

Lessons

learnt from

LOCKDOWN

The highs and lows of the pandemic's impact on disabled children and young people



Department
for Education



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ACKNOWLEDGEMENTS

This report has been made possible by the involvement of hundreds of children, young people, parents and practitioners from across England.

The consultation was co-designed by FLARE, the national young SEND advisors to the Department for Education.

We would like to thank everyone for their time and contribution to this project. A full list of organisations that took part is in Appendix 1.



SPECIAL THANKS

The Council for Disabled Children (CDC) commissioned Kaizen to design and deliver this consultation. Founded in 2000, Kaizen is an award-winning social business that specialises in designing, delivering and facilitating cutting edge projects. Kaizen deliver work across the community sector in the areas of regeneration, education, employment, housing and health. Kaizen are a leading organisation in the development of engagement theory and practice and their engagement models and delivery have been recognised as best practice. Kaizen has delivered dozens of consultations with tens of thousands of people including thousands of children and young people. For more about Kaizen, see www.kaizen.org.uk

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Introduction

This report presents the combined findings and key messages arising from over 425 children and young people who took part in focus groups and a further 218 who contributed their views and experiences through the online survey. The consultation took place during Feb – March 2021. In total, more than 643 children and young people, 128 parents and 110 professionals contributed their views and experiences. This is the largest consultation to date with children and young people with special educational needs and disabilities to explore the impact of the pandemic on their lives and to understand their support needs moving forward.

1.1 BACKGROUND AND CONTEXT

The COVID-19 pandemic has brought unprecedented challenges to all children and young people, and even more so for children and young people with Special Education Needs and Disabilities (SEND). The voices of young people with disabilities are often left unheard or are ignored and that is why it is so important after a generation defining experience such as the COVID-19 pandemic that we ensure that they are heard too.

It is important to understand from the young people what the impact of lockdown and the pandemic has been for them and what additional support they will need to help them to recover. For some young people there have also been unexpected benefits from the lockdown. Understanding which new ways of working have worked well and could or should be continued can help drive improvement in the sector and better provision for children and young people.

Making Participation Work (MPW) is a national children and young people's SEND participation programme funded by the Department for Education and jointly delivered by CDC and KIDS. MPW supports professionals and participation practitioners to develop good participation practice and increase opportunities for children and young people with SEND to be part of strategic decision making. CDC and KIDS believe that all children and young people have the right to be involved in the decisions that affect their lives. As part of MPW, CDC commissioned this consultation to give the opportunity to children and young people with SEND to share their experiences of how lockdown has impacted them, in particular in relation to their support network, academic goals, and social and emotional wellbeing.

Over 643 children and young people shared their views either through taking part in focus groups or by completing an online survey

Organisations across the sector were contacted about the upcoming consultation and invited to have their children and young people participate: the response was immediate and powerful, far outstripping our initial estimate for how many children and young people would want to take part. In the end, over 643 children and young people shared their views through taking part in focus groups or by completing an online survey. The children and young people who shared their views came from across the country, and over 110 schools, colleges, and youth organisations took part, demonstrating the overwhelming strength of feeling there was to support young people with SEN and disabilities to have a voice. We also heard from their parents, carers and the professionals who support them.

1.2 LANGUAGE USED WITHIN THIS REPORT

Throughout this report we have referred to special educational needs by its acronym **SEN**. This report includes the views of disabled children and young people (CYP) and those with special educational needs aged 5-25 years old, but to make it easier to read we have referred to them as *disabled young people* or *young people* or *SEND* throughout the report. Where we have used the term *accessible* or *accessibility*, we mean not only physical access but also documents and information presented in a format that is suitable to a young person's disability and uses language that is easy for them to understand. The acronym EHCP refers to Education, Health and Care Plan and PEP is a Personal Education Plan.

The groups who participated in submitting views to this report were drawn from across a range of settings, including school councils and student unions from both non-maintained special schools and mainstream schools, youth groups supported by national and local charities and a group formed specifically to discuss SEN reform, we refer to them all in this report as young people's groups.



What we did

This was a co-designed consultation between Kaizen, CDC, and the FLARE young advisory group, and is based on the feedback of children and young people participating in CDC and KIDS led youth groups. Having agreed the scope and key aims and objectives, Kaizen designed the research questions which we received feedback on and then designed the question set and resource packs, which again, we received feedback on from professionals and young people with SEND.

We also designed an engagement strategy to reach especially seldom heard young people and engage with a full diversity of individuals and organisations. We wanted the consultation to be an opportunity for all young people with SEND to be heard at a national level. This required bespoke design and planning that supports accessibility as well as tailored support to enable a wide range of people to participate and engage.

CDC sent an introductory email to their network of organisations about the opportunity and connecting them with Kaizen. Organisations who wanted to take part were given individual support both over email and the phone so as to support them in being involved in the ways that worked best for their children and young people.

Kaizen were initially commissioned to consult just with children and young people, through focus groups, and with a target of 130 children and young people. It became evident that the demand for children and young people's participation out-stripped the expectation of the consultation. It was also clear that parent, carer and professional's participation was valuable in adding to the experiences of children and young people during the pandemic. The consultation was opened up wider than the initial number of groups and opened to professionals, parents and carers to give their views too, yet with the acknowledgement that there had previously been opportunities for these groups share their views with decision makers in a way that children and young people had not.

During February-March 2021 we conducted a series of focus groups with children and young people and also had the same questions as online surveys for young people, parents and carers and professionals so those who wanted could give their views that way. The focus groups were recruited based on the engagement strategy to hear from a diverse group of young people (see the section on *Who we heard from* for more details). A combination of Kaizen staff and local professionals facilitated the focus group sessions which were online or face to face (if practitioner led groups were already in a school bubble). All staff delivering focus groups used the same broad session outline with the young people, which was designed to be able to be adapted to fit their needs. All focus group feedback was then emailed back to Kaizen for analysis.

The consultation pack (see Appendix 4), including the focus group questions, resources, online survey links and FAQs were all sent ahead of the delivery dates, so that children and young people,

parents, and professionals could familiarise themselves. We also spoke ahead of time with the practitioners delivering the sessions to ensure consistency and answer any questions. This all helped as ahead of the sessions, parents and children could pre-answer the questions and not feel too overwhelmed in a group. The sessions went well, with practitioners feeding back good quality engagement and a sense of feeling proud that children and young people were being heard and having a say.

**“It was great being back and telling our side of how covid affects us”
(Young Person)**

“Thank you for taking the time to come to speak to the group and listen to what they have to say. I know it means a lot to them when someone listens and is interested in what they have to say and I am sure you could tell they became very comfortable in talking to you so thank you for a great workshop!” (Professional)

Organisations that delivered the focus groups themselves (especially schools) also fed back that the sessions helped to frame the return to school conversations. Time in PHSE lessons and Form Time was utilised with a teacher leading the session with the online survey being completed or notes recorded on the focus group session template.

**“The students engaged very well with the questions and I feel it was useful for them to have an opportunity to express themselves about this issue. The question they struggled with most was no. 4; I think this was due to lack of awareness of their own needs and the impact. This is an area we need to work on with them as a college.”
(Professional)**

A wide range of organisations participated from County Councils, NHS Trust Foundations, to youth based charities with SEND youth forums, schools and colleges and parent and carer forums (see Appendix 1). Everything that has been said is included anonymously.

Who we heard from

In order to gain as wide a range of views as possible, the following criteria were considered when developing our engagement strategy:

- A wide geographical and socio-economic range and reflecting the pan-disability focus of CDC
- 5-25 years age range
- Diverse ethnic backgrounds
- Experience of different academic settings
- How children and young people engaged during lockdown
- Living in a range of settings, for example towns, cities and villages

Over 643 children and young people participated in the consultation. There was a very wide geographical spread (see Appendix 3) and there were more than 50 different disabilities, health or learning support needs that the young people self-described as having (see Appendix 2).

Total numbers of people who shared their views

Children and Young People (via Survey Monkey).....	218
Children and Young People (via focus groups).....	425+
Parents / Carers.....	128
Professionals / Practitioners.....	110

NB. We are using 425+ as the number of young people who participated via focus groups as that is the number that was reported back from practitioners and Kaizen facilitators. There were also a few practitioners who sent back feedback but didn't say how many young people were in the group so we couldn't include numbers for those groups.

The majority of children and young people who took part in the consultation via the online survey identified as White. However, the focus groups reached a more diverse ethnic demographic with approximately one third of the 425+ young people who took part in the focus groups coming from Black, Asian or other ethnic minority backgrounds. These included the groups below that were specifically mentioned by practitioners or young people when self-describing:

- White (included British, Irish, Mixed)
- Black (included British, Somali, other African, Caribbean)
- Asian (included British, Pakistani, Indian, Bangladeshi)
- Mixed/Other (included Iranian, Turkish/Cypriot)

Overall, we had slightly more young men participate than young women. Approximately 65 young people who took part in the focus groups did not have their gender recorded. Just four survey respondents didn't complete the gender question.

Gender of participants	Focus groups	Survey monkey
Male	58%	56%
Female	42%	40%
Transgender		1%
I'd rather not say		0%
I'd prefer to self-describe		2%

We also heard from 110 practitioners. They came from across the country, from over 65 organisations and a wide variety of roles including SENDCOs, teaching assistants, teachers, participation leads, short breaks staff and managers, Disability Services managers, speech and language teachers and assistants, registered managers and Headteachers. They worked with young people across the age range from early years to young adults and have an enormous range, depth and longevity of experience between them.

Of the 110 practitioners, most were very experienced; 79% had more than 5 years' experience and most of them had more than over 10 years:

- 21% had worked with children and young people with SEND for between 1-5 years
- 16% for 5-10 years
- 63% for 10+ years

There were also 128 parents who took part in the consultation with children from early years to young adult. The breakdown of the ages of their children was as follows. The % shown is the % of parents who said they have a child in that age group. Some parents have more than one child with SEND, so multiple responses were possible, and the total is therefore more than 100%.

Early Years.....	3%
Primary.....	41%
Secondary.....	37%
College.....	18%
Young Adult.....	9%

3.1 ENSURING THE CONSULTATION WAS INCLUSIVE

The consultation was designed to be accessible to any young person with SEND between ages 5-25 including those who are non-verbal.

There was a range of ways that young people, parents and practitioners could share their views:

- Focus group workshops (virtual) with children and young people, facilitated by Kaizen
- Focus group and individual discussions facilitated by practitioners in their organisation
- Online survey for CYP to complete themselves with support as needed from practitioners/parents
- Online survey for practitioners and parents

We designed a question set of 8 questions that could be asked and answered in whatever way was best for the children and young people. Some organisations spoke with their children and young people individually, some in groups.

Every child and young person is an individual and the questions were a direct fit for some more than others. The questions were there as a guide and those supporting the CYP in answering could adapt them in whatever way was best for the child or young person, which could include answering all or some of the questions and through words or any other means – practitioners fed back that they used various methods of picture exchange communication cards and Makaton as well as including artwork that the young people had done as a response to the questions.

As well as the question set, we put together 2 possible sets of slides for practitioners to choose which version is most appropriate for their group and to use as a visual aid resource if they wanted whilst they had the conversations. Practitioners fed back that these were appropriate and easy to use:

“Thanks for your calls, emails and sending through all the information... all the slides look great and the information is easy to understand.” (Professional)

The practitioners were also able to adapt the slide set to meet the needs of their children and young people, which some practitioners chose to do. The questions and slide sets are included as Appendix 4.

Research questions

The overarching question that was explored in this research was how has the pandemic impacted children and young people with SEND, and what are the key learnings from this experience that can help shape future policy and improve practice?

The questions asked explored the following areas (NB. these are the broad research questions – they aren't the actual questions that were in the focus groups or survey; those can be seen in Appendix 4)

- What do young people think the key impacts have been of the pandemic on young people with SEND?
- What do professionals who work with young people with SEND feel the impacts (positive and negative) of the pandemic have been on:
 - The young people they work with (academic impacts, wellbeing impacts and support impacts)?
 - Their ability to provide the support that is needed
- What types of support could help young people with SEND deal with and learn from their experience of the pandemic – to help mitigate some of the negative impacts and amplify the positive impacts?
 - What has been the impact in terms of communication?
 - Has the pandemic and the impacts of it been communicated clearly to young people and professionals
 - Do the professionals and young people feel there has been enough open dialogue / that the young people input has been given due weight
 - Do the professionals and young people feel there is a greater need for advocacy on behalf of young people and their families to ensure their needs are not forgotten or reduced.
- What can we learn from the pandemic experience that can help improve provision for young people with SEND after the pandemic ends?
 - What have been some unexpected benefits/changes of the pandemic experience?
 - What are things that young people/practitioners wish they had known at the start that they know now?

This report highlights the common themes that emerged from the online surveys and focus groups across all three groups of participants: young people, parents / carers and professionals. The voice and experience of young people is given more space as the least number of opportunities to be heard and whose perspectives are seldom taken into account. At the end of the report, we have gathered the recommendations together from across these themes to provide a clear set of actionable points that can be taken forward.

4.1 ABOUT THE DATA

We are aware that whilst the levels of engagement have been high, the views of these young people are by no means able to represent all young people with SEND in England.

All the questions were open questions on which we completed a thematic analysis, hand coding for themes that emerged using the principles and approach of Grounded Theory. The phrase ‘grounded theory’ refers to theory that is developed inductively from a body of data, rather than from the preconceptions of the researchers.

This enabled us to draw out the common issues amongst those who responded. To give an indication of roughly how many people expressed the same point we use some specific phrases to indicate the of popularity of a theme:

- “Many people” is used to describe a very popular theme that most people mentioned
- “Quite a lot of people” refers to a popular theme
- “Some people” is an indication that it was less than half but enough people that it is important to mention and finally,
- “A few people said” may just apply to a few people but it may be their experience is of particular significance or that they had an interesting idea.



Experiences and views of the pandemic

5.1 FAMILY AND FRIENDS: CHANGING RELATIONSHIPS AND SOCIAL CONTACT

For some young people lockdown provided a breather, a moment of respite from a busy, noisy school and a break from navigating tricky social dynamics. But for many more young people it meant they were isolated from their friends and unable to spend time in person with close family or best friends.

“I couldn’t celebrate my birthday with my friends for the first time ever. I haven’t been able to see any of my new friends out of school since we met at the start of year 7.” (Young Person)

Loss of social contact with friends and family

Unsurprisingly, the theme of missing family and friends came out as one of the primary challenges of the COVID period for children, young people and their parents and carers. Many young people talked about desperately missing their family and friends. For many young people, the family meals, holidays, visits to grandparents, playdates and activities with friends were the core activities where they felt joy, had fun and experienced laughter. This has been a common experience for most of the population, however for young people with SEND this can present particular difficulties. Many young people already struggled to navigate peer relationships and develop friendships. For some young people their relationships were doubly valuable because social interaction wasn’t the easiest for them. Practice and ongoing opportunities to hone their social skills were essential. Over the lockdown period many young people and parents reported not just missing their friends but also social withdrawal.

Parents and professionals observed a significant loss of confidence in the young people’s abilities to maintain friendships and social interaction. Quite a lot of young people and their families talked about how hard it was to develop social skills and form friendships online or with constantly shifting classes at school. For many young people this past year has set back their social development and shaken some friendship ties.

“I have been unable to remain in touch with many of my friends and have felt quite isolated and sad. There is only me and mum at home. My sister has never returned from university and I have missed her for the whole year. I have not seen some of my carers in the whole year or been able to join in with my youth groups.” (Young Person)

“Having to cope with being alone with only my mind being my comfort.” (Young Person)

“Some of the things that have been difficult for me is not being able to go out as much and not being able to hang out with my friends.” (Young Person)

“I’ve not seen family for over a year. I’ve not seen my friend for 5 months. I’ve found not being able to see friends and family really hard. I’ve been very upset about it all.” (Young Person)

“I’ve struggled to find opportunities to make any new friends, I need more prompting to leave the home, and I can’t feel included in the thrills of experience.” (Young Person)

“I’m missing my friends. Missing after school clubs. Missing grandparents.” (Young Person)

“Not being able to see friends, especially on birthdays. Not being able to play with people. Not being able to hug.” (Young Person)

For some young people not being able to see their friends left them with a sense of loneliness or isolation. Other young people talked about feeling low or depressed as a result. For many, and this is something that parents and professionals highlighted too, it could actually result in an ‘unlearning’ of social skills. A number of people (young and older) talked about increasing levels of social anxiety, difficulties building social connections and reading social dynamics.

“I have not been able to go to dance lessons, sea cadets or see my friends. I have felt very lonely. I forgot how to socialise.” (Young Person)

“We need help to know how to be with people and this is more important than learning classroom things.” (Young Person)

**“Lockdown school, I hated it, not seeing my aunty and family or friends. I need to be outside I hate being in the house.”
(Young Person)**

“Missed my cousins and other family. I love hugging and really missed it.” (Young Person)

“Loss of social life. Our son specifically needs to practise social interaction with others and had been making really good progress as he matured.” (Parent)

A few young people talked about enjoying the fact that there was less social interaction. This was normally because they found social interaction and navigating peer group dynamics hard work, overwhelming and tricky at the best of times. For some, their experience of their peers in school had been negative and marked by bullying. In these situations, being forced to stay at home removed a lot of those pressures.

**“I like that nowhere is busy and people I don’t know can’t be too close because I have social anxiety and trouble talking with others.”
(Young Person)**

Whilst reduced social contact suited some young people and allowed them to stay in their comfort zone, some parents did worry that this wasn’t always the most desirable thing, even if the young person reported it as a positive in the moment.

Deepening relationships with close family

One positive that quite a lot of young people talked about, was how they had grown to value time with family and had deepened their relationship with their parents. There was time to do everyday tasks together (cooking, gardening, watching TV) and these moments became valued by young people and parents.

“Being able to spend more time with my family at home, usually I don’t get to see them this much. It was strange at first but we get along a lot better now.” (Young Person)

“I have been able to spend more time with my older brother going cycling and walking the dog. I have learned how to play pool and darts (with my family). I have been allowed to stay up later at the weekends and get up later I have enjoyed the movie nights once a month, we hire a film and eat lots of treats.” (Young Person)

Extra time spent at home has helped our young person’s language improve greatly. He is diagnosed as ASD, LD, Non Verbal, with Significant Speech Sound Disorder with Features of Developmental Verbal Dyspraxia, however we have found that he is saying lots more since having lots of 1:1. We also think that this is because we have different expectations of him than his College. He is extremely eager to be a part of every conversation and if he cannot verbalise, he will sign (BSL, mostly Makaton) or write it down - either on paper or on an electronic device - mobile being the most favoured. He has demonstrated that he has a great singing voice and knows lots and lots of songs. He has also become more demonstrative physically, asking for hugs and loves more often. It has brought us a lot closer as a family. (Parent)

Young people also talked about how crucial these relationships were in helping them cope with the lockdown. Parents and siblings became teachers, entertainers and counsellors. Inevitably parents and young people alike reported that this could become very intense and for some children and young people this high dependency relationship also increased issues like separation anxiety.

For parents it could be stressful and exhausting. Without negating some of these challenges it is important to recognise that many young people and their families also valued this extra time together. It allowed them more unhurried space to enjoy activities as a family and share household activities such as gardening and cooking together.

Socialising online

For many young people being able to use technology to stay in touch with extended family and friends was really important.

**“The pandemic and lockdown have showed me how technology can be a useful tool to talk to family & friends if they are far away.”
(Young Person)**

Quite a lot of young people reported a sense of achievement for having mastered online means to communicate with family. For a few young people the shift to online meant that they actually communicated more often with extended family:

“Cooking with nana on Zoom - I’ve seen her more regularly than normal.” (Young Person)

Quite a lot of young people specifically talked about how important online gaming had become to them and their ability to maintain friendships.

**“Learned how to talk to friends online through video games.”
(Young Person)**

**“I have been able to talk to my friends and cousins every day using my mobile phone. I have joined in with family quizzes and Bingo once every 2 weeks with face timing on Zoom and I have also talked and played with my friends using my Nintendo Switch.”
(Young Person)**

**“Socially and emotionally, some have found that socialising online actually suits their needs better, and they can be themselves more online. Some have found it empowering to be able to join online gaming communities for example and feel included.”
(Professional)**

A few young people talked about how communicating online actually made it easier for them to talk to people as it cut out the pressure to read the non-verbal cues that they found challenging during face-to-face communication

“I have found it easier to talk to people online rather than in-person. Video meetings make it easier to not worry whether I am maintaining the appropriate amount of eye contact during conversations.” (Young Person)

**“I am now more social and in contact with friends which didn’t happen before. The pressure and stress of being out and about has been removed because I have been shielding at home.”
(Young Person)**

However, despite these positives of deepening relationships with immediate family and the advantage (for some young people) of not having to navigate tricky relationships face to face, most young people struggled to maintain friendships online and a priority for many is to resume face to face socialising with friends and family.

**“Let us be with our friends and do more fun things...”
(Young Person)**

The importance of pets

Not all of the relationships that helped sustain our young people during the lockdown came in human form. One of the key relationships that some young people talked about was that with their pets. Cats and dogs, guinea pigs, hamsters, horses, tortoises were all given a special mention by young people. They became young people's confidants and best friends.

“My pets - cats know when you are sad or unwell - stroking them relaxes me when am not in a good place.” (Young Person)

Young people identified that pets were good for stress relief and also great non-judgmental listeners. Many young people talked about how they would talk to their pets, where maybe they wouldn't be able to talk to other people. There was also a sense that pets would give them a sense of purpose.

“Having my guinea pigs to talk to.” (Young Person)

**“My hamster because he is my new friend and I just sit and talk to him sometimes instead of my friends.”
(Young Person)**

“My pets, dog and tortoises. They need me.” (Young Person)



5.2 FAMILY SUPPORT

Reduction in family support services

Many parents felt that whilst there had been allowances for children with SEND to return to schools and colleges, many other support services had not been accessible during this time. The loss of this support was felt even more acutely as the burden of schooling, 24-hour care and managing their children's mental health became concentrated in the home, with the parents.

**“The minimal support provided by the Council stopped overnight and apart from the beginning of lockdown last year when we had a welfare phone call, nothing since, now coming up to a year later.”
(Parent)**

“As parents of two children with SEN needs, we have been practically broken by the last year of not getting the help that we need.” (Parent)

This concern was mirrored by professionals working with families. One of the most frequently highlighted themes was concerns that families were no longer able to access the support that they had prior to the pandemic.

**“Reduction in support available and lack of school leaves families alone and unsupported and can't manage. Social care thresholds seem to have increased massively. Results include family breakdown.”
(Professional)**

“Lack of continuity of care - plans keep changing so intervention has to as well. Interventions such as surgical intervention not being carried out consistently which has a significant impact on the health and well-being of students.” (Professional)

“We have gone from supporting families multiple times a week to next to nothing. Routine is so important for a lot of the families we support, the impact of a child being with our provision, is also respite for the family. This has all changed and we have seen families really struggle.” (Professional)

From the professional perspective, many practitioners were very aware that the restrictions put in place for COVID-19 protection have had a significant impact on the way services have been delivered. Face to face support (unless children were in a class bubble and it was delivered by their teacher) have largely stopped. Some sessions and activities had moved online. Professionals talked about how they were unable to use many of the interactive, tactile learning resources they would normally have access to during online sessions – some felt that this made the sessions less engaging or accessible. Professionals also talked about the fact that they would normally build relationships with the young people through fun and informal activities

“We can’t do many of the activities that we would normally do to build trust and begin to enable young people to experience ‘joy’ and ‘fun’ and to have an Emotionally Available Adult to engage with.” (Professional)

Professionals talked about the impact of staff absence due to illness or needing to shield (especially teaching assistants in school).

Assessments have become more difficult and often delayed

The professionals who would normally rotate around schools (educational psychologists, speech and language therapists) have not been able to do so. Assessments have moved online where possible however quite a few professionals talked about how it was not possible to do these assessments online (may not be able to see the child or hear the child clearly). A few professionals highlighted that these difficulties in doing assessments had seen either EHCP’s being signed off without educational psychologist input or delays in assessments being undertaken. A number of practitioners reported waiting lists growing for assessments for Autism.

Poor planning and communication about the needs of children and young people with SEN and disabilities

Quite a few parents highlighted the lack of communication. They said that many announcements about education addressed a mainstream audience and made little reference to the needs of children with SEND, and that there was also often a gap in information targeted at children and young people with SEND. A few parents were not aware that they could send their children into school during the first lockdown. Others were discouraged by local authorities trying to keep the numbers of children learning in school low.

“It felt from the beginning of the pandemic that the linkup between government directives and SEND provision were really out of sync. Information sharing has been poor for SEND parents. Everything very much directed at the masses with info about SEND provision almost filtering down much later.” (Parent)

“No transition for my eldest son moving to secondary. Unable to be supported as it stated in his EHCP due to limitations caused from social distancing.” (Parent)

“I haven’t seen my usual respite carer for nearly a year, and my enabler for the whole of this lockdown.” (Parent)

“Very, very, stressed parents as we’ve had most of our support removed. Friends couldn’t help with our complex children, we didn’t have any family visit us to offer support, our Adoption Support Fund counselling ended, we were stuck at home for many months not realising our older son should be entitled to school.” (Parent)

It was a common theme across young people, parents and carers and professionals that there should be a greater acknowledgement of the needs of children living with SEN or disabilities in mainstream discourse and that this should be backed up with adequate funding to ensure that the support was there to meet these needs.

Online meetings with professionals

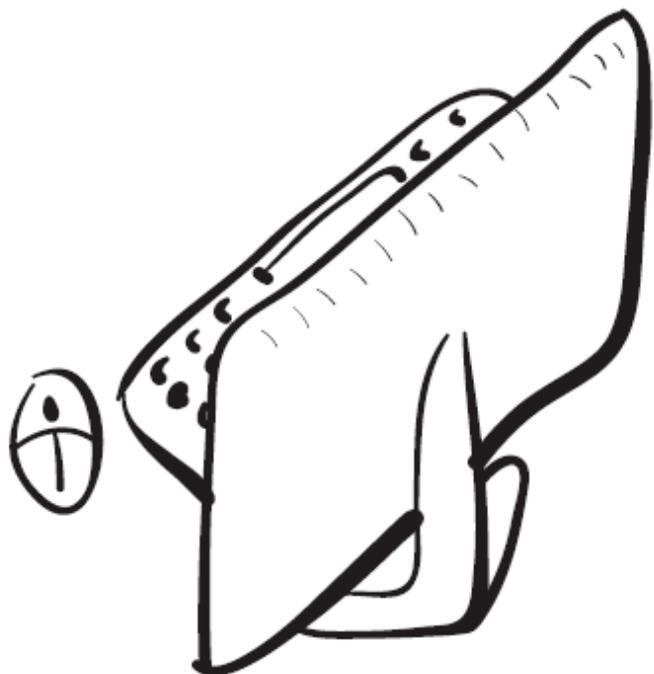
One development that seems to have worked well for quite a few people is the movement of some of the review meetings online. Whilst initial assessments online were tricky parents reported that having review or other meetings online had the benefits of:

- reduced travel costs,
- didn't have to worry about childcare
- travel anxiety wasn't a problem
- less intimidating
- they could be recorded and reviewed

Professionals also reported that it was easier to co-ordinate colleagues time and that online meetings had proved very convenient.

“I have had some of my young people participate in their PEP and EHCP meetings online which they would have usually not done had it been a face-to-face meeting - they have been able to turn their cameras off or mute themselves when they wanted to.” (Professional)

However, a number of young people, parents and professionals said that they preferred face to face as it felt easier to build relationships and communicate everything they wanted.



5.3 LEARNING ONLINE OR IN SCHOOL

“Online learning has been so hard. I don’t feel like I learn anything this way, I find it even harder to concentrate and understand what I’m being told.” (Young Person)

Home-schooling and online learning challenges

The experience of learning online during COVID-19 was, and still is really difficult for young people. For quite a lot of young people they found the amount of screen time overwhelming, they missed the teachers being on hand to assist them, schoolwork was difficult and screen time draining. Lessons were often not differentiated for children with SEND. Parents were at times also overwhelmed by having to pick up the job of teacher.

“Although online lessons have been provided, they have not always been successful. Teachers have not differentiated the work.” (Parent)

“Lots of the work the school set have meant I can’t complete or take part in due to my dyslexia even when mums asked for more work that I can do they didn’t send anything.” (Young Person)

“I usually get a lot of support at school from my teaching assistants, but I have not had this. My parents both work and don’t always have time to do my home schooling with me. I get very frustrated when I don’t understand something and then I have no help. It makes me really angry; I feel like I have been left.” (Young Person)

**“I don’t understand the online lessons, I find them difficult.”
(Young Person)**

**“It’s been hard to pay attention during meetings on Teams.”
(Young Person)**

Zoom sessions are triggering to them due to sensory needs and any group zooms were not tolerated. (Parent)

“Nothing has been good, because unable to see friends and go to college, my disability has taken a step back and I have really struggled.” (Young Person)

“The same work is set for all children for home-school without regard for their SEND.” (Parent)

“I found online learning difficult quite a lot because it was like the teachers were reading from a script. Not like it is when in class. So sometimes the teacher would go too fast and it wasn't always easy to get their attention to tell them that, then I would worry because I was falling behind.” (Young Person)

“I'm in higher sets and am expected to be able to manage at that level. I can't. I need help due to my physical and mental health needs in addition to my specific learning difficulties.” (Young Person)

Many parents talked about the difficulties of motivating their children to engage in online teaching, with it often becoming a bit of a battle ground. Young people have been experiencing ‘online fatigue’. They are tired of screens and yet have to use them for education, homework and to connect socially. Young people also talked about having to sit in the same place, working on the computer all day and night and getting bored of sitting in the same place doing the same things again. Some young people painted a really vivid picture of a type of “Groundhog Day”.

Access to IT equipment

Some young people and parents did not have laptops for young people to use online. Reported IT difficulties were with laptops not working, not having enough computers to work on and general WIFI difficulties. Obviously where IT was a barrier to work it was nearly impossible to have a positive online learning experience.

“A laptop that works, the one that my county sent me doesn’t turn on very easily and I can’t get on Microsoft.” (Young Person)

“This pandemic has highlighted the huge divide in technology available in the home. Some pupils had no devices for homework. Extra laptops did not arrive till Lockdown 3 for some pupils. Too much screen time is a disadvantage for some pupils - the constant flashing pixels for ADHD pupils is not healthy.” (Professional)

Many young people talked about how important having the right IT equipment, technical tools and WIFI was. This was one of the key things that they said had helped them through the lockdown. It wasn’t given the same priority by parents and professionals. When we think that young people’s phones, iPad, games consoles etc had to fulfil the role of classroom, connect them to their friends, provide entertainment etc it is easy to understand why children and young people placed a high priority on having the right tech.

Positives about online learning

There were a number of clear positives about the home learning experience as well. Young people felt good that they had learnt new tech and learning online from home did suit some young people. For some young people, home-schooling allowed them to work at their own pace, without the stress and sensory overload of school or the threat of bullying.

“I have been able to talk more during virtual meetings compared in-person ones partly because it’s easier to know who to look at during conversations: only looking at the current speaker in a Zoom meeting is easier than alternating my focus during in-person conversation.” (Young Person)

A more flexible schedule of home-schooling also allowed young people to take breaks to look after their physical health needs without the stigma or need to explain to others what they needed.

“When remote learning I been able to have break when my head had started to hurt and I would like this to carry on when I am back at college.” (Young Person)

“Not having to go to school as I need the toilet a lot & leaving the classroom is embarrassing.” (Young person)

“When I have a day when I am tired or not up to feeling like going out, it is ok as I can go online and turn off the camera and listen. That is not always easy face-to-face.” (Young Person)

“Because I’m online, they can’t see what I look like or what I have done. They can only judge me on my work. And they can only judge me based on the things that I say. It causes them to think about judging me as a person first before I open up about my disability.” (Young Person)

“I’ve enjoyed my independent work and I’ll probably struggle with the visual overload and noise going back to school.” (Young Person)

“As a parent being able to watch my son do an online activity each week where some kids are in school and some at home has been lovely. I understand the class dynamic much better.” (Parent)

“Don’t assume lockdown has been a negative experience for all children. My daughter has positively thrived away from the school environment. I really wish that home-schooling could continue, e.g., with children being able to do home-schooling a couple of days a week.” (Parent)

“None (negatives)...my child has asked if he can continue to be home-schooled after lockdown.” (Parent)

In-school lessons during lockdown

Those young people who were allowed to go to school faced a significantly different school experience. Many young people reported their time in school during the lockdown as positive. There were smaller classes, the whole school experience was quieter, there was more one to one time. Most young people saw this as a benefit.

**“All my lessons are in one room with less people, this is a quieter environment to work in - this is good for me. - Working in a smaller group means I get more support from teacher/assistant teacher.”
(Young Person)**

“(I like the...) one way systems, quieter, smaller groups, more teacher time.” (Young person)

“School is usually quieter. I don’t have to go to loud or noisy places.” (Young Person)

For some young people the frustration was not being able to attend school;

The college has refused to allow me to return due to the CEV letter given to adults with Down syndrome despite my desire to return and my mum providing a letter giving reasons why and a letter from the GP. I feel like I have no voice and no one is respecting my wishes. I have been unable to remain in touch with many of my friends and have felt quite isolated and sad. There is only me and mum at home. (Young person)

5.4 HOBBIES, INTERESTS, NATURE AND VOLUNTEERING

Missing out

The importance of extra-curricular activities for young people with SEND was another strong theme. Many young people talked about how not being able to attend clubs, do activities (especially horse riding and swimming) or take part in volunteering had really impacted them during the last year. They were disappointed, frustrated and missed many of these activities deeply. It was clear that not being able to engage in these activities impacted both their mental health and physical health.

Riding, swimming, sports clubs and social groups were all activities that help to underpin positive mental wellbeing so a big gap had been left for many young people. Parents and professionals also observed the knock-on impact of reduced physical activity for young people's fitness levels. It also meant that quite a few young people were not able to let off steam which in turn was leading to increased behavioural issues.

“It has been difficult not going to my badminton group.” (Young person)

There has been an impact on support outside of the home due to the restrictions. The closure of community facilities and activities has meant limitations to what support workers can do with a child. This means less fun time out in the community for the children and less engagement with their support workers.
(Professional)

“I don't go to park anymore with my friend because you can get COVID on the football. I'm not playing football again.”
(Young person)

“My dad hasn't been able to work and we haven't been on the park we just stay in all the time I don't get to see my friends. We just go to Morrison's that's it.” (Young Person)

A few older young people had part time jobs or volunteering opportunities that they had had to stop during the COVID-19 pandemic. For a number of them this was really sad. Conversely when we found a couple of young people who had been able to stay in touch with their volunteering opportunities during the lockdown this had really improved their sense of wellbeing.

Getting creative at home

For some young people the extra time at home with family had allowed for new hobbies or activities to emerge. Quite a lot of young people talked about doing more arts and crafts at home, helping family with household chores, cooking and gardening. This was something that young people positively valued.

“I like to draw a lot when I feel stressed (the drawings are usually fan art), I watch my favourite shows/cartoons (Steven universe etc).” (Young Person)

“My artwork has improved a lot.” (Young Person)

**“I like being outdoors. Before Covid-19 I never did anything in the garden, but I now spend more time outdoors.”
(Young person)**

“I have been baking a lot with my mum and have been making cheesecake which I have really enjoyed.” (Young Person)

Going out for walks and spending time in nature was inevitably mentioned a lot as it was one of the few activities young people could engage in. One parent who talked about the importance of parks and allotments was really aware that not all families would have access to this.

“The pandemic has highlighted the importance of green spaces for mental health. Some thought needs to go into community resources for SEN CYP who are living in accommodation with no outdoor space. Could support and funding be provided to local allotment associations to help with this?” (Parent)

“The sun because it makes you feel better. Walks to get out the house because I feel like a prisoner.” (Young Person)

“I loved it when the school took us to a nearby forest for an outdoor adventure day. It was such great fun! I would love to do more of that at school.” (Young Person)

5.5 CHILDREN AND YOUNG PEOPLE'S MENTAL AND PHYSICAL HEALTH

The sudden loss of routine, structure of school and access to clubs and friends has had a huge impact on the mental health and emotional wellbeing of children and young people with SEND and their families. It is a thread that runs through all the other themes identified as well. Mental health challenges and support needs was one of the most commonly raised themes throughout the experiences that were shared by children and young people, parents and carers

Feeling down, sad, lonely or angry

Quite a few young people talked about how the lockdown had affected their moods. Often, they talked about not being able to be with friends or do the hobbies that they enjoyed as being a key trigger for these feelings.

“I get angry more often.” (Young person)

“Made me feel lonely and alone. It was nice when I finally got back to school.” (Young Person)

**“I have felt very low and fed up because I can't see friends or do my motocross which I love. I have spent all my time in my room online because it's the only way I could chat to friends and have some fun. I have felt bored and unmotivated and switched off from learning because all the things I enjoyed weren't allowed.”
(Young Person)**

**“Being away from school has made me even sadder and I don't like feeling like it, now when I eat I feel sick so I don't eat.”
(Young Person)**

**“My son has started self-harming, we've started noticing him getting stressed and angry, before he never really displayed anger, his anger is normally towards himself.”
(Parent)**

Loss of routine and structure, increase in anxiety and behavioural issues

Many people told us that the loss of routine and structure and increased anxiety for young people often created instability in other areas of the children's lives, like sleep or eating patterns. Overall, this combined to trigger an increase in behavioural issues in the home. Parents and professionals in particular talked about some of these challenges:

“My routine being taken away, and the guidance hasn't been clear so I have been confused on what is ok to do and what isn't.”

(Young person)

“Without consistent daily activity my son's behaviour has worsened. He has begun to sabotage efforts to help him by urinating on the floor when he is told off, throwing toys and hiding them then shouting / crying / screaming for them until they are returned and deliberately attack his younger and older sisters.”

(Parent)

“My son cannot cope without a consistent, rigid routine; he becomes very agitated and upset. At the beginning of the first lockdown, he was having 6 or 7 meltdowns every day, lasting up to 90 minutes each.” (Parent)

“He also has flashes of anger and will hit his mouth in temper, again, he does not seem to be able to understand why this is. Occasionally he will sign and write his emotions down. One day he wrote and drew faces for 'Sad', 'Happy', 'Angry' and 'Crying'. It made us all cry!” (Parent)

“Children are reverting to behaviours which have illustrated their anxiety, anger, fear etc e.g. becoming non-verbal, using animal noises or other sounds to communicate their needs.”

(Professional)

“He has become insular, negative and scared and worried. His conversational ability is usually pretty good, but we have been reduced to rubbish as he has nothing to tell us. He desperately misses his friends.” (Parent)

Increase in anxiety triggered by COVID-19

Children and young people were (and are) listening to the news. They have been picking up on adult anxieties. For many children and young people there is still confusion about the messaging on COVID-19. For example, some children wondered why, when people were told to stay home, people were saying it was safe for them to go to school. Some young people were aware of their extra vulnerability or the vulnerability of loved ones. A few young people were bereaved during the COVID period. Some young people are still confused about transmission and have been desperately scared about more vulnerable relatives catching it.

“He is afraid to go out now, unless he is with both of us and generally in the car. His College has remained open throughout and he attended until he had to isolate due to a M.O.S, contracting COVID. Since then, he has refused to return, getting very upset even at the suggestion.”

(Parent)

“Anxiety for some pupils has been overwhelming especially during this last lockdown when the media led by the Government have told the public that they must stay in or they might infect someone who will then die compared to the ‘you are special and/or vulnerable and must go to school.’” (Professional)

“We never get to go to the places where we go to before because the virus is all spreading around so we have to keep away from it. We don’t even get to hug our friends.”

(Young person)



Understandably all of this has fuelled higher rates of anxiety. Young people reported being reluctant to leave the house and have decided to withdraw from re-joining these extra curriculum activities

“The pressure on my carers as they are older carers, Covid could kill them.” (Young Person)

“Mum working in the supermarket has been a little scary, and because initially I was classed as just vulnerable and not extremely vulnerable my mum was unable to take time off work to shield with me. I felt bad for her because people thought she was overreacting, but her reality was that she was terrified of catching Covid and bringing it home to me. I heard her on the phone telling someone that if she did catch it and bring it home, I could die. That was a bit scary.” (Young Person)

“The government should take more care about Corona virus and think about it because my mum says it will stay around forever. I am worried about that because it could evolve to kill kids as well more often.” (Young Person)

Social anxiety and clinginess

Some young people who have not been at school much since the pandemic began have really lost confidence in their social skills. The idea of returning to bigger groups of children and or complex friendship dynamics is quite scary and daunting.

“His self-esteem has gone lower than before, his social anxiety has got worse and he won’t go anywhere that there’s too many people, he has not socialised at all online or outside.” (Parent)

“Being cut off from social interaction with all other children during last year’s lockdown and then again this year, has resulted in my son being ostracised by all other children in his class when he has tried to return to school. He finds it difficult to contemplate returning to school and his class and has anxiety over both, several times a day.” (Parent)

“I was calmer and more relaxed during lockdown as I didn’t have to go anywhere. My parents think I am less able to socialise now though and are encouraging me to gradually do more stuff outside my room. They think I am less able to cope with the outside world now and it will take a while for me to be willing to go out. That’s why it was good that I went back to school as I feel safe there. My parents think my mental health was worse during the pandemic but I think I am OK.” (Young Person)

Improvements in mental health and wellbeing

The experience of lockdown was not universally negative for young people’s mental health and wellbeing. One of the key positive experiences that some young people reported from the lockdown experience was that they had more time to rest, sleep and process information. Not having to get up early for long journeys to school or work was appreciated by a number of young people. It highlighted for some just how busy their lives had been previously and that this had often taken a lot out of them both physically and mentally. Young people appreciated not feeling so tired and physically drained from long days at school and travel.

**“I have been sleeping better during lockdown- because it’s been quieter and there is nothing to stress about in the morning.”
(Young Person)**

“Just lying in bed’- A bigger lie in- has allowed me to have more rest. Feel better and rested.” (Young Person)

“I’m not forced to do things I don’t want to do – going to school, going shopping, meeting people.” (Young Person)

Being in the home or a less crowded school environment also reduced the opportunity for sensory overload. Some young people told us this as a positive change that they would like to keep. A number of young people felt that this slower pace and extra time afforded them more time to reflect on things.

“I have enjoyed having more time to reflect on my behaviour, beliefs and thought systems. I have had the time to re-evaluate if the people in my life are causing me more good than bad.”

(Young Person)

A final factor that some young people raised as having a positive impact on their mental health was the fact that when they were not at school they were not being bullied. It emphasised the sad fact that bullying is still far too common an experience for young people with SEND.

Physical health and experience of health services

Exercise, sleep and good diet are the basic foundations of our health, both physical and mental. One of the consequences of change in routine and reduction of young people’s access to sports clubs and recreational activities has been a reduction in fitness levels. A number of parents and professionals raised concerns about this.

“He found the colder months difficult as he is a very physical child. We struggled because we couldn’t find anywhere for him to run off energy” (Parent)

“He has become withdrawn and physically unfit due to the severity of his injuries from the accident and has been unable to go outside for physical exercise or to have hydrotherapy for his injuries due to lockdown.” (Parent)

“My son’s weight has increased as I am not able to keep him on a diet due to his aggressive behaviour.” (Parent)

“She is struggling to lose weight (she is already obese) because she is a very sedentary person and obviously is not getting any exercise by just sitting around all day.” (Parent)

Another consequence of covid restrictions was that older young people with health conditions who required ongoing treatment found themselves attending appointments alone. A young person who attended treatment for cancer during the lockdown talked about the impact of this and reduced access to services:

“I had to endure radiotherapy treatment every day for 5 weeks on my own with no one able to accompany me to the hospital...I haven’t been able to receive the support I desperately need to discuss the thoughts in my head regarding low self-esteem, returning to work post cancer treatment and fears and anxiety of reoccurrence. Similarly, the lack of contact with my oncologist and health support team at the hospital due to reducing the amount of people visiting the hospital, I have felt very isolated and alone whilst trying to recover.” (Young Person)

The movement of health care appointments online also met with a mixed reception. Some young people and parents much preferred appointments to be online as it saved time, travel, car parking costs at hospital and some young people felt they could be more relaxed at home. Others were not confident in online appointments for physical health care. Feedback suggests that routine check-ups and reviews were easier to do online than initial assessments. Again, the clear message was that in an ideal world young people would have a choice about whether these meetings were online or in person.

“I had my medical online which was much better because I was not nervous and I was able to answer the questions because I was relaxed (annual medical for young people with learning disability).” (Young Person)



5.6 PROFESSIONALS UNDER PRESSURE AND PARENTAL MENTAL HEALTH

Parents' emotional health

Parents and carers became the front line of education, social and health care during the pandemic. The normal opportunities for respite (while children were at school or through formal respite arrangements) were not available. Combined with the additional pressures of trying to home-school, support young people's mental health and manage more challenging behaviour it has become a bit of a perfect storm. For some families this tipped them into crises. A theme from quite a few of the parents is the toll that this has taken on their own mental health and wellbeing.

**“Emotionally it has been ridiculously hard. I can’t write it in this box.”
(Parent)**

“As most of my respite/childcare and social life disappeared I felt more stressed and tired.” (Parent)

“His routine is heavily disrupted and this has impacted on behaviour and sleep habits causing severe distress in the household. I average 4 hours of sleep each night and am not coping.” (Parent)

“Mine and my husband’s mental health as well as my physical health have deteriorated massively.” (Parent)

**“Our adopted son’s behaviour progressively got worse and he started hitting, throwing toys to break them and screaming for hours on end. As parents, we nearly had a breakdown.”
(Parent)**

“Our son has a need for reassurance, help to focus and to work through his thoughts and feelings that have become much more intense in the last year. He understandably seeks much more reassurance from his parents than from school staff. We usually have a break when he’s at school, but we’ve had no breaks during home-schooling.” (Parent)

These pressures have also come at a time when families have often found themselves with reduced access to support from professionals generally.

Professionals under pressure

Quite a few of the professional responses highlighted that this has been a time of increased workload and stress for those supporting families as well. Responses highlighted that they were very aware of the challenges that many of the families were under and carried a level of anxiety around about the families that they were working with.

Some professionals highlighted the challenges of doing this type of work remotely from home, where there was not the informal support to check and talk through your approach to supporting a family. Some staff reported feeling isolated and stressed and talked about the impact that had on their mental health.

“The workload has been immense: preparation and planning for the children at home and at school simultaneously; providing additional resources for children who need adaptations, etc at home.”

(Professional)

“Sometimes I struggle with mental health due to living alone and not being able to talk about my day with anyone at home.”

(Professional)

“Working under pressure to think outside of the box to ensure families are provided with some form of support to help prevent them going into crisis in some cases supporting these children with additional needs myself as well as managing a case load of 30 cases. - Feeling rather isolated at times working from home and not having close contact with colleagues to discuss and bounce ideas between each other to help find solutions and signposting of ideas to the children and families.” **(Professional)**

Another theme that emerged was the anxiety that staff carried about contracting COVID and bringing it home to their families or passing it onto students

**“Worry that I would catch Covid and pass it on to learners or family or pass it on to my family. Worrying about my youngest son who had Covid while I was working I worried could not be with him.”
(Professional)**

“I have had constant worries. We kept being told that it is a case of ‘when’ a person in school gets covid, not ‘if’. I worry about who it will be and the impact that it will have on them. I have needed to take some time off with illness and I worry about going over the threshold into statutory sick pay. I cannot pay my mortgage on sick pay. Having to lose pay, and possibly my house because somebody else has got the virus... or if a member of my family is sick... feels very wrong and worries me all the time. All of these worries do not help my mental health.” (Professional)



Recommendations

6.1 PRIORITISE EMOTIONAL, SOCIAL AND MENTAL HEALTH RECOVERY

This was the strongest recommendation that emerged from the consultation. Young people, parents and professionals all talked about how important it was as society begins to open up and schools get back into a routine to ensure that the priority is the emotional, social and mental health of children and young people. Many people said that they did not want pressure to be on academic catch up at the expense of young people's mental health. For the many young people who had found the COVID-19 period isolating, stressful and lonely, the focus should be on re-engagement socially, getting used to being back in a routine, gaining confidence in peer relationships and having fun.

“Please don't make us have extra school to catch up with what we've missed. School is stressful enough without having to be there even longer. Normal school is exhausting for me as it is.”

(Young Person)

“The priority should be on social re-engagement and mental health rather than 'catching-up'. So much of this academic year has been lost, catching-up is an impossible ideal for all kids, let alone those with SEND.” (Parent)

Many people suggested a key mechanism to do this was restarting extra-curricular activities. Activities that helped young people socialise - like youth clubs for young people on the autistic spectrum or day trips - were repeatedly mentioned. Also highlighted were sports and outdoor activities. Young people have been desperately missing swimming, riding, and other hobbies that have stopped with the restrictions. Parents and professionals highlighted the need for activities that would help young people be physically active, regain fitness levels and burn off energy

“Activity-based Youth clubs to rebuild kid's social skills and get them out of the house, interacting with their peers and non-family adults. Outward bound type groups to build on the walking they have been doing and connect to the natural world. Help them reflect on how they felt during lockdown and what an achievement it is to get through.” (Parent)

“Having activity groups targeted at Aspies; these can activity-focused (drama, art, etc.) and/or just about general socialisation - either or. Talking to fellow Aspies improved my socialisation skills greatly and makes it easier to engage with neurotypical people.”
(Young Person)

“Can the COVID stories be after watershed so when I am having tea I am not having to watch the stories as it makes me feel anxious.”
(Young person)

Mental health services and support was another key tool to help healing for young people who had found this period really difficult. Suggestions were made that this support should go beyond existing CAMHs provision so that more young people can access it. Ideas included sessions within the curriculum that support young people’s mental health and also helped them process, understand and make sense of the experience of COVID.

Suggestions included:

- Open and / or restart youth clubs (including specific social clubs for neuro-diverse young people) and extra curriculum activities.
- Open and / or restart sports and physical outdoor activities that are fun and also help children regain fitness levels.
- Increase access and provision of mental health services including bereavement support and support for children and young people who have increased anxiety about COVID-19.
- Ensure that support for mental health support is not just restricted to school nurse or CAMHs. A wider community and school-based offer should be provided (but also it should not be expected that teachers do this as an add on).
- Create a recovery ‘curriculum’ which prioritises social and fun activities and mental health support as children return to school.
- Make sure there is time for fun, friendship and letting off steam - do not extend school days or eat into young people’s free / social time for additional academic catch up classes
- Recognise the value of downtime / family time that the lockdown afforded and retain more opportunities for this (not returning to the pre-covid ‘busy’ levels that many young people reported as overwhelming on the senses and stressful).
- Consider limiting anxiety provoking news stories on TV until after watershed.
- Recognise the role and importance of ‘therapy’ pets both in school settings and at home – where appropriate could encourage families to have a pet and perhaps even have a small fund available to support them in doing so if needed.

6.2 KEEPING THE THINGS THAT WORKED WELL

Young people's experience of education was very varied during lockdown – some young people thrived at home, many more struggled and experienced setbacks educationally as well as emotionally.

“I think we should have a medium between online and in person school, perhaps (for example) every Tuesday we are online, then Wednesday we come in person to school.”

(Young Person)

“It has been good that those people who are more vulnerable are able to stay at home and still take part meaning they are safe. The chat box in Zoom has been an excellent way for some to communicate during online sessions.”

(Young Person)

“I'm getting more support in school because they aren't as busy as usual with there being less people in school this is help with both work and my mental health.” (Young Person)

Recognising this diversity and that there is no 'one size fits all' for children and young people in education and recognising that in the offer that is provided to children and young people would be a valuable development.

Suggestions:

- Prioritise routine and structure for young people.
- Focus on return to school, not catch up.
- Retain small class sizes.
- Additional one to one support where needed.
- Create a recovery curriculum – greater flexibility and more focus on emotional and social learning.
- Explore blended learning or option of elements of continued online learning for children who can't be in school or who have thrived in the home environment.
- Support children and young people to participate in their annual reviews and PEPs online
Provide more training for school staff and teachers about supporting children and young people with SEND.
- Ensure children and young people have the correct technology and access to Wi-Fi to be able to access school from home where needed.
- Create the school systems and environment where school staff and teachers can implement the things they learn in trainings to support children and young people with SEND.



6.3 PRIORITISE FAMILY SUPPORT

The impact of school closures, home schooling and its knock-on effects for behaviour, mental health and stress were felt throughout the families. It is not only the children who need support as we emerge from the COVID pandemic. Many of the services that would normally help families during this time have not been able to provide the same levels of support. Some families have said that they feel they are at breaking point. Professionals highlighted the need for safeguarding and crises support for families who have reached crises over the last 12 months.

Parents and young people expressed different preferences for receiving support online or in person. For some families there were also some benefits to having meetings about ECHP's or healthcare appointments online. Other parents and young people expressed a preference for face-to-face meetings. Initial assessments were particularly challenging online.

**“Having Free School Meals (FSM) was really helpful and over half term.”
(Young person)**

“Meeting with important people on chat instead of in person as this makes me anxious but when I see them on the screen it’s not as bad.” (Young Person)

“Annual Review was online – it was more convenient for my mum, not having to travel. BUT I would probably prefer for some of them to be in person in future.” (Young Person)

The toll that the pandemic has taken on those who have worked through providing support to families also has to be acknowledged with appropriate support in place for practitioners where needed.

Suggestions:

- Prioritise respite care and short breaks
- Mental health support for families and professionals
- Give options for meetings with professionals like ECHP reviews and appointments with healthcare professionals to be held online
- Continue free school meals during the school holidays
- Increase and ringfence funding for SEND support services

6.4 RETURN TO SCHOOL SAFELY

Understandably, concerns about how to resume school and extra curriculum activities safely were highlighted by some young people and parents. Concerns included not finding it easy to understand the rules, worries that people were not sticking to it and general fear about contamination. There were some clear priorities expressed around ensuring that young people with SEND and those working with them had priority access to vaccinations, information was accessible and that the rules didn't keep changing.

“Please make sure that young people with SEND are prioritised first when our age group are inline to be vaccinated.”
(Young person)

“It’s hard to understand some of the things Boris does say I get very confused with the big words.” (Young person)

“It would be good to have a clear plan of what’s going to happen when we come out of lockdown.” (Young Person)

Recommendations from young people, parents and professionals about how to manage and communicate a safe return to school included:

- Clear (and consistent) guidance and messaging about COVID safety for families including accessible information for children and young people.
- Vaccinations for staff working with SEND young people.
- Develop plans for Educational psychologists and Speech and language therapists to return to school and face to face visits safely.
- Minimise chopping and changing rules as much as possible.

6.5 A NOTE ON FUNDING

Some of these recommendations require funding. Many people (young people, parents and professionals) highlighted the need for adequate funding for support services for SEND young people and felt strongly that services were not currently adequately funded. There was a recognition that budgets were tight across education, health, social care and the voluntary/ community sector. A few people expressed that in order for these services to be provided effectively, funding would need to be restricted to SEND services so that it didn't get diverted to other areas.

Conclusion

“(I would like to see...) a kinder environment that puts the different needs of all children (SEND and non-SEND) first. A less punitive system with real multi-disciplinary support for parents.”
(Parent)

The experiences that children, young people, parents and carers have highlighted through this report clearly communicates the difficulties, pain, anxiety and stress of the last year. For many families it has been an incredibly challenging period and a perfect storm of behavioural triggers whilst many of the normal coping strategies available to young people and their families have been reduced or completely unavailable.

However, in the stories about what has helped people get through this period there is a glimpse of a possible future where there is a bit more time to relax, consolidate, be flexible, take time with loved ones and explore interests. Where young people can be in learning environments with smaller class sizes, less sensory overload, more one to one support or the option to engage online when that suits an individual young person. We can begin to see and explore possibilities for an alternative vision where we have learnt the lessons from this experience and commit to keeping those elements that can work better for children and young people with SEND.

Young people, parents, carers and professionals have all recognised that for this to happen there needs to be a recognition of both the importance and value of supporting our children and young people with SEND. It will also take adequate funding, political vision and will.

APPENDIX 1:

PARTICIPATING SCHOOLS, COLLEGES AND YOUTH ORGANISATIONS

Schools and colleges that supported students to take part

- Acorn School
- Aspire Academy
- Beacon School, Exmouth
- Bearwood Primary
- Bede College Sunderland
- Benton Dene School
- BHASVIC
- Bidwell Brook
- Bournemouth & Poole College
- Bridestowe Primary School
- Castledon College
- Churchill Special School
- City College
- Clay Hill School
- Clyst Hydon Primary school
- Coventry City College
- Coventry College - Henley Campus
- Crownhills Community College
- Cullompton Community College
- Dover Christ Church Accademy
- East Sussex College (Lewes)
- ECC
- Ellen Tinkham College
- Ellen Tinkham School
- Exbourne C of E Primary School
- Exmouth Community College
- Farringdon and Bede Campus
- Fullwood Primary School
- Furrowfield
- Grateley House School
- Hayes Primary School
- Henley College Coventry
- Hill Park
- Holsworthy Community College
- Hurstmere School
- Judgemeadow Community College and Leicester College
- KHQ School
- Kirklees College
- Magdalen Court School Exeter
- Manor High School
- North Tawton Community Primary School
- Oaklodge Specialist Arts College
- Okehampton college
- On Track Education
- Our Lady's Catholic Primary School
- RNC
- Rushey Mead Academy
- Saint Paul's Catholic School
- South Tawton Primary School
- Sparsholt College
- St Austell
- St Luke's C of E School Exeter
- Stoke Park School
- Stokes Wood Primary
- Sunderland College
- Tavistock College
- Team Domenica
- The Greater Horseshoe School
- The Royal National College for the Blind (RNC)
- Willand Primary School
- Woodfield Secondary School
- Woodlawn School
- Wynstream

APPENDIX 1:

PARTICIPATING SCHOOLS, COLLEGES AND YOUTH ORGANISATIONS (CONTINUED)

Organisations that hosted Focus Groups (led by local practitioners or Kaizen)

NB In each case, as well as giving us the feedback from the young people, the practitioners also gave us feedback on the process of how they involved their yp in the consultation and how it was for the young people to participate as well as any learning for the professionals.

- Advocacy for All
- Amaze Sussex
- Aspen 2 at Dover Christ Church Academy
- Big Mouth Forum, Disabled Children Service, Leicester City Council
- Blackburn & Darwen Council
- CLIC Sargent
- Coventry City Council
- Credo Care Disability Fostering
- Devon County Council Champions for Change
- Disability Positive
- Essex County Council – SEND Strategy and Innovation
- Face Front Inclusive Theatre which runs DDM youth theatre group.
- FLARE / Council for Disabled Children
- Fred Nicholson Complex Needs School
- Future Me Gloucestershire, Gloucestershire County Council
- Greater Manchester Youth Network
- Hull City Council
- icandance
- InterAct
- KIDS
- Larchwood Youth Group
- Leicester city Social emotional mental health SEMH Team
- Lydford Primary School
- Marches Family Network
- SEMH Leicester city council, (Caldecote Primary School)
- Space PSM
- St Anne’s School and Sixth Form College
- St Rose’s School
- Stockport Action Youth Speakers (SAYS) supported by Seashell Trust.
- Stoke Park School
- Me2Club
- Nobody’s perfect SEN youth group. Bexley Targeted Youth Service.
- North Tyneside SEND Youth Forum
- Northumberland IASS
- Rochdale Youth Service
- Scarf
- Seashell Trust
- The Hive College
- Thomas Pocklington Trust
- Transition Health Outreach Service, Hackney Ark.
- Unique Youth / Wandsworth Council
- Vision Ambassadors, Vision Support Team, Leicester City Council
- Woodfield School, HLS
- Wirral’s SEND Youth Voice Group, Wirral Council
- Y Services for Young People
- Yellow Submarine
- YMCA The Chatterbox Project
- Young People Cornwall
- Youth Voices West Sussex

APPENDIX 1:

PARTICIPATING SCHOOLS, COLLEGES AND YOUTH ORGANISATIONS (CONTINUED)

Professionals who gave their own views in the consultation through the online survey were from the following organisations

- 3 Hares Schools - Dartmoor Multi Academy Trust
- Acorn School
- Aspire Academy
- BabcockLDP
- Bardwell Branch-Out
- Barnardos and Somerset Rape and Sexual Abuse Service
- Berry Pomeroy Parochial CE Primary School
- Cambian Group
- Care4children
- CareTech
- Grateley House School - Stratford Lodge
- Child Family Health Devon
- Christ the Saviour Church of England Primary School
- Clyst St Mary
- Cornwood Primary School
- Credo Care Disability Fostering
- Crown Hills College
- Culm Valley Federation
- Dartmoor Multi Academy Trust
- Devon Primary school
- Devon ROVIC Service
- Devon SpLD (Dyslexia) Service
- Disability Positive
- Disabled Children's service Leicester City Council
- First Federation Trust
- Flexicare (Oxford and Abingdon)
- Grateley House School
- Haytor View Community Primary
- HHS
- Holsworthy Community College
- Horrabridge Primary and Nursery School
- Kids
- Kingsley School
- Kingswear Primary School
- Lady Margaret Primary School
- Langtree Community School
- Leicester City Council
- St Thomas More Vol Academy
- Mainstream federated infant and Junior School
- Marriott Primary School
- Okehampton College
- Okehampton Primary School
- On Track Education
- Oxfordshire County Council
- OxSwift Community Transport, part of OXNAV Oxfordshire Neighbourhoods & Villages Trust
- Pegasus
- Phoenix Learning and Care
- Royal National College for the Blind
- Sparkenhoe Community Primary School
- St Andrew's Primary Academy
- St Martin's C of E Primary and Nursery School
- St Wilfrid's School
- St. David's C of E Primary School
- St. Helen's Primary School Abbotsham Bideford
- St. Raphael's School

- Stokes Wood Primary School
- Sunderland College
- The Pace Centre
- WAVE
- West Sussex County Council

- Willand School
- Woodfield School Coventry
- Wynstream School
- Y Services for Young People



APPENDIX 2:

TYPES OF SPECIAL EDUCATION NEED OR DISABILITY YOUNG PEOPLE SELF-IDENTIFIED AS HAVING

- Language developmental delay
- Down Syndrome
- Autistic Spectrum Disorder (ASD)
- Attention deficit hyperactivity disorder (ADHD)
- Global Developmental Delay
- Hypermobility
- Hypomobility
- Dyslexia
- Slow processing
- Major anxiety
- Brain tumour
- Developmental Language Disorder (DLD)
- Moderate learning difficulties
- Depression
- Suicidal ideation
- Anxiety
- Panic disorder
- Auditory processing disorder
- Visual stress
- Slow processing speed
- Visual Impairment
- Delayed learning
- Low muscle tone and hyper extension in hands
- Sensory Processing Disorder (SPD)
- Inflammatory Bowel Disease
- Obsessive-compulsive disorder (OCD)
- Asthma
- Diabetes
- Developmental coordination disorder
- Autism (Asperger)
- Ehlers Danlos Syndrome
- Short term memory issues
- Oppositional defiant disorder (ODD)
- Foetal Valproate Spectrum Disorder
- Heart condition
- Post-traumatic Stress Disorder (PTSD)
- Tourette's Syndrome
- DiGeorge Syndrome
- Tetralogy of Fallot
- Irlen's syndrome
- Pathological Demand Avoidance (PDA)
- Epilepsy
- Dyspraxia
- Behcet's disease
- SEMH needs
- Aicardi-Goutières syndrome (AGS)
- Ataxic cerebral Palsy
- Dysarthria
- Cerebellar Hypoplasia
- Cognitive affective syndrome
- Semantic Pragmatic Disorder

APPENDIX 3:

WHERE THE YOUNG PEOPLE WHO PARTICIPATED IN THE CONSULTATION WERE LOCATED

- Ashbrooke Sunderland
- Bere Alston, Devon
- Birmingham
- Brighton
- Bromley
- Cardiff
- Christchurch, Dorset
- Cornwall
- Coventry
- Croydon
- Dawlish, Devon
- Dorset
- Dover
- East Sussex
- Essex
- Exmouth, Devon
- Gateshead
- Hampshire
- Hayes
- Herefordshire
- Holsworthy
- Houghton
- Huddersfield
- Hull
- Ilford, Essex
- Kent
- Leicester
- London
- New Milton, Hamps
- Newcastle Upon Tyne
- North Devon
- North Tyneside
- Okehampton
- Oxfordshire
- Paignton Devon
- Peacehaven
- Percy Main
- Plymouth
- Princetown
- South Brent, Devon
- Sunderland
- Surrey
- Sway, Lymington
- Tavistock, Devon
- Wallsend
- Washington
- Welling
- West Sussex
- Whitburn
- Wickford
- Willand, Devon
- Winchester
- Winnersh
- Wirral
- Wood End

FAQs about the National Children's Bureau Consultation for Children and Young people with SEND about the impact of the pandemic

Purpose of the consultation

- The pandemic has brought unprecedented challenges to all children and young people (CYP), and even more so for children and young people with SEND and so it is important to understand from them what additional support they will need to help them to recover from the impact of lockdown.
- The Council for Disabled Children (CDC) wants to ensure that as many young voices as possible are given the opportunity to share their experiences of how lockdown has impacted them, in particular in relation to their support network, academic goals, and social and emotional wellbeing.
- There have also been unexpected benefits from the lockdown and understanding what new ways of working have worked well and could be continued can help drive improvement in the sector and better provision for CYP.

Who will be taking part in the consultation?

- We will be hearing from children and young people with SEND, aged between 5-25 from across England
- The CYP will be from a wide geographical and socio-economic range and will reflect the pan-disability focus of CDC
- CYP with SEND are involved in the research design
- Youth professionals with CYP with SEND are also involved in the co-design and in giving their input on the impact of the lockdown on the CYP they work with
- Parents will also be able to give their feedback in an online survey

What happens to the findings from the consultation?

Everything the CYP say is anonymous and the findings from the consultation will be given to the Department of Education (DfE) and all the organisations that take part in the consultation to contribute to the national pandemic recovery discussion about children and young people with SEND.

There will also be a shorter and accessible report that will go to all organisations and CYP, that have taken part in the consultation.

What's the timescale?

The consultation is taking place between February 15th - March 8th.

How will the children and young people take part?

There are a range of ways that CYP, parents and practitioners can share their views:

- Focus Group workshops (virtual) with CYP, facilitated by Kaizen
- Focus Group and individual discussions facilitated by practitioners in their organisation
- Online survey for CYP to complete themselves with support as needed from practitioners/parents
- Online survey for practitioners and parents

APPENDIX 4:



Is there a set of questions that the CYP will be answering?

Yes. The overarching question that is being explored is how has the pandemic impacted CYP with SEND, and what are the key learnings from this experience that can help shape future policy and improve practice.

A focus group question set is attached and below is the online link:

https://www.surveymonkey.com/r/NCB_CYP

They explore the following 3 broad questions:

- What types of impacts (positive and negative) have CYP experienced on their academic studies, and has it had them alter their aspirations?
 - What types of impact has it had on their emotional wellbeing – what things have been particularly challenging to mental well-being and what things have been supportive or beneficial
 - How has it impacted on the support they receive from family/friends/statutory providers and what types of support are most helpful
-
- Some organisations are speaking with their children and young people individually, some in groups.
 - There are 8 questions that can be asked and answered in whatever way is best given the needs of the children and young people.
 - As well as the questions, we've included 2 possible sets of slides for you to choose which version is most appropriate for your group and to use as a visual aid resource if you want whilst you have the conversations (feel free to adapt these if you want).
 - Can you record the information onto the Focus Group question set template and then email to ncbconsultation@kaizen.org.uk within 3 days of your session?

How can all CYP be included?

- We realise that every child and young person is an individual and that these questions will be more of a direct fit for some than others. They are here as a guide and those supporting the CYP in answering them can adapt them in whatever way is best for the CYP which can include answering all or some of the questions and through words or any other means, such as through Makaton signing, talking mats, art etc
- It would be great to have drawings or any other visuals the cyp might want to include as part of the consultation.

How do the CYP give their consent?

- As part of the process at the beginning of the conversation when the practitioner is explaining about the consultation, they'll ask permission to feedback what the CYP say and will remind the CYP that everything is anonymous and there will be no recordings or photos.
- The cyp would raise their hands to give this permission, either actually or the online raising hand or whatever way is appropriate for the individual cyp and the practitioner will record that they asked for and got consent.

APPENDIX 4:



Who do we contact if we have questions?

Anju Virdee is coordinating this project, please contact her at anju@kaizen.org.uk or 07306 365425 with any questions you may have.

How and when do we get you the feedback from the cyp?

We need all consultation feedback in by **March 8th** at the latest and you would either complete it online or email it to ncbconsultation@kaizen.org.uk.

Where possible, please can you get us the feedback sooner than March 8th, ideally within 3 days of your session, as that will support us in being able to process all the information.

Can I also give my thoughts about the impact of the pandemic on the CYP?

Yes, definitely – there's been a lot of interest from youth professionals to give their feedback about the impact of the pandemic on the children and young people that they work with. We'd love to hear your thoughts – below is the link so you can complete the questionnaire:

https://www.surveymonkey.com/r/NCB_PP

Thank you so much for making it possible for the children and young people that you work with to have their voice heard as part of this consultation.

NCB Consultation Question set for children and young people with SEND about the impact of the pandemic on them

Aims of the consultation

To hear from children and young people what they think the key impacts have been of the pandemic on them and what can be learned from that:

- What types of impacts (positive and negative) have CYP experienced on their academic studies, and has it had them alter their aspirations?
- What types of impact has it had on their emotional wellbeing – what things have been particularly challenging to mental well-being and what things have been supportive or beneficial
- How has it impacted on the support they receive from family/friends/statutory providers and what types of support are most helpful

Notes for Facilitators about the questions

- Some organisations are speaking with their children and young people individually, some in groups
- We realise that every child and young person is an individual and that these questions will be more of a direct fit for some than others. Those supporting the CYP in answering them can adapt them in whatever way is best for the CYP which can include answering all or some of the questions and through words or any other means, such as through Makaton signing, talking mats, art etc
- It would be great to have drawings or any other visuals the cyp might want to include as part of the consultation
- We have put a link to the online version of these questions in the FAQs case that's useful for you to have; this version has facilitator notes in too, the online version just has the questions
- There are 8 questions and we've laid them out with space between each question so you can write the feedback directly onto this - please feel free to use more paper if you need!

Introduction to the consultation

Below are some examples of things to cover in the introduction which we've written as if Kaizen are facilitating the session. We know that many of you are facilitating your own sessions and conversations with the cyp you're working with - of course say whatever you want in your own words.

Thank you very much for taking the time to give your thoughts on the impact of the pandemic and lockdown on you, we really appreciate it. (slide 1)

We have some questions we're going to be talking about - you can say as much as you want and you can also draw pictures afterwards as your response to questions if you would like and then get to your worker who'll email them to us

You are our pandemic heroes/volunteers (*adapt according to age/need*) who by speaking with us will be helping us to write a report that will be sent to different people to let them know what is important to you and the other people we speak to. We won't put your names in it, so you can be as honest as you like, no one will know who said what in the report, it will be anonymous.

Your worker might check back in with you after the session ends to see how you are doing - this is our way of helping you to stay safe, happy and well.

APPENDIX 4:



I know you've already said to your worker that you're happy to be part of this - can you say that again now either by raising your hand actually or online...

Remember to listen to each other, to be kind and supportive and not to take any screenshots or recordings. If you have any questions, just ask, and if it gets a bit noisy, mute yourself and wave or put your hand up button on so we know you want to talk. (slide 2)

Let's get going!

Pandemic Superhero Icebreaker (NB *the timing for this conversation will need managing so it doesn't take more than 5-10 minutes. You don't have to do this icebreaker if you don't want, could be something else*) (slide 3)

I can see most people's names, but if you can say your first name for me then we all know who is here.

Because we are all pandemic heroes, we are going to start off by working out our superpowers. Over the last year we've all had to adapt to a different way of school, or seeing our workers, or our friends. Sometimes it's been easy, sometimes it's been hard. If we created a pandemic superhero, what kind of superpower would they have? Let's have a think...

Ask the group to think of a superpower to use in the pandemic. To help them or someone else. If you can, draw or write it up so the cyp can see. Try to find at least 4 or 5 different superhero qualities. Listen out for ones that link to the topics for exploration later to be able to refer back to them, making links and connections for the group. For older young people/high functioning, adapt to create a character of someone that is a pandemic volunteer, there to help others.

Ok so our pandemic superhero/volunteer needs a name... any ideas? XXXX can help us in the session if we need it!

Consultation Questions

We want to think about the last year and what has changed. There are lots of parts of our lives that are different now because of the pandemic. Some of the changes might feel good, others might not feel good. *You might feel it's worth defining with the group what we mean by pandemic and lockdown, either here or before Qu 1*

(depending on the flow of the conversation in questions 1 and 2, slides 4, 5, 9 could be useful)

APPENDIX 4:



1. What are some of the things that have been good for you about the pandemic and lockdown?

Think about different parts of your life - school/uni/college, home, seeing friends, things you like to do, the people who support you. *(NB for facilitator, the cyp can talk about anything they want - can you bring up school, home and support if they haven't mentioned them)*

2. What are some the things that have been difficult for you about the pandemic and lockdown?

Think about different parts of your life - school/uni/college, home, seeing friends, things you like to do, the people who support you. *(the cyp can talk about anything they want can you bring up school, home and support if they haven't mentioned them)*

NB you could have questions 1 and 2 be one conversation if that works better for the group and just record the answers under each category of what's been good/difficult

Can draw out some of the feelings if appropriate to do that for the group e.g. we said it was difficult learning from home and not going to school...how does that make us feel – sad/angry/alone. Why do we feel that way?

APPENDIX 4:



- 3. What's helped you in the last year during the pandemic and lockdown? see what they say**
eg. friends/support/pets/activities/family/internet etc

Example prompts could be: What things/objects/activities/technology/changes have helped and why? Who has helped and why? What did you like doing/seeing/hearing/ feeling/smelling? If we could pick the top three what would they be and why? Where did it help to be? Where did it help to go?

(slides 6, 7, 10)

You'll see slides 6 and 10 are both images of different types of help - you could start with slide 6 which just has a few images and if you want to give prompts of more possible ideas, there's slide 10. Slide 7 has images of possible types of communication

- 4. Has there been anything to do with your specific needs or support that you think has been better during the lockdown and that now that you would like to carry on? For example some young people have said that they prefer being able to input into their annual review meetings online rather than in person. (NB we're wanting specific examples to do with SEND that have been positive)**

Do you have examples of things like that that have been better for you?

APPENDIX 4:



5. What is the number one thing you would like the government to prioritise for children and young people with SEND in our pandemic recovery plan?

6. What type of support would be of most help for you right now?

(prompts could be things e.g. computer and tech, activities, more contact with my worker, seeing people face to face, independence etc; could ask this question as 'if you had a magic wand and you could magic different support for you right now, what would you magic'...)

(could use slide 10 as a supporting image if wanted)

APPENDIX 4:



7. What are you most looking forward to being able to do once the pandemic and lockdown is over?

8. Is there anything else you would like to say?

Closing (slide 8)

Thank you to you all for taking part today and for all your ideas. We've been busy writing them down and will add them to the ideas from other groups around the country. We'll let your worker know when the report is ready so they can send on to you.

Don't forget, if you have any other ideas just let us know! Tell your worker (or send in any drawings) and they'll pass them on to us.

Host to carry out normal end of session check ins/signing off procedures

APPENDIX 4:



Section for Facilitators to complete after the focus groups

Name	
Name of organisation	
Did you do a focus group with the children and young people or did you speak with them individually/ various groups spread across the period of the consultation?	
If it was a focus group, when was the date of session?	
How many cyp took part in the consultation?	
How many each who identify as male/female/transgender/self-identify	
Broad description of the range of ethnicities of the cyp that took part	
How did the focus group/conversations go eg feel of the conversations, how able were the cyp to engage with the questions etc	
Is there anything else that you would like to say?	

APPENDIX 4:



Having a good meeting together

Video / mic or off – you can choose



Speak, use the chat, wave or put your hand up!



Be kind, supportive and please don't take pictures



APPENDIX 4:

Our Pandemic Hero/Volunteer

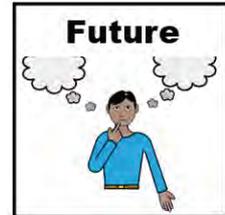
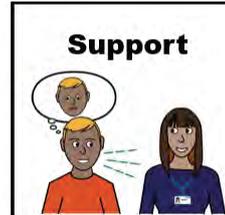
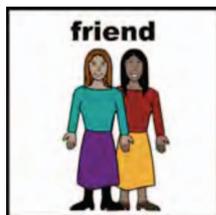


What do they do
or have that helps
other people?

What do they do
or have that helps
them?

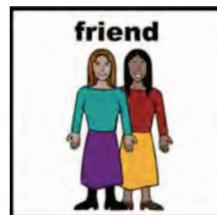
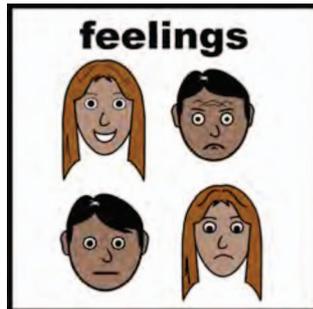


The pandemic: what has changed?

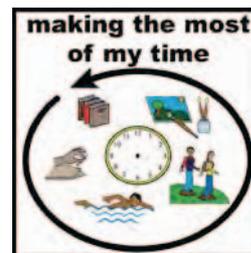
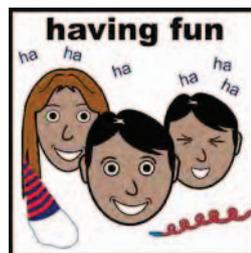


APPENDIX 4:

The pandemic: how do we feel?

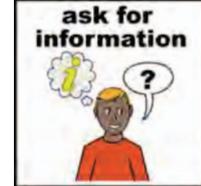


The pandemic: what helped?



APPENDIX 4:

The pandemic: communication

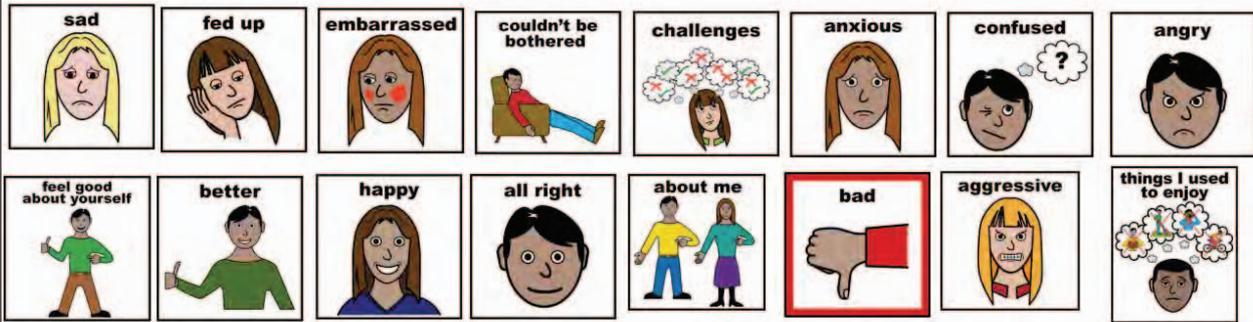


Thank you



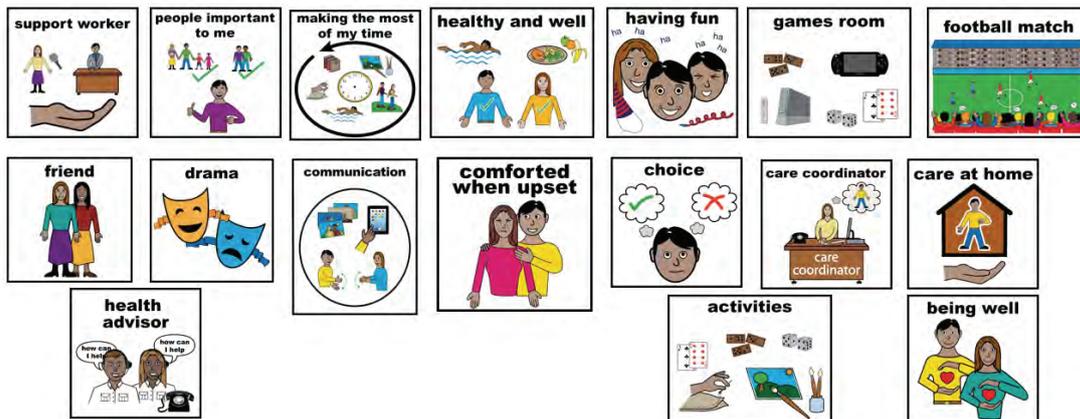
APPENDIX 4:

Feelings



Thanks to <https://www.learningdisabilityservice-leeds.nhs.uk/easy-on-the-i/image-bank/> for the images

Things that helped



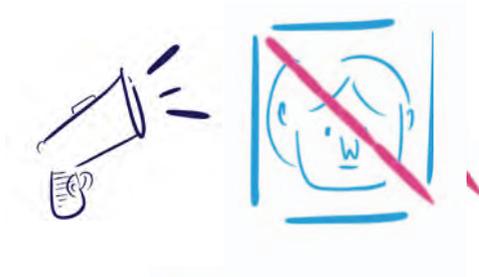
Thanks to <https://www.learningdisabilityservice-leeds.nhs.uk/easy-on-the-i/image-bank/> for the images

APPENDIX 4:



Having a good meeting together

On or off – you can choose



Speak, use the chat, wave or put your hand up!



Be kind, supportive and please don't take pictures



APPENDIX 4:

Our Pandemic Hero/Volunteer



What do they do
or have that helps
other people?

What do they do
or have that helps
them?

The pandemic: what has changed?



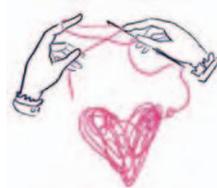
Home



Friends



School/College



Support



Futures

APPENDIX 4:

The pandemic: how do we feel?



The pandemic: what helped?



APPENDIX 4:

The pandemic: communication



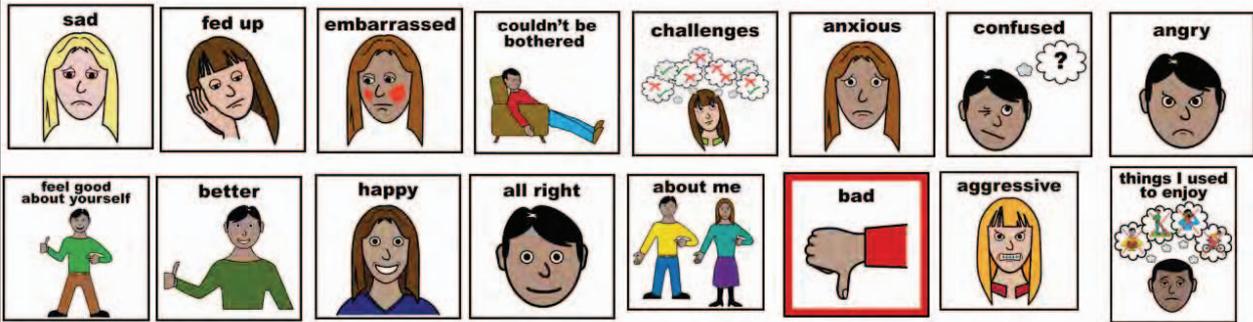
Thank you



Med www.drawntomedicine.com

APPENDIX 4:

Feelings



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Things that helped



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FAQs for Parents about the National Children's Bureau Consultation for Children and Young people with SEND about the impact of the pandemic

Purpose of the consultation

- The pandemic has brought unprecedented challenges to all children and young people (CYP), and even more so for children and young people with SEND and so it is important to understand from them what additional support they will need to help them to recover from the impact of lockdown.
- We want to ensure that as many young voices as possible are given the opportunity to share their experiences of how lockdown has impacted them, in particular in relation to their support network, academic goals, and social and emotional wellbeing.
- There have also been unexpected benefits from the lockdown and understanding what new ways of working have worked well and could be continued can help drive improvement in the sector and better provision for children and young people.

Who will be taking part in the consultation?

- We will be hearing from children and young people with SEND, aged between 5-25 from across England
- The CYP will be from a wide geographical and socio-economic range and will reflect the pan-disability focus of CDC
- CYP with SEND are involved in the research design
- Youth professionals with CYP with SEND are also involved in the co-design and in giving their input on the impact of the lockdown on the CYP they work with
- Parents will also be able to give their feedback in an online survey

What happens to the findings from the consultation?

Everything the children and young people say is anonymous and the findings from the consultation will be given to the Department of Education and all the organisations that take part in the consultation to contribute to the national pandemic recovery discussion about children and young people with SEND.

There will also be a shorter and accessible report that will go to all organisations and children and young people.

What's the timescale?

The consultation is taking place between February 15th - March 8th.

How will the children and young people take part?

There are a range of ways that CYP, parents and practitioners can share their views:

- Focus Group workshops (virtual) with CYP, facilitated by Kaizen
- Focus Group and individual discussions facilitated by practitioners in their organisation
- Online survey for CYP to complete themselves with support as needed from practitioners/parents
- Online survey for practitioners and parents

APPENDIX 4:



Is there a set of questions that the children and young people will be answering?

Yes. The overarching question that is being explored is how has the pandemic impacted CYP with SEND, and what are the key learnings from this experience that can help shape future policy and improve practice.

The online link to the questions is: https://www.surveymonkey.com/r/NCB_CYP

It could be that your children complete these online themselves or its of course also fine for the parent to ask their child the questions in whatever way is the best fit and the parent to fill in the online questionnaire with their child's answers.

How can all children and young people be included?

- We realise that every child and young person is an individual and that these questions will be more of a direct fit for some than others. They are here as a guide and as a parent you can adapt them in whatever way is best for your child, which can include answering all or some of the questions and through words or any other means, such as through Makaton signing, talking mats, art etc
- It would be great to have drawings or any other visuals your children might want to include as part of the consultation.

How do the children and young people give their consent?

- At the beginning of the conversation when you as a parent are explaining about the consultation, can you ask your child permission to feedback what they say and that everything is anonymous (there will be no recordings or photos).
- Can you record that your child was asked for permission in whatever way is appropriate for them and that they gave it.

Who do we contact if we have questions?

Anju Virdee is coordinating this project, please contact her at anju@kaizen.org.uk or 07306 365425 with any questions you may have.

How and when do we get you the feedback from our children?

We need all information in by **March 8th**.

You would support your child in completing the questionnaire online and if there any additional pictures or anything else you would email it to Anju at ncbconsultation@kaizen.org.uk

Can I also give my thoughts about the impact of the pandemic on my children?

Yes, definitely – it would be very valuable to hear from parents about the impact of the pandemic on your children. Below is the link so you can complete the questionnaire:

https://www.surveymonkey.com/r/NCB_PP

Thank you so much for making it possible for your children to have their voice heard as part of this consultation.

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Making Participation Work

This resource has been created by the Council for Disabled Children as part of the Making Participation Work programme, a joint partnership between the Council for Disabled Children and KIDS, and funded by the Department for Education. For more information about the Making Participation Work programme, visit us at:

<https://councilfordisabledchildren.org.uk/our-work/participation/practice/making-participation-work>



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