



# Special Educational Needs and Disability (SEND)

## Your voice questionnaire summary

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## Introduction

Kent County Council and its partners are determined to work together to transform the way we work with children with SEND and their families.

At its core this means creating a new relationship with parents and carers which is genuinely open and transparent, and characterised by increased levels of trust, and a commitment to consultation, partnership and co-production across every area of our improvement journey.

The first step was to get a good understanding of our families' experiences of accessing and using SEND services and what they would like to see change.

We received responses from the 660 parents, carers and stakeholders challenging the partnership to get things right. We are grateful to all of those who gave their time to outline how working together as a community we can improve our SEND services promoting the view that "it takes a village to raise a child".

The reach of the questionnaire has helped us to hear fully what our families are feeling about our services. Feedback shows us that when the system works, then children; parents and carers are happy with their child's progress, however, when it is not working, the impact on families, children and young people is far reaching and can be devastating.

## Methodology

The questionnaire which was designed to help us better understand the experience of children, young people and families' journeys through the SEND system was circulated through schools, parent charities, IASK, and a range of other avenues including some social media platforms. We would like to thank SENCO's in schools who played a pivotal role in its distribution.

The anonymity of the questionnaire helped to ensure that respondents with a wide range of views and experiences were able to share thoughts, comments and views on how to improve services.

One limitation to this approach, however, is that we are unable to collect data allowing us to report back to respondents directly or check in on parents' views of progress.

We were told consistently throughout the feedback that the voice of families is missing. We have therefore presented many of the findings to include direct quotes from parents.

Responses have also been sampled by IASK for objectivity and lack of bias and agreed as being representative of parents' views.

In order to reach specific communities and families with specific needs we will conduct further shorter more targeted questionnaires in the future. We will be working with the Parent Forum, Kent PACT and a range of other engagement events to gather feedback and test progress.

The questionnaire set out to establish how respondents used and accessed support, where there were areas for development and what was working. This led to three key lines of enquiry:

- Our families experience of the services received so far.
- Parental views on the vision for future service delivery
- Actions to improve service delivery

This report and its findings will be published and publicised widely through the Local offer and other forums. The findings will be presented to the SEND Improvement Board to inform our Improvement journey.

## Section 1: About you

Overall respondents were parents and carers of children and young people with SEND. The highest number of respondents had children in primary, infant or junior school with the next highest groups in secondary or special schools.

Around 30% of children and young people were under the care of a paediatrician and just under a quarter were accessing therapeutic services. 22% of families received direct payments and around, 20% accessed Social Work or Early Help Services.

Kent has a wide range of community-based education provision, including ASD units within Primary Schools, Grammar Schools and community provision that has grown from a Special school. Parents and carers from across the range of provision responded as well as parents of children not currently in schools, who may be accessing special college, home tuition or not in receipt of any provision.

One of the key themes to emerge from this line of enquiry was the variability of inclusive provision and the frequency of non-inclusive practice amongst schools and settings.

When asked about which health services were being accessed parents reported a wide range of services and experiences although long waits to access services and not being able to access any support were common.

The need for parents to access private support was frequently raised along with the cost to parents and it was reported widely that there is not considered to be enough therapies available. Parents frequently cited the need for more resource and more staff to support children.

We asked what social care support or service was being accessed

Respondents described delays in diagnosis, delivery and provision of service as well as a lack of direct service provision.

Third sector, charities and commissioned services, such as Space2beme, SNAAP, Imago and Salus (and others) were highly regarded, "Without them we'd be lost." However, it was not clear whether parents knew that many of these services were commissioned and paid for by the Local Authority.

Understanding the cohort of respondents will inevitably help strengthen our future communications and will help us to target more specifically where we need to co-produce and improve our Local Offer.

## Section 2: Your experiences of our services

The majority of parents did not find the content or the presentation of the local offer to be helpful. Only half felt confident that education had provided appropriate provision to meet their child's SEND needs and fewer than half believed that the current staff team have the skills and knowledge to fully meet their child's SEND needs.

Most parents felt that neither the health nor the social care element of the support was being adequately met. Time delays were frequently cited as a key contributor to the global dissatisfaction with the service.

Very few parents felt that they had been actively included in the planning for their children but where they had been parents were able to fully articulate the benefits.

"My son was diagnosed aged 2 and early intervention really was the key to why he is doing so well now." A more common experience described the difficulties parents face in navigating their way through the SEND services and provision.

Families told us that the Local Area is not abiding by the SEND Code of Practice Principles.

Parents supported the Ofsted / CQC findings of a service which is fragmented with little support for parents. Parents reported that access to the local offer is confusing and as a result "staff are over capacity resulting in professionals who are not able to do the job that they set out to do; "every organisation that is there to assist children is greatly understaffed and overworked. Therefore, nothing seems to be completed effectively."

### **Q8. Tell us what you feel is working well with our SEND services, provision and support.**

This question has been answered 489 times.

39% of respondents told us that nothing is working well, whilst others gave detailed feedback about the excellence of individual staff.

41% of respondents felt that the best outcomes were seen when schools were truly inclusive, reporting that they could see significant progress for their children when schools had a culture of inclusive practice. It was recognised that some schools are "working hard to support SEND pupils despite facing increasingly insurmountable challenges".

We were told that what made the difference was when there was a "variety of interventions offered in school", and that skilled, knowledgeable and compassionate support was key to getting this right.

The importance of having the right staff with the right skills and outlook was a recurring theme throughout the survey and in this section 13% of respondents felt that this is what made a difference to them - "You have some amazing, amazing dedicated staff who are incredibly supportive and helpful above and beyond her role."

Specialist teaching support was valued and the quality of provision and learning in special schools was noted as key to children's success for a number of parents. "(they) are extremely skilled and know how to adapt the curriculum to support the child."

Parents also recognised that schools achieved better outcomes for children when parents were involved in the planning of provision.

As well as good engagement and partnership working with parents the importance of having robust clear Education and Health Care Plans was noted. "The ability to work through the EHCP with my children's school, works very well for us as a family. I am given fantastic information about my children's needs at school via their teachers and as a team, we all discuss and decide what the best way forward to tackle any situations that have occurred or are due to happen in the future. Without the EHCP both children would not have this continued level of support that has for them had successful results."

We received inconsistent feedback about the quality and availability of health provision which could indicate that either there isn't enough support to go around or that there are geographical differences in the way that services are commissioned. Either way the feedback we received was robust about the need for children and young people to be able to access the right services in the right place at the right time.

## **Q9. Tell us what you feel is not working as well with our SEND services, provision and support.**

This question was answered 538 times.

Parents reported feeling invisible, isolated, helpless and frustrated. Parental support networks were identified as the main source of global support and guidance.

Almost a third felt that the system, culture and practices were not child focused contributing to this sense of invisibility, "Children are being lost in the system and parents are not receiving the support that they need." "support around transport was described as "inhumane" and there were frequent references to a disconnect between decision making and the best interests of the child. "The sooner they [children] get the right help with the right tools the quicker they can overcome/manage the problem."

Some parents proposed the view that delays in assessment or service delivery were a conscious decision in order to defer spend. Others felt that staff were poorly trained and lacked support. They were however keen to work with the system to support change "It would save money and make a huge difference to families like ours if the caseworker actually met with the child and built a relationship with the family. They would then understand the SEN needs much more and it would not all feel like a huge fight."

The lack of good partnership working, and good communication was the most consistent theme regarding what is not working well. "Not knowing is worse than being told honestly that the waiting list is x long, or that provision is not available."

## Q10. Tell us what you feel needs to change with our SEND services, provision and support.

This question was answered 513 times.

Parents reported that the culture and system were not child focussed, reporting that the system felt “adversarial” they commented that more progress would be made and parents would be happier if we “stop recruiting lawyers to fight tribunals and instead spend the money on providing services and therapies.”

“Having more creative working practices are required to help the system be more inclusive, “regular training for mainstream school staff, may help children manage in mainstream better rather than poorly planned or incorrect provision”.

There was a request for services to be more aspirational and ambitious for children. “Settings should be educational not just seen as childcare; children should not be just looked after but should be taught.” We hear of children feeling like a burden because of their disability- “School trips are so difficult to attend that my child is now not wanting to go as feels his wheelchair is too much hassle for everyone else – this is extremely poor.”

Families feel that it should be the role of the Local Authority join services up but all too frequently it fell to them and they were expected to “explain our stories and repeat ourselves to a million different services”.

The local offer is not well defined, well communicated or family friendly.  
Families want EHCPs to be, “shorter in length” “EHCP’s should define needs clearly and accurately” Plans should be “more specific and delivered on time”

## Section 3: Your thoughts on our future vision

### The draft vision

Services will work with families to improve outcomes and achievements for children and young people with SEND.

Families can reach the right people at the right time to support their children.

Children and young people with SEND in Kent feel happy, safe and supported while they learn and grow.

650 people responded to the question

- Is the vision clear?
- Does it say what they wanted it to?
- Does it include the right ambitions for the future?

The majority confirmed that the vision was clear, contained what they would wish to see and presented the right ambition.

However, many felt that the partnership lacked “the commitment to follow through what it’s visions states.”

“The Local Area must work together across its all of services and with parents as equal partners to change the current perception” Delivering the priorities identified in the Written Statement of Action will only be achieved if changes are co-produced in partnership with parents and carers”.

## **Section 4 – Your thoughts on our Written Statement of Action workstreams**

### **Workstream 1: Parental engagement and co-production**

Central to the SEND code of practice is the need to fully involve children, young people and families in decisions about their support and what they want to achieve. Parents told us that they didn’t feel included and listened to, and the Local Area needs to work with parents in an open, transparent and inclusive way: “Listen and stop making everything such a monumental battle and being so obstructive to parents’ views.”

Services need to change the experience of families from a confrontational, adversarial one to one that is inclusive, collaborative and efficient.

We heard across all our family’s voices in this questionnaire that this isn’t happening in Kent.

The children’s workforce needs sufficient support to understand the principles of co-production, have the time to build relationships with children, young people and their families and have the skills to work in a person-centred approach.

Services need to have a common understanding of what Co-Production is, and what it means for children, young people and families.

Good open and transparent communication is key to building trust and delivering a person-centred approach.

Children, young people and their families need to be involved in decisions about their support. The services and children’s workforce need to ensure that children and young people can express their views about these decisions, and they must be considered in a way that it is appropriate for that child or young person to do so.

The Local Offer must be co-produced with children, young people and families. The workforce will also need to grasp the impact of transitions on children and young people, alongside the context of family, school and wider community life.

### **Workstream 2: Inclusive practice and the outcomes, progress and attainment of Children and Young People**

Unsurprisingly most young people relate their experiences of SEND both positive and negative through the prism of their experience of education. Parents value good SENCO’s and inclusive practice.



Most felt that in order to address this area of concern the Local Area needs to support schools with effective and accessible training to help increase schools' knowledge and understanding. Not only should "Teachers... be given the training to recognise the different learning styles of our children and be able to support them to achieve their full potential." But there should also be, "Better (training for) early years practitioners to identify the need for medical assessment of needs. Recognise and act on the need to support the emotional and mental wellbeing of those in early years and primary education who are affected by SEND.

Parents report that in the main good SENCOs - with enough capacity - support families well are important in supporting inclusivity in schools . SENCO's are also key to early identification, planning and partnerships working well.

Respondents felt that the Local Area should develop a forum, or task and finish group to support joint working with schools.

Parents reported the view that schools need to be more inclusive and should receive help to build capacity and confidence to be able to identify and implement reasonable adjustments, so that children can thrive and achieve without fear of discrimination within schools.

Too many parents reported that families feel schools do not accept or believe their experience of problems within the education. Reporting that their children are shouted at, labelled naughty and wrongly excluded, all of which impacts their ability to reach their potential.

There are instances where schools have refused to support families by completing an EHCP for the child or young person, advising them that it would be quicker if the family apply themselves. This is not only untrue but also further penalises vulnerable families and breaks down trust in the system.

Schools and the Local Authority should work together to ensure that schools feel confident with the help of health they can manage special education and health needs.

### **Workstream 3: Quality of Education, Health and Care Plans**

In the other sections, culture change and leadership have featured, but this is the first section where this was the priority issue with a third of respondents telling us they would like the leadership to hold professionals and services to account and lead a less adversarial, more child focused culture.

Parents asked for simple, jargon free, clearly laid out plans which evidence that the author knows the child and demonstrates that the child and parent voice is present. Plans and reviews need issuing in advance of transitions to help families manage the experience of change

Education and Health Care Plans need to be of good quality, specific, measurable, achievable, realistic and timely and delivered with purpose and transparency. Families shared their views of what is working, what is not and what needs to change.

Parents have repeatedly described a frustration at not being able to discuss the progress of their children's EHCP and plans need to have clear lines accountability. This has promoted a view that staff do not place their children at the heart of the process which is not transparent or clear about delays.

Co-production is central to the SEND Code of Practice but is frequently missing and needs to be embedded fully within the whole children's workforce.

Families outlined concerns that if an EHCP presents a child's strengths within the report then they were fearful that this may reduce the Authorities perception of the true level of need and mitigate against the necessary levels of support being offered.

Parents highlighted a need for a change in culture and for the system to become more child focussed, with realistic and aspirational considerations for future transitions and independence, social interactions and employment

#### **Workstream 4: Joint commissioning and governance**

This question puts leadership and culture change as its highest priority – “Kent in general seems to not care”. There is a general feeling that totally new ways of thinking and doing things is needed – “Everyone is too committed to 'we've always done things this way' and are unwilling to change. This needs to change” .

We were told that services are fragmented and not working together, often resulting in families having to repeat their stories.

Parents feel that budget constraints mean that thresholds are based on resource rather than need.

Although many universal services are available parents felt that there was a huge gap between that level of need and meeting the threshold for specialist services, we were also told about geographical differences in service provision.

The Local Area must ensure that Education, Health and Social Care work better to identify more fluid thresholds. Parents felt that through co-production they could help bring about a reduction in gaps in provision.

Services need to work better to pool budgets and share data to develop an understanding of wider need.

We were told that data led decisions are more likely to lead to outputs where co-produced decision were more likely to lead to outcomes.

It is hoped that the development of a single Kent CCG will help this and provide a county overview, helping to avoid duplication and ensure a wider fairer coverage of provision.

Better join up between services would give those services the opportunity to learn from best practice in other areas. KCC has already developed a robust model of co-production with young people and already uses resilience-based conversations with schools through Headstart.

## Workstream 5: Service provision

The most recurring theme in this section is the long waiting times and the need to improve on these, as they are, “completely unrealistic and failing the children's needs”. It is not only the waiting times in themselves that are causes for concern, it is the lack of support offered at the end of the process, “We got an ASD diagnosis after a year of being referred. You get the diagnosis and leaflet but left to get on with it.”

The evidence for the importance of early identification and intervention is widely known, yet the stories presented to us in this questionnaire tell that the common experience is one of too many delays and missed opportunities to support children and young people to thrive at the earliest opportunity.

Delays due to long waiting lists and services being over capacity are clear. In January 2019 speech, language and communication needs were identified by the DoE nationally (at 23%) as the most common primary need. We therefore need a wider approach to understanding communication difficulties if we are to include young people in decision making and planning helping to improve global inclusive practice and reduce school exclusion.

Transport arrangements were also cited as an area where economics were not always in line with the best interests of the child.

There was a view expressed that access to provision was a ‘geographical lottery’ with the availability of services being post code driven rather than needs driven.

## Conclusion

Ofsted and CQC gave KCC and its partners a clear message that SEND provision across Kent was disjointed, isolating for parents and difficult to navigate. The Local offer and EHCP's as well as systems for assessment and delivery of services are not effective. Practices in schools are not inclusive and delays across all areas of the system are too long and too frequent.

Listening to the voice of parents it is clear that for many the experience of getting a diagnosis or recognising the reality of their child's disability can feel overwhelming, however in the main parents want to work with services to ensure that they are better able to meet the needs of children and young people with SEND.

It is important that parents and children are able to discuss concerns, feel listened to and see a clear plan and direction of travel for support.

One size does not fit all and not all families want the same thing.

Common themes from the consultation show that the key elements for success are:

- A culture of inclusive practice
- Co-production with children, young people and families
- A Child focused service that identifies need early and ensures appropriate local support

- Having high aspirations, and a positive rather than deficit model to planning and decision making
- Good Leadership to drive forward culture change
- Holding teams, services and joint commissioning to account
- Better integration of services
- A clear robust and well communicated Local Offer
- Better communication with families as equal and trusted partners

## Recommendations

Building on the areas for development identified in the Written Statement of Action and by utilising the voice of parents and carers to inform our decision making we need to work with parents and carers to win back their trust.

Key recommendations to achieve this:

### **The participation of children, their parents and young people in decision-making**

Kent should develop a model of genuine co-production as an ethos and method of improvement and delivery; shifting the balance of decision making to include children, young people, parents and carers where families have active roles in planning and delivering,

### **The early identification of children and young people's needs and early intervention to support them**

Working across the partnership with health providers, schools and early years settings to develop a strength-based social model response to disability, as well as a medical treatment model. Ensure that staff are trained and supported to adopt a more child centred approach which is responsive to early needs as well as new and emerging needs as children move through transition stages and or have changing circumstances requiring support.

### **Collaboration between education, health and social care services to provide support**

Develop a model and culture of integrated working where children and young people have their health, education and social needs need met seamlessly and holistically as though they were one child rather than three different versions of the same child and develop service provision and pathways which make sense to the lives of families.

### **A focus on inclusive practice and removing barriers to learning**

Develop and promote a clear definition and understanding of inclusive practice for all services and work in partnership to ensure that this is embedded within all services, schools and settings.

Ensure that EHCPs demonstrate that they know the needs of individual children and young people and that services are tailored to meet their needs.

## **Successful preparation for adulthood, including independent living and employment**

Leaders need to bring about system change. To work together to both hear and respond to the voice of families and to hold failing services to account, setting high standards and developing systems to support high aspirations for our children and young people. Developing a model of joint commissioning working together to govern and commission services and improve our service delivery timescales.

Thank you for sharing your experiences with us and the Local Area regrets the impact that this has had and by using this survey as a benchmark and starting point and working with you we pledge to improve our SEND services and provision

**Work has begun on all five workstreams outlined above and they can only be successful and bring about the desired change when co-produced with our children, young people and families. Some of this work has started and the main co-produced activities have been supported through the Parent Carer forum, Kent PACT. Other engagement opportunities through workshops and focus groups are also being developed.**

If you would like to join and support SEND transformation in a strategic way then you can do this by joining Kent PACT simply [go the Kent PACT website](#).

You could be involved in wider health service scrutiny by becoming a volunteer for Kent Healthwatch, to this [go to the Healthwatch website](#).

Other opportunities for becoming involved will be published on [Kent's Local Offer webpage](#) which itself is undergoing transformation through co-production

If you can think of any other way you may like to be come involved you can let us know on the [Local Offer Page under Local Offer, Your Voice](#).