The crisis in supporting children with SEND
Executive summary

NAHT represents over 28,000 school leaders across the UK and were one of the first to raise alarm over the school funding crisis hitting schools across the UK. Independent experts have been adding their voices to the picture, and the Institute for Fiscal Studies\(^1\) revealed that between 2009/10 and 2017/18, total school spending in England fell by 8% per pupil in real terms.

In addition to cuts to school funding, cuts to health and social care provision now often leave teachers at the front line in supporting a range of children’s needs, including those with special educational needs (SEN). The funding crisis in schools is not just about cuts to education budgets, but the cost to the most vulnerable children of cuts to a range of critical support services.

It is against this backdrop that in the summer of 2018, NAHT sought the views of school leaders on their experiences in relation to the education of children with special educational needs and disabilities (SEND). This report uses our findings to call on the government to address the funding shortage for these children, which is now at crisis point.

Key findings

- Only 2% of respondents said that the top up funding they received was sufficient to meet individual education health and care plans (EHCPs) or statements for pupils with SEND.

- 94% of respondents are finding it harder to resource the support required to meet the needs of pupils with SEND than they did two years ago.

- 73% of respondents said it was harder to resource support for pupils with SEND due to cuts to mainstream funding, as cuts to teaching assistants and pastoral staff have had a major impact on schools supporting their most vulnerable pupils.

- 70% of respondents said that cuts to health and social care budgets were making it harder to support the needs of children with SEND in the last two years.

- 83% of respondents reported not receiving ANY funding from health and social care budgets to support pupils with statements or EHCPs.

- 30% of respondents don’t receive services from health and social care to support their pupils.

\(^1\) IFS, [School funding per pupil falls faster in England than in Wales](https://IFS.org.uk) (July 2018)
• **There are long delays for pupils to be assessed**, with 15% of respondents waiting over six months from referral for an EHCP assessment, and 39% waiting over six months from referral for an EHCP to be produced.

• **EHCPs are not accurate when produced**, with less than a third (32%) of respondents reporting that EHCPs accurately reflect and help to address the needs of their pupils with SEND.

• 75% of respondents said that **professionals from health and social care don’t attend annual reviews and meetings** enough to provide the support needed.

**The impact on children**

Behind the numbers in this report lie the experiences of our members, and more importantly the children they are working to support. It is their experiences which most clearly reveal a system in crisis:

“A child arrived in September in a wheelchair with cerebral palsy - we have to provide 1:1 support and 2:1 for toileting - we have received not a penny. Applied for top-up funding - still waiting” [by May/June].

“Top-up funding is being used to run the schools as the £10,000 per place has not been reviewed in almost a decade and is not currently enough to cover running costs of special schools.”

“…We are also commissioning services from Health which were previously free but as criteria for involvement is raised we have to pay for support (Speech Therapy, Physiotherapy and so on).”

“Changes for health provision for under-fives means fewer are identified before starting nursery… I have parents who are shocked that we have concerns when their child starts nursery.”

“We have 39 children at SEN support and there is no funding to support them due to the other pressures on SEND.”

“Pointless having them [EHCPs] if there is no funding to support what they say the pupil needs.”

“CAMHS [child and adolescent mental health services] threshold is so high that pupils need to have attempted suicide to be taken on by CAMHS in this area”

“EPs [educational psychologists]: … there are long waiting times, and the work they are prepared to do is dictated by them rather than the child/school’s needs. SALT [Speech and Language therapists]- we just can’t afford to buy enough time so have to wait far too long. We use OTs [Occupational Therapists], not physios: their training is not sound enough in most cases to meet our needs. CAMHS: the thresholds are so ridiculous we can hardly access them despite very high levels of significant needs.”
Individual CAMHS workers are highly effective but far too few and their system makes them inaccessible most of the time.”

“We have had no LA [Local Authority] EP for 2 years and have had to buy private EP reports at £520 a time because we cannot access service. S&L [Speech and Language] no longer work with the children in school, but make a termly visit and give recommendations, which we have to fund support for. Mental health services are so hard to access that we are now paying for our own counsellor, which takes up a very substantial portion of our funding”

“It is extremely difficult to get children’s needs diagnosed in the first instance and almost impossible to access CAMHS service.”

“An educational psychologist will only be provided for an EHCP application. We need their support before it gets to this stage. You can only get a child onto the CAHMS list if they are suicidal or worse!”

The above are selected comments provided alongside answers in our survey, further comments are included in the report’s appendix. They leave no doubt as to the urgency of taking action to support children with SEND in our schools.

**Recommendations**

This report confirms the bleak picture that NAHT members have been reporting for some time; it shows an education system that is struggling to meet the needs of our most vulnerable pupils. The clear recommendations of this report are:

1. The DfE must undertake a full review of current and future demand for high needs funding to support pupils with SEND and secure an immediate increase in funding from the Treasury.

2. There must be proper recognition of the full cost of educating pupils with SEND, and we must move away from the concept of a ‘notional SEND’ budget that penalises mainstream schools that are most inclusive.

3. The real terms cuts to mainstream funding have led to cuts in learning and pastoral support staff that is also undermining the ability of schools to support their pupils with SEND, especially for the one million SEN support pupils not receiving high needs funding. The government must provide sufficient funding to redress the real terms cuts to the mainstream schools block funding.

4. The education budget was never intended to meet all the needs of pupils with SEND and the government must provide more funding for health and social care services to promptly meet the health and social care needs of children and young people with SEND and those with mental health problems. The additional £20.5bn\(^2\) per year going into the NHS must include provision to support children and young people’s EHCPs and mental health needs.

\(^2\) Department of Health and Social Care, 5 year NHS funding plan (June 2018)
5. The government must ensure that there are sufficient trained therapists and professionals available to support the special educational and mental health needs of pupils.

6. In April the education select committee launched an inquiry to review the success of the 2014 reforms to the SEND system. This report makes clear that the vision set out in the SEN code of practice is not being delivered. Delays to assessing pupils and the failure to fund their support is resulting in our most vulnerable pupils missing out. The inquiry must identify the actions required to deliver the code as originally intended.

Who did we ask?

Our online survey was open for a period of three weeks between 21 May 2018 and 11 June 2018 and received a total of 637 responses from NAHT members.

- 94% of respondents were from primary or nursery settings
- 91% were from mainstream and 9% from special schools
Getting support for children with SEN

There are 1.28m pupils\(^3\) with special educational needs in schools in England, who receive support in one of two ways. The first of these are the 1.02m children with SEN who do not have a statement or education, health and care plan (EHCP) but will have special educational provision put in place by their school to remove any barriers to learning they may face – this category of pupils are described as having SEN support needs. **Schools do not receive any additional funding outside of their main budget to support these children.**

Some children with SEN may not make expected progress in schools, despite efforts to identify, assess and meet their special educational need. In these cases, schools or parents can request an assessment for an EHCP (previously a statement). This assessment involves the local authority (LA) gathering information from relevant people or agencies, including the views, interests and aspirations of the parents and child or young person. The plans identify educational, health and social care needs to allow pupils to realise their educational potential, and the EHCP sets out the additional support required to meet those needs. In 2018, there were 254,000\(^4\) children with a statement or EHCP in England.

In order for schools to give children who require an EHCP the support they need, they must be able to refer children for an assessment when necessary, have the assessment carried out in a timely manner, rely on that assessment providing a good understanding of the child’s needs and have confidence that funding will be available to provide the support which the plan deems necessary.

Our survey shows evidence that for the significant majority of schools each part of this process is broken.

**Referring for assessment**

The SEND code of practice\(^5\) (that has regulated the requirements for the education of pupils with SEND since 2014) sets out the statutory timelines around the assessment for an EHCP. Where an assessment is carried out and the decision is taken not to produce a plan, the LA must notify the parent within a maximum of 16 weeks from the point of referral; however, we found that to even get to the point of assessment, 15% of schools had to wait over six months.

For those children who are judged to need a plan upon assessment, the statutory deadline for the plan to be produced is 20 weeks from the point of referral – 39% of respondents said that this was exceeded, as they were waiting over six months for an EHCP to be provided.

Time spent waiting for an assessment and plan to be produced is time a child’s needs are having to be met by the school, without any support or funding available.

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\(^3\) DfE, National statistics – Special educational needs in England (January 2018)  
\(^4\) DfE, National statistics – Special educational needs in England (January 2018)  
\(^5\) DfE, Statutory guidance - SEND Code of Practice (Sep 2014)
This can divert scarce resources from supporting the school’s wider group of pupils.

Q. When you refer a pupil for an EHCP

- What is the average waiting time before the initial assessment is carried out?\(^6\)
- From the point of referral, what is the average waiting time for the EHCP (if agreed to) to be produced?\(^7\)

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0%  5% 10% 15% 20% 25% 30% 35% 40%

- Up to 8 weeks
- 8 weeks - 3 months
- 3 – 5 months
- 6 – 9 months
- 9 – 12 months
- 12 – 18 months
- More than 18 months
- It varies greatly
- Other
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Assessing the child's needs

Although the code of practice gives guidance, it does not stipulate the form that an EHCP must take, so each LA may prepare them in a different way. However, they must each include:

- the views, interests and aspirations of the young person
- their educational, health and social care needs
- the outcomes sought
- the provision from each; special education, health care and social care.

The responses to our survey showed that less than a third (32%) of respondents felt that EHCPs accurately reflect and help to address the needs of their pupils with SEND.

Furthermore, as those needs change, the regular review meetings to discuss a child’s needs are critical, yet when asked how often specialists from health and social care attend relevant meetings, 75% of school leaders who wanted this support reported that this was either not at all or not enough to provide the support needed.

\(^6\) There were 454 respondents to this question
\(^7\) There were 451 respondents to this question
Having faced lengthy waits for assessments to be carried out and plans to be produced, our members then find that the resulting EHCP does not accurately reflect the child’s needs, and that specialists from health and social care don’t regularly attend the meetings that could help address any shortcomings of the plans in place.

This leaves schools increasingly isolated in trying to provide a level of support they are not trained or funded to deliver.

Q. Generally, to what extent do EHCPs accurately reflect and help to address the needs of your pupils with SEND?

- They vary significantly depending on the local authority (6%)
- The quality varies significantly (27%)
- They often overestimate their needs (2%)
- They generally provide an accurate assessment of need (32%)
- They often underestimate need in at least one area (29%)

There were 558 respondents to this question.
Q. Where relevant, do professionals from either health or social care attend annual reviews and other relevant meetings relating to a child’s needs and EHCP/statement?9

Key findings

Long delays for EHC assessment and EHCP production
- 15% said they wait over six months from referral for an EHCP assessment
- 39% said they wait over six months from referral for an EHCP to be produced

EHCPs not accurate when produced
- Less than a third (32%) said that EHCPs accurately reflect and help to address the needs of their pupils with SEND
- 75% said that professionals from health and social care don’t attend annual reviews and meetings enough to provide the support needed

9 There were 540 respondents to this question
The wider school funding picture

The funding crisis in schools is today the biggest area of concern for school leaders – our members fear for the future of their pupils and their educational provision. Most already feel that they have done everything to make budgets balance: cut staffing levels, improved procurement practice, reviewed class sizes and curriculum, deferred all but the most critical repairs to their buildings and slashed investment in training and professional development. They have run out of options. Without an injection of funding into the sector, our 2018 Breaking Point survey of school leaders found that 79% are expecting a deficit budget for 2019/20.

In considering the funding context for SEND provision we must account for both mainstream settings and the funding dedicated to special schools. The 1.28m pupils with SEN are either registered as requiring SEN support (1.02m), and unlikely to receive any form of high needs funding, or have an EHCP or statement (0.25m).

The core funding for schools and academies in England comes via the dedicated schools grant (£43.7 billion in 2018/19), which is divided into four blocks, including:

- The schools block which pays for mainstream pupils’ education, including for mainstream schools’ SEN support
- The high needs block allocated to both mainstream and special schools to support places for pupils in special schools and the top-up funding to meet the needs of pupils with EHCPs.

With school budgets at crisis point both these sources of funding are under severe stress, a point emphasized in our 2018 Breaking point survey where members reported that supporting children with additional needs was the factor causing the most financial pressure on schools. Our members tell us clearly the vital importance of funding in considering the support of children with SEND.

Key findings

- Only 2% said top-up funding was sufficient to meet individual EHCPs
- 94% said they are finding it harder to resource the support required to meet the needs of pupils with SEND than they did two years ago
- 50% said top-up funding levels have decreased over the last 12 months
- 37% said that LAs have reduced the value of top-up bands.

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10 NAHT, Breaking Point 2017/18 (2018)
11 DfE, National statistics – Special educational needs in England (January 2018)
**Funding EHCPs and statements**

For pupils with EHCPs or statements in mainstream schools, the local authority (LA) will assess and determine the cost of meeting the pupils’ needs. Mainstream schools are expected to meet the first £6,000 (or more in some local authorities) of the identified needs from their core school budget. This is known as the ‘notional SEND’ budget, notional in that schools often receive far less than £6,000 per pupil in their core budget. The LA then provides additional top-up funding where the cost of the special educational provision required to meet the needs of an individual pupil exceeds this £6,000.

In special schools or specialist units in mainstream schools, the school place is funded at £10,000 and the local authority then determines the additional top-up funding required to meet each pupil’s needs as identified in their EHCP or statement.

It is vital therefore, that where a child has more complex needs and has been assessed and provided with an EHCP or statement, that top-up funding is provided to meet the costs of supporting that child. In a damming indictment of the state of top-up funding, only 2% of respondents said that the funding they received was sufficient to meet individual EHCPs.

<table>
<thead>
<tr>
<th>Q. Is the top up funding you receive to meet individual EHCPs:</th>
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<tbody>
<tr>
<td>Sufficient</td>
<td>2%</td>
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<tr>
<td>Insufficient</td>
<td>71%</td>
</tr>
<tr>
<td>Variable depending on pupil’s needs and/or accuracy of the EHCP</td>
<td>22%</td>
</tr>
<tr>
<td>Other</td>
<td>6%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
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</table>

Local authorities should work with schools that have high needs students, to ensure there are clear processes for determining and allocating top-up funding. In order to promote greater transparency, LAs are encouraged by the government to publish information about their top-up funding arrangements, for example how the funding levels are set for different types of institution, including any banding or top-up funding values. Transparency about these arrangements are key for schools to understand how and why they might receive what levels of funding.

However, 37% of respondents to our survey reported that their LA had reduced the value of their top-up funding bands.

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13 There were 554 respondents to this question
Q. Has your local authority made any changes to the top-up funding bands for pupils with EHCPs or statements? 14

We found that 50% of respondents said that overall top-up funding levels had decreased over the last 12 months, showing a rapid deterioration in the ability of schools to support pupils with high needs.

Q. Overall, have the top-up funding levels for each pupil with SEND: 15

In order to set the context for this lack of funding, we asked about support in the last two years, and reasons for any change. 94% of respondents said they were finding it harder to resource support for pupils with SEND than they did two years ago.

14 There were 534 respondents to this question
15 There were 553 respondents to this question
Q. Are you finding it harder to resource the support required to meet the needs of pupils with SEND than you did two years ago?

<p>| | |</p>
<table>
<thead>
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<th></th>
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<tbody>
<tr>
<td>Yes</td>
<td>94%</td>
</tr>
<tr>
<td>No</td>
<td>0%</td>
</tr>
<tr>
<td>Varies depending on cohort</td>
<td>3%</td>
</tr>
<tr>
<td>Not sure</td>
<td>1%</td>
</tr>
<tr>
<td>Other</td>
<td>1%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
</tr>
</tbody>
</table>

Q. What do you think are the reasons for this? (Please tick all that apply)

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local authority cuts to high needs top up funding for pupils with SEND</td>
<td>79%</td>
</tr>
<tr>
<td>Cuts to mainstream funding for the school</td>
<td>78%</td>
</tr>
<tr>
<td>Cuts in health and social care services meaning that support and therapeutic services are less accessible and responsive to need</td>
<td>75%</td>
</tr>
<tr>
<td>Children have more complex needs</td>
<td>72%</td>
</tr>
<tr>
<td>More stringent criteria making it harder to secure an EHCP</td>
<td>56%</td>
</tr>
<tr>
<td>Delays in securing an EHCP assessment</td>
<td>48%</td>
</tr>
<tr>
<td>Reduced numbers of teaching assistants</td>
<td>44%</td>
</tr>
<tr>
<td>New curriculum is less accessible to pupils with SEND</td>
<td>35%</td>
</tr>
<tr>
<td>Other</td>
<td>7%</td>
</tr>
</tbody>
</table>

16 Are you finding it harder...
17 What do you think are the reasons...

When the 94% who were finding it harder than two years ago to resource support were asked what they thought the reasons for this were, the top three responses were:

- LA cuts to high needs top-up funding - 79% (74% of respondents to initial question)
- mainstream funding for the school - 78% (73% of respondents to initial question)
- health and social care services - 75% (70% of respondents to initial question).

The table above represents responses from both mainstream and special schools. For mainstream schools alone, **77% of those reporting that it was harder to resource support attributed this to the cuts to mainstream funding**; cuts to teaching assistants and pastoral staff have had a major impact on schools supporting their most vulnerable pupils.

16 There were 454 respondents to this question
17 There were 424 respondents to this question
75% of those finding it harder to support the needs of pupils with SEND highlighted the impact of cuts to health and social care. This emphasises the point that the funding question is not just about direct school budgets, but that schools are now being asked to do more; going beyond the role of teacher and educator. Health and social care cuts must be considered as part of the funding crisis.

Our survey findings confirm that it is the real terms cuts to the schools block funding, as well as cuts to high needs funding and children’s services in health and social care that are combining into a crisis for funding the education of pupils with SEND.

Health and social care

The relationship between education, health and social care is critical to the education of children and young people with SEND. Some of their needs can be met by schools, but many of their physical and psychological needs must be supported by health and social care. Funding for these services is at the heart of the question of how we can allow children with SEND to realise their potential in schools.

Key findings

- 70% said that cuts to health and social care budgets were making it harder to support the needs of children with SEND in the last two years.
- 83% said they do not receive ANY funding from health and social care budgets to support pupils
- 30% said they do not receive ANY services from health and social care departments to support pupils
- Of those who do receive services, 82% said that these have declined in the last two years
- For each service, long waiting times were the greatest barrier to use.

Q. Are you finding it harder to resource the support required to meet the needs of pupils with SEND than you did two years ago?

| Yes | 94% |

Q. What do you think are the reasons for this? (Please tick all that apply)

| Cuts in health and social care services meaning that support and therapeutic services are less accessible and responsive to need | 75% |
Q. Do you receive funding from health and social care budgets to support your pupils?\textsuperscript{18}

\begin{figure}[h]
  \centering
  \includegraphics[width=0.5\textwidth]{pie_chart.png}
  \caption{Percentage of respondents receiving funding from health and social care budgets.}
\end{figure}

Schools rely on expert support for children with SEND, which lie outside the expertise or scope of school staff. These services include speech and language therapists, occupational therapists and educational psychologists, who provide vital support to the children in the school.

30\% of respondents said that they didn’t receive such services from health and social care and, of these, 53\% said they used to receive services but these had been stopped despite being needed.

Amongst the 66\% who did receive services, 82\% said that these had declined in the

\begin{table}[h]
\centering
\begin{tabular}{|l|c|}
\hline
Those who answered ‘No’ said - & \\
\hline
We have never received funding from health and social care to support our pupils but it is needed & 77\% \\
We used to receive funding from health and social care budgets to support our pupils but this has stopped despite it being needed & 12\% \\
Our pupils with SEND do not require funding from health and social care to meet their needs & 6\% \\
We used to receive funding from health and social care budgets to support our pupils but this has stopped as it is no longer needed & 1\% \\
Other & 4\% \\
\hline
\end{tabular}
\caption{Reasons for not receiving funding from health and social care budgets.}
\end{table}

\textsuperscript{18}There were 555 respondents to this question

\textsuperscript{19}There were 451 respondents to this question
last two years – further evidence of the deterioration of cuts to health and social care services on children with SEND.

Q. Do you receive services (e.g. allocated time for speech and language therapy or another specialist resource) from health and social care to support your pupils?20

There were 548 respondents to this question

There were 376 respondents to this question

### Those who answered ‘Yes’ said -

<table>
<thead>
<tr>
<th>Description</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>We receive services from health and social care to support our pupils but these have declined in the last 2 years</td>
<td>82%</td>
</tr>
<tr>
<td>We receive services from health and social care to support our pupils and the level of support has remained the same in the last 2 years</td>
<td>9%</td>
</tr>
<tr>
<td>We receive services from health and social care to support our pupils and the level of support has increased in the last 2 years</td>
<td>2%</td>
</tr>
<tr>
<td>Other</td>
<td>7%</td>
</tr>
</tbody>
</table>

20 There were 548 respondents to this question
21 There were 376 respondents to this question
To understand the difficulties in accessing services we asked for different types of provision what the greatest barrier to access was. In each case, the length of waiting time was cited as the greatest barrier. The cost of educational psychologists was also notable as nearly a third (31%) named this as the greatest barrier to access.

Q. For each of the following services which is the greatest barrier

<table>
<thead>
<tr>
<th>Service</th>
<th>Long waiting times</th>
<th>Not available in our area</th>
<th>Cost of the service is prohibitive</th>
<th>Lack of specialists in our area</th>
<th>We don't have a problem accessing this service</th>
<th>We don't use this service</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational psychologists</td>
<td>38%</td>
<td>2%</td>
<td>31%</td>
<td>12%</td>
<td>15%</td>
<td>1%</td>
<td>535</td>
</tr>
<tr>
<td>Speech and language therapists</td>
<td>44%</td>
<td>2%</td>
<td>12%</td>
<td>23%</td>
<td>18%</td>
<td>1%</td>
<td>526</td>
</tr>
<tr>
<td>Physiotherapists</td>
<td>35%</td>
<td>6%</td>
<td>6%</td>
<td>16%</td>
<td>12%</td>
<td>25%</td>
<td>527</td>
</tr>
<tr>
<td>Mental health services (CAMHS)</td>
<td>84%</td>
<td>2%</td>
<td>1%</td>
<td>10%</td>
<td>2%</td>
<td>1%</td>
<td>528</td>
</tr>
</tbody>
</table>

Conclusion

At our 2018 annual conference, NAHT passed an unprecedented number of motions which directly related to the funding of support for children with SEND. Our members were telling us loud and clear that for these children, the system is in crisis.

Our survey data substantiates these compelling messages and this report unambiguously sets out the state of crisis which exists.

NAHT calls on the government to take the necessary steps to ensure learning is open to all.

22 There were 162 respondents to this question
NAHT 2018 Annual Conference motions:

**Motion 6.** We are failing many of our children with additional needs because of the shortage of specialist support, appropriate funding and adequate systems required to deliver effective early intervention.

Conference calls on national executive to press the government for appropriate funding in order to provide the high-quality specialist support and systems required to deliver effective early intervention in all schools.

**Motion 7.** Conference is concerned about the government’s failure to adequately fund high needs provision for the education of pupils with SEND and by the negative impact this has on a school’s ability to provide for those pupils. Conference calls for national executive to ensure that NAHT campaigns nationally on this issue, working jointly with local authorities in London and nationally, and raising awareness with MPs of how government policy is damaging our pupils with the greatest needs.

**Motion 8a.** Conference urges government to work with NAHT to address the problems caused by diminishing resources coinciding with the increased complexity of children’s needs.

**Motion 8b.** The funding crisis for both mainstream pupils and high needs funding for pupils with additional needs, alongside cuts to health and social care services, threatens the ability of mainstream schools to support children with SEND. Conference urges national executive to call on the government to review the provision and find solutions so that mainstream schools can offer the same high-quality education to pupils with SEND.

**Motion 8c.** Increasing social care demands on schools whilst implementing budget cuts is a paradox. Conference instructs national executive to press the government to prioritise funding in this area rather than expecting present funding to meet the social care needs of all children.

**Motion 8d.** Funding and support for pupils with special educational needs and disabilities is reaching crisis point in our schools.

As the champion for our most vulnerable children and young people, conference urges national executive to drive home the seriousness of the situation to the government and press for an overall review of the decline in funding and support for pupils with all levels of SEND.
The following are a representative selection of comments to given questions of our survey.

Q21. Are you finding it harder to resource the support required to meet the needs of pupils with SEND than you did two years ago?

- A child arrived in September in a wheelchair with Cerebral palsy - we have to provide 1:1 support and 2:1 for toileting - we have received not a penny. Applied for top up funding - still waiting - ridiculous
- We cannot rely on Local Authority support as we used to. We have been proactive and created resources and a nurturing learning environment for the children.

Q22. What do you think are the reasons for this? (Please tick all that apply)

- Top up funding is being used to run the schools as the £10,000 per place has not been reviewed in almost a decade and is not currently enough to cover running costs of special schools. We are also commissioning services from Health which were previously free but as criteria for involvement is raised we have to pay for support (Speech Therapy, Physiotherapy and so on)
- Long wait times to see professionals e.g CAMHS, EP
- More SEND pupils coming to our popular school
- Parents of pupils with complex needs choose our school for their children. We have 5% of the total population with EHC plans which means our notional SEN funding is overspent annually by over £18k. This is impacting on our ability to staff and resource the school adequately for pupils who are vulnerable without EHC plans.
- Special schools not having enough spaces, this backs up support bases that in turn backs up schools with far more complex individuals.
- Access to Educational Psychologist services is dire
- Changes for health provision for under fives means fewer are identified before starting nursery, questionnaires are sent out and no follow up if no response. I have parents who are shocked that we have concerns when their child starts nursery. Also impact of parents expectations of 30 hours for children with very complex needs. Local school says ch will have to go back to part time until statutory school age, however we are told we are not inclusive if we do not offer the 30 hours to all entitled.
- There does seem an increase in the numbers of children with significant needs including all forms of autism
- …The reality is that EHCPS are not fairly distributed across schools so some schools are funding over and above their initial allocation, making it impossible at times to fully meet the first £6K of provision from the school budget. As an example, my school's delegated funds equate to 3.5 EHCPS. There are currently 11 children with an EHC in my school - so the budget gap is over £66,000.
- Influx of children from local schools not wanting to deal with SEND issues
- Increased parental demands
- Inadequate total funding for high level and low level needs in total. Receiving a fair slice of a cake which is too small.

Q26. Generally, to what extent do EHCPS accurately reflect and help to address the needs of your pupils with SEND?

- Quite often the targets set are too short sighted and too high for achievement in a short space of time. Also, EHCPS frequently reference 1:1 rather than enhanced provision
- Pointless having them if there is no funding to support what they say the pupil needs.
- When a child arrives with an EHC it underestimates. Biggest issue is they do not have one when clearly should.
- No input or at best outdated or poor input from health make them very unreliable as a working document and very one sided on education when parents need a more holistic approach
- They underestimate need and rarely provide much in the way of additional support, leaving the school to meet the cost of additional (now statutory) hours from a constantly dwindling budget.
- The EHCP presents very helpful information yet it doesn’t consider the school’s true capacity to address needs nor does it consider all the additional effort/timescales/skill base needed to acquire the right staff and have them professionally developed as necessary.
- There is an unfair process where children with the most significant needs are underestimated or not recognised as having needs, whereas others with less needs are being given EHCPs at parental request. As a school who know our children well we don’t feel listened to or supported by our local Authority.

Q28. Is the top up funding you receive to meet individual EHCPs:

- You have to fight to get it! You have to reject the pupil’s place at your school (even when they’re already in situ) and quote the SEND code to say you are unable to meet the pupils needs with the resource being offered. I then invite the LA to review the resources alongside a costed provision map.
- Top up funding is based on the costs of the lowest paid TAs, whereas meeting the needs of some children requires us to pay teachers, or HLTAs. This has meant that almost all available resource is put into trying to meet these needs, at the expense of all the other children in the school. Last year there was a shortfall of over £70,000 between our SEN funding and the cost of the support.
- It does not cover the full salary of a teaching assistant
- It’s none existent!
- Top-up funding no longer available

Q37. For each of the following services, what do you find is the single greatest barrier to access? (This question is talking about access to Educational psychologists, speech and language therapists, physiotherapists, CAMHS)

- CAMHS threshold is so high that pupils need to have attempted suicide to be taken on by CAMHS in this area. Shameful and I feel very sorry for the service who are doing their best.
- And very often, our referrals do not meet threshold and a Early Help Assessment is recommended!
- S&L therapy is available free for 5s and under; then it is responsibility of parents and school unless child reaches criteria for EHCP. No OT/physio school and parents fund. No SEMH support following diagnosis from CAMHS, school has to provide.
- "Hoops" need to be jumped through before you can access the service e.g. to access CAMHS, the family must first agree to and have taken part in an Early Help Plan (not always the service that is required for the child, when parenting is not the cause of the issue!)
- SaLT and Physio - constantly changing staffing as they become overworked, disillusioned and leave; maternity leave is not fully covered; time for note is taken out of face to face contact time.
- CAMHS for associated learning disability isn’t available- massive black hole in service here.
- EPs: LA cannot recruit so there are long waiting times, and the work they are prepared to do is dictated by them rather than the child/schools needs. SALT - we just can’t afford to buy enough time so have to wait far too long. We use OT, not physios: their training is not sound enough in most cases to meet our needs. CAMHS: the thresholds are so ridiculous we can hardly access
them despite very high levels of significant needs. Individual CAMHS workers are highly effective but far too few and their system makes them inaccessible most of the time.

- Social care is also necessary as for many young people with complex health and learning needs they require a multi disciplinary approach and often the health support is the decision of commissioners who do not have a joined up approach with education.

- We have had no LA EP for 2 years and have had to buy private EP reports at £520 a time because we cannot access service. S&L no longer work with the children in school, but make a termly visit and give recommendations, which we have to fund support for. Mental health services are so hard to access that we are now paying for our own counsellor, which takes up a very substantial portion of our funding.

- We have to buy in SALT and EP services privately.

- Can’t get children in to see them if attachment issues which accounts for 80% plus of our needs.

- Children with SLT and Physio and OT provision on their EHCP receive it but it is very very hard to get any support for children at SEN support level which is a complete anathema to me as we are constantly told that early intervention is best. It means that unless we buy into enhanced provision at a very high cost to the school, these children receive no support.

- CAHMS is almost unobtainable for your children. The only route is parent self referral.

- It is extremely difficult to get children's needs diagnosed in the first instance and almost impossible too access CAMHS service.

- Not willing to pick up children unless they have threatened suicide.

- we employ our own EP and speech and language therapists as they are no longer of decent quality and accessibility.

- We employ our own Tier 2 mental health worker.

- The Ed Psych service is an additional budget cost.

- Occupational Therapy is virtually non-existent even for those children with an identified need on an EHCP.

- schools have to fund the gap in services now.

- More stringent criteria means it is more difficult for referrals to be accepted.

- Camhs don’t seem to accept referrals for ch and yp with sld.

- We do not get any local support. Parents have to pay - ecp children we use private therapists.

- No support for children under 5.

- We provide psychotherapy as students cant wait.

- Waiting times for children in significant need of mental health support are very concerning.

- An Educational psychologist will only be provided for an EHCP application. We need their support before it gets to this stage. You can only get a child onto the CAHMS list if they are suicidal or worse!

- We employ our own SaLT - high cost but high need.

- We have sourced our own support for EPs after a disappointing traded service provided by LA.

- Although the services are available a number of children do not ‘meet the criteria’ therefore the school is left to support the children with limited skills in mental health, and SALT.

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