



Learning from the Covid crisis for educating children and young people with SEN / disabilities.

March 2021

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SUMMARY

This policy seminar on **Learning from the Covid crisis for educating children and young people with SEN / disabilities**, which took place via Zoom on 16 November 2020 addressed these current issues and questions: i. What has it been possible to provide for the range of SEN since the Covid crisis? How well has provision worked and what has been worse and/or better than before Covid? ii. What has been learned from the experience of the Covid crisis that has affected: Ideas about what education for CYP with SEN / disabilities is about and how future education might be delivered? iii. How are parents thinking about the future of education for their children? For example: Increased interest in home schooling for particular group and where not at school has led to reduced stress? Presentations were by **Amy Skipp** (ASK Research) on 'Special education during lockdown: Provider and parent experiences'; **Sharon Smith** (Parent Advocate) 'Parents' perspectives: what can we learn from Covid crisis education for students labelled with SEND', and **Dominic Wall** (Executive Principal & SEND Lead for Co-op Academies Trust) on 'Managing medical complexity in specialist educational settings during Covid'.

Amy Skipp presented the conclusions from a study that involved a survey of a representative sample of 200 senior leaders from special schools and colleges, a survey of over 500 parents/carers of children who usually this provision and 40 in-depth interviews with providers and 40 with parents/carers. This covered the actions special schools and colleges took at the start of the first national lockdown and what happened with teaching and learning for pupils on roll at special schools/colleges as well as the non-educational input. The research found that not only that the whole cohort of pupils with EHCPs faced greater disadvantage than their peers during the pandemic, but those from poorer backgrounds faced even greater challenges compared to their better-off peers, leading to a double disadvantage, and the potential for a further widening of the attainment gap. The main effects of this period on pupils were reported as: worse mental wellbeing, loss of progress and skills, increased social isolation, physical deterioration and uncertain futures. The research team will continue monitoring what happens next in special schools and colleges and for the families of children who attend them.

Sharon Smith draws on a number of studies to describe how parents' perspectives of education during Covid have been very mixed. Some parents have reported that their children have thrived – whether they have been at home or within the education provision for vulnerable children during lockdown in schools. Yet, many other families have reported the opposite. These families have described how they have felt utterly abandoned during this period, reporting that their children had a really poor experience of education during the Covid crisis, which has left families having to try and pick up the pieces, whilst also juggling other commitments including the education of their other children. It is suggested that the Covid crisis has exposed the existing inequalities and the exclusion of some children who have SEND. In this way it has aggravated pre-existing inequalities and exposes the extent of exclusion within the state education system. She concludes with the experiences of her daughter, who has Down syndrome, showing how she actually benefited from being educated at home and how those benefits continued to be seen when she was back at school.

Dominic Wall focuses on managing medical complexity, the care conditions requiring aerosol generating procedures, which had been a key talking point during the Covid period. Children with complex health care needs were ill-served by the system collectively, and many children were not able to return to school when the promise was 'all children will return in September.' By November 2020 all 17 of those students were still not attending school because of personal protective equipment (PPE) issues. This paper shows that this is a story about complicated government procedures, advice writing, triple-locks where the Cabinet Office reviews things before it lets the DfE say them. This issue sits within a wider context and the underlying fault lines in which there are contradictory messages with the consequence that this very vulnerable group of children spent 8 months without clear guidance that really describes how schools can seek to meet their needs.

The **Summary of the group discussion** indicated some common general conclusions about the inequality revealed by the Covid crisis, not just about special needs, but education across the board, seen to reflect the powerful effect of socio-economic disadvantage. It was also suggested that the quality of pre-existing relationships and values in schools influenced how well schools coped with the restrictions. Various positives were identified, such as: parents appreciating what teachers were doing, innovative online multi-agency approaches, significant professional learning about online learning and about changes and flexibility in organising teaching, learning and grouping. The negatives were: the gaps in out of school provision, safeguarding concerns, some schools not having supportive systems around them, examples of unwelcoming schools and rare recognition for teachers' contributions during the period. In addition, some recommendations were made: the importance of the wellbeing of all teachers, their preparation for additional support of returning pupils, more flexibility and change in designing and carrying out teaching and learning, more done to share positive stories and practices on which teachers and schools can build and that parents will be more supportive of children going back into schools, if there were clearer and more consistent official messages.

CONTENTS

	Page
1. Introduction	4
2. Special education during lockdown: Provider and parent experiences	
Amy Skipp	8
3. Parents' perspectives: what can we learn from Covid crisis education for students labelled with SEND	
Sharon Smith	14
4. Managing medical complexity in specialist educational settings during Covid	
Dominic Wall	21
5. Summary of group discussions	25

Section 1: Introduction

This policy seminar on **Learning from the Covid crisis for educating children and young people with SEN / disabilities** on 16 November 2020, 2-4pm on Teams. It addressed the following issues and questions:

1. What has it been possible to provide for the range of SEN since the Covid crisis? How well has provision worked and what has been worse and/or better than before Covid?
2. What has been learned from the experience of the Covid crisis that has affected: Ideas about what education for CYP with SEN / disabilities is about and how future education might be delivered?
3. How are parents thinking about the future of education for their children? For example: Increased interest in home schooling for particular group and where not at school has led to reduced stress?

The programme consisted of three presentations followed by discussions in small group. Amy Skipp (ASK Research) on 'Special education during lockdown: Provider and parent experiences'; Sharon Smith (Parent Advocate) 'Parents' perspectives: what can we learn from Covid crisis education for students labelled with SEND', and Dominic Wall (Executive Principal & SEND Lead for Co-op Academies Trust, Co-op Academy Southfield) on 'Managing medical complexity in specialist educational settings during Covid'. The conclusions of the small group discussions are summarised at the end of this policy paper.

SEN Policy Research Forum

The SEN Policy Research Forum, which organised this seminar, incorporates the aims and work of the previous SEN Policy Options group in a new format and with some expanded aims. The Forum's website is at:

<https://senpolicyresearchforum.co.uk>

The aim of the Forum is to contribute intelligent analysis, knowledge and experience to promote the development of policy and practice for children and young people with special educational needs and disabilities. The Forum will be concerned with children and young people with special educational needs and disabilities from preschool to post 16. It will cover the whole of the UK and aim to:

1. provide timely policy review and critique,
2. promote intelligent policy debate,
3. help set longer term agendas – acting like a think-tank,
4. deliberate over and examine policy options in the field.
5. inform research and development work in the field.
6. contribute to development of more informed media coverage of SEND policy issues.

The uncertainties over what counts as 'special educational needs' and 'disabilities' in relation to a wider concept of 'additional needs' are recognised. These will be among the many issues examined through the Forum.

The Forum, which continues the work of the SEN Policy Options group has been continuing this work since 1993 for over 28 years. It started as an ESRC seminar series with some initial funding from the Cadbury Trust. The Forum appreciates the generous funding from NASEN and the Pears Foundation to enable it to function, though it operates independently of these organisations.

Lead group and coordination of the Forum:

Dr Peter Gray - Policy Consultant (co-coordinator)
Professor Brahm Norwich - University of Exeter (co-coordinator)
Yoland Burgess - Young People's Education and Skills, London Councils
Professor Julie Dockrell – UCL Institute of Education
Beate Hellawell - Lewisham local authority
Dr Brian Lamb - Policy consultant
Professor Geoff Lindsay - University of Warwick
Penny Richardson - Policy Consultant
Chris Robertson - SENCO Forum; University of Birmingham
Sharon Smith – Parent of young person with SEN
Dr Rob Webster - UCL Institute of Education
Professor Klaus Wedell - UCL, Institute of Education
Julie Wharton - Winchester University

Membership:

If you would like to join the Forum, go to the website and follow link to register as a member. You will be invited to future seminars and be able to participate in discussion through the blog on the SENPRF website for joining instructions.

<https://senpolicyresearchforum.co.uk>

For further information please contact the co-coordinators of the Forum, Brahm Norwich, Graduate School of Education, University of Exeter, Heavitree Road, Exeter EX1 2LU (b.norwich@exeter.ac.uk) or Peter Gray (pgray@sscyp) .

Past Policy Options Papers (see website for downloadable copies)

1. Bucking the market: Peter Housden, Chief Education Officer, Nottinghamshire LEA
2. Towards effective schools for all: Mel Ainscow, Cambridge University Institute of Education
3. Teacher education for special educational needs: Professor Peter Mittler, Manchester University
4. Resourcing for SEN: Jennifer Evans and Ingrid Lunt, Institute of Education, London University
5. Special schools and their alternatives: Max Hunt, Director of Education, Stockport LEA
6. Meeting SEN: options for partnership between health, education and social services: Tony Dessent, Senior Assistant Director, Nottinghamshire LEA
7. SEN in the 1990s: users' perspectives: Micheline Mason, Robina Mallet, Colin Low and Philippa Russell
8. Independence and dependence? Responsibilities for SEN in the Unitary and County Authorities: Roy Atkinson, Michael Peters, Derek Jones, Simon Gardner and Philippa Russell

9. Inclusion or exclusion: Educational Policy and Practice for Children and Young People with Emotional and Behavioural Difficulties: John Bangs, Peter Gray and Greg Richardson
10. Baseline Assessment and SEN: Geoff Lindsay, Max Hunt, Sheila Wolfendale, Peter Tymms
11. Future policy for SEN: Response to the Green Paper: Brahm Norwich, Ann Lewis, John Moore, Harry Daniels
12. Rethinking support for more inclusive education: Peter Gray, Clive Danks, Rik Boxer, Barbara Burke, Geoff Frank, Ruth Newbury and Joan Baxter
13. Developments in additional resource allocation to promote greater inclusion: John Moore, Cor Meijer, Klaus Wedell, Paul Croll and Diane Moses.
14. Early years and SEN: Professor Sheila Wolfendale and Philippa Russell
15. Specialist Teaching for SEN and inclusion: Annie Grant, Ann Lewis and Brahm Norwich
16. The equity dilemma: allocating resources for special educational needs: Richard Humphries, Sonia Sharpe, David Ruebain, Philippa Russell and Mike Ellis
17. Standards and effectiveness in special educational needs: questioning conceptual orthodoxy: Richard Byers, Seamus Hegarty and Carol Fitz Gibbon
18. Disability, disadvantage, inclusion and social inclusion: Professor Alan Dyson and Sandra Morrison
19. Rethinking the 14-19 curriculum: SEN perspectives and implications: Dr Lesley Dee, Christopher Robertson, Professor Geoff Lindsay, Ann Gross, and Keith Bovair
20. Examining key issues underlying the Audit Commission Reports on SEN: Chris Beek, Penny Richardson and Peter Gray
21. Future schooling that includes children with SEN / disability: Klaus Wedell, Ingrid Lunt and Brahm Norwich
22. Taking Stock: integrated Children's Services, Improvement and Inclusion: Margaret Doran, Tony Dessent and Professor Chris Husbands
23. Special schools in the new era: how do we go beyond generalities? Chris Wells, Philippa Russell, Peter Gray and Brahm Norwich
24. Individual budgets and direct payments: issues, challenges and future implications for the strategic management of SEN
Christine Lenehan, Glenys Jones Elaine Hack and Sheila Riddell
25. Personalisation and SEN
Judy Sebba, Armando DiFinizio, Alison Peacock and Martin Johnson.
26. Choice-equity dilemma in special educational provision
John Clarke, Ann Lewis, Peter Gray
27. SEN Green Paper 2011: progress and prospects
Brian Lamb, Kate Frood and Debbie Orton
28. A school for the future - 2025: Practical Futures Thinking
Alison Black
29. The Coalition Government's policy on SEND: aspirations and challenges? P. Gray, B. Norwich, P Stobbs and S Hodgson.
30. How will accountability work in the new SEND legislative system?
Parents from Camden local authority, Penny Richardson, Jean Gross and Brian Lamb
31. Research in special needs and inclusive education: the interface with policy and practice, Brahm Norwich, Peter Blatchford, Rob Webster, Simon Ellis, Janet

Tod, Geoff Lindsay and Julie Dockrell.

32. Professional training in the changing context of special educational needs disability policy and practice. Neil Smith, Dr Hazel Lawson, Dr Glenys Jones.

33. Governance in a changing education system: ensuring equity and entitlement for disabled children and young people and those with special educational needs. Peter Gray, Niki Elliot and Brahm Norwich.

34. School commissioning for send: new models, limits and possibilities, Tom Jefford, Debbie Orton and Kate Fallon.

35. An early review of the new SEN / disability policy and legislation: where are we now? Brian Lamb, Kate Browning, Andre Imich and Chris Harrison.

36. Preparing for adulthood - developing provision for children and young people with SEND. Yolande Burgess Justin Cooke. Ellen Atkinson and Gill Waceba.

37. A worthwhile investment? Assessing and valuing educational outcomes for children and young people with SEND. Graham Douglas, Graham Easterlow, Jean Ware & Anne Heavey

38. Changes in SEN / disability provision, pressures on ordinary schools and parental choice: a review of inclusive education and its prospects. Alison Black, Lizzie Harris, Jayne Fitzgerald, Claire-Marie Whiting and Jenny Andrews.

39. Policy for SEND and Inclusion: examining UK national and some European differences. Chris Robertson, Alfons Timmerhuis Niels Egelund and Camilla Brørup Dyssegaard, Cecilia Simón and Gerardo Echeita and Richard Rieser. 2018

40. Exclusions, barriers to admission and quality of mainstream provision for children and young people with SEND: what can be done? Jules Daulby, Louise Gazeley, Nicola Furey and James Roach. 2019

41. Accountability, performance management and inspection: how to enable positive responses to diversity? Jonathan Roberts, Nick Whittaker, Jane Starbuck and Robin Banerjee. 2020

43. A review of policy in the field of special needs and inclusive education since the 1990s Lorna Selfe, Robin C. Richmond with Peter Gray and Brahm Norwich. 2020

44. Trends in SEN identification: contexts, causes and consequences, Jo Hutchinson, Sami Timimi and Neil McKay, 2020.

Copies of most of these papers can now be downloaded from the website of the SEN Policy Research Forum <https://senpolicyresearchforum.co.uk/past-policy-papers/>

Section 2:

Special education during lockdown: Provider and parent experiences

Amy Skipp

In this paper I present the first set of findings from a study we have carried out looking at special education provision during lockdown. This project was funded by the Nuffield Foundation and carried out in collaboration with NFER and Rob Webster. The study involved a survey of a representative sample of 200 senior leaders from special schools and colleges, a survey of over 500 parents/carers of children who usually this provision and 40 in-depth interviews with providers and 40 with parents/carers. The fieldwork period was July-August 2020, so during the first national lockdown and the aim was to understand what both groups had done during this time and how decisions had been made.

What actions did special schools and colleges take at the start of the first national lockdown?

In March 2020 the government announced that educational institutions would need to close to the majority of pupils. The exceptions were those whose parents were critical workers or who were deemed vulnerable. This latter group included those on Child Protection Orders as well as pupils with EHCPs. This announcement set up the expectation that all pupils with EHCPs could continue to attend their usual place of learning.

The issued guidance on how to deliver in school over this time was perceived as showing a very limited understanding of how special providers operate and the types of needs that their students have.

- 98% of special schools and colleges have pupils requiring one to one support
- 76% have pupils who need personal care
- 98% said they had pupils who could not adhere to social distancing and safety measure

Guidance at that time suggested 2 metre distance was kept between pupils and staff, that pupils were sat in rows of desks, and that shared equipment was removed. Providers reported how this caused them severe delivery issues, as their pupils require physical contact and their schools/colleges often have small teaching spaces and high staff numbers. In addition leaders identified that their provision involved medically vulnerable populations, who are often reliant on transport to get to school and who require high levels of therapeutic input. This resulted in the majority of special schools and colleges being open for in-school pupils but with severely limited capacity. Our data shows that nine out of ten providers stayed open, offering in-school provision over this time.

Parents reported how the changes brought about by the pandemic had affected them and their families. Ordinarily they were reliant on the support their child received at school (both learning, social engagement and therapy/intervention delivery); respite, in-home and community services; and both formal and informal child and family support. When 'lockdown' was announced all of this help stopped. School offers were reduced or children could not be accommodated in school, usual activities delivered by the school stopped, and health and social care services were severely reduced or ceased altogether.

Many families therefore found this a very difficult time as they had to manage without all of this usual support, they were responsible for care of the child with SEND 24/7 with no break, they often had to also care for other children, engaging all children at home in remote learning, whilst at the same time potentially trying to maintain their own work, and the anxiety caused by the uncertainty of the circumstances. Some also reported how their child's needs had increased over this time, including their self-regulation and behaviour management having worsened, and that they were restricted to being inside all day, every day.

"I can't take my eyes off him for one minute without fear of him putting stuff in his mouth and choking, climbing up the cooker or in the kitchen drawers, or trying to strangle his brother" Parent

"I don't even get time to go to the toilet. My daughter has to come with me and I sit her on my lap. Like having a toddler, except she's twelve" Parent

As providers could only take a certain number of pupils into school and they knew that families would really struggle if they were left with their children at home with them for an extended period, they had to make very difficult decisions about who to offer the available places to. They had to balance the risks of pupils being in school with the risks of them remaining at home.

"Throughout I've had to weigh up the possibility of a virus that may spread in children, and may or may not make some school members very poorly, with the certainty that lots of our pupils will find this massive change really hard and that this will be very difficult for many families to manage" Provider interview

Parents also had to decide, even if they were offered a place in school, what actions to take. They reported weighing up the benefits of maintaining their school place – keeping a routine, specialist input and tailored support, as well as allowing the family some respite – with the potential risks – from their child mixing with others and potentially being more susceptible to catching or being more severely affected by the virus than other children. Many families told us that over this period they had chosen to 'shield their household', fearing that for various reasons they may be at greater risk from Covid-19 (including underlying health conditions, behaviours, being from a BAME background, or – most often in single parent families – having limited other childcare options).

As lockdown went on, and after government guidance eased restrictions slightly after June 1st, schools and colleges still faced capacity issues but switched to offering places on a part-time basis i.e. instead of having one pupil in for 5 days, they offered two pupils places for 2.5 days each. Providers felt this would help give more families a bit of a break, but also mean pupils kept in the habit of attending school.

"By June we were getting parents who were a lot more emotional requesting places. They were just at the end of their tether" Provider

Overall half of the parents we surveyed said their child attended school/college at some point between lockdown starting in March and the end of the Summer term. This obviously

means that half of pupils did not attend their special school or college at all over these 5 months (plus the August holiday period).

What happened with teaching and learning for pupils on roll at special schools/colleges?

In school input

Three quarters of providers said their focus was on childcare rather than learning over this period.

“Our aim is to help our pupils to tread water during this time until we get back to normal and teaching them again.” Provider

To adhere to the way they interpreted government guidance, along with broader public health messages, many of the usual in-school routines and activities had to be drastically altered or stopped altogether. Contact times (i.e. the length of time they spent in class) and the offer (how they were spending their time and what support could be available to them) were reduced. In addition some providers had felt the need to strengthen their behaviour policies (for example, pupils who spat could not be allowed in school).

Remote input

As was the case with most other schools, specialist providers attempted to develop a remote support offer. This was reported as more challenging for pupils with EHCPs than with other learners.

Providers reported that an average of 30% of their families whose child had an EHCP had limited or no IT access. In addition many pupils with SEND were reported to find engaging with ‘on screen’ learning difficult or impossible.

Providers tried to produce resources in a range of ways including paper worksheets, activity packs, some live online lessons, online links, and home visits. They reported that:

- Learning materials and feedback were personalised
- Pupil engagement was good
- Remote support was resource intensive (due to the need to personalise it to each pupils’ needs and their family circumstances)

Parents said home learning was difficult, as they were not equipped to support their child’s specialist learning and their focus was on keeping their children happy and occupied. Amounts of home learning reported by families of pupils with EHCPs were lower than for other pupils.

Non-educational input

Pupils with EHCPs not only require special support for their education, but also often access health and care services. The requirements to deliver all the support detailed in EHCPs was disapplied by the Coronavirus Act 2020, but LAs were asked to use their ‘best endeavours’ to provide support.

Parents and providers reported how many of these additional services became unavailable during the pandemic. Frontline health staff, for example, were redeployed and other staff were advised to work from home and not carry out any work in-person.

There were reports of missed GP, hospital appointments and sessions with Child and Adolescent Mental Health Service; a lack of therapeutic input including Physio, Speech and Language Therapy, Occupational Therapy and hydrotherapy; and issues with equipment provision (such as standing frames, splints, etc).

In terms of reduced social support services families lost respite, in-home and personal care services as well as family support events and activities (often provided by community and voluntary sector organisations). In addition education providers reported how they had to pick up family welfare checks and manage increasing numbers of safeguarding issues.

“These pupils all have EHCPs, which are meant to involve support from three services. But everyone else just went home and expected us to pick it all up” Provider

Many providers reported that pupils lost health and care input over this six month period, and that it was difficult for education practitioners to try and ‘plug the gap’.

Disadvantage, doubled?

Pupils with SEND face worse life outcomes than their peers with no SEND. This cohort are also more likely to be from more disadvantaged backgrounds. Government statistics show around 35% of pupils with an EHC plan are eligible for free school meals, more than double that for pupils with no SEN (close to 15%). Compared with schools and colleges serving less deprived communities, special providers with higher proportions of pupils eligible for free school meals were more likely to experience staffing issues, not be able to maintain health and care input, not be providing pupil feedback on learning, have higher rates of families without access to IT and report lower pupil engagement over the lockdown period.

This means that our data shows not only that the whole cohort of pupils with EHCPs faced greater disadvantage than their peers during the pandemic, due to the difficulties of providing in-school and remote support and the loss of the other vital support they require. But, in addition those from poorer backgrounds faced even greater challenges compared to their better-off peers, leading to a double disadvantage, and the potential for a further widening of the attainment gap.

Likely effects of this period.

Parents and providers detailed how pupils with EHCPs had lost learning and regressed in their skills and abilities over this time. Some pupils had seen benefits from this time in terms of not having to attend school and having more time at home with family. However many had experienced worsening mental wellbeing and behaviour issues due to the change in their routine and increased anxiety.

The main effects of this period on pupils were reported as:

- Worse mental wellbeing
- Loss of progress and skills
- Increased social isolation
- Physical deterioration
- Uncertain futures

It was also felt that wider family wellbeing had suffered over this time, and relationships between families and service providers had in some cases deteriorated. Parents also

reported that relationships at home had been severely strained over this period, including the breakdown of some parental relationships.

Special schools and colleges felt they were going to have to spend an extended period of time in the new academic year re-acclimatising pupils to being in school and learning, but also addressing their increased emotional needs that had developed over the preceding six months.

Providers also detailed how what they could offer (in terms of time in school/college, activities undertaken, in-school routines) would remain limited from September 2020, and they had concerns about when the additional services that had stopped during the pandemic would resume. The majority felt that pupils with EHCPs would have greater needs, and require the content of their EHCPs to be reassessed when they returned to educational provision.

There were concerns about the longer-term effects of this time on the Special Education sector more widely. Providers reported that funding was likely to be put under further strain (as they had incurred greater costs during the pandemic, but also would be faced with greater needs to support post-pandemic), that their workforce was facing burn-out from the extra work they had had to carry out, and that the cohort of pupils in special provision might change as pupils in mainstream school fall behind their peers or start to display possible SEND. It was also reported that those currently in mainstream with an EHCP might now feel that their needs would be better met in a special school or college, leading to an increase in demand for specialist places and support.

However one of the greater concerns raised was that pupils may not return to special provision at all. Overall, providers felt that around 14% of pupils would not return to their previous specialist placement.

- 64% said this would be due to safety concerns (i.e. whether in-school provision would be safe for their child)
- 55% said parents would keep their children at home due to their medical vulnerability (34% of households surveyed had been shielding during the first national lockdown)
- 33% said they would not return due to their inability to adhere to safety guidance (because of the pupils' needs).

DfE attendance monitoring data for the new term has indeed shown that pupils with EHCPs have had lower attendance rates in the new term than their mainstream peers.

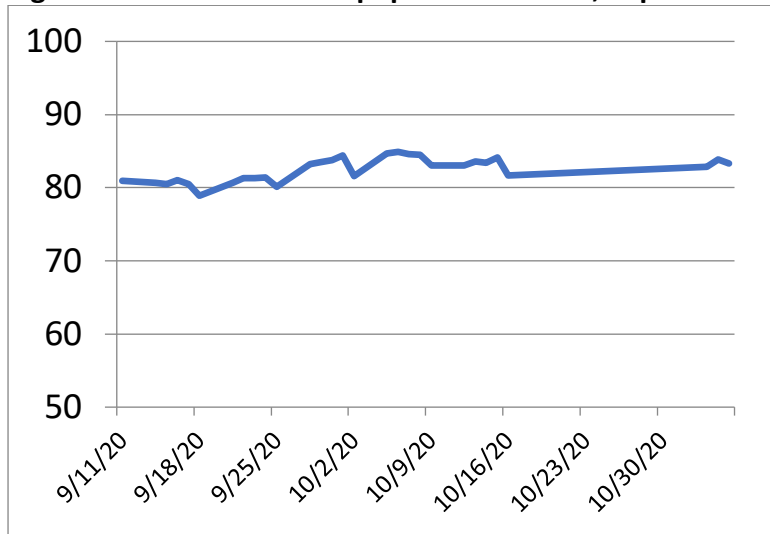
Official figures do not break these data down by type of school. However recent analysis shows that in November 2020 attendance of pupils at special schools in England was at 75%, meaning one in four pupils have not returned.

This raises questions of great importance.

- What is happening with the pupils who are not back in Special schools or colleges?
- Are they being supported remotely?
- Have they deregistered? And are they therefore being home educated?
- To what extent are they receiving the additional support set out in their EHCP?

- Are they ever likely to return to in-person education?

Fig 1: Attendance rates of pupils with EHCPs, September – October 2020



Source: DfE attendance data for State schools

We hope to be able to continue monitoring what happens next in special schools and colleges and for the families of children who attend them. Providers and parents had concerns in the Summer that any ongoing disruption and delay in returning to ‘normal’ could worsen the situation, and we now know that unfortunately education has continued to experience issues in the 2021/21 school year.

Note:

The outputs from this project can be found at:

<https://www.nuffieldfoundation.org/project/covid-19-mitigation-education-provision-and-special-schools>

Section 3:

Parents' perspectives: What we can learn from Covid-crisis education for students labelled with SEND.

Sharon Smith

Introduction

Within this paper, I will be drawing on a number of surveys and research studies in order to describe how parents' perspectives of education during Covid have been incredibly mixed. Some parents have reported that their children have thrived – whether they have been at home or within the education provision for vulnerable children during lockdown in schools – yet many other families have reported the opposite. These families have described how they have felt utterly abandoned during this period, reporting that their children had a really poor experience of education during the Covid crisis, which has left families having to try and pick up the pieces, whilst also juggling other commitments including the education of their other children.

I will demonstrate how there has been an enormous disparity in the level of support and the type of support that has been given to children with Special Educational Needs and Disabilities (SEND). However, it is unclear what has caused this disparity. Some schools managed to adapt quickly and supported the education of these pupils really well but other schools did not. Special Needs Jungle (2020) describe how a parent of a primary age child, who has a significant visual impairment, reported that her daughter was unable to access school work delivered by an online portal because the work had not been differentiated (Special Needs Jungle, 2020:7). This is despite the fact that the portal provides a range of free, integrated and easy to use accessibility functions (Special Needs Jungle, 2020:7). Yet, at the same time, a special school for Deaf students managed to move almost all of its lessons online within days of lockdown (Special Needs Jungle, 2020:8). The school delivered online specialist therapy, performing arts lessons and fully subtitled assemblies (Special Needs Jungle, 2020:8). Additionally, due to the high number of pupils who were having to shield and were unable to come into school or meet up with each other, the school introduced online social activities and clubs to make sure that their pupils were not lonely (Special Needs Jungle, 2020:8).

However, to present this as a simple binary between these two types of experiences would also be wrong, as I think it is significantly more complex than that. What appears to be evident is that the Covid crisis has exposed the existing inequalities and the exclusion of some children who have SEND. It could be argued that the Covid-19 pandemic is deepening pre-existing inequalities and exposes the extent of exclusion within the state education system. Many parents feel that their children have fallen off the radar and are not being educated with – or to the same standard – as their peers who do not have SEND. I will also discuss how there are some children who have thrived either at home or in adapted mainstream environments, because the exclusionary factors previously existing in the school environment have been removed. However, in many instances they are thriving apart from their peers, rather than being educated together with them.

Parents' experiences of lockdown education

“Son is in Year 8 at a specialist ASC school. Working at Year 9 / Year 10 level, but sent some Year 1 work. He went into meltdown over injustice of it. When I mentioned it, the teacher said she set same work for all 7 children in class. No differentiation at all! I’ve left [my son] to source appropriate work while working two jobs.”

“All we’ve had is Twinkl print outs. That’s it. Nothing else. I’m now teaching my daughter myself. Doing a much better job, personalised work, focus on key areas and interest led”

“My child’s teacher has been generally supportive where she can, but he hasn’t been provided with differentiated work.”

“School have been great, they’ve sent work, they’ve been available to video call, I’ve had phone calls and emails. But she has full time one to one at school, and I’m struggling to educate her and her brother who also has additional needs. Just because the support is good, doesn’t mean everything is OK.”

Parent quotes (Special Needs Jungle, 2020a:1-4)

Special Needs Jungle undertook a survey (Special Needs Jungle, 2020b), which attracted almost 1,000 parent responses, across 139 local authority areas in June 2020. They found that 68% of parents reported really struggling to educate their child during lockdown (Special Needs Jungle, 2020b:6). Only 28% of parents reported that their child’s school provide their child with very good support, and only 18% of parents reported that their child’s school or college provided enough SEN support for their child to be able to complete their work at home (Special Needs Jungle, 2020b:6). Only 1 in 7 reported that their child received any online learning support from a teaching assistant. Some parents reported their children received no work at all and others reported that if work was received, it was frequently not differentiated to a suitable level.

The Alliance for Inclusive Education’ research (ALLFIE, 2020) with parents found similar results. Additionally, parents in their study reported that even when online lessons and learning materials were provided, either by schools or the national platforms such as Oak Academy, they were not always inclusive to disabled students. For instance, there was a lack of differentiated content, BSL interpretation or audio descriptions provided (ALLFIE, 2020:5). It should also be noted that there are some children who will always need hands-on adult support to access materials even if the content has been differentiated.

The Disabled Children’s Partnership survey reported additional concerns from parents. 83% of parents during lockdown said that there was a negative impact on their disabled child’s friendships and only 50% said that all therapies and extra support stopped (Disabled Children’s Partnership, 2020:2,8). As a result, many parents have reported feeling abandoned and found that their children were cut off or ignored during this time (Disabled Children’s Partnership, 2020:1).

Some children were significantly happier at home

“The lockdown has made us realise that pressures from school have a dreadfully negative impact on my child’s wellbeing and behaviour. Taking the stress of school out of the equation has improved her general health, both physical and mental.”

(Parent quote - Disabled Children's Partnership, 2020:17)

"Last year he was struggling with school and very anxious/refusing school. We've taught him his times tables he's up to 9 but only knew 2 and 20 at the start of lockdown. He's happily doing all the work at home. Hasn't missed school at all. Said it has been the best year of his life (we also got guinea pigs so that helped!)"

(Parent quote – Special Needs Jungle, 2020a:2)

However, whilst some parents and children found education at home particularly difficult, it is also clear from the research that some parents have reported how their children and young people were actually a lot happier at home. For those who find school a highly pressurised environment, being at home was a massive relief. They felt safer, less anxious, and they were able to spend more time with their family. Of course at home, there is unlikely to be any bullying, there is no uncomfortable uniform, no sensory overload, the timetable's not fixed so children were able to take breaks when needed, and there is freedom to learn in different ways plus the ability to develop more independence.

Reaching Families (2020) reported that 21% of parents who responded to their survey said that children were significantly more relaxed since lockdown started and 15% reported that their children were sleeping better (Reaching Families, 2020:7). It is clear that some children, who have been removed from a stressful and potentially exclusionary school environment, have managed to engage more with their learning and being at home has had a positive impact on their well-being.

Home is home and school is school

"Child is unable to learn at home. Sees home as home, school as school. Huge rows and meltdowns when attempted. I fear he will be very very behind when school continues."

(Parent quote - Disabled Children's Partnership, 2020:13)

"Trying to get any school work done with a school refuser is hugely difficult, and it is turning the child's safe place into a nightmare for them"

(Parent quote – Reaching Families, 2020:6)

Once again, within this complex picture, some parents have reported alternative perspectives. Being at home has been really difficult for some children. Reaching Families describe how some children struggled to make the transition from learning at school to learning at home because they see the two as being 'entirely separate zones that do not overlap' (Reaching Families, 2020:2). Home is home and school is school. Additionally, a number of parents said that their children were suffering from anxiety, mental health problems and behavioural problems, including in some instances, violence (Reaching Families, 2020:4); these issues escalated the longer that families went through lockdown.

Shepherd & Hancock (2020) have reported that the lack of routine, structure and peer interaction was also very challenging for a number of students. Parents were concerned about the lack of social interaction that their child had and there were fewer opportunities for conversations, turn-taking, sharing and group activities at home (Shepherd & Hancock, 2020:2-3).

Vulnerable provision in schools

Children and young people with EHCPs and those who have social workers were classed as a vulnerable cohort and were able to attend their education setting during lockdown. However, many parents found this label of 'vulnerable' really quite confusing and many actually felt that their child would be more vulnerable to Covid if they were actually in school. Therefore, although this provision was actually made available, many parents chose to keep their children at home due to safety concerns.

However, those children who did attend school often in a smaller class size and smaller groups actually felt that they benefited from that as well. So, they had increased one to one time with teachers and the opportunity to build better relationships both with the other people who were attending that provision and also with the teachers (Daniels et al. 2020:4). This is reminiscent of the Mary Warnock's justifications for separate specialist provision, that suggested that mainstream education was not suitable for all children and that some children would benefit from smaller classrooms, more time with the teacher, and education away from typically developing children who might bully and tease them (Warnock, 2010). The vulnerable education provision within schools has potentially provided the smaller classrooms and increased time with a teacher, and many children did thrive as a result. However, in the same way that Warnock's recommendations for this smaller type of provision led to students being educated separately to their peers, this government policy has resulted in the same outcome. Students in the vulnerable provision were not necessarily being educated alongside their peers, rather they were being educated in a separate provision, and they were not necessarily engaging with or visible to the other pupils that they might normally be educated with in school.

The Re-opening of Schools

"The lockdown has made us realise that pressures from school have a dreadfully negative impact on my child's wellbeing and behaviour. Taking the stress of school out of the equation has improved her general health, both physical and mental."
(Parent quote - Disabled Children's Partnership 2020:17)

Although schools have re-opened, attendance figures are already showing that a smaller proportion of students with SEND are in school than the general pupil population. There are potentially a number of reasons for this. Some parents do not want to send their children back to school or college in the short term because of the increased risks of Covid – especially if their child has underlying health concerns. However, there has been an increase in parents choosing to home educate because they have seen how much happier their children are at home outside of difficult school environments. Some parents have reported that their children are actually concerned and anxious about going back to school (Shepherd & Hancock:2020:3). For instance, they are concerned about the social interactions, teacher expectations, social distancing requirements, noise, having to learn all day and transport arrangements (Shepherd & Hancock:2020:3).

Potentially more worrying is that some parents are reporting that their child is not permitted to return to school, as a result of a risk assessment that is been put in place or removal of support (Tirraoro, 2020). Parents are being given reasons such as social distancing requirements, their child's inability to follow these new strict behavioural policies

that are being put in place, or that personal care needs cannot be met because of a lack of specialist protection equipment.

“Since his class returned to school the interaction via the online app has ceased which means he has had no specific interactions with his teacher or TA since this time”
(Parent quote - Special Needs Jungle 2020b:4)

And finally, given that the vast majority of students are now back at school, families have found that the support for home education has frequently been either removed or reduced for their child or young person who remains at home, for instance if they need to be shielding. Once again, this is leading to an increased separation between some students with SEND and their peers and a potentially poorer educational experience.

My own experience as a parent

To draw this paper to a close, I would like to draw on my own experience as a parent of a disabled child during lockdown. In particular, I want to focus on the two areas where my daughter, who has Down syndrome, actually benefited from being educated at home – and those benefits continue to be seen now she is back at school.

My daughter is in Year 11 in a mainstream secondary school and she has an Education, Health and Care Plan with 32.5hrs Learning Support Assistance provided. As a result, she has a Learning Support Assistant with her all day every day in school. However, in lockdown we were unable to replicate this. As a result, my daughter was forced to become more independent in her learning because we could not sit with her all day due to our own work and study commitments. We provided her with work that we differentiated to a level we knew she would be able to access, and asked her to work through it and ask for help only when really needed. During this time, her independence and confidence grew significantly. We have encouraged her school to continue to support her developing independence now that she has returned to school. However, for this to happen we believe that it will be a more concerted effort from the teachers to think about how to include her more in the general classroom, and it will require suitably differentiated instructions and work that she can access with minimal support. Of course, this supports Russell et al’s recommendations in their case for change following the *Deployment and Impact of Support Staff (DISS) Study* (Russell et al., 2013).

Their study found that a consequence of the deployment of teaching assistants was that ‘supported pupils become separated from the teacher, missing out on everyday teacher-to-pupil interactions’ (Russell et al., 2013:12). Unlike teachers, TA’s focussed more on ‘task completion’ than with ensuring teaching and learning had taken place, and closed down talk rather than opened it up (Russell et al., 2013:13-14). During lockdown, with the exception of art, which I will discuss below, my daughter did not receive much teacher instruction or contact, as they focussed instead on teaching the rest of the class. One could suspect that this highlights how little teacher time she had previously received in the classroom, as her education relied on interactions with learning support assistants instead.

To explain how greater teacher involvement has benefited my daughter, I will draw on a second example from our own experience during lockdown. Prior to lockdown, my daughter’s school were allowing her to sit in on the GCSE art class, but they did not think that she would be able to undertake GCSE Art & Design qualification. During her first term

of her being in Year 10, she would bring home her art book and it was clear to us that the learning support assistant had done some of the more detailed artwork in the book. However, during lockdown, when the school emailed the weekly work to the whole class, we quickly realised that the artists and the type of art that was being used as inspiration for the work that the students were going to undertake would be difficult for my daughter to access. She would not be able to reproduce similar artwork, even using her own interpretations. Therefore we looked for alternative artists to provide her with some inspiration, including Anthony Gormley and his sculptures, as well as other artists who were using photography, collage or more abstract approaches within their art.

During lockdown my daughter worked really hard on her art and on her return to school, with a portfolio of art that she had produced independently, the art teacher contacted me to explain how the work was of a suitable standard for submitting for a GCSE qualification. This led to a conversation about how and why we had chosen the artists we did, which was resulted in the art teacher suggesting more accessible artists for my daughter to be inspired by, now she is back in art lessons at school. The learning support assistant now takes on more of a support role and my daughter has been enabled to work independently in class, due to the teacher differentiating the curriculum and thinking about how it can be tailored to my daughter's ability level and interests. It looks as though she should gain a GCSE qualification next summer as a result. Again, this links back to Russell et al's recommendations about the effective use of teaching assistants in the classroom. As they describe, there is a need for a change in the teacher's role, where teachers need to adopt a more inclusive pedagogical strategy 'which deals with the learning of *all* pupils, and not delegate the learning and care of pupils with SEN and lower attaining pupils to TAs' (Russell et al., 2013:4, original emphasis).

Final thoughts

I would like to finish this paper leaving the reader with three questions to think about, that I think are suggested by the research into parents' experiences of Covid-crisis education during and after lockdown:

- Why was it that some schools were able to continue to support and educate children with SEND well during lockdown and others did not - was this simply shining a light on existing exclusion within inclusion?
- Has the new 'vulnerable' label has led to further separation and exclusion for some children with SEND, as the focus has been on safety and protection, rather than being included within education?
- What can we learn from the children who thrived or built independence during this period and what worked well for them?

References

ALLFIE (2020) *The Alliance for Inclusive Education's submission to the Education Select Committee's "The impact of COVID-19 on education and children's services" inquiry*. Available at: <https://committees.parliament.uk/writtenevidence/8754/pdf/>

Daniels, H., Thompson, I., Porter, J., Tawell, A. & Emery, H. (2020) *School Exclusion Risks after COVID-19*. Available online at: http://www.education.ox.ac.uk/wp-content/uploads/2019/11/Daniels-et-al.-2020_School-Exclusion-Risks-after-COVID-19.pdf

Disabled Children's Partnership (2020) *#LeftInLockdown - Parent carers' experiences of lockdown*. Available at: <https://disabledchildrenpartnership.org.uk/wp-content/uploads/2020/06/LeftInLockdown-Parent-carers%E2%80%99-experiences-of-lockdown-June-2020.pdf>

Pavlopoulou, G., Wood, R. & Papadopoulos, C. (2020) *Impact of Covid-19 on the experiences of parents and family carers of autistic children and young people in the UK*. Available at: <https://discovery.ucl.ac.uk/id/eprint/10101297/>

Reaching Families (2020) *Coronavirus Survey*. Available at: <https://www.reachingfamilies.org.uk/images/impact/RF-CoronavirusSurveyReport-April2020.pdf>

Russell, A., Webster, R., & Blatchford, P. (2013) *Maximising the Impact of Teaching Assistants: Guidance for School Leaders and Teachers*. Abingdon: Routledge.

Shepherd, J. & Hancock, C.L. (2020) *Education and Covid-19: Perspectives from parent carers of children with SEND*. Available online at: https://amazesussex.org.uk/wp-content/uploads/2020/09/Brief-Report_Education-and-Covid-19_-_Perspectives-from-parent-carers-of-children-with-SEND-FINAL.pdf

Special Needs Jungle (2020) *Evidence submitted by Special Needs Jungle to the 2020 House of Commons Education Committee Inquiry into the Impact of COVID19 on Education and Children's Services*. Available at: <https://committees.parliament.uk/writtenevidence/9019/pdf/>

Special Needs Jungle (2020a) Annex to Evidence submitted by Special Needs Jungle to the 2020 House of Commons Education Committee Inquiry into the Impact of COVID-19 on Education and Children's Services. Available at: <https://committees.parliament.uk/writtenevidence/9020/pdf/>

Special Needs Jungle Ltd (2020b) *Coronavirus and SEND education*. Available at: <https://www.specialneedsjungle.com/coronavirus-send-education-survey/#DLreport>

Tirraoro, T. (2020) The scandal of the children with complex needs told they're not welcome back at school. *Special Needs Jungle*. 8 September 2020. Available at: <https://www.specialneedsjungle.com/scandal-children-complex-needs-not-welcome-back-school/>.

Warnock, M. (2010) Special Educational Needs: A New Look. In: Terzi, L. (ed.) *Special Educational Needs: A New Look*. London: Continuum, 11-45.

Section 4:

Managing medical complexity in specialist educational settings during Covid - how pre-existing fault lines have constructed children's exclusion from school

Dominic Wall, Executive Principal and SEND Lead for Co-op Academies Trust

Introduction

This paper is about managing medical complexity, in particular the care conditions requiring aerosol generating procedures, which have been a key talking point during the Covid period. This is presented by a Special School Headteacher who is a member of the DfE SEND Reference Group during Covid-19, and I'm also a topic adviser for NICE, the National Institute of Health and Clinical Excellence regarding education and special educational needs.

When we came back to school in Autumn 2020 I wrote a piece in *Schools Week* to draw attention to the fact that children with complex health care needs had been really ill-served by the system collectively, and many children were not able to return to school when the promise was 'all children will return in September.' At the time of presentation (November 2020) all 17 of those students were still not attending school because of personal protective equipment (PPE) issues. What will be shown is that this is not simply a story about complicated government procedures, advice writing, triple-locks where the Cabinet Office reviews things before it lets the DfE say them. That is true, but actually it sits within a wider context and the underlying fault lines about why it is difficult for these children and their families.

All this sits in a context of the ideological battles around inclusion in the twentieth century. In the twenty-first century society has developed the technology to keep children who previously did not survive infancy, did not get to school even, are now successfully getting into school and to adulthood. We are seeking to find a model that really meets their needs effectively. One of the things we have generated as a system in pursuit of that is the SEND Code of Practice, renewed in 2015. In parallel with that, there have been the impacts in the second part of this decade in particular in schools of austerity, and the way in which public sector budgets have forced different entities into commissioning statutory requirements rather than commissioning for excellent outcomes. I will discuss how this has been constructed; the funding, the organisation and governance of these interactions between health and education services. All this underlies the lack of understanding about how to respond when it comes to Covid-19 and the children who have aerosol generated procedures.

Historical context

My family had two adopted children, who joined us when I was ten, and I remember my little sisters coming home asking my mum, "What does it mean if you are educationally sub-normal?" - cos that's what the teacher told them they were. I can remember my mum, an activist, telling me this lady called Warnock had come up with an idea that was going to change that. So, the Education Act 1981 was something I knew was in place when I was trained and ILEA (Inner London Education Authority which is now disbanded) had come up with this startling idea that Kevin and Lee should be allowed to play together, something which I took very seriously in my PGCE years. So, I was one of the young teachers very motivated when the Salamanca Statement came out and told us that all children with

special needs must have access to regular schools, and therefore to be included with their peers.

Over time I have come to recognise that there has actually been a down-side to the polarised proposal that sets the medical model against the social model of disability. Some came to take a view that some types of education setting as negative and a segregation, even as discriminatory. This statement was actually written in 2003 at a time when the Government report of the Special Schools working group was just concluding that we probably did need to keep Special Schools for a particularly vulnerable type of child.

“Inclusion within a special school is a contradiction of terms. Inclusion by definition takes place in the mainstream. It is a nonsense for special schools to describe themselves as 'inclusive' because for a child to be in a special school in the first place, exclusion has had to take place. ... That child has been excluded from the school or setting where he or she would have gone, had they not been categorised as having individual 'deficits' requiring separate provision in a special school” (Centre for Studies in Inclusive Education, 2003).

Back then, some of the people were involved in the debates around the Campaign to ban all Special Schools by 2020. But, by 2015, the world had moved on and for the children with complex needs a statutory duty was introduced that schools and their governing bodies must make arrangements for children with medical conditions. Too often they were not enabled to attend schools. In the SEND Code of Practice 2015, it was clarified in Section 42 that healthcare provision must be provided – CCGs (Clinical Commissioning Groups) must ensure that health provision is made available in those schools where those children go. There had been a test case - The Bromley case in 1999 - which was remembered as a big watershed. This clarified that health derived therapies which educate or train children so that their development prospers can be regarded as specialist educational provision and therefore should be funded within Part F, the Special Education part, of an Education Health and Care Plan. This was a really important bit of organisational thinking because it led us into the discussion at individual child level about: ‘Is this medical health derived activity a therapy that educates or trains, or a health need that supports health and well-being?’

However, we organise school as blocks and sectors and so ever since then, in the schools funding regulations (Education and Skills Funding Agency, 2020), in the very final part of the whole regulations, there is an obscure one line statement, which says that therapies are now part of this thing called the ‘high-needs’ block. However, interestingly, when you go to the operational guidance for the high needs block, there is no mention of therapies. When you go and look at the law, and ask the question, ‘where is this health provision for children with the most complex needs when they attend school provided from?’ what you discover is that there is Schedule 2 of the annual statutory instrument, i.e. where the high needs block of provision is funded from (The School and Early Years Finance (England) Regulations, 2020. DfE, 2020). But, when you search for the explanation of how these therapies will be provided for, it only says not ‘therapies’ but ‘special medical support.’ It says that ‘special medical support’ should be funded in so far as such expenditure is not met by an NHS Trust or CCG. Now, this is obscure because of the elision from the word ‘therapies’ to ‘special medical support’, and because of the choice of words in the drafting of this statutory instrument. This states that ‘in so far as such expenditure is not met by an NHS Trust, Clinical Commissioning Groups (CCGs) etc.,’. What has actually been happening nationally in times of austerity is that CCGs and NHS Trusts have been using this statement to say, ‘we

only have to fund this if it's not met and therefore, you the local authority should fund it because we're not going to meet it.' I, I know of over a dozen local authorities where CCGs have actively withdrawn their health provision– not their therapy provision – their health provision – from specialist settings where the most vulnerable children with medical needs now have reduced service as a result.

You might think that the Care Quality Commission (CQC) would take a view that this was a problem, but the CQC is set up so that it only governs the work of those supervised by registered healthcare providers. If there is any 'delegation of tasks' when people who work for other organisation, such as schools, have tasks delegated to them, you then discover that that it is not under the CQC. There is different guidance from the Nursing and Midwifery Council which is very clear that if you are delegating healthcare tasks to people who work for another organisation, such as a school, you must ensure that the people involved are competent to do those tasks within their job. This means that they are clinically supervised rather than just line managed by a head teacher, and that their competence when trained meets the required standard, which is quite a high standard. The Royal College of Nursing has discovered that in fact it is really quite a complicated activity for a nurse to train school staff in carrying out medical activities. So, not only do you need to be in partnership with the employer, you retain accountability for the training that you provide. This means that you must ensure that the support worker you train is employed and governed to do those tasks.

The reason that this is so important is because these very vulnerable children require all of those things to sustain their life as well as their health and wellbeing. A number of cases have been drawn to the attention of the organisation that I coordinate, Medicine in Specialist Schools, when children in specialist schools have died where the healthcare provision or the quality of the support for that child's health need was considered to be in question. These challenges create a real problem in terms of an accountability gap. Is it the fault of a head teacher that services were unable to support a child's health and well-being? Or is it the fault of a clinician who cascaded training, then walked away without checking on the competence and clinical supervision that followed on? A letter has been written to Ofsted to highlight this issue, but a year later a reply is still awaited. This reflects a fault line in our national design of support for these children.

Covid context:

During Covid children with the most complex needs, those needing respiratory care that involves every day continuous supervision to maintain their health and wellbeing, have been out of school since March in almost all cases in England. One of the reasons is that the national messaging around managing Covid in schools ignored their needs (DfE, 2020). At the end of the summer term 2020, the DfE stated that staff in education will not require PPE, but if you turn down to the Q&A section at the bottom of a long website, it stated that in fact children with the most complex health care needs did indeed need exactly the same PPE as that worn on Red Wards in hospitals. This then became quite a controversial issue. Just before the September term started back an authoritative group of medics wrote a paper which proposed that schools could operate to a lower standard than those proposed by Public Health England. But recently the new guidance which came out in November 2020 clearly adds content on aerosol-generated procedures. But, when you go to that content, what you discover is that we are still trying to strike a balance between taking a non-medical approach in which each child's medical needs are individually assessed through their

Education, Health and Care Plan, and continuing to tack on the PPE requirement. This comes straight from a medical setting and is consistent with the public health guidance on how to support children with health care needs in any setting, or anyone with an aerosol-generated procedure.

Concluding comments:

I have briefly sketched out why we have had these contradictory messages with the consequence that this very vulnerable group of children had basically spent 8 months without clear guidance that really describes how schools can seek to meet their needs. I have a hopeful perspective for a number of reasons. One is that as shown in the SEND Reference Group, the DfE is earnest in its wish to understand this better, respond quicker and to collaborate with the sector more effectively. The new Minister for Children and Families, who started in February 2020 has made a very clear statement of a willingness to pull two ends of a polarized spectrum – the medical model and the social model – together to have a system fit for purpose to support these children and their families much more effectively than we have been able to do before.

References:

Centre for Studies in Inclusive Education (2002) *Inclusion Charter*. Accessed on 8.2.2021 : <http://www.csie.org.uk/resources/charter.shtml>

DfE (2020) The School and Early Years Finance (England) Regulations (2020). Access on 8.1.21 at National Archives: <https://www.nationalarchives.gov.uk/information-management/legislation/>

DfE (2020) Safe working in education, childcare and children’s social care settings, including the use of personal protective equipment (PPE)

<https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe>

Education and Skills Funding Agency (2020) School. Revenue funding 2021-2022; Operational guide. DfE December 2020. Accessed on 8.1.21: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/945784/Schools_Operational_guide_2021_to_2022_V4_.pdf

Section 5:

Discussion group summaries:

Groups considered the following seminar questions:

1. What has it been possible to provide for the range of SEN since the Covid crisis? How well has provision worked and what has been worse and/or better than before Covid?
2. What has been learned from the experience of the Covid crisis that has affected: Ideas about what education for CYP with SEN / disabilities is about and how future education might be delivered?
3. How are parents thinking about the future of education for their children? For example: Increased interest in home schooling for particular group and where not at school has led to reduced stress?

GROUP 1:

For this group one of the key points was about how parents were coping; parents were suddenly realising what teachers were doing. There is potentially a real appreciation of the work that teachers are doing in terms of curriculum delivery. Parents know their children very well, they know how to support their needs, but they do not particularly potentially know how to teach them. Another big issues that arose for us was the inequality that it highlighted, not just about special needs, but education across the board. So, there are situations where parents have poor access to internet, where they have poor equipment, where they have more than one child needing support, and sometimes more than one child with a SEND needing support at home. It really did become an issue of equality both in terms of resources but also in terms of knowledge. What sort of social capital did the parents have? Did they know how to navigate the system? Did they know how to get the best for their children? So that was one key issue that we brought up.

The other focus of discussion was the issue of teaching assistants. What is the role of TAs? What is the position of them and is it time to revisit that and look at some research around the roles of TAs and schools? The other question raised was whether this is a good time for us to reevaluate what education is actually about. Is it that we are a teaching service that teaches the children in our care or is it that we are just basically a babysitting service to allow the workforce to be mobile? Another matter was about there are not only children in schools, there are also adults, the teaching workforce. Many teachers are currently saying there is very little acknowledgement for what they do - being asked to go into work daily into a room with maybe a dozen but maybe up to thirty children without masks; where is the consideration for their health?

GROUP 2:

This discussion was in terms of the pros and cons of what has happened during this Covid period. There have been good things that have happened – some innovative approaches particularly towards multi-agency working. For instance, people meeting together virtually, speech-therapy has been reported to be affective and parents were feeling that their child was safer at home in a lot of cases.

Another example was therapy providers being very adaptable, for example, shifting CBT onto Zoom. But, it was felt that some therapies might work better than others in a virtual environment. However, there was also a lack of services, with some talk about schools being

not very positive in their approach to welcoming in children. In a few cases, this may have involved schools trying to put parents off sending in their children.

There were safeguarding concerns too about children being at home. There was regression in some schools saying that they could no longer meet children's needs. Also, there children's concerns about being in school, although some bullying situations may have improved. There was also some reference to increased differentiation in teaching but also schools were having to address gaps in learning. There was talk about the Ofsted interim reports around reading.

This group finally talked about emotional well-being, and how we maybe need to think about the extra training that might be needed for staff that involves thinking about the everyday experiences of children. How does this affect their mental health and how they learn about themselves? One practice mentioned was Well-being Wednesdays, when children were encouraged to talk about their emotional well-being. And, we finally ended up talking about the importance of the well-being of head teachers and making sure that the school workforce's emotional well-being was valued too, which links to a point made by the previous group.

GROUP 3:

This group started talking about teachers; experience at the moment – being exhausted and their very high commitment to make it work. There was a need to maintain a simpler and clearer shared message about how to organise schools. Some believed that the situation had changed from May 2020 when the Government and teachers were fighting with each other. If parents are to be supportive of children going back into schools then maintaining that clear consistent message is important. There was also discussion about the well-being of staff, with people feeling safe. It was suggested that the wide-range of experiences had shown up the fault lines and how people had become more polarised. Somebody talked about 'shining the light on existing good and existing poor practice'.

Schools will be trying their best, but without a supportive system around them, they are not going to do nearly as much as a school that has a strong collaboration at a strategic level with CAMHS and education professionals. Some schools have been working closely with public health. For example in a Pupil Referral Unit (PRU) even children who spit could go in because they were issued with visors. That was a very different experience from some people who desperately needed something that they were advised to have, but could not obtain until now.

There have been some significant learning, becoming more technologically literate. This involves deciding what will be retained when back in the classrooms. There can be more flexible use of spaces, people could learn in different ways and think more about how technology is used. Teachers could break away from rigid and uniform expectations about what children are learning and what children are achieving. This reinforced Sharon Smith's discussion about Art GCSE. This is about different kinds of relationships where parents have seen a different way for their children's learning; becoming more involved in their children's learning and have better conversations with schools.

GROUP 4:

This group focussed on three things. First, responses to Covid highlighted inequalities between local authorities, e.g. neighbouring London Boroughs. This is about the variation in funding and the overall lack of resources, particular when it came to health and social care, availability of social workers and so on. Secondly, not enough has been done on sharing the positive stories and the positive practices on which teachers and schools can build. This was seen as foundational for going forward; shaking things up and doing things differently or better, but some kind of building blocks is required for that. Bringing out the points of light is needed. Thirdly, this group discussed some concerns about the ways in which less-inclusively minded schools might use the normalisation of home – schooling to outsource their responsibilities. As a note of caution, could this be the new off-rolling? Right at the end this group wondered whether or not the medical language of the pandemic might be somehow influencing the medicalisation of special needs again.

GROUP 5:

Like the other groups, this group talked about the range of experiences; children were experiencing things in a different way. For example, in school-based bubbles or pods, some of the children with special educational needs actually benefit from that, as with staggered starts and ends to the day, smaller groups at lunch-time, and it actually becomes a much calmer environment. But, other schools have been finding it more difficult. For example, a lack of teacher knowledge with regards to specific special educational needs, when teachers are on their own with the group in a bubble or a pod without any other support. They might be struggling with that. We discussed different experiences between the shires and the north of England where there are more areas of deprivation, which has exaggerated the difference in the experience that children are having.

There was also discussion of out of school provision and how that has been affected. Some things have been able to carry on, for example, a theatre group, that has proved quite successful. But others could not be presented in an IT format, so they had to stop. As a result the enrichment side that the children should be getting is not actually happening. That was having an adverse effect on parents as well. The differentiation aspect of some IT provision was also discussed. What parents can find for a child who is functioning at a lower level than their age and that is not demoralising or condescending was an issue. It was also noted that these experiences highlight the need to improve staff subject knowledge with regards to specific SEN needs, both teachers and teaching assistants.

GROUP 6:

The discussion in this group overlapped with those reported. One of the issues for this group has been the large variability between schools, reflecting the powerful effect of socio-economic disadvantage. This discussion touched on what was meant by the North and South differences, given the current narrative about this divide. But, there is also the issue within authority variations, e.g. in Sheffield where there are socially disadvantaged much more advantaged areas. There is a danger of over-generalising from very simple messages about the North and South. It was pointed out that in London, people in Tower Hamlets and lots of Hackney would not see themselves as a particularly advantaged area.

In another area there was an example of people in education assuming health service people were to be re-deployed into the education system, but did not turn up. As this became known, it caused parental anger. However, at a micro-level, there were benefits for

children and for staff in having fewer children. But, this raised the question of what was happening to all the other children who are not there at the time. And, also, what was happening as mainstream schools were receiving back children, with groups getting bigger. The other side of that issue was what can we learn from that that might be interesting and useful for the future; for handling groups of children in mainstream schools.

Finally, there was the issue that arises often in different areas of education and social care, the importance of relationships. In this case it is the pre-existing relationships and the values of individual schools. Where these existed, they could come together so that there was a better dialogue and consultation with a collegial approach, rather than parents being told what to do.

GROUP 7:

This group discussed why there was such a disparity and inequality in activities that were being sent home. Some had heard from parents about being really worried and anxious about children who were not engaging in their work, worried that they were going to be falling behind. This was about the variability in quality of what was being sent home. They connected this to expectations around education and the school accountability agenda. It was thought that this may lead practitioners to send home work that was not appropriate home learning. It may even be inappropriate in terms of what should be provided in terms of the knowledge led agenda, now current in schools. This led to talking about the kind of education that is needed for all children to thrive, not just children with special education needs. This was illustrated by how in the early years children are measured in very narrow curriculum areas. There was little accountability for providing opportunities for children to develop good social skills, develop resilience, and all those essential skills that are for life.