

## **Comprehensive Spending Review 2020** **Submission from the Council for Disabled Children<sup>1</sup>**

### **Who we are**

CDC are the umbrella body for the disabled children's sector with a membership of over 300 voluntary and community organisations and an active network of practitioners that spans education, health and social care. As a membership body we provide a collective voice that champions the rights of children, young people and their families and challenges barriers to inclusion. As a collective we believe that the views of disabled children and young people are vital to the development of an inclusive society and that they have the right to be heard and actively participate in decisions that affect them. We believe that every child and young person should enjoy the same rights and opportunities and that every aspect of society should be fully inclusive to disabled children and young people.

### **Introduction**

Disabled children and young people and children and young people with special educational needs have significantly poorer life outcomes than their peers who are not disabled and do not have SEN:

- Disabled people are more likely to have no qualifications<sup>2</sup>
- More than 70% of young people in the youth offender system have a communication disability<sup>3</sup>
- Disabled people, identified as disabled in childhood experience higher levels of lifelong social isolation<sup>4</sup>
- Disabled children and young people and their families have been disproportionately affected by the COVID restrictions, including losing provision tailored to meet their needs and being cut off from the informal support of family and friends

These poorer outcomes carry a significant long-term human and financial cost.

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<sup>1</sup> This submission is also made on behalf of the Special Educational Consortium

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<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/disability/bulletins/disabilityandeducationuk/2019#disability-and-education-data>

<sup>3</sup> Public Health England data

<sup>4</sup> <http://www.lse.ac.uk/social-policy/Assets/Documents/PDF/working-paper-series/08-19-Sam-Parsons-and-Lucinda-Platt-2.pdf>

There is no quick and easy fix. CDC argues that Comprehensive Spending Review is an opportunity to make a major long-term investment in improving outcomes for children and young people with SEN and disabilities, improving their life chances and reducing the long-term human and financial costs.

We recommend three areas of significant investment:

- 1: Early intervention in the early years
- 2: Early intervention and SEN Support
- 3: Early intervention and a range of services to support families and keep children in school and in their local community

## **1: Early intervention in the early years**

*Access and inclusion:*

A Parliamentary Inquiry co-chaired by Robert Buckland MP and Pat Glass MP, reporting in 2014, found:

*worrying evidence that the lack of suitable and willing providers, and limited inclusion support, means many children are prevented from accessing the universal 15 hours free early education offer, denying them critical developmental opportunities available to non-disabled children.<sup>5</sup>*

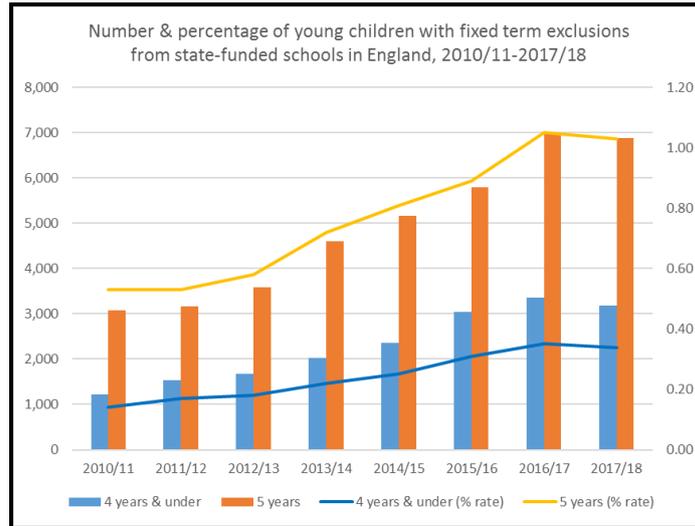
A follow-on survey, a year later<sup>6</sup>, found that 25% of the parents responding were accessing none of the free entitlement for their disabled child. Of the parents who were not accessing any of the free childcare offer 30% did not think staff were adequately trained and 25% said the nursery or child carer refused a place or excluded their child because of their disability or SEN.

We do not gather data on the exclusion of young children from early years settings that are not schools, but the schools data shows a significant recent increase in the exclusion of young children over recent years:

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<sup>5</sup> Contact a Family (2014) *Parliamentary Inquiry into childcare for disabled children: Levelling the playing field for families with disabled children and young people*

<sup>6</sup> Contact a Family (2015) *Levelling the playing field: Equal access to childcare for disabled children One year update*



**Workforce:**

High quality early years provision benefits the early learning and development of all young children; it is crucial to young children with SEN and disabilities.

The research from the *Effective pre-school, primary and secondary education project* informs our understanding of the importance of high quality pre-school provision and provides a robust evidence base for the key features of that high quality provision. A consistent theme from this team of researchers has been the association between high quality settings and a higher proportion of trained teachers:

*The findings showed that children benefitted in high quality, effective settings that: viewed academic and social development as equally important but maintained a strong educational focus, especially where a higher proportion of trained teachers working alongside less well qualified staff.*<sup>7</sup>

To ensure high quality early years provision, the research tells us of the importance of a highly qualified workforce and the need for a higher percentage of trained teachers. Yet two recent reports<sup>8,9</sup> have highlighted poor levels of pay, low levels of qualifications and insufficient training and opportunities for progression amongst the early years workforce. These factors are contributing to turnover rates and a relatively unstable workforce.

**Early identification and early action**

At the same time there has been an erosion of focus on early identification and an early response to young children with SEN and disabilities. As resources have diminished over the last ten years, specialist services have been focused on children with more significant levels of need and at a later age. In a survey of speech and language therapists (SLTs), the Royal College

<sup>7</sup> Taggart, B., Sylva, K., Melhuish, E., Sammons, P. and Siraj, I. (2015) *Effective pre-school, primary and secondary education project (EPPSE 3-16+)* How pre-school influences children and young people's attainment and developmental outcomes over time. DfE Research Brief (pp19-21)

<sup>8</sup> NatCen and Education Policy Institute for the Social Mobility Commission (2020) *The stability of the early years workforce in England*

<sup>9</sup> Bonnetti, S. (2020) *The early years workforce in England*. Nuffield Foundation

of Speech and Language Therapists (2016)<sup>10</sup> found that only 40% of respondents said that they had the capacity to deliver services to children *without* EHC plans. This trend is problematic as the majority of children with SLCN do not have an EHC plan. Reductions in services for very young children, and the re-direction of services to children with more significant needs, has affected the capacity of services to intervene early, with 43% of respondents commenting that speech and language therapy support was not being commissioned for children aged 0-2 years:

*It is now very rare for children under three with very specific SLCN to receive any therapy and therefore I expect to see a greater need for targeted SLT in the 3-11 age group as their needs are not being addressed as early as possible.*

This heralds the increased toll on children's learning and development and the likely higher costs of delayed action. Other specialist support services had been reduced and re-organised, see below, and the overall impact is a delay in identifying and meeting needs.

**CDC recommends a 5-year strategy with significant financial investment in early years to:**

- **Improve the levels of qualifications in the workforce**
- **Develop a multi-agency approach to early identification and meeting needs**
- **Improve take-up of the early years entitlement for young children with SEN**
- **Improve outcomes for young children with SEN and disabilities and reduce the SEN/non-SEN gap**

## **2: Early intervention and SEN Support**

In the school years, the indications are that the ability of schools to respond to the full range of needs from their core universal provision has diminished significantly. There has been:

- an increase in the number of pupils on SEN Support, increasing to 1,047,165 pupils since 2015;
- an increase in EHCPs: 390,109 in January 2020, an increase of 10% since 2019, and 36% over 3 years;
- an increase in the number of pupils in state-funded special schools, up by 6,400 (5.3%) to 128,100
- and an increase in the number of pupils in non-maintained special schools

These are all signs of a system under stress. In addition:

- Pupils with an EHC plan have more than twice the absence rate of pupils with no identified SEN

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<sup>10</sup> <https://www.rcslt.org/-/media/Project/RCSLT/send-report-jan2017>

- Pupils with an EHC plan have a persistent absence rate of 24.6% nearly 3 times higher than for pupils with no identified SEN
- Pupils with SEN are 5 times more likely excluded than their peers

There are other signs that indicate that schools are struggling to provide a good education for pupils with SEN and disabilities. Ofsted has identified a significant increase in home education:

*The number of children educated at home is increasing rapidly. As at autumn 2018, there were an estimated 58,000 children known to be educated at home, which is an increase of approximately 27% from the previous year. In particular, many children moved to home education from secondary school.*

*More children with additional needs are now being educated at home. Growing evidence suggests that, overall, a disproportionate number of children who are removed from the school roll of a secondary school and do not move to another setting have special educational needs, are from disadvantaged backgrounds or are known to social care services, or have a combination of these characteristics.*

*We have also seen examples in our inspection evidence of schools giving parents an ultimatum – permanent exclusion or leave – or pursuing fines when a reasonable adjustment for a disability would have been more appropriate.*

*Schools face some pressures that can encourage decisions to be made in the interests of the school. A few school leaders commented that the pressures of the accountability context for secondary schools are a barrier to meeting the needs of some pupils. One school leader explained that vocational studies ‘works for the pupils but not for the school data’. Progress in these subjects is not included in the Progress 8 measure.<sup>11</sup>*

There is also growing evidence<sup>12</sup> of unexplained pupil exits from schools<sup>13</sup>:

- as many as 1 in 10 pupils (10.1 per cent) in the 2017 cohort experienced exits at some point during their time at secondary school that cannot be accounted for
- this is an increase over previous cohort that finished their GCSEs in 2014
- a significant proportion of all pupils experiencing an unexplained exit fail to return to the school system ever again: as many as 4 in 10 (24,000) pupils experiencing an unexplained exit in the 2017 cohort did not return at all.

This study found that the overwhelming majority of unexplained exits are of vulnerable pupils, including around 1 in 6 (15.7%) of all pupils with identified special educational needs.

This range of indicators represents a significant compromise to the educational entitlement of pupils with SEN and disabilities.

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<sup>11</sup> Ofsted (2019) *Exploring moving to Home Education in Secondary Schools*

<sup>12</sup> Hutchinson, J and Crenna-Jennings, W. (2019) *Unexplained pupil exits from school* Education Policy Institute and National Education Union

<sup>13</sup> data relates to Y11 pupils in 2017

*Specialist support:*

However, schools cannot be expected to have available to them the necessary skills and expertise to meet the needs of all pupils who may want to be admitted. Whilst the evidence is that schools are finding it harder to respond to the needs of all pupils, their ability to call on specialist support services to supplement and complement their own skills and expertise has also been compromised.

Following a report from the Institute for Employment Research<sup>14</sup>, the DfE has now recognised that there are insufficient educational psychologists, both qualified and in training, to meet demand. Plans are now in place to support more trainee EPs. However, other shortages are not being addressed:

- a survey of visual impairment services by RNIB in 2019<sup>15</sup> found that just under half of local authorities have cut or frozen specialist visual impairment education services budgets over the last two years
- a shortage of speech and language therapists means that older children with higher levels of need are being prioritised. As a result, younger children are not having their needs identified and addressed early and problems associated with delay are stacking up for the future.

In addition, schools now have to pay for most forms of specialist support and, with the significant erosion of the value of schools' budgets over the last ten years, this has created pressures to protect core staffing. Tight budgets and the loss of specialist support have further compromised schools' capacity to respond to pupils' needs.

**CDC recommends a significant investment to improve the ability of schools and colleges to meet the range of needs:**

- **a significant increase in funding, targeting improvements in outcomes for pupils with SEN and disabilities**
- **improved training and better preparation of all teachers to meet the needs of all pupils**
- **greater accountability for the use of delegated funding and the quality of the provision made by schools for pupils with SEN and disabilities**
- **recognition and celebration of a wider range of achievement when pupils leave school or college**
- **thematic inspection by Ofsted of SEN and disability provision in schools and colleges to inform the targeting of resources**
- **high quality multi-agency services to support children, families and schools, including the provision of information, advice and support to children, young people and families about their entitlement**

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<sup>14</sup> <https://www.bps.org.uk/news-and-policy/new-government-report-calls-more-educational-psychologists-be-trained>

<sup>15</sup> RNIB (2019) Left out of learning: FOI 2019

#### **Accessibility and capital investment recommendations:**

- **capital funds to upgrade all educational buildings to the highest standards of accessibility**
- **development of mainstream school resource bases to bring together curriculum expertise with specialist SEN and disability expertise and improve outcomes**
- **Funding for blended or remote learning, allowing all pupils with SEN and disabilities to access resources, teachers and lessons remotely when they need to**
- **Development of the SEN and disability accessible resources available through Oak Academy and the extension of these to include post-16 learners**

#### **Specific post-16 recommendations:**

- **Ensure that vocational and employment opportunities for young people are accessible to learners with SEN and disabilities**
- **Ensure that the Kickstart programme is accessible to young people with SEN and disabilities and extends beyond the Universal Credit criterion.**

### **3: Early intervention and a range of services to support families and keep children in school and in their local community**

To attend school, to stay with their family and in their local community, many children rely on more than one service from more than one agency:

- Children with a range of medical needs rely on support from community health services to manage their conditions, or to provide training for staff to provide daily support;
- Children and young people with social emotional and mental health needs rely on support from Children and Young People's Mental Health Services;
- Families rely on support through early help and short breaks provision to support their family life.

There has been a significant erosion of support for families with disabled children and most parents of disabled children have to go through long exhausting battles to gain basic support. Research carried out by the Disabled Children's Partnership<sup>16</sup> in 2018 shows that:

- Most disabled children receive no regular support from outside their own close family.
- 1 in 10 parents believe health and social care services meet the needs of their disabled children.
- 9 in 10 parents say they had to fight to get the services they need.
- At the same time the number of disabled children who receive social care is reducing.

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<sup>16</sup> <https://disabledchildrenpartnership.org.uk/wp-content/uploads/2018/07/Case-for-a-Disabled-Childrens-Fund.pdf>

- This is despite the number of disabled children in the UK increasing by 33% over the past 10 years to nearly 1 million and their needs becoming ever more complex.

As resources have diminished, local authorities and their health partners have restricted the support available; when services are not available, the needs of children, young people and their families escalate; they are more likely to fall into a crisis; and intervention in a crisis is always more costly.

**CDC recommends a significant investment to improve early support from jointly commissioned services:**

- **There needs to be a significant investment in identifying needs early; the development of early help pathways for disabled children and young people, including those on SEN support; and the provision of short breaks and other early interventions**
- **Improved support, and reduced waiting times, from mental health services; specialist equipment and support to pupils with medical needs in school**
- **Joint commissioning of services based on an understanding of the needs of children and young people across the local community**
- **The development of infrastructure to support practical developments, including the development of digital systems that allow for communication between different agencies**
- **Transformational change to the way that disabled children's health and social care services are delivered, to focus on the needs of the family as a whole, promote welfare, keep children in their communities**
- **Professional development to support the achievement of jointly owned outcomes for children and young people; and to develop the role of the DCO/DMO and DSCO**

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