I started his assessments in reception halfway through and I'm still… so that is really frustrating and for parents because we start the process and we're right, we're going to get this for your pupil and then it just doesn't happen."

SENCo, school 3, primary, local authority 1

A headteacher from another school said they had waited 60 months for one pupil's EHC plan to progress from assessment to 'getting the plan approved'. This was apparently due to staffing issues in the local authority.

When Jordan was in Year 2, his school requested that the EHC plan be re-written following new advice from an educational psychologist. However, at the time of data collection mid-way through Year 3, Jordan's EHC plan had not been re-written. The SENCo had also observed delays in EHC plans for other pupils that were attributed to the absence of crucial staff:

> "The EHC coordinator that was working with him had gone off on sick and [the plan] just was sitting on someone's desk which is really frustrating."

SENCo, school 3, primary, local authority 1

Other participants also had concerns about the timeliness of access to crucial services:

> "I think sometimes the system just lets the pupils down because… it doesn't kick into action quick enough and identify those pupils that need help at the point where they should have it."

Robert's foster parent, school 6, secondary, local authority 2

> "He [Cameron] is someone that we feel needs some support and has been let down a little bit… it was difficult but because he wasn't identified as being as having any special educational needs until Year 7, it's been a longer process…"

SENCo, school 7, secondary, local authority 2

A few respondents had concerns that went further than those related to the timeliness of access. They noted an absence of appropriate expert provision, particularly from health professionals:

> "I'll send out invitations to invite to paediatricians, speech and language, school nurses and it's very rarely that they turn up. And that's frustrating for me because I'm then having to get on the phone, speaking to them more… it's got to be a 2-way process, but if they came and if it was multi-agency more, it would support these pupils a lot more."

SENCo, school 1, primary, local authority 1

In an attempt to reduce the impact of long waiting lists, some families and schools were either contemplating or taking steps towards trying alternative diagnostic routes or making referrals at an earlier stage:

> "…making those referrals earlier, rather than wait until the end of reception to say oh, actually his speech and language hasn't really come on that much this year. So let's do it now. Because the waiting lists are huge…"

SENCo, school 2, primary, local authority 1

> "…if I know that we are heading towards a psychologist, I will say to mum or dad, go to your GP try and get a paediatrician appointment so that by the time we've already got that, so we're trying to save time there."

SENCo, school 4, primary, local authority 2

Aaron received help from speech and language services and a therapy programme was being delivered in school. However, school staff felt this was not meeting his needs and enabling progress. The teacher also reported that 'even speech and language have said they are at a loss as to where to go next with him'. It seems that in this case, despite the recognition that provision was not effective, there had been no improved understanding of Aaron's needs or any changes to the support he received.

Clearly, concerns over delays and waiting lists for external provision were prevalent, even within the small sample for this study. Where these occurred, they caused frustration for families and schools and had a potential impact on pupil progress.

Frustrations with bureaucracy for EHC plan assessments

As mentioned previously, some participants experienced delays with EHC plan assessments, describing high levels of bureaucracy within the assessment process. This was another area of frustration for schools and families. Both local authorities described trying to improve their EHC plan assessment process and reduce delays, with local authority 2 aiming to reduce the number of applications. They reported that this work focused on enabling more of their schools to confidently offer appropriate support for pupils within school, with the expectation that this would reduce the need for formal EHC plans:

> "…we know not all of those pupils need plans… So we need to give schools the confidence and the resources and support to support pupils in mainstream settings and then we need to give parents the confidence that that offer's available… at the moment, some of that exists brilliantly across our schools and some of it doesn't… so we're working on that."

Assistant director for education, local authority 2

Representatives from local authority 1 indicated that their approach to improving the EHC plan assessment process aimed to ensure that a rich quality of evidence was provided to enable the panels to make good decisions:

> "So we start off with a very robust process that we challenge as a local authority… and I think over the last definitely over the last 2 years the evidence that has been provided to us has become more detailed, more in depth and… our decision making is better."

Head of service education and SEND, local authority 1

However, some school staff believed that this focus on demonstrating, in depth, what had already been done or providing increased detail could in fact result in delays for pupils. They also perceived the local authority challenge as an indication that their professional perspective was not valued. This has potential implications for creating a trusting collaborative partnership approach. Some participants felt that the steps they now needed to take to 'prove' that a sufficient range of approaches had already been tried was a barrier to ensuring that timely provision was put in place for children and young people:

> "To have an EHCP you have to show the EP [educational psychologist] that that pupil has had 2 terms [of] one to one support. So we… have a TA to sit with that pupil for 2 terms."

Headteacher, school 4, primary, local authority 2

> "…we need to make sure we've given extra reading support for 6 weeks, so they can't question have we tried that… it's putting in the paperwork in place… as a counter defence because from a professional point of view, you know where they need the support."

Thomas's teacher, school 5, primary, local authority 2

> "I try and do my best [for] the pupils, collect the evidence, get all the evidence from the professionals involved, I'll submit an education and health care plan and then they'll come back and say ah actually, we're wanting this now, but that wasn't in their original criteria when I submitted it. So then I have to go back, get that information, submitted it, oh well now because if we're waiting for that the educational psychologist report is out of date… sometimes I just feel the local authority are making it harder to get an education, health and care plan for the pupils."

SENCo, school 1, primary, local authority 1

The data presented above suggests that schools' capacity to meet local authority requirements at the point of EHC plan assessment was a challenge. Other school respondents described the detailed requirements for evidence as a source of 'frustration'. They appeared to regard this as unnecessarily bureaucratic rather than as a way to ensure good decision-making.

Some respondents felt that these kinds of bureaucratic delays also occurred in health referrals outside of the EHC plan process.

> "…we did… a complex needs referral to the paediatrician and we were told no because he had to have a speech and language referral first and then we have to act on those outcomes for 3 months. And if that doesn't work which it still isn't. So now we've got to re-refer."

SENCo, school 3, primary, local authority 1

There was some evidence that the push from local authorities for high levels of detail and evidence of previously attempted interventions or other help had led to a breakdown of trust between the local authority and some school staff:

> "Whenever they come and talk to us at the directors briefing they tell us how much money they have saved on special educational needs because the budget is so high. But that has an impact on our pupils… they said how many education and health care plans they'd turned down that month and I felt that that was very inappropriate because you don't fill all those forms in if you don't think a pupil has a need…"

Headteacher, school 1, primary, local authority 1

Overall, we found evidence that local authorities were aiming to improve the way they approached the EHC plan process and allocate their potentially limited resources, but that some reforms or process steps were viewed by schools and families as an overly bureaucratic source of frustration. This had a potentially negative impact on the experience of school staff and the nature of partnership working during the EHC plan assessment. However, ultimately, the process was perceived as a barrier to timely access to specialist services for some pupils with SEND.

Parents and schools filling in gaps

One factor in the differences in the pupils' experiences was the extent to which families and schools could fill in the gaps when they were unable to access specialist services and expertise. A lack of specialist input led to a few families organising this privately. For example, Isaac's family privately funded visits to a child psychologist when he started secondary school after they did not 'really get very far through the normal channels'. Jordan's parents paid for private physiotherapy for him while he waited to receive a diagnosis of cerebral palsy. They continued to pay for private treatment after Jordan began to receive NHS physiotherapy and occupational therapy because they felt the sessions were too infrequent. In addition, Jordan's TA reported concerns over his physiotherapy programme after an operation and 'carrying on with the same physio when things had changed for him physically. I didn't want to do the wrong thing'. This suggests that the physiotherapy programme being followed in school had not been updated by health practitioners and school staff were working to fill this gap. The impact of this was that support staff were not confident to deliver the therapy.

However, attempting to fill in the gaps left by the specialist services in a local area increased the risk of pupils not having their needs fully identified and met. Madison's parent suspected that Madison had dyscalculia, but the SENCo explained that, currently, the local authority did not provide dyscalculia assessments. Madison's parent was concerned that she would continue to struggle with numeracy without additional help so paid for private mathematics tuition. As well as this, the school tried to help Madison with mathematics, without formal assessments or advice from external professionals, by using their own more limited training:

> "I'd done some training on dyscalculia so we obviously we made sure that staff were aware… The maths teacher also did some training on that when [Madison] was in year 7."

SENCo, school 7, secondary, local authority 2

Another school also reported focusing on internal professional development in response to issues with accessing external services:

> “ In the school, it’s continuing to train staff or make staff fully aware of all the issues that impact on SEN. Because we’re [struggling] for these outside agencies, we’ve got to try and do a lot of it more ourselves now we can’t keep waiting.”

SENCo, school 4, primary, local authority 2

Some parents pressed health providers when they felt an initial assessment had not been accurate, to try and ensure correct identification and assessment of need. However, family respondents did not always feel confident that they could find a way to be heard or in their ability to make a difference for their children:

> “ …they always said to me it was because he was delayed, because he was premature. But I knew it was, there was more to it than that… Every time I would question stuff… So, when he was about 18 months and it was like no, it’s not because he’s premature, there’s something else not right.”

Thomas’s parent, primary, local authority 2

> “ You do feel completely unsupported. I’m a pretty proactive person so I’ll seek it out and I’ll make it happen, but I can’t even do that.”

Matteo’s parent, school 4, primary, local authority 2

Even 2 years after the diagnosis of Connor’s sensory processing disorder by CAMHS, his parent felt that they needed more information and that they were at a loss as to what to do to help him:

> “ Just someone who can explain to me how to get him the help he needs because there isn’t anything. It’s like, I don’t know, so they diagnose and see you later! And that’s all there is, do you know what I mean?”

Connor’s parent, school 5, primary, local authority 2

The SENCo reported that Connor had previously received some speech and language therapy but at the time of the research, this had ended. The school and the parent appeared to have worked together to develop his current provision without multi-agency input. This lack of joined-up external support is likely to have impacted how effective any provision might be.

These examples of strategies employed by a few participants to secure support for their children are no substitute for timely access to high-quality specialist services. In addition, they are dependent on families’ and schools’ financial and personal resources and so are not an inclusive alternative to provision from the SEND system.

Summary

Both local authorities had mechanisms in place to promote collaborative working between education, health and care services. Local authority initiatives included education support services and school consortiums, which were valued by school staff. They were seen as effective for developing inclusive practice, allowing staff to draw on specialist knowledge, and also facilitated collaborative practices.

However, this did not always translate into positive experiences for pupils, families and schools. Many schools and families valued the services they received, but some pupils were not receiving adequate help even when services were involved.

School SENCos played a crucial role in securing input from external professionals which was critical for securing joined-up provision. The extent to which the SENCo can devote time to their role and the amount of training they received is therefore likely to influence outcomes for children and young people. In common with previous research,[footnote 72] this section has shown that this varies between SENCos at different schools, with some expected to carry out their duties alongside a full teaching load.

Based on a strong ambition for collaborative multi-agency working, both local authorities had put in place initiatives to promote this practice and respond to some of the challenges experienced by families and schools. However, in line with existing research, we found that collaboration between schools, families and education, health and care services was not always smooth.[footnote 73] Waiting times and the reported bureaucracy of the SEND system were a significant challenge for some schools and families. This led to problems with timely access to specialist services and frustrations for SENCos in the planning and coordination of support. A lack of timeliness with access to services could lead to schools and families filling in the gaps to help children and young people with SEND access what they needed to learn and develop. Where this occurred, some schools and families drew on financial and personal resources. However, this alternative is not possible for most families and should not be required if the SEND system is working effectively to provide timely access to multi-agency services.

Discussion

This research has taken a case study approach to explore the experiences of children and young people who, at the time of data collection, were studying in mainstream schools. This final section draws together the main findings, and the highlighted text below answers the study’s research questions.

Research question 1: How are the needs of children and young people met in mainstream schools?

Teachers, TAs and SENCos worked closely with pupils to understand them as individuals so that adaptations to the curriculum and school environment could be tailored to each child. Their needs were met more effectively where this work was co-produced with families and with external agencies working as a team to put appropriate provision in place.

Many of the children received support from one-to-one TAs. Some did not access the full curriculum and spent extensive periods of time outside of the classroom learning on their own or in a small group with TAs. This raises questions about how the curriculum is being designed and taught for some children with SEND. Quality education for pupils with SEND relies on day-to-day classroom practice, with TAs and teachers sharing curriculum goals, and having the necessary subject, curriculum and specialist knowledge.

Research question 2: To what extent does the approach schools take to identifying, assessing and meeting these needs vary between providers?

Mechanisms for sharing information with families and eliciting help from external agencies did not work equally effectively for all of the pupils. Co-production between families and schools, the time the SENCo had to devote to their role and the extent to which external agencies worked together all influenced how well children were helped to learn and interact with their peers.

Some schools and families took steps to try and fill in the gaps when multi-agency working was not successful, while others were not in a position to do so. This resulted in differences in the extent to which pupils’ needs were met.

In-school provision

Typically, schools took a pupil-centred approach to their provision for children and young people with SEND. This primarily drove staff to develop deep understandings of the strengths and needs of each pupil they supported. Having high expectations for what pupils could achieve and ensuring that they felt included with their peers were also important features of practice. These factors, alongside the development of positive relationships between staff and pupils, were seen by many participants as important for creating effective provision. Despite this ambition, there were apparent gaps in understanding of some pupils’ starting points, and their strengths and needs. This had an impact on how well adaptations helped pupils learn and develop.

The pupils who were part of this study had unique needs. For the most part, these needs were identified soon after they started formal education. However, some pupils’ needs were not accurately identified until later in their primary education or even when they reached secondary school, despite there being concerns about their learning or development at a younger age. For some pupils, this was because their needs were masked, for example by the child’s coping strategies. For others, it was because school staff did not appropriately plan curriculum content to make it accessible for pupils with SEND. We also saw examples where schools and families lacked necessary multi-agency input. Staff knowledge was found to be a critical factor in how well a pupil’s needs were understood. This shows the importance of continuing professional development for SEND and greater access to staff or practitioners with specialist SEND expertise when working towards the accurate and timely identification of need.

School staff worked in a range of ways with pupils with SEND to include them in the classroom and in wider school life. Schools made adjustments to support pupils socially and emotionally and this went some way to increasing those pupils’ access to the curriculum. Teachers adapted their teaching and used tailored or specialised resources. Access to quiet spaces and strong communication between teachers and schools at transition points were also important.

Almost all the pupils in this study had TAs allocated to them and most parents and carers were very positive about the support they provided. Many pupils were taken out for intervention activities delivered by TAs, which meant they were spending curriculum time out of class and were not able to participate in the same learning opportunities as their peers. Some pupils were missing entire chunks of the curriculum. The fact that several pupils were taken out of class for TA-led interventions raises concerns about pupils with SEND having full access to the high-quality teaching they need in order to have the best chance of success. It raises the risk of learning loss in some curriculum areas for these pupils. It also suggests that the curriculum offered may not always have the same ambition as that curriculum taught to pupils without SEND.

Interventions were often delivered by TAs. This raises questions not only for staff collaboration but also for support staff training. Interventions will only be useful if intended curriculum goals are clear and if staff have strong enough subject and curriculum knowledge to deliver them or are under the close supervision of someone who does. Research suggests that interventions of this nature need to be high-quality and designed in such a way as to minimise pupils’ over-reliance on particular adults.[footnote 74] It follows that strong collaboration between teachers and TAs is vital to ensure clarity of learning intentions but also that good subject and curriculum knowledge is required in order to deliver intervention activities successfully for pupils. It is therefore crucial that TAs, who supervise the learning of children and young people with SEND, have the requisite subject and curriculum knowledge to support pupils who have struggled to learn the intended curriculum at the same time as their peers. Given the fact that pupils with SEND are likely to have poorer outcomes than pupils without SEND,[footnote 75] they deserve and need the very best teaching to enable them to make the same progress as their peers.

Training towards robust subject-specific knowledge of the curriculum is therefore an important element of ensuring that the TA role works effectively for children and young people with SEND, including opportunities for all those involved in supporting pupils with SEND to gain additional qualifications.

Other implications related to the routine deployment of TAs also emerged. Regular time out of the classroom in small groups and individual sessions led some participants to express concern about the resulting social exclusion of pupils. In addition, concerns about pupils’ over-reliance on adults raises questions about pupil independence.

Occasionally, participants felt that the curriculum content being taught to the pupils was not easily accessible and did not meet their needs. Due to missed prior learning or unmet needs, the pupils did not have some of the required foundational knowledge and skills to build on. In addition, they were not always given the chance to master basics before moving forwards. When this occurs, it is likely that pupils will continue to experience difficulties and their gaps in understanding will progressively widen. This implies that the chances to succeed in the future would not be available for all pupils.

The SENCo played a crucial role in collaborating with parents and in coordinating input from multi-agency professionals. This has also been highlighted in previous research.[footnote 76] While SENCos were clearly playing an important role in building relationships with families and coordinating service assessments or programmes, they also had differing amounts of time available to devote to their role and to access continuing professional development. Some were fulfilling the SENCo role alongside full-time class teacher responsibilities. This indicates that in some schools, the role of the SENCo is not strongly prioritised. This will affect how well they can carry out their role and facilitate positive outcomes for children and young people.

Co-production

Previous research has shown that provision is more effective where it has been co-produced with children, young people and their families.[footnote 77] In our small sample, positive, trusting relationships and strong collaboration between home and school, in particular with the SENCo, were found to promote the accurate and timely identification of need and co-production of provision. Some of the parents and carers in our sample had ample opportunities to discuss and decide support with schools and felt well supported by individual members of staff, such as the SENCo or a class teacher. They were also more likely to have confidence in the school’s broader approach to inclusion. Both formal and informal communication channels that allowed for frequent information-sharing between families and schools strongly facilitated this co-productive approach to meeting pupils’ needs.

Although mechanisms for co-production were often in place at school-level, implementation was not always meaningful. Delays to identifying and meeting needs for a few pupils were exacerbated by parents and carers not being given sufficient information about their child’s learning and development. Some parents and carers were also not given opportunities to meaningfully input into support plans by, for example, contributing to targets or evaluating provision. As a result, some families did not have a good understanding of their child’s school experiences, and some school staff were less certain of pupils’ needs because they were lacking the information needed to fully understand a child. At times, parents and carers were provided with support plans without opportunities to contribute to planning or decision-making. In a few cases, no written support plan existed at all, suggesting that there was no graduated approach in place and no opportunities for co-production. In a few cases, there was also a lack of parent and carer engagement. When this happens, support for pupils is less likely to be effective. This also raises concerns about how schools understand the concept of co-production and how authentically parents and carers are viewed as partners.

Multi-agency working

In order to ensure good quality provision that met the needs of pupils with SEND, both participating local authorities offered a wide range of multi-agency specialised services to schools. This specialised support complemented what was offered by schools. Families and school staff valued the input from external services. However, it appeared that some pupils were not receiving help that adequately met their learning and development needs even when multi-agency services were involved.

Local authorities described a strong commitment to collaborative working between education, health and care providers. Some local authority multi-agency structures for enabling this partnership working, such as the education support services and SEND networks, were especially valued by school staff. This was because they enabled access to specialist knowledge that could impact positively on the planning of provision to meet pupils’ needs.

This study found evidence that access to the expertise of multi-agency services and providers could strongly influence the nature, quality and extent of support pupils received. Although efficient multi-agency working was the ambition of the 2 local authorities in this study, this did not always translate into improved practice and positive experiences for children and young people, families and schools. Waiting times for assessments and perceived bureaucracy, in particular relating to the EHC plan assessment process, were reported to be significant challenges for some schools and families. Delays in identification and assessment of needs could have a long-term impact on children and young people with SEND. In a few instances, even when multi-agency services were involved, a failure to refer or share information between professionals meant that in some cases pupils’ targets and support plans were outdated and their needs unmet.

Some schools and families felt that pupils did not have access to the full range of practitioners needed and responded to this by attempting to fill gaps in provision, for example by accessing private therapy or only using knowledge available to them in school to try and design support. These types of mitigating strategies are no substitute for timely access to specialist multi-agency services for all pupils who require them. In addition, some of the strategies used by families and schools were dependent on their own financial and personal resources. This is not an inclusive alternative to services and support mechanisms that are meant to be provided as part of the SEND system and suggests that the playing field is not level for all pupils. It highlights the importance of a full range of appropriate multi-agency expertise being available to both plan and provide support that effectively meets pupils’ needs.

Implications

What the evidence highlights is the importance of all professionals within the SEND system working collaboratively to understand the child and co-produce the plans for provision with families. It also underlines how robust curriculum and subject knowledge alongside a strong understanding of SEND must be present to maximise the learning and development of pupils with SEND. These are important factors that will enable children and young people with SEND to have access to the range of opportunities they need to succeed in life. This is vital to ensure that they are able to progress confidently to the next stage of their education, training or employment and achieve well.

Pupils in this study experienced support in their mainstream schools in a variety of ways, sometimes even when they had a similar or the same identified need. While individuals are working hard and with care, this variability in provision is not an indicator of a system working effectively for children with SEND. For example, mechanisms for sharing information with families and eliciting help from external agencies need to work equally effectively for all pupils so that appropriate provision is in place consistently. This highlights the importance of a full range of appropriate multi-agency expertise being present and available to both plan and provide support that meets pupils’ needs, and for support plans to be co-produced with children and their families.

Some of the pupils in our sample were thriving. They were accessing the full curriculum alongside their peers, were making progress and were fully included in the wider life of their schools. Others were accessing a more limited curriculum or were excluded from particular events and activities. This highlights broader issues for debate about what ‘success’ looks like in supporting pupils with SEND.

The experiences documented here also highlight the fact that school staff sometimes have difficult decisions to make about how best to support their pupils. Pupils with SEND may take longer to master particular areas of the curriculum. They may need to study a reduced number of subjects or receive interventions out of the classroom to ensure that they learn as much as possible. However, as previously discussed, this has implications for the extent to which children can be included in school life. There were also documented examples of pupils with SEND being over-reliant on their TAs. Despite this, though, TAs were a popular method of support with parents. Co-production is an important component of effective provision, but difficult decisions need to be balanced between parental wishes and what is best for the child.

This report has shown that school practitioners need regular continuous professional development to strengthen and update subject and curriculum knowledge. This is important so that all practitioners working with children with SEND, including TAs, who may deliver significant components of children’s education, receive training to help them teach effectively. This report has highlighted, however, that curriculum knowledge is not the only area that training could fruitfully focus on. Our research found that many school staff used labels, such as autism, attention deficit and hyperactivity disorder (ADHD) and dyspraxia, to describe children with SEND. This suggests that practitioners should be familiar with the wide-ranging debate around the use of labels for SEND and the potential problems this can create for effective inclusive practice and possibly for pupils themselves. In particular, they should understand that assigned labels are not the focus. Instead, it is more important to understand pupils as individuals with unique strengths, removing barriers to learning and providing support that meets needs and makes a positive difference.

Appendix 1: Detailed methodology

This appendix gives details of the methods of data collection and the sample included in the research.

Sample

The research was centred around the experiences of 21 pupils with SEND. These pupils were drawn from a sample of 7 mainstream schools within 2 local authorities. Of these pupils, 7 had an EHC plan, 1 from each school sampled.

School staff purposively selected pupils with SEND who they felt would be able to participate in the study without experiencing distress. They then contacted the parents or carers for these pupils to ask if they would like to participate in the study and asked for consent on behalf of the children and young people. In total, 20 pupils, 21 parent or carers, 7 headteachers, 7 school SENCos, 21 class teachers/form tutors and 20 learning support adults (general class or one to one) were interviewed.

The final sample of schools had differing characteristics, but the majority were local authority maintained. Table 1 and 2 show the breakdown of schools across the 2 participating local authorities and characteristics of note.

Table 1: Breakdown of participating schools across local authorities

School	Local authority 1	Local authority 2
Primary	3	2
Secondary	0	2

Table 2: Characteristics of participating schools

School	Non-faith	Faith (Church of England)	Faith (Catholic)	Local-authority-maintained	Academy (multi-academy trust)
School 1		x		x	
School 2	x				x
School 3	x				x
School 4			x	x	
School 5		x		x	
School 6	x			x	
School 7	x			x	

Local authorities and CCGs

As well as carrying out data collection in schools, we carried out group interviews with the 2 local authorities that the schools were situated in. These were completed by Ofsted researchers. In local authority 1, the local authority group interview was with the EHC assessment team manager, the head of service education and SEND, the director of education (early help and SEND), the behaviour and exclusions officer and the school improvement and quality assurance for SEND officer. For the CCG in local authority 1, the designated clinical officer and commissioning manager were jointly interviewed.

In local authority 2, the local authority group interview was with the director of children’s services, the assistant director for education, SEND lead and the director of community services. For the CCG in local authority 2, the assistant director for community and transformation and the assistant director for commissioning and transformation were jointly interviewed.

Appendix 2: Data collection instruments

Existing literature suggests that the indicators of effective provision are:

- collaborative practice across the local area (education, health and social care)
- sustained parent and child involvement in offered provision beyond the point of diagnosis or plan creation
- early and accurate identification of children and young people’s needs

The topic guides for all interviews were created with the above themes in mind.

Materials for the pupil interviews were co-produced with a SEND community group (participants aged 12 to 25). Questions produced by the group were included in the topic guides and suggested interview techniques were also adopted. The consent form wording and formatting for children and young people was also produced using the group’s input.

The main areas explored in the in-depth interviews primarily concerned individual pupil experiences; for example, their interests, what they enjoyed and found challenging at school, the help and support they received and what they felt might make this even better. This was supplemented by in-depth interviews with their parents and school staff to gain insight into how needs are identified in school, the extent of communication and co-production with parents, the involvement of external professionals and how any provision was subsequently evaluated.

The interviews with the local authority and CCG groups offered a strategic overview of SEND provision in each area, along with a discussion of the perceived strengths and challenges.

Interview process

All school interviews were carried out by Her Majesty’s Inspectors (HMI) in pairs or trios. All inspectors had received research training. It was made clear to schools that the research would not influence any subsequent school inspections and that inspectors would not be evaluating school practice or providing any informal judgements or advice during the research process. Interviews took place in January and February 2020 (before the COVID-19 pandemic) and were held face to face in participating schools. One school that agreed to participate in April 2020 was not included in the research due to the pandemic.

The research followed Ofsted’s ethical research policy,[footnote 78] and all participants were given an information sheet and consent form before agreeing to take part in the research. The interviews were carried out individually with the pupils (some of whom had a familiar adult supporting), their parent or carer, the headteacher and the SENCo. Joint interviews with pupils’ class teacher and TA/learning support were also completed for each child. In secondary schools, the joint interview was with the form tutor and the pupil’s key worker. One secondary staff interview was only with the form tutor.

The focus group interviews with the local authority and CCG professionals were carried out by 2 members of the Ofsted research team.

Interviews were recorded with participants’ permission. Where permission to record was not given, evidence notes by inspectors have been used for analysis.

Data analysis

Most of the coding and analysis was completed using full transcriptions of the interviews. Three interviews (2 pupils, 1 headteacher) were analysed using evidence notes due to issues with the recordings and one interview did not take place because the pupil did not wish to participate. The interview with local authority 2 was partially analysed with evidence notes as well as transcription due to an issue with the second half of the interview recording.

Analysis used a thematic approach and was partially inductive to ensure that the voices of children and young people were captured as accurately and thoroughly as possible, and partially deductive to ensure that key themes identified in the wider literature were included in the analysis process. The analytical coding framework was reviewed on a regular basis by the research team for quality assurance purposes.

Limitations of the research

The findings of this report concern a small number of children with SEND and as such are not generalisable to the wider population of those with SEND. Although the sample is small, we can still develop hypotheses around the factors that may influence the experiences of children with SEND who are educated within mainstream schools. The children were selected by their schools. We asked schools to select children who would not find it difficult to discuss their lives with unfamiliar adults as well as being dissimilar to one another in terms of key characteristics like gender, age and their types of need. Making this methodological decision may have limited the breadth of the sample. It should also be noted that the data collected from the children was less rich than that gathered from adult participants.

There was limited evidence of social care input for both pupils who were in care at the time of the study. However, it should be noted that this relates to a very small number of respondents and that social care professionals supporting these children and young people were not included in this research.

It is important to recognise that this research was carried out early in the spring term of 2019/20, with fieldwork completed before the COVID-19 pandemic resulted in schools being closed to most pupils. As such, the context of the findings in this report relates to a time before the pandemic.

We recognise that because interviews were carried out by Ofsted inspectors, there was an increased risk of social desirability bias from participants. Inspectors carried out rigorous research training before visiting to help mitigate for this.

Appendix 3: The case study pupils

Introduction

This appendix gives the experiences of the 21 young participants who were part of this project. We developed understanding about the children and young people’s experiences through interviews with them and their parents/carers. It is important to note that the data collection methods selected did not fully suit the young participants. The methods did not always engage them well and, consequently, their responses were sometimes less detailed. Some pupils were supported during their interview by a member of school staff.

Overview of the children and young people

The information below is from the respective schools, gathered from school staff, parents, carers and pupils. The children have been given pseudonyms to protect their anonymity.

School 1: primary school in local authority 1, a one-form-entry primary school with a religious character

Ethan

Ethan is in Year 2. He is a bubbly pupil with a good sense of humour. He often presents demanding and unpredictable behaviour, such as shouting and refusing to work. His parents and teachers agree that he prefers organised routines and finds change challenging. Ethan is enthusiastic about school, loves colouring and painting and is strong in maths. Although Ethan has friends, both his parents and teachers pointed out some challenges he has with consistent, positive peer interaction. Ethan experiences sensory needs: high light and noise levels are challenging for him. His motor skills are not strong, and this reportedly affects his independence with some aspects of personal care, such as dressing himself.

His parents felt strongly that he should be educated in a mainstream setting. He had received a diagnosis of autism while in nursery and his EHC plan was put in place in Reception. His TA said he was included in everything, but it depended on what he would ‘let himself be included in’, which his parents agreed with.

His teacher used his interest in art as part of his sensory diet. Ethan also had ongoing subject support intervention with a TA and adapted lesson activities that used his interests to help him participate. He had nurture provision every day. The school

supported Ethan to attend school trips and take part in school plays. He had a familiar adult but not a one-to-one adult, because staff did not want him to become over-reliant. Staff used timers and visual timetables to support him with his anxiety around changes in routine.

Ava

Ava is an energetic Year 2 pupil who joined the school in the middle of Year 1. She lives with her parents and an older brother who has an ADHD diagnosis. Ava said that she likes dancing and went to ballet club. She also likes watching movies and listening to music. Her parent said that she enjoys arts and crafts and playing on her iPad. She goes to Sunday school and Rainbows. Within school, Ava said her favourite subjects are science, mathematics and phonics. She also enjoys writing, although she did say that she found writing hard. She does not like sport and she finds listening difficult in school.

Ava experiences difficulties with attention and at times finds socialising challenging, struggling to keep friends. She has dietary issues around what she is willing to eat. She also needs supervision during mealtimes at home. She is sensitive to textures on her skin. Ava's parent reported some angry outbursts when routines were changed.

Ava did not have an EHC plan at the time of interview, but the school were aiming to secure a formal needs assessment.

Ava said that she sometimes had help in lessons and other times she could do it by herself. She talked about using a sound mat to help her in English. A TA sometimes sat at her table. She went to small-group nurture provision and phonics intervention every morning but was always back in the main class in the afternoons. For mathematics, Ava went to the year group below. She used mathematics apparatus like number squares to help herself. She had a fidget/squeeze toy for when she felt 'mad' or was struggling to focus. She also had a quiet space she could use when she needed to.

Jackson

Jackson is in Year 3. He is a chatty, happy child who loves sharing what he has learned. He talked about enjoying playing with his classmates. He was said to enjoy mathematics and English but finds tests difficult because he said there was a lot to remember and he forgot things easily. He said that one day, he would like to become a policeman or a 'YouTuber'. Outside of school, he enjoys swimming, bike riding and Nerf games.

Transition into formal schooling had been a challenge for Jackson. He had been anxious and withdrawn and took a long time to settle. His teacher said that he found reading challenging and sometimes had poor attention. Jackson had chronic lung disease that he had medication for and an inhaler that school staff could administer. His parent said that his health was poorer in winter. Jackson did not have an EHC plan at the time of interview.

In the early years, Jackson received speech therapy. He frequently went to hospital appointments independent of the school. In school, Jackson said that he often got given the 'easiest work' but not always. He discussed how he used a finger spacer and a pencil grip for his handwriting, which he found helpful. He also used a personalised dictionary and sound mat to support his spelling. He sometimes went out of class with a TA to practise mathematics or English work that he found hard.

School 2: primary in local authority, a 2-form-entry primary that is part of a multi-academy trust

Matthew

Matthew is in Year 6 and is a confident, fun pupil with a good sense of humour. He is also a little guarded. Matthew was living with foster parents at the time of interview, along with his 2 older sisters. Within school, Matthew enjoys mathematics but was said to sometimes need help with reasoning problems. He also likes art and PE. Matthew reported hating English and said he found spelling a specific challenge. Matthew mentioned that he had lots of school friends. In his spare time, Matthew enjoys computer games, football and watching National Geographic programmes.

Matthew was permanently excluded from his previous primary school after repeated temporary exclusions for aggressive behaviour towards staff. He then attended a pupil referral unit, where he was diagnosed with ADHD. He took medication for his ADHD to support him with school life but, during the holidays, the foster parents reported giving him a break from this as his behaviour at home was not an issue. Matthew had an EHC plan in place.

Matthew had had an individual reward chart for behaviour, but school staff had withdrawn it in preparation for secondary school. Instead, they used the class behaviour system. When Matthew first joined the school, he had one-to-one sessions with a TA to help him catch up with his missed learning and now he was fully included in the class. Staff supported Matthew's peer relationships by using team building activities. Matthew also went to forest schools as part of the school curriculum. In Years 3 and 4, Matthew had received play therapy.

Ian

Ian is a sporty and creative Year 4 pupil with a flair for mathematics. He also enjoys karate. He was described as becoming 'obsessive' when he developed an interest, such as in Pokémon cards or computer games. His parents said that Ian could find new situations difficult and become quite introverted. His parents reported 'fighting' his dislike of school, although these concerns had diminished over time. At the time of interview, Ian enjoyed school.

When he first started school, Ian developed some repeated tic-like behaviours that his parents felt were connected to anxiety. Ian had sensory difficulties around textures and noise. He found it very difficult to manage his emotions and could quickly become angry and engage in aggressive behaviours such as throwing chairs. This behaviour could be triggered by frustration with English work. Ian also had a lazy eye, identified by an optometrist. Ian did not have an EHC plan, but the school were waiting for an assessment for speech and language and had made a referral for autistic and ADHD behaviours. His parents were waiting for a paediatric assessment but had not been given a date.

Ian was moved to a different class after his parents requested this. This happened in the first half term of Year 4 and his behaviour since had hugely improved. His parents had adopted a shared behaviour points system with the school that used Pokémon cards as a reward. The school had also set up a trading centre on the playground and said that this had helped Ian to develop his social skills.

Ian also had sensory support at school. He had squeezy balls and ear defenders that he used for events like sports day. The SENCo and his parents had planned for him to have a separate workstation. He had reading overlays and had his work printed on green paper following recommendations from the optometrist. Ian previously had play therapy between Years 1 and 2 to help with the transition.

Amelia

Amelia, a Reception pupil, was described by her parents as an outgoing 'tough little cookie'. She enjoys reading, painting, role play, toy cars and Fireman Sam. She is helpful, caring, responsible and is 'a real character with a wicked sense of humour'. The class TA said that Amelia loved helping others and doing jobs in the classroom like the register or handing out book bags. She also likes to help other children if they were upset or hurt themselves. Amelia attended a multi-sports club as well as yoga sessions.

Amelia had a vascular tumour with lymphoedema, and this had affected her health. As a baby, she underwent numerous blood transfusions and chemotherapy and frequent hospital stays limited the time she could spend in early years settings. Her physical development and fine motor skills were below age-related expectations and she struggled with writing. She had also struggled with toileting until her parent found that a timer was effective, which the school then started using. Amelia did not have an EHC plan at the time of interview, but the SENCo at her school was in the process of gathering evidence towards a possible referral for assessment.

Amelia had a twin sister and the school talked about how the parent had asked for them to be in separate classes to help Amelia develop more independence. This had been successful, and Amelia had stopped focusing on adults and had become more self-sufficient. Amelia had extra hours of support with a TA for phonics and motor skill activities. Staff also supported Amelia by using a timer to help her focus on tasks. She had support in PE with gross motor skills.

When Amelia moved from nursery to reception the school supported the transition by giving her additional time out of their provision for 2-year-olds to help her catch up on early years experiences she missed when she was young. She had support from an external speech and language team at the time of the study.

School 3: primary in local authority 1, a 2-form-entry primary that is part of a multi-academy trust

Jordan

Jordan is a Year 4 pupil described by his parents as charismatic and chatty. He is positive, determined and happy. He lives with his parents and brother. He is very confident and enjoys sharing his ideas with others. School staff described him as very popular with his peers. Outside of school, he enjoys music and horse riding. He also enjoys taking part in an annual sports day for children with disabilities, which he has received medals for.

Jordan was born prematurely and had a brain haemorrhage early in life. He was diagnosed with cerebral palsy when he was 18 months old. He often used a wheelchair or walker for support, but his mobility had improved slightly since having an operation on his back. School staff reported good levels of physical activity on the playground. His teacher reported that although he had strong ideas for writing, he did struggle with presenting ideas. He also found mathematics challenging. At the time of interview, he was working a little below age-related expectation. Jordan had an EHC plan, which was put in place after his parent applied when he was in Nursery.

Jordan had a class TA that helped him with his wheelchair and moving between classes/areas in the school as well as providing learning support. School staff said that he had to have support from 2 adults with toileting. A different TA helped him with lunch times and outside on the playground, for example by carrying his lunch tray while he was in his wheelchair. He attended school trips but staff talked about needing to organise separate transport for him, such as a taxi. Jordan talked about having visits from 2 physiotherapists a few times a year but also had private physiotherapy in addition to this. His class TA did exercises with him recommended by occupational therapy.

Ryan

Ryan is described as a friendly, sociable Year 5 pupil. He has an older sister, enjoys playing with his dog and spends his spare time playing tennis and computer games. He said he loved travelling and his dream at the time of interview was to become a pilot. Ryan loved mathematics, PE and drawing and asked lots of questions in lessons to further his learning. He was able to talk enthusiastically about what he had learned in science, history and geography and he said he enjoyed school. He said he made friends easily and liked to attend a youth group each week to socialise and play games. His confidence with his learning is growing.

His parents and school staff described sensory processing issues emerging when Ryan was in Nursery. These were mainly around heat and noise. When Ryan was in lower key stage 2, he and his parent saw an occupational therapist, who agreed that he had 'mild to moderate' sensory processing challenges.

Ryan sometimes struggled to manage his emotions and would have a 'meltdown'. He was described as working at age-related expectations for mathematics but not English, which he did not enjoy. He said that writing made his hand hurt. Ryan did not have an EHC plan at the time of interview.

Ryan talked about having help with English, especially spelling, from the class TA. It was reported that he was also well supported by his peers. He talked about being able to use the IT suite as a quiet space when he needed to, for example, when it became too noisy for him in class. School staff talked about he was now able to self-regulate his emotions and explain what had upset him. Staff helped Ryan manage his sensory difficulties with heat by making sure he sat on the edge of the carpet or near a window. They had also encouraged him to regulate himself, for example, to get up and go and splash his face with water if he needed to.

Nathan

Nathan was described as an outgoing, caring Year 6 pupil, at ease with his peers. At the time of interview, he lived with his family, including an adult sister who was a wheelchair user and a pet dog. He acts as a playground helper in school, assisting others when needed. He has a passion for basketball and wants to be a basketball player when he grows up. He also generally enjoys his schoolwork, in particular mathematics. He likes drawing and playing computer games. At times, his teachers said he could be distracted during lessons but that he loved school.

After falling ill with a bug in Year 3, Nathan developed a significant phobia of illness, which his parent identified as emetophobia. This phobia caused a fixation with illness that was debilitating for most of that year. His parent talked about him having panic attacks and 'freezing' when he became too anxious. After Nathan expressed thoughts of self-harm, he received support from CAMHS, which had a positive impact. In Year 6, Nathan was described as still having occasional flare-ups but that he had made good progress managing his phobia. His phobia had resulted in some absence from school and being 'unable to function at his full potential' academically. Nathan also talked about how he sometimes got distracted in class. Nathan did not have an EHC plan at the time of interview.

When he was in Year 3, he saw CAMHS workers once a week. In Year 6, Nathan talked about getting help from the class TA when he asked for it and that he had lots of help for spelling, which he had recently got better at. At school, he had a role as a playground buddy, helping to resolve issues between other children, which he enjoyed. He talked about having 'strategy cards' that helped him in Year 3 by providing him with reassurance that he'd be OK. His parents said that the school gave him a brave book to record achievements in and boost his confidence, which had worked really well. School staff have been careful to avoid assessment-related pressure on Nathan to make sure they did not 'undo' his progress. His teacher talked about how they supported Nathan's anxiety around transition to Year 6 by talking him through the expectations and routines 'right down to the little things like where his books went'.

School 4: primary in local authority 2, a one-form-entry primary school with a religious character

Matteo

Matteo is a Year 4 pupil who is bright and has a good sense of humour. He loves mathematics and computing and finds them easy. He also enjoys science and art. Matteo said that he had a lot of friends to enjoy playtime with. He lives with his parents and younger sister and loves spending time at home, often helping out with chores. Matteo likes to keep a teddy close by but does not take him out to breaktimes at school. He is on the school council. Outside of school, he enjoys watching comedy, collecting rocks and playing piano and is a member of a jiu-jitsu club. He also enjoys computer games, technology and geology and reading. His aspiration is to study rocks.

Matteo was already diagnosed with autism and ADHD and had an EHC plan at the time of the study. He was taking a low dosage of medication for his ADHD. His parents described him as having 'high functioning' autism. Matteo was aware of his diagnosis. Parents and school staff acknowledged that, at times, Matteo exhibited some challenging behaviour and could struggle to stay focused. His mood could be unpredictable, swinging from happiness to sadness or anger. School staff said he found working in groups and thinking of others difficult. The physical elements of handwriting hurt Matteo's hand if he did it for too long and he struggled choosing the appropriate style and genre for writing tasks. His parents also mentioned that Matteo sometimes put things in his mouth to taste them and they worried he would do this with something dangerous or unsanitary. Matteo talked about struggling to finish his lunches and his parent talked about this being a long-term issue which they felt was connected to sensory needs around noise in the lunch hall.

Matteo had 2 one-to-one TAs who alternated between mornings and afternoons. He had his own workstation in the classroom where he completed lesson tasks. One of his TAs was always outside with him at playtimes and talked about intervening to support Matteo's social skills where needed. If there was an incident with behaviour, the parent came in to discuss it with staff rather than Matteo being put in the behaviour book. Matteo said that he had sensory breaks, which he enjoyed, as well as a feelings check-in and a 'now and next' timetable. He had the option to use ear defenders when he felt he needed them.

Jakob

Jakob is a multi-lingual pupil in Reception. He was described as bright, independent and complex. His parent said that he could be calm and helpful at home. He likes trains and cars and loves building with LEGO. His TA said he was very good at building with construction materials. Jakob is confident about his learning and his parent felt that he was calmer now he was starting to catch up academically with his classmates.

Jakob had presented with very challenging behaviour. He struggled to sit still and found transition points during the school day challenging. Staff talked about how he refused to follow rules or instructions. Jakob also struggled to sit still. The school was waiting for an assessment of needs at the time of the study and felt that he had sensory needs as well as behavioural. His teacher described highly disruptive behaviour when he first joined the school, including spitting, swearing and hitting TAs, which they felt had a negative impact on staff well-being. Jakob said that 'nobody wants to play with me if I'm bad' and his teacher confirmed he only had 2 friends that he played with. Jakob did not have an EHC plan at the time of the interview.

Jakob said he received stickers for 'being good'. He had several TAs who changed over throughout the day who the class teacher described as being 'velcro'd to him' because he was 'too much for any one person'. He was accompanied for most activities by a one-to-one TA. One of the TAs talked about getting him ready in advance for transition points such as home time. The school had early years funding in place for Jakob, which they used for his one-to-one TAs. His TAs have supported him to take part in small-group work, which he now participates in for phonics and art. His parents had a sticker chart at school that matched the one Jakob had in school and rewarded him when he got 3 stamps. He had a 'now and next' timetable and a timer for when he needed to sit in his chair.

Aaron

Aaron is a happy, bubbly, loving Year 1 pupil who can be stubborn and have mood swings. His parent said he was helpful and affectionate around the house. He finds his speech difficulties frustrating, but this does not stop him wanting to communicate. His mother described him as a 'chatterbox'. He lives with his parents and slightly older brother, who he does not always get on well with. In school, he loves mathematics, which his TA said was a strength. He also enjoys art, history, PE (particularly dance) and playing instruments in music lessons. He is sociable, has lots of friends and is often the centre of attention. At home, he enjoys playing computer games with his dad, imaginative play and cooking.

Aaron had severe speech and language needs due to a narrow larynx and difficulties with manipulating his tongue and mouth. His parents reported that he only started speaking in sentences in the year he started school. When he was younger, he had had sleep apnoea and glue ear as well as having his adenoids and tonsils removed. At the end of Reception, he had not reached the 'good level of development'[footnote 79] in phonics, speaking, reading or writing. In Year 1, English was still a challenge and Aaron found writing and reading difficult. His teacher said that he could be hard to motivate and his parent said he was very behind but doing well for him. His TA felt that Aaron did not realise that his words were 'not coming out' and got frustrated when he was not understood. Aaron did not have an EHC plan at the time of interview.

Aaron was having speech and language sessions in school at the time of the study, but the TA said that the therapist was struggling with him and that Aaron was not making much progress. The TA also did one-to-one phonics sessions with him every day using guidance from speech and language, but they could not 'push him too much' because he could quickly lose motivation. The teacher said that, most of the time, Aaron was in a smaller table group for lessons and the TA always sat with his table when they were in the class. His parent said that, at home, Aaron sometimes used signs to communicate.

School 5: primary in local authority 2, a one-form-entry primary school with a religious character

Thomas

Thomas is in Year 5 and is a confident pupil who wants to learn. While being a little playful and keen to seek attention, his TA confirmed he was 'not a child who disrupts the class'. Mathematics is Thomas's favourite subject and staff agreed it was truly his strength. He also likes science and topic lessons. Thomas said that he found English hard, particularly writing and using punctuation correctly. He said that remembering what to do for different genres was also tricky. His teacher echoed this but said that they were not concerned about his academic attainment. Social issues were not reported.

Outside of school, Thomas enjoys karate and he also attends 2 in-school clubs. He enjoys singing and playing guitar and has sung in assembly. He said he would like to become a manager in a pet shop. Thomas was born prematurely, and his parent reported that he experienced challenges with walking and speaking during his early years. He found changes to routine difficult and had highly specific preferences with clothing. His family said they needed to support him with some elements of personal care and also at mealtimes, with family members pouring drinks for him and cutting up his food.

Thomas had an EHC plan, which he received when he was in Reception following an autism diagnosis when he was in Nursery. He was also reported to have weak motor skills. When he was in Nursery, a speech therapist introduced the family to PECS (Picture Exchange Communication System) to support him but, at time of interview, Thomas was described as no longer needing this method. Current support centred on Thomas having one-to-one support from a TA and being able to stick to a set routine, particularly in the mornings. The school used a daily planner to communicate what has happened in Thomas's day to his family.

Connor

Connor is a caring, cheeky, well-behaved and hard-working Year 2 pupil who likes to get things correct. He is also quiet, sensitive and sometimes nervous. He is the youngest of 3 siblings. He has a small group of friends at school and is a member of the school choir. At home, he enjoys playing with his iPad, toy cars and monkeys. In school, he likes PE and also mathematics, although he admitted finding the latter quite difficult. He is a talented artist and was keen to show his sketch book when he was interviewed. Connor said he would like to work in a pet shop when older.

Connor's parent described first becoming aware that he might need support as a result of Connor's aversion to certain types of food, which restricted his dietary intake: 'all he would eat was Haribo'. Connor's diet was still an area of concern at the time of interview. His teacher suggested that this might be affecting his overall health.

Connor reported that he found English difficult, both reading and writing. He especially disliked reading and his parent talked about having to take turns reading a page to encourage him. His parent described Connor has having low self-confidence, and that he had cried going into school just before the interview, which his parent attributed to anxiety. Connor's TA mentioned that, although he had made progress in phonics, he was still behind age-related expectations.

After initial suggestions of autism, when Connor was 5, his parent was told by CAMHS that he had a sensory processing disorder. He also had a fear of food and smells and continued to experience some dietary difficulties. His parent reported some challenging outbursts at home and difficulty in supporting him to feel calm. Connor did not have an EHC plan at the time of interview. The school were not fully aware of all the aspects of the contact between his parents and CAMHS. Connor's parent was also not aware that the school SENCo was in the process of developing a written support plan for him.

Harper

Harper is a lively, funny and helpful Year 3 pupil who gets on well with his peers. He lives with his parents and 3 siblings. His parents reported behaviour problems at home and felt he craved attention. Outside school, Harper had been part of a karate club and is interested in playing football. He does not attend school clubs. Harper talked about enjoying playing outside on the trampoline, using games on his phone and watching TV. He also said he liked playing with toys and 'daydreaming'.

Harper is happy about going to school and particularly enjoys art. Mathematics, computing and reading are more challenging for him, although, during the interview, he said that he felt he was improving. Harper's teacher reported that he was working significantly below age-related expectation but enjoyed getting involved in all subjects. With reading, Harper's teacher said that Harper struggles to form letters properly and apply sounds, which he has support for. His teacher was not sure whether or not Harper had passed his phonics check.

Harper did not have an EHC plan at the time of interview and there had been no involvement from external agencies. His parent said she was only aware that he was 'a little bit behind'. His parent was unaware that Harper was on the SEND support register at his school, having only discovered it when she was asked to give consent to participate in this research. His parent suggested that Harper's needs mostly manifested as behavioural difficulties at home and were not 'anything that needs to be labelled for because he can clearly control it'.

School 6: secondary in local authority 2, a slightly larger-than-average secondary comprehensive

Robert

Robert, a Year 7 pupil, is a happy, and proactive pupil who contributes in lessons. He was said to have a positive attitude to learning. Robert is looked after, having been in foster care for 3 years. He has several siblings, but they do not all live together. Robert was said to enjoy school. He arrives early and he talked about having lots of friends. He likes art, design and technology, food technology and enjoys playing football. Outside of school, Robert enjoys holidays, Scouts, cooking, gardening and board games. Robert said that he would like to become an IT technician and described, during his interview, how he had helped his teacher fix a computer.

Robert had gaps in learning due to long absences from school. He had attended 5 or 6 schools in his lifetime. His foster parent felt that the curriculum was too demanding for Robert as he did not have all of the knowledge needed to learn more advanced topics. One of Robert's main areas of need was English, specifically reading, in which he was significantly behind age-related expectations. His foster parent said they struggled to encourage him to read at home. They also said that when they first met Robert, he could not write his own name. Robert was aware he was not a strong reader and said he was 'not getting good scores'. He felt he was not improving, although the school SENCo felt he was making slow but steady progress. Robert had an EHC plan at the time of interview. This had been put in place while he was with his foster parent, who felt that the support Robert received once the application was successful had improved.

Robert came in early 3 days a week to have one-to-one spelling intervention. He felt that this helped him. He also had regular reading interventions and the SENCo had started looking at a mathematics recovery programme for him. Robert received counselling in school. Robert said that he felt he was helped in school and that people always '[came] over to help' if he asked. He had one-to-one TA support in core subjects. Robert talked about missing some non-core lessons to do extra English and mathematics work. He had extra time for tests.

Maria

Maria is a friendly, well-behaved, sometimes quiet, sometimes chatty Year 7 pupil. She lives with her family, including 2 sisters, and she has been brought up to be bilingual. She had spent a lot of time travelling in her earlier life, but her family were now settled in England. Maria reportedly likes school. Her favourite pastime is reading. She also likes history, PE, music and Spanish but finds mathematics, science and geography more challenging. School staff described a positive attitude, good behaviour and readiness to learn, although at the time of interview she had missed some homework deadlines, particularly in mathematics. Outside of school, she enjoys bike riding and playing tennis. She is musical and plays the flute as a hobby. She was said to get on well with her peers and enjoys spending time with friends.

Maria's identified needs stemmed from previous hearing loss, which her parent said had started to have an impact on her learning and development when she was 4. Maria had had operations to improve her hearing, which had been successful, but her parent felt the learning she had missed caused her to fall behind her peers, particularly in terms of her speech. At the time of interview, Maria was said not to speak. However, her parent felt she was talking more than previously, and Maria engaged well with the research interview. Staff felt that Maria had learning needs rather than a language need, because Maria's speech was reported to be better than her written work. School staff also reported that she had problems with cognition, working memory and language comprehension. Maria's attention could wander.

Maria did not have an EHC plan at the time of interview. She received support from the school in terms of one-to-one support for reading and had TA support in all core subjects. Maria's TA talked about modelling work for her in English and providing encouragement and reassurance in mathematics. Her form tutor described breaking material into chunks and using simple language to help Maria learn. She also received access arrangements for exams. Maria had some additional reading and spelling interventions that she was taken out of lessons for. At the time of the study, Maria was about to start a Talking Partners intervention to help develop her communication.

Faizan

Faizan is a quiet, independent, motivated and well-behaved Year 10 pupil. He was born prematurely in Pakistan and had moved to England very early in his life. He lives with his parents and younger brother. School staff agreed he was dedicated and focused and had a positive attitude to learning. He does not struggle within any area of the curriculum. He excels in science. He has a good group of friends and his form teacher reported he had positive relationships with his peers. Faizan said he would like to go to college. In his spare time, Faizan enjoys drama, art and playing on his computer.

After an audiology assessment, Faizan was confirmed to have bilateral high frequency hearing loss. His parent said he could not hear high-pitched sounds. His SENCo suggested Faizan also had difficulty hearing soft noises. He wore hearing aids at school and the SENCo suggested this had helped his hearing significantly. His form teacher reported that he spoke with a faint slur and mentioned that Faizan did not always maintain eye contact. Faizan also had an asymptomatic enzyme deficiency, but this did not affect his school life. At the time of the research, he wore hearing aids at school but not routinely at home, in accordance with doctors' advice, to reduce the risk of ear infections.

Faizan did not have an EHC plan at the time of interview. In the past, Faizan had received support from speech and language therapy but had been discharged. He had also previously used a Roger Pen for hearing support, but he was not using one at the time of interview. External health professionals periodically assessed Faizan in school to make sure his hearing aids were working effectively. In terms of in-school support, his form tutor made sure he sat near the front and double checked his understanding with him regularly. They also said direct communication was important for Faizan. The SENCo agreed that Faizan did not need much support with his learning but said that a sensory support worker worked with him. This was to cover vocabulary gaps resulting from hearing difficulties, in preparation for GCSEs. The sensory support worker also worked with Faizan around any additional comprehension issues raised by school staff. Faizan felt that he got the same level of help as everyone else and that he was doing well at school.

School 7: secondary in local authority 2, a smaller-than-average secondary comprehensive

Isaac

Isaac is an affectionate, sometimes chatty, sometimes shy Year 10 pupil. His teacher described him as lovable and bubbly and he was well-liked by his peers. His friends are mainly girls attending other schools. He lives with his parents and has no siblings. Isaac was said to be independent but, at times, is also happy to allow others to do things for him. He enjoys running and is a member of a local athletics club. At the time of interview, he played the piano and enjoyed reading Horrid Henry. Gaming and shopping for clothes are also hobbies. Within school, he enjoys practical subjects, particularly food technology and media. He had taken part in a number of school stage productions and wants to study drama in college. His parents suggested a job in the food industry would also fit his strengths.

Isaac was diagnosed with a genetic disability and dyspraxia, as well as behavioural and academic needs. He also experienced some anxiety and had low muscle tone. He had been prescribed medication to aid his sleep when he was 5, which he was still taking. His parents said they were concerned about his social relationship development. Isaacs's behaviour was described as unpredictable, challenging and disruptive at times both at home and at school. He had outbursts of aggression. However, school staff said that, as he had matured, he had become more able to regulate his emotions, for example, by learning how to 'take 5 minutes'. Isaac was struggling with science and mathematics and was following an entry level and functional skills pathway to his Year 11 qualifications. He found retaining information very challenging. Isaac has an EHC plan that was put in place when he was 5. His genetic condition and dyspraxia were not identified until he was around 8.

Isaac talked about speaking to school staff about what he found challenging and what he enjoyed in school. He said he got the chance to talk about what he needs. Isaac was given differentiated homework tasks to build up his confidence. Isaac independently went to lessons and lunch but knew where to find his TA if he needed them. He had one-to-one TA support during all lessons and breaktimes. In class, he often worked in small groups. His worksheets are made bigger for him to help engagement. Isaac had a room he could go to when he needed a time out, which he said made him feel relaxed. He still carried out learning activities while he was there. Outside of school, Isaac saw a private child psychologist.

Cameron

Cameron is a quiet, happy and caring Year 11 pupil. He was said to enjoy school, particularly technology, mathematics and art, and is attentive and hard-working. He enjoys surfing, horse-riding, kayaking and walking with his dogs. He also likes to cook and said he would like to pursue a career in the food industry. Cameron lives with his mother and younger brother. His parent said he really wanted to achieve and was generally hard-working and quiet. His TA also said he was eager to please. Through the school, he had taken part in the Duke of Edinburgh award as well as sports events.

When he was in primary school, Cameron's father had died. Following this bereavement, Cameron temporarily stopped speaking and produced very little work. He was diagnosed with dyspraxia and hypermobility in primary school. When he started secondary school, he struggled with the transition and was an elective mute for a time. However, he said he now felt more confident and could speak. At the time of interview,

However, he said he now felt more confident and could speak. At the time of interview, he was experiencing new issues with trembling hands and wrists and found working with different members of staff challenging due to their different approaches. He also has difficulties with processing information. Writing is especially difficult for him and this impacts his achievement across the curriculum. The school had applied for an EHC plan but this had been denied. However, Cameron had been allocated 'exceptional funding' so that the school could support his needs.

Cameron received extra time for any exams and had dropped a subject (geography) that he was particularly struggling with to help support his other learning. He had one-to-one support in mathematics and English lessons and 3 hours out of class each week for intervention sessions. These could be for revision, coursework, additional English or catch-up work, for example. Cameron talked about his TA scribing for him in lessons. Staff also talked about supporting him with peer interaction through group activities and pre-warning Cameron about questions to allow extra thinking time. Every morning, Cameron had a 'coaching session' with his form teacher, where he discussed his current learning and how he was feeling.

Madison

Madison is a sensitive, caring, polite, hard-working and enthusiastic Year 8 pupil. She is also very quiet and lacks confidence. Madison's parent said that she had always been quiet but was happy to go to school. School staff reported that she was happy with peers and had one particular friend who she was very close to. Madison was said to be well organised and to have a mature attitude. She enjoys geography, history, art and drama. Outside of school, she likes drawing, cooking and taking part in charity work with her family. She also loves animals and has a wide range of pets at home that she cares for. Madison said that she would like to become a nurse or a midwife.

Mathematics was a significant challenge for Madison. Dyscalculia had been mentioned but no formal assessment had been made as this was not part of the local authority's services. School staff said that processing and comprehension had now been formally identified as an area of need. Although Madison's English teacher reported good progress, Madison suggested she was struggling in English. Madison said that she sometimes got 'worked up' because she found work across lessons challenging and reported feeling angry. She wanted to get better at school but said that she struggled in a range of subjects when there were a lot of questions to process and content to understand. School staff reported that she often panicked in science and needed a lot of repetition. At the time of interview, there had been no formal identification of need. Madison did not have an EHC plan.

When Madison first started at the school, she had experienced bullying, which had been dealt with after she moved class and received pastoral support. This support had been one-to-one and daily initially. She had also received counselling at school. She no longer needed to use these services at the time of the study. Madison used a reading pen and headphones to help her. Her parent mentioned that the school had started trialling one-to-one reading comprehension sessions with her in the mornings before school. She also went to subject intervention groups for mathematics and comprehension with a TA every week. Madison also took part in Talking Partners intervention for social skills and communication, which she said she really enjoyed. In mathematics, Madison had a lot of scaffolding with differentiated tasks, modelled answers, TA support, practice questions to take home and revision cards. She attended homework club, where she had support from a TA. Madison had a place to go when she was angry, but she said she did not need to use it very often.

---

1. 'National statistics: special educational needs in England: January 2020', Department for Education, 2020.

   We will use the term 'SEND' (special educational needs and/or disabilities) in this document except for where participants or literature have used 'SEN' (special educational needs). ↩
2. 'National statistics: special educational needs in England: January 2016', Department for Education, 2016; 'National statistics: special educational needs in England: January 2020', Department for Education, 2020. ↩
3. 'National statistics: special educational needs in England: January 2020', Department for Education, 2020. ↩
4. For example, Y Anders, P Sammons, B Taggart, K Sylva, E Melhuish and I Siraj-Blatchford, 'The influence of child, family, home factors and pre-school education on the identification of special educational needs at age 10', in 'British Educational Research Journal', Volume 37, Issue 3, 2011, pages 421 to 441; S Ellis and J Tod, 'Identification of SEN: is consistency a realistic or worthy aim?', in 'Support for Learning', Volume 27, Issue 2, 2012, pages 59 to 66; S McCoy, JBanks and M Shevlin, 'School matters: how context influences the identification of different types of special education needs', in 'Irish Educational Studies', Volume 31, Issue 2, 2012, pages 119 to 138; 'The special educational needs and disability review: a statement is not enough', Ofsted, September 2010; J Hutchinson, 'Identifying pupils with special educational needs and disabilities', Education Policy Institute and Nuffield Foundation, March 2021; House of Commons Education Select Committee (2019). ↩
5. For example, 'Local area SEND inspections: one year on', Ofsted and Care Quality Commission, October 2017;

   'Ofsted Annual Report 2019/20: education, children's services and skills', Ofsted, December 2020; 'Support for pupils with special educational needs and disabilities in England', National Audit Office, September 2019; House of Commons Education Select Committee (2019). ↩
6. Co-production is a way of working that brings together pupils, parents or carers and education, health and care services into partnership when making decisions about how best to support a pupil. The aim of co-production is to involve pupils, parents and carers in the fullest possible way. When asked about their school's 'school information report' about provision for SEND, many parents and carers in the sample were not aware of it. ↩
7. Multi-agency services include education, health and care providers (that may provide assessments, provision input and expertise for EHC plans) or in-school support for pupils with SEND. ↩
8. 'National statistics: special educational needs in England: January 2020', Department for Education, 2020. ↩
9. 'Special educational needs and disability: code of practice: 0–25 years', Department for Education and Department of Health and Social Care, June 2014; page 15. ↩
10. 'Special educational needs and disability: code of practice: 0–25 years', Department for Education and Department of Health and Social Care, June 2014. ↩
11. 'Special educational needs and disability: code of practice: 0–25 years', Department for Education and Department of Health and Social Care, June 2014. ↩
12. 'Definition of disability under the Equality Act 2010'. ↩
13. The Equality Act 2010 sets out that providers must make 'reasonable adjustments' so that disabled children and young people are not at a substantial disadvantage compared with their peers. The SEND code of practice states that this may include adjustments to procedures, criteria and practices and the provision of auxiliary aids and services. ↩
14. For example, Y Anders, P Sammons, B Taggart, K Sylva, E Melhuish and I Siraj-Blatchford, 'The influence of child, family, home factors and pre-school education on the identification of special educational needs at age 10', in 'British Educational Research Journal', Volume 37, Issue 3, 2011, pages 421 to 441; S Ellis and J Tod, 'Identification of SEN: is consistency a realistic or worthy aim?', in 'Support for Learning', Volume 27, Issue 2, 2012, pages 59 to 66; S McCoy, JBanks and M Shevlin, 'School matters: how context influences the identification of different types of special education needs', in 'Irish Educational Studies', Volume 31, Issue 2, 2012, pages 119 to 138; 'The special educational needs and disability review: a statement is not enough', Ofsted, September 2010; J Hutchinson, 'Identifying pupils with special educational needs and disabilities', Education Policy Institute and Nuffield Foundation, March 2021. ↩
15. H Algraigray and C Boyle, 'The SEN label and its effect on special education', in 'Educational and Child Psychology', Volume 34, Issue 4, 2017, pages 70 to 81; F Lauchlan and C Boyle, 'Labeling and inclusive education', in 'Oxford Research Encyclopedia of Education', Oxford University Press, 2020. ↩
16. F Lauchlan and C Boyle, 'Labeling and inclusive education', in 'Oxford Research Encyclopedia of Education', Oxford University Press, 2020. ↩
17. 'National statistics: special educational needs in England: January 2016', Department for Education, 2016; 'National statistics: special educational needs in England: January 2020', Department for Education, 2020. ↩
18. 'National statistics: special educational needs in England: January 2020', Department for Education, 2020. ↩
19. The Children and Families Act 2014. ↩
20. B Lamb, 'Lamb Inquiry – special education needs and parental confidence', Department for Education, December 2009. ↩
21. This included the introduction of the Equality Act 2010 and a revised SEND code of practice (2014), as well as multiple reviews into care and provision (see: 'The special educational needs and disability review: a statement is not enough', Ofsted, September 2010; C Lenehan, 'These are our children', Council for Disabled Children and Department of Health and Social Care, January 2017; D Rochford, 'The Rochford Review: review of assessment for pupils working below the standard of national curriculum tests', Standards and Testing Agency, October 2016. Area SEND inspections of local areas by Ofsted and the CQC were also introduced ('Local area SEND inspections: one year on', Ofsted and Care Quality Commission, October 2017). ↩
22. 'Support for pupils with special educational needs and disabilities in England', National Audit Office, September 2019. ↩
23. Before September 2014, a statement of SEN was the document which set out the pupil's need and the extra help they should receive. ↩
24. 'Education, health and care plans: England, 2020', Department for Education, May 2020. ↩
25. 'National statistics: special educational needs in England: January 2020', Department for Education, 2020. ↩
26. 'National statistics: special educational needs in England: January 2020', Department for Education, 2020. ↩
27. 'Education, health and care plans: England, 2020', Department for Education, May 2020. ↩
28. For example, 'Ofsted Annual Report 2019/20: education, children's services and skills', Ofsted, December 2020; B Lamb, 'Lamb Inquiry – special education needs and parental confidence', Department for Education, December 2009; S Parsons and L Platt, 'The early academic progress of children with special educational needs', in 'British Educational Research Journal', Volume 43, Issue 3, 2017, pages 466 to 485. ↩
29. 'HMCI's commentary: recent primary and secondary curriculum research', Ofsted, October 2017. ↩
30. 'Special educational needs and disabilities', House of Commons Education Committee, October 2019. ↩
31. This includes staff training, access to specialist skill support and commissioning of services by local authorities, for example. ↩
32. 'Support for pupils with special educational needs and disabilities in England', National Audit Office, September 2019. ↩
33. 'Ofsted Annual Report 2019/20: education, children's services and skills', Ofsted, December 2020. ↩
34. 'Local area SEND inspections: one year on', Ofsted and Care Quality Commission, October 2017. ↩
35. 'Ofsted Annual Report 2019/20: education, children's services and skills', Ofsted, December 2020. ↩
36. The design of pupil interviews was supported by a SEND community group of young people. ↩
37. T Booth and M Ainscow, 'Index for inclusion: developing learning and participation in schools', 3rd edition, Centre for Studies in Inclusive Education, 2011. ↩
38. M Ainscow, A Dyson and S Weiner, 'From exclusion to inclusion: ways of responding in schools to students with special educational needs', Centre for British Teachers Education Trust, 2013. ↩
39. Aaron's communication difficulties prevented him from expressing himself during the interview for this study. His TA was present but was unable to translate what Aaron was saying. ↩
40. The external specialist from the local authority SEND team who was providing weekly support to Faizan was referred to by the SENCo as a 'sensory support' key worker. In the interviews, participants did not specifically mention that a Teacher of the Deaf was involved in Faizan's support. ↩
41. Autism, here referred to as autism spectrum disorder. ↩
42. Research has shown that instruction from TAs can limit pupils' progress and understanding, and reduce autonomy and independence. This can lead to some pupils developing 'learned helplessness'. See, for example, J Sharples, R Webster and P Blatchford, 'Making the best use of teaching assistants: guidance report', 2nd edition, Education Endowment Fund, 2018. ↩
43. Many of the pupils were only able to identify some of the help they received. This often related to the support provided by a TA – the visible form of support. Some pupils also mentioned physical resources, such as sound mats, that helped their learning, but generally they were unable to describe the wider planning and resources that their parents and school staff mentioned. ↩
44. The Equality Act 2010 sets out that providers must make 'reasonable adjustments' so that disabled children and young people are not at a substantial disadvantage compared with their peers. The SEND code of practice states that this may include adjustments to procedures, criteria and practices and the provision of auxiliary aids and services. ↩
45. B Lamb, 'Lamb Inquiry – special education needs and parental confidence', Department for Education, December 2009. ↩
46. 'The deployment and impact of support staff (DISS) project', Maximising the Impact of Teaching Assistants, 2009. ↩
47. J Sharples, R Webster and P Blatchford, 'Making the best use of teaching assistants: guidance report'. Second edition. London: Education Endowment Fund, 2018. ↩
48. 'The deployment and impact of support staff (DISS) project', Maximising the Impact of Teaching Assistants, 2009. ↩
49. 'The Making a Statement (MAST) study', Maximising the Impact of Teaching Assistants, 2012. ↩
50. 'Inclusion and education: all means all', Global Education Monitoring Report, UNESCO, 2020. ↩
51. It should be noted that this study did not gather data about the subject and curriculum knowledge, or training for subject and curriculum knowledge, of the TAs in the sample. ↩
52. For example, P Blatchford and R Webster, 'Classroom contexts for learning at primary and secondary school: class size, groupings, interactions and special educational needs', in 'British Educational Research Journal', Volume 44, Issue 4, 2018, pages 681 to 703. ↩
53. The data collection for this study did not explore school budgets or how effectively they were used to support pupils with SEND. The Lamb Inquiry highlighted schools' over-reliance on TAs and the importance of carefully considered deployment of support assistant time, directed by the teacher and linked to objectives for the individual child: B Lamb, 'Lamb Inquiry – special education needs and parental confidence', Department for Education, December 2009. ↩
54. Interview data revealed that Robert was entitled to 25 hours of support but EHC plans were not gathered as part of the data collection. It is therefore not possible to state that these reported challenges for TA time allocation led to Robert not receiving his full entitlement to support and therefore his EHC plan not being fulfilled. ↩
55. For example, 'Identifying special educational needs in the early years: perspectives from special educational needs coordinators', National Association for Special Educational Needs, 2020; G Lindsay, J Ricketts, LV Peacey, JE Dockrell and T Charman, 'Meeting the educational and social needs of children with language impairment or autism spectrum disorder: the parents' perspectives', in 'International Journal of Language and Communication Disorders', Volume 51, Issue 5, 2016, pages 495 to 507. ↩
56. 'Identifying special educational needs in the early years: perspectives form special educational needs coordinators', National Association for Special Educational Needs, 2020. ↩
57. Y Anders, P Sammons, B Taggart, K Sylva, E Melhuish and I Siraj-Blatchford, 'The influence of child, family, home factors and pre-school education on the identification of special educational needs at age 10', in 'British Educational Research Journal', Volume 37, Issue 3, 2011, pages 421 to 441. ↩
58. 'Special educational needs and disability: code of practice: 0–25 years', Department for Education and Department of Health and Social Care, June 2014. ↩
59. B Lamb, 'Lamb Inquiry – special education needs and parental confidence', Department for Education, December 2009. ↩
60. 'Special educational needs and disability: code of practice: 0–25 years', Department for Education and Department of Health and Social Care, June 2014. ↩
61. Section 19 of the Children and Families Act 2014 refers to the support and involvement of children and young people, specifically that a 'local authority in England must have regard to (a) the views, wishes and feelings of the child and his or her parent, or the young person; (b) the importance of the child and his or her parent, or the young person, participating as fully as possible in decisions relating to the exercise of the function concerned; (c) the importance of the child and his or her parent, or the young person, being provided with the information and support necessary to enable participation in those decisions; (d) the need to support the child and his or her parent, or the young person, in order to facilitate the development of the child or young person and to help him or her achieve the best possible educational and other outcomes'. ↩
62. For example, C Shepherd, J Hanson and V Dodd, 'Experiences of education, health and care plans: a multivariate analysis', Department for Education, March 2018; B Norwich, 'The future of inclusive education in England: some lessons from current experiences of special educational needs', in 'REACH Journal of Special Needs Education in Ireland', Volume 30, Issue 1, 2017, pages 4 to 21; A Lendrum, A Barlow and N Humphrey, 'Developing positive school-home relationships through structured conversations with parents of learners with special educational needs and disabilities (SEND)', in 'Journal of Research in Special Educational Needs', Volume 15, Issue 2, 2015, pages 87 to 96. ↩
63. For example, 'Identifying special educational needs in the early years: perspectives from special educational needs coordinators', National Association for Special Educational Needs, 2020; J Ricketts, LV Peacey, JE Dockrell and T Charman, 'Meeting the educational and social needs of children with language impairment or autism spectrum disorder: the parents' perspectives', in 'International Journal of Language and Communication Disorders', Volume 51, Issue 5, 2016, pages 495 to 507; B Taggart, P Sammons, R Smees, K Sylva, E Melhuish, I Siraj-Blatchford, K Elliot, and I Lunt, 'Early identification of special educational needs and the definition of "at risk": the early years transition and special education needs (EYTSEN) project', in 'British Journal of Special Education', Volume 33, Issue 1, 2006, pages 40 to 45. ↩
64. There was less evidence overall of pupils being involved in co-production of provision and, although a few could remember attending meetings for this, they could not recall the outcomes. ↩
65. According to the SEND code of practice, the role of the SENCo includes taking responsibility for the routine coordination of specific provision for pupils with SEN, ensuring that they receive appropriate support and high-quality teaching. As part of their role, the SENCo should work closely with staff, parents and other agencies and be the main point of contact with local support services.

    For example, S Pearson, R Mitchell and M Rapti, '"I will be 'fighting' even more for pupils with SEN": SENCos' role in predictions in the changing English policy context', in 'Journal of Research in Special Educational Needs', Volume 15, Issue 1, pages 48 to 56; MD Smith and KE Broomhead, 'Time, expertise and status: barriers faced by mainstream primary school SENCos in the pursuit of providing effective provision for children with SEND', in 'Support for Learning', Volume 34, Issue 1, 2019, pages 54 to 70. ↩
66. Children's and Families Act 2014. ↩
67. 'Improving the educational outcomes of children in need of help and interim findings', Department for Education, March 2018. ↩
68. O Palikara, S Castro, C Gaona and V Eirinaki, 'Professionals' views on the new policy for special educational needs in England: ideology versus implementation', in 'European Journal of Special Needs Education', Volume 34, Issue 1, 2018, pages 83 to 97. ↩
69. It should be noted that due to problems with the sound recording, a full transcript was not available for council staff in local authority 2. We have therefore not used quotations as evidence to the same extent for this local authority. ↩
70. For example, D Crowther, A Dyson and A Millward, 'Supporting pupils with special educational needs: issues and dilemmas for special needs coordinators in English primary schools', in 'European Journal of Special Needs Education', Volume 16, Issue 2, 2001, pages 85 to 97; GJ Dobson, 'Understanding the SENCo workforce: re-examination of selected studies through the lens of an accurate national dataset', in 'British Journal of Special Education', Volume 46, Issue 4, 2019, pages 445 to 464; H Curran, H Moloney, A Heavy and A Boddison, 'It's about time: the impact of SENCo workload on the professional and the school', National Association for Special Educational Needs, 2018; H Curran, H Moloney, A Heavey and A Boddison, 'The time is now: addressing missed opportunities for special educational needs support and coordination in our schools', Bath Spa University, 2019; H Curran and A Boddison, '"It's the best job in the world, but one of the hardest, loneliest, most misunderstood roles in a school": understanding the complexity of the SENCo role post-SEND reform', in 'Journal of Research in Special Educational Needs', Volume 21, Issue 1, 2021, pages 39 to 48; O Palikara, S Castro, C Gaona and V Eirinaki, 'Professionals' views on the new policy for special educational needs in England: ideology versus implementation', in 'European Journal of Special Needs Education', Volume 34, Issue 1, 2018, pages 83 to 97. ↩
71. A service for this local authority comprised of specialist teachers and education practitioners who worked with local authority schools where children and young people had progress, SEND or social, emotional or mental health difficulties. ↩
72. D Crowther, A Dyson and A Millward, 'Supporting pupils with special educational needs: issues and dilemmas for special needs coordinators in English primary schools', in 'European Journal of Special Needs Education', Volume 16, Issue 2, 2001, pages 85 to 97; GJ Dobson, 'Understanding the SENCo workforce: re-examination of selected studies through the lens of an accurate national dataset', in 'British Journal of Special Education', Volume 46, Issue 4, 2019, pages 445 to 464; H Curran, H Moloney, A Heavey and A Boddison, 'It's about time: the impact of SENCo workload on the professional and the school', National Association for Special Educational Needs, 2018; H Curran, H Moloney, A Heavey and A Boddison, 'The time is now: addressing missed opportunities for special educational needs support and coordination in our schools', University of Bath, 2019; H Curran and A Boddison, '"It's the best job in the world, but one of the hardest, loneliest, most misunderstood roles in a school": understanding the complexity of the SENCo role post-SEND reform', in 'Journal of Research in Special Educational Needs', Volume 21, Issue 1, 2021, pages 39 to 48; O Palikara, S Castro, C Gaona and V Eirinaki, 'Professionals' views on the new policy for special educational needs in England: ideology versus implementation', in 'European Journal of Special Needs Education', Volume 34, Issue 1, 2018, pages 83 to 97. ↩
73. For example, O Palikara, S Castro, C Gaona and V Eirinaki, 'Professionals' views on the new policy for special educational needs in England: ideology versus implementation', in 'European Journal of Special Needs Education', Volume 34, Issue 1, 2018, pages 83 to 97; 'Special educational needs and disabilities', House of Commons Education Committee, October 2019. ↩
74. J Sharples, R Webster and P Blatchford, 'Making the best use of teaching assistants: guidance report', 2nd edition, Education Endowment Fund, 2018. ↩
75. For example, 'Ofsted Annual Report 2019/20: education, children's services and skills', Ofsted, December 2020; B Lamb, 'Lamb Inquiry – special education needs and parental confidence', Department for Education, December 2009; S Parsons and L Platt, 'The early academic progress of children with special educational needs', in 'British Educational Research Journal', Volume 43, Issue 3, 2017, pages 466 to 485. ↩
76. M Ainscow, A Dyson and S Weiner, 'From exclusion to inclusion: ways of responding in schools to students with special educational needs', Centre for British Teachers Education Trust, 2013. ↩
77. For example, 'Identifying special educational needs in the early years: perspectives from special educational needs coordinators', National Association for Special Educational Needs, 2020;

    C Shepherd, J Hanson and V Dodd, 'Experiences of education, health and care plans: a multivariate analysis', Department for Education, April 2018; G Lindsay, J Ricketts, LV Peacey, JE Dockrell and T Charman, 'Meeting the educational and social needs of children with language impairment or autism spectrum disorder: the parents' perspectives', in 'International Journal of Language and Communication Disorders', Volume 51, Issue 5, 2016, pages 495 to 507; A Lendrum, A Barlow and N Humphrey, 'Developing positive school-home relationships through structured conversations with parents of learners with special educational needs and disabilities (SEND)', in 'Journal of Research in Special Educational Needs', Volume 15, Issue 2, 2015, pages 87 to 96. ↩
78. 'Ofsted's ethical research policy', Ofsted, December 2019. ↩
79. A child achieves a good level of development at the end of the EYFS if they have achieved at least the expected level in the early learning goals. This includes the prime areas of learning (personal, social and emotional development; physical development; and communication and language) and the specific areas of mathematics and literacy, as well as understanding the world and expressive arts and design. 'Early years foundation stage (EYFS) statutory framework', Department for Education, March 2014. ↩

Is this page useful? Yes No

Report a problem with this page

Coronavirus (COVID-19)

Coronavirus (COVID-19): guidance and support

Brexit

Check what you need to do

Services and information

Benefits
Births, deaths, marriages and care
Business and self-employed
Childcare and parenting
Citizenship and living in the UK
Crime, justice and the law
Disabled people
Driving and transport
Education and learning
Employing people
Environment and countryside
Housing and local services
Money and tax
Passports, travel and living abroad
Visas and immigration
Working, jobs and pensions

Departments and policy

How government works
Departments
Worldwide
Services
Guidance and regulation
News and communications
Research and statistics
Policy papers and consultations
Transparency and freedom of information releases

Help Privacy Cookies Contact Accessibility statement Terms and conditions
Rhestr o Wasanaethau Cymraeg Built by the Government Digital Service

OGL All content is available under the Open Government Licence v3.0, except where otherwise stated

© Crown copyright