
Pre OFSTED/ CQC Readiness Survey

2018 to 2019

FVP Parent Representatives

Ofsted and COC Readiness Analysis - Survey Data.

1. Population

This survey was published for completion in February/March of 2019. This survey was completed anonymously, with the only personal data gathered being the respondents postcodes so that we could ascertain whether or not they lived and accessed services with in the Peterborough area. Responses were gathered from 35 parent carers; representing a total of 34 children, 21 of whom were identified as male and 13 as female. Ages of children and young people were declared as between 0-19 attending a range of educational settings ranging from mainstream primaries to academy secondary schools. All respondents had young people with a formal diagnosis, in a wide range of SEND as illustrated below, however one respondent noted they were unsure as to the exact identification of their young persons needs.

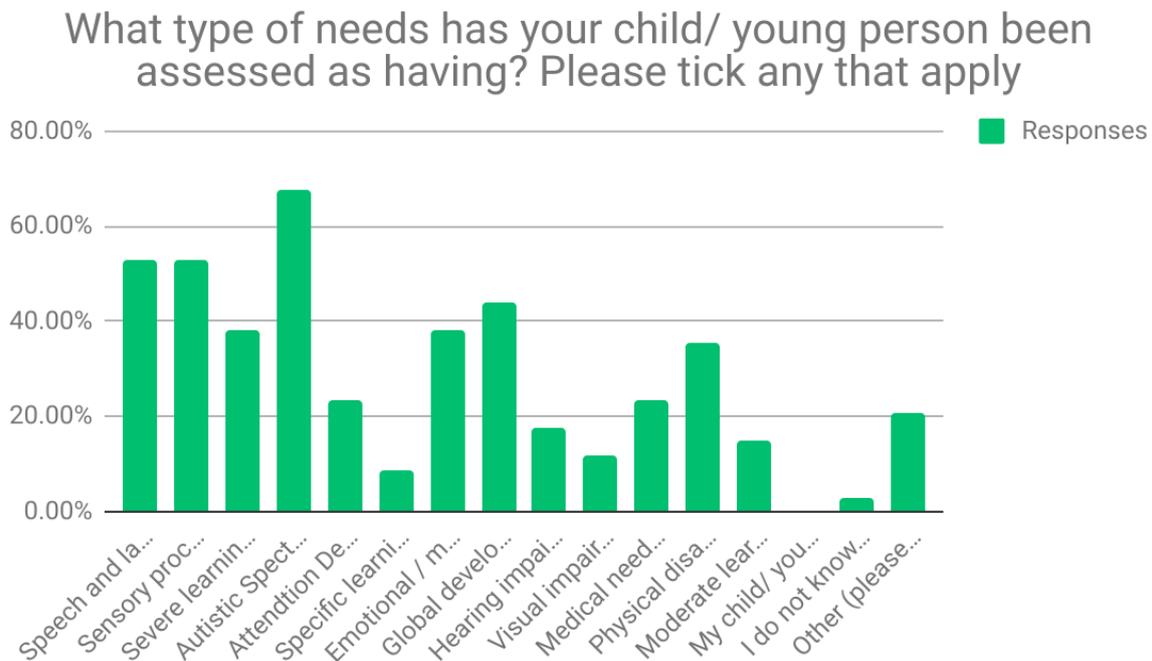


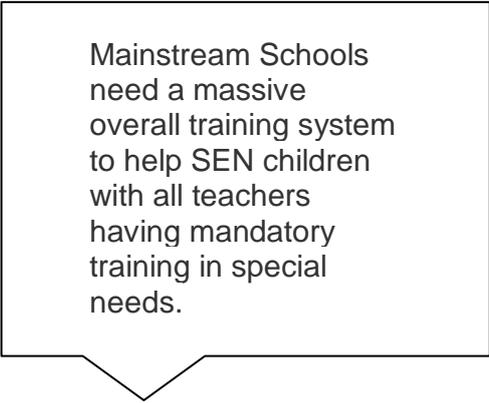
Fig. 1 Variety of Special Needs among the poll population

In addition to the choices provided, a number of respondents used the “other” option to detail their young persons needs, these responses are as follows:

- Ehlers Danlos Syndrome
- Hypermobility
- Chromosome Disorder
- Acquired Brain Injury
- Cerebral Palsy
- Trauma Disorder (PTSD)
- Downs Syndrome

The wide range of differing needs, even in a small sampling of the population is a clear indicator that educational settings need to cater for a wide range of special needs. Training is necessary in all settings, in at least the most basic elements of SEND, with strong links and coordination across education, health and social care to ensure that all children and young people are supported to progress and flourish. An improvement in mainstream response and management of children with SEND, enabling inclusion within all activities and the deliverance of a true differentiated curriculum would release some of the pressure on the areas specialist schools, enabling them to prioritise places for young people with the greatest need while ensuring all children are adequately educated and making progress.

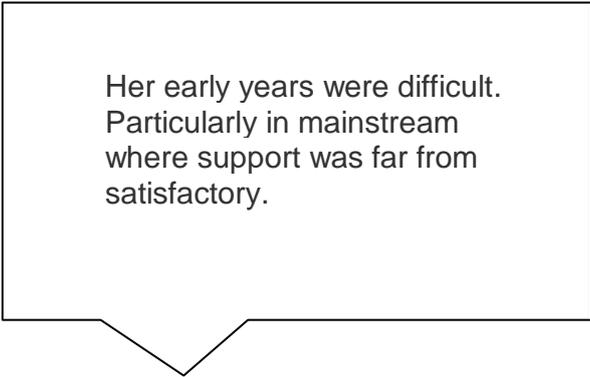
Following are comments collected from parents during the survey after they were asked how things could work differently to change people's experiences of SEND services:



Mainstream Schools need a massive overall training system to help SEN children with all teachers having mandatory training in special needs.



An appropriate setting for complex children with autism with a learning disability.



Her early years were difficult. Particularly in mainstream where support was far from satisfactory.

Fig. 2 Comments Relating to experiences in varying educational settings

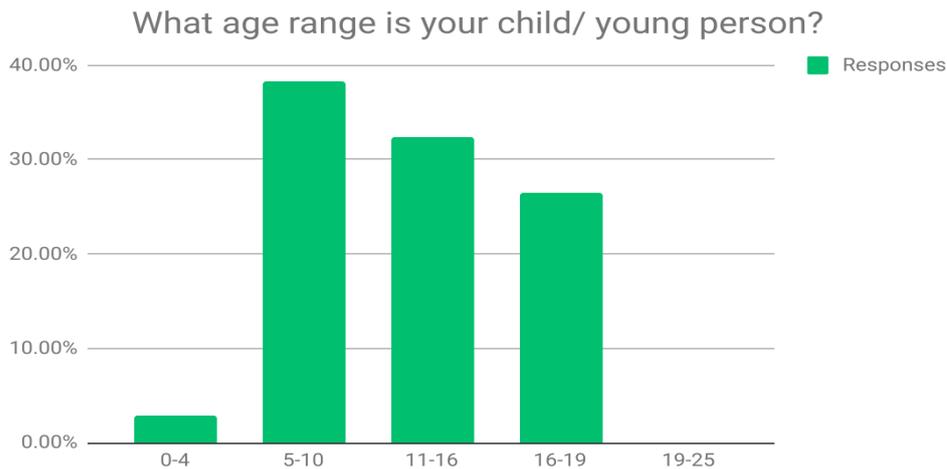


Fig. 3 Young Person Population Age Range

The age ranges declared are shown above and illustrate the wide range of challenges faced by SEND services. Children need to be supported as they develop; from early help to preparing for adulthood, and as this snapshot shows there are young people spread across all age ranges with a wide range of differing needs emerging as young people get older.

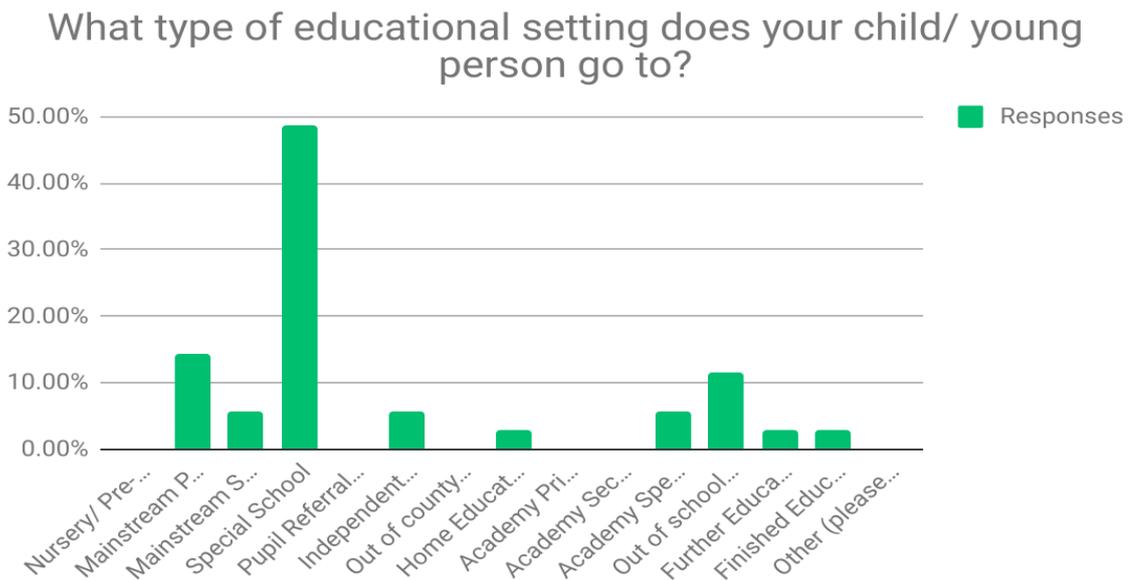


Fig. 4 Overview of SEND Educational Settings among the poll population

The overwhelming majority of respondents had children attending specialist schools - a mixture of academy, local authority and private, but there are a variety of other settings represented, including home-schooling and mainstream primaries/secondaries. The majority of parents with children in specialist settings feel that their child's needs are being met, but

this is a different story for mainstream attendees. SEND support for mainstream settings is still an area which needs developing and improvement, with many parents finding the Early Help Pathway difficult to navigate and unnecessarily lengthy. There is an underlying theme in parent responses that communication is a challenge across the board, especially between health, education and social care services and how parents are informed of what support is available and how it is accessible. Enabling parents to access the correct services and information via signposting and advice would bring about a marked change in this dissatisfaction. Family Voice are continuing a programme of outreach into schools, meeting a range of parents; from those just entering the pathway to those with long established diagnoses. This programme has seen marked success but it is an area which needs further development and funding if it is to successfully alleviate concerns over information sharing.

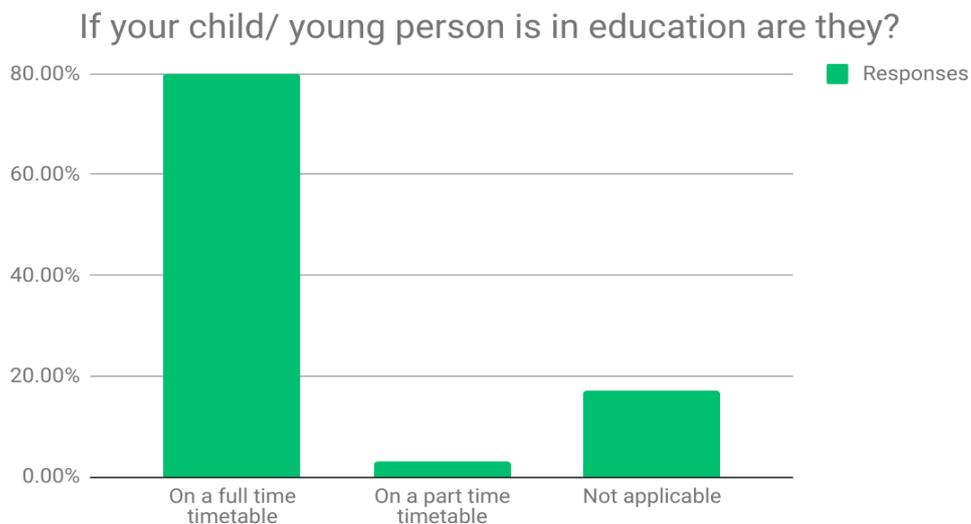


Fig. 5 Breakdown of population into Full and Part-time Timetable.

It is reassuring to see that 80% of the poll population are in full time education, with only 2.8% receiving a part time education. However 11.4% of respondents declared their children to be “out of education” as opposed to having finished or receiving education at home, this could be an indicator of failings in mainstream to manage the needs of children with SEND coupled with a shortage of availability of specialist school placements. It is also important to note that although the percentage of children receiving a part time education is small, the small percentage are still being failed by the system. Part time education is not a long term solution to management of needs.



Fig. 6 Parental Resilience

It is a positive sign that all parents declared a good understanding of their child's needs. If the information given here was accompanied by accounts of systems that worked well, parents feeling supported and respected and a situation where all services were seen to work together to effectively support children with SEND then it would be a measure of a high success rate for the SEND work carried out so far, meaning that services had improved and parents were feeling empowered and in control. However when that is taken into consideration alongside comments that we have gathered regarding a lack of information availability, difficulty accessing services and how much of a fight it is to access the right support it could be indicative of a situation where parents are having to take too much into their own hands, have given up on the system and may be at risk of burnout. This hypothesis is supported by the responses to the next question, dealing with support parents were given after their child's needs had been identified. Sixty percent of respondents answered in the negative, indicating that the understanding they had gained since was a result of individual effort and investigation as opposed to a result of support given by professionals.

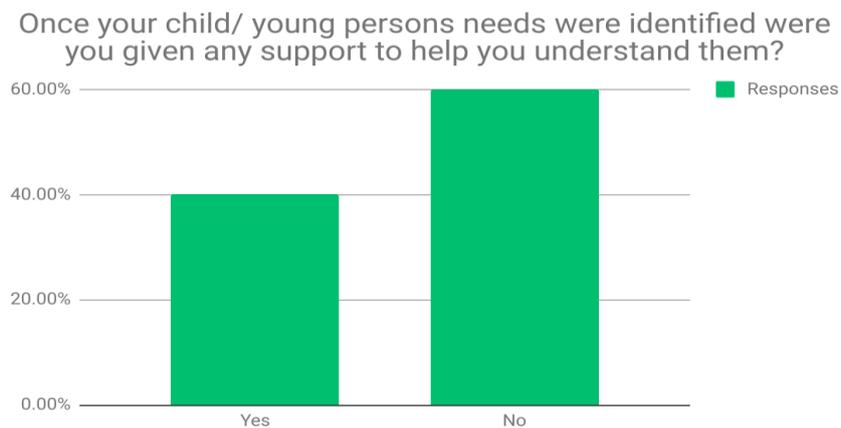


Fig. 7 Post-Diagnosis Support Rates Among Poll Population

Parents now have a wide range of information sources available to access in Peterborough, from various charitable organisations to the comprehensive guide to SEND found on the Local Offer website. Regardless of this we are told consistently that parents do not have enough information, about the child’s needs and about the availability of help, support and local service provision. This is perhaps indicative of a fault in the manner of information dissemination in Peterborough, and suggests that an investigation into the underlying reasons for the failure, and a rethinking of the system to suggest alternate ways of informing parents may be beneficial.

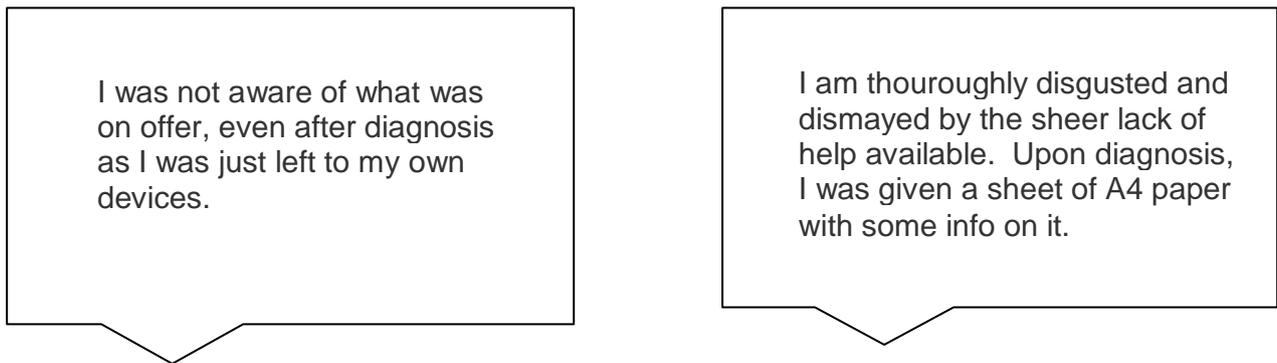


Fig. 8 Parent Comments Relating to Post Diagnosis Support

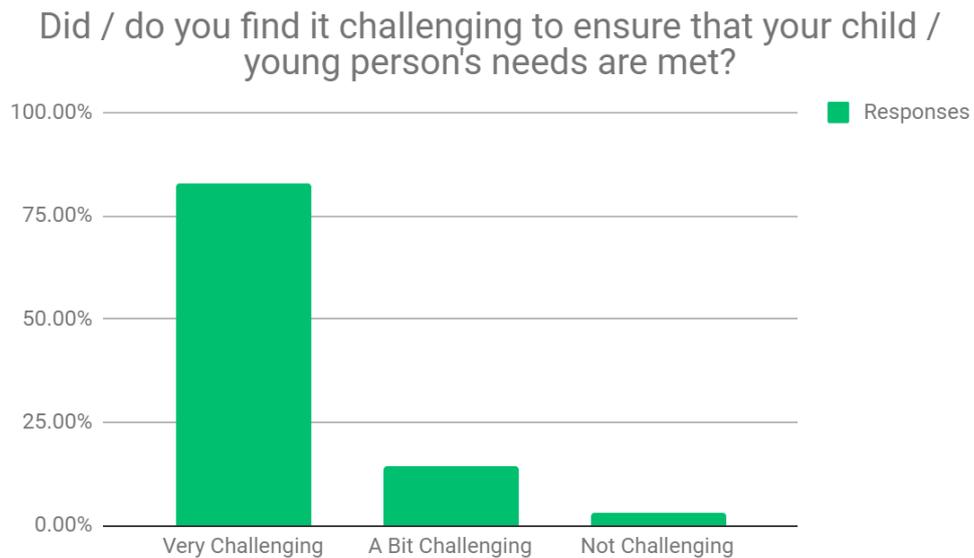


Fig. 9 Parental Perception of difficulty in meeting needs

Parents are reporting that once their children’s needs are identified, and they feel that they are confident in their understanding of those, they struggle to get those needs met across the board. SEND is a complex and in depth field which requires joint working between a number of agencies and professionals; with parents reporting a lack of information sharing, difficulties with austerity measures and service provisions being limited it comes as no surprise that they feel they have to fight to get needs met. Regardless of the external contributing factors, internal service provision should be appraised and monitored on a regular basis to ensure best working practice is being adhered to.

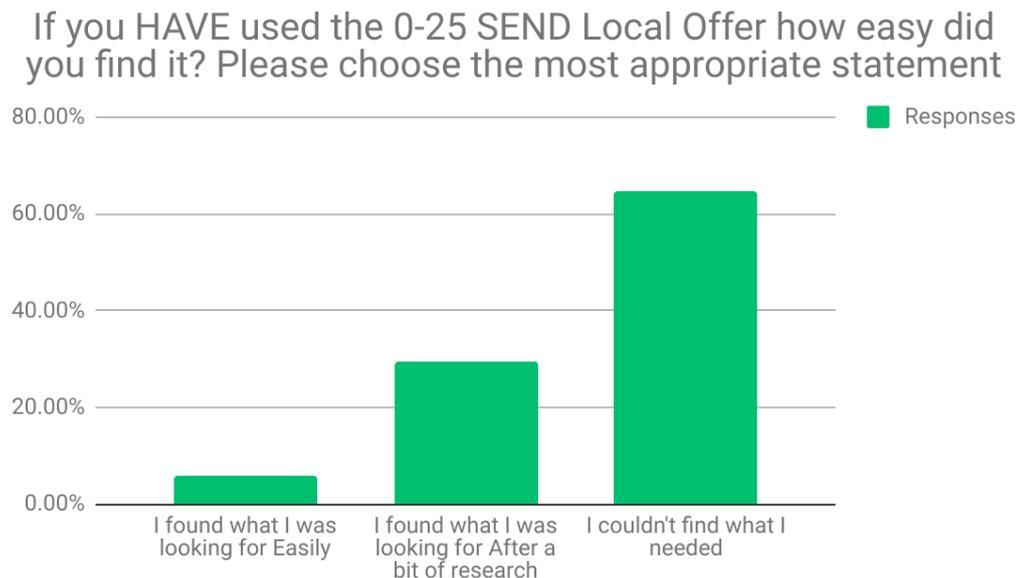


Fig. 10 Local Offer Accessibility

Peterborough’s Local Offer website is continuously updated and redesigned with fresh information, inline with changing service provision and needs in co-production with Family Voice Peterborough. The Local Offer team regularly attend parent carer meetings and sit on numerous strategic boards to ensure their offer is as comprehensive as possible. In a recent peer review conducted with Suffolk they were found to have complete comprehensive information available in over 84% of required areas. Regardless of the quality of the information available an overwhelming majority of users still report difficulty in finding the information that they needed, with 64% stating that they never accessed the information, even after spending time researching the site.

One of the ways in which the Local Offer intends to advertise to parents is the inclusion of their post cards in EHCp review paperwork - however parents are reporting to us that they are not receiving them, an area that needs to be reviewed to ensure that all possible avenues of distribution are being followed. Family Voice hold a stock of the Local Offer postcards and disseminate them at all opportunities - from our schools mornings to all events that we attend.

In addition to the Local Offer, all areas must have an IAS (Independent Advice and Support) service - as defined by Chapter 2 of the SEND Code of Practice. The IASS must be independent of the local authority, health and social care services and offer:

- Advice on the Local Offer, Local Policy and Practice, Personal Budgets, The law on SEND and Health and Social Care
- IAS through the ECH process
- A telephone helpline
- Individual casework, representation and support for attending meetings
- Help with form filling in and letter writing
- Support on exclusions
- Support for resolving differences, mediations and tribunals
- Signposting to local or national sources of advice and support
- Training on the law relating to SEND, to be delivered to educational settings and statutory/voluntary agencies

Parents declare a high level of satisfaction when they have had dealings with Peterborough’s IASS, however they also report difficulty in getting hold of the correct individual as the service is stretched too thin. It is imperative that all service providers work together to address concerns raised via IAS, in order to empower parents and young people with SEND with the confidence to take an active and informed role in their development.

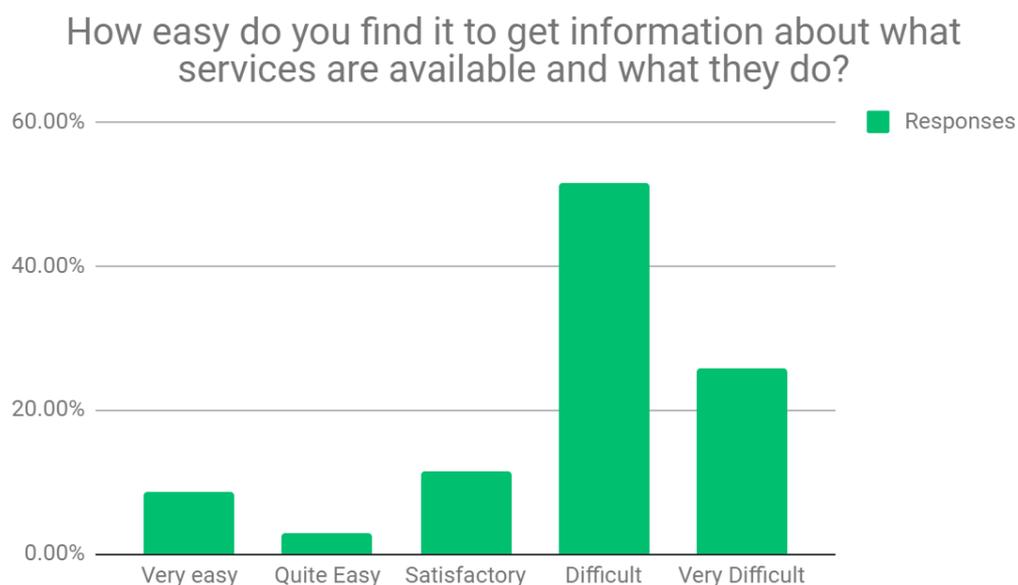


Fig. 11 Parental Difficulty in Finding Information

Coupled with a perceived lack of information upon diagnosis, the confusion felt by parents regarding the Early Help Pathway and a lack of engagement with the local offer this data is indicative of a long standing issue regarding the distribution of information and its accessibility.

In this past year Family Voice have led a drive to reach more parents via outreach into schools which has engaged 125 new parent carers. In addition we have attended numerous events in locations such as Peterborough Regional College and Peterborough’s first Family Fund information fayre. These events have proved an invaluable way to raise our profile and capture the attention of parents who are feeling isolated and unsupported - we are able to sign post to services on the spot and encourage individuals to become members of our charity so that they might receive regular updates on the changes of the world of SEND as well as be informed of any opportunities to participate.

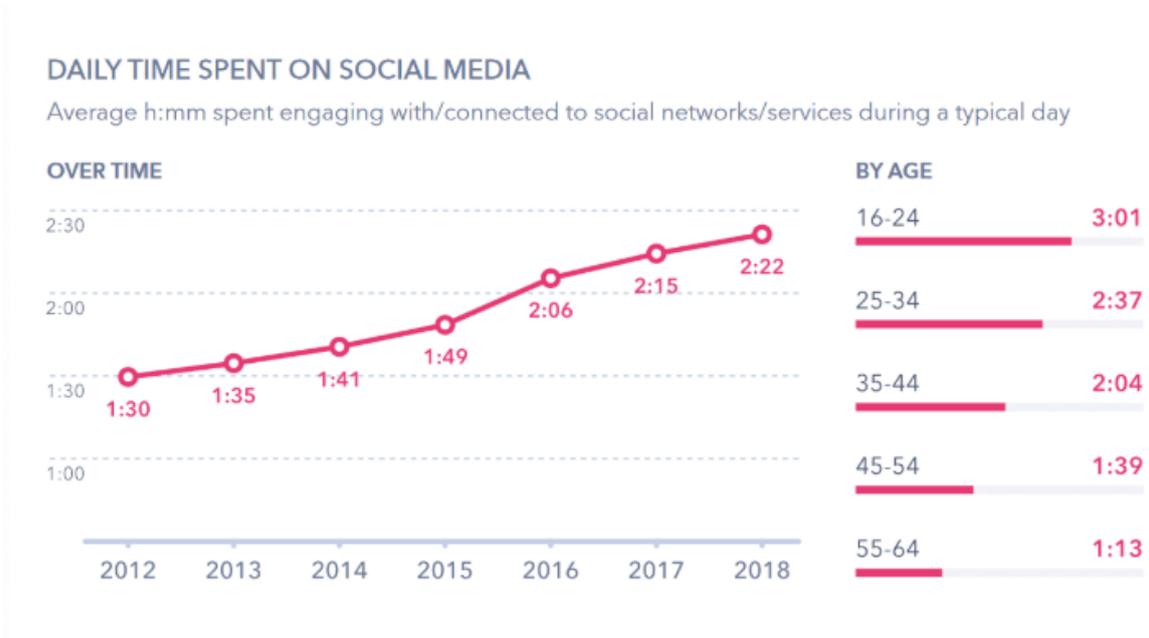


Fig. 12 Daily time spend on social media by age range¹

As an organisation we make good use of social media platforms, with over 1400 followers on Facebook at the time of writing. One of the challenges we have faced is arranging events which coincide with timings for parent carers to attend - individuals are increasingly busy and it can be difficult to coordinate the logistics which facilitate high attendance levels. Social media is a way to alleviate some of these difficulties: with the expansion in usage of smart phones, and the availability of data hotspots nationally studies show that users are spending between 2-3 hours a day browsing social media - by posting relevant information about service provision on our page, and engaging parents in discussion and participation on our group we are able to capture an audience without them having to leave the comfort of their own homes. We frequently see individuals engaging with, and sharing our posts which snowballs our reach as people they are associated with become able to view our information. This increases our reach to an average of 2-3k individuals per week.

¹ <https://www.digitalinformationworld.com/2019/01/how-much-time-do-people-spend-social-media-infographic.html>

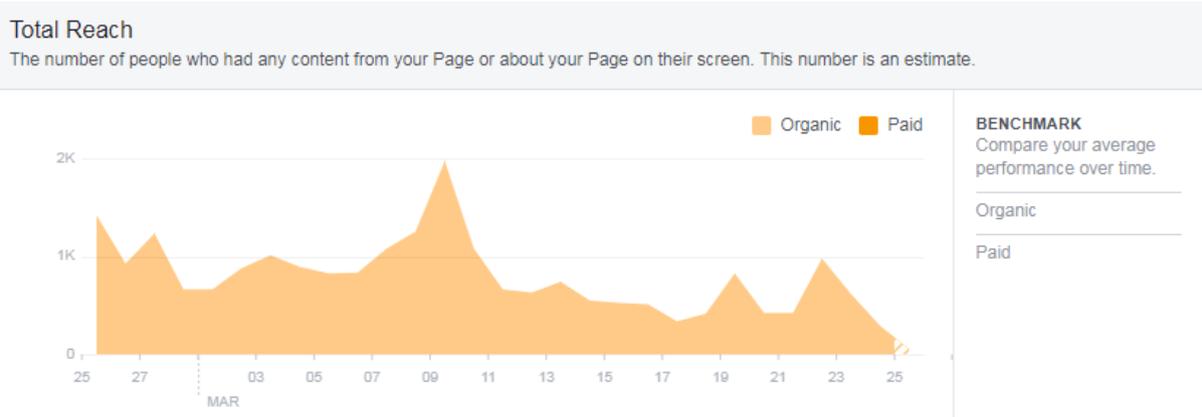


Fig. 13 Facebook reach for “Family Voice Peterborough” during March 2019

2. Joint Working

The Children and Families Act of 2014 changed the world of SEND and its management. Along with introducing the EHC plan it placed a statutory duty on local authorities to promote joint working between education provision, health care provision and social care provision. The Act reads as follows:

25 Promoting integration

(1) A local authority in England must exercise its functions under this Part with a view to ensuring the integration of educational provision and training provision with health care provision and social care provision, where it thinks that this would—

(a) promote the wellbeing of children or young people in its area who have special educational needs or a disability, or

(b) improve the quality of special educational provision—

(i) made in its area for children or young people who have special educational needs, or

(ii) made outside its area for children or young people for whom it is responsible who have special educational needs.

(2) The reference in subsection (1) to the well-being of children and young people is to their well-being so far as relating to—

(a) physical and mental health and emotional well-being;

(b) protection from abuse and neglect;

(c) control by them over their day-to-day lives;

- (d) participation in education, training or recreation;
- (e) social and economic well-being;
- (f) domestic, family and personal relationships;
- (g) the contribution made by them to society.

Fig. 14 excerpt from Children and Families Act 2014, Section 25.

Please tell us how well you think your child / young person's needs have been identified by:

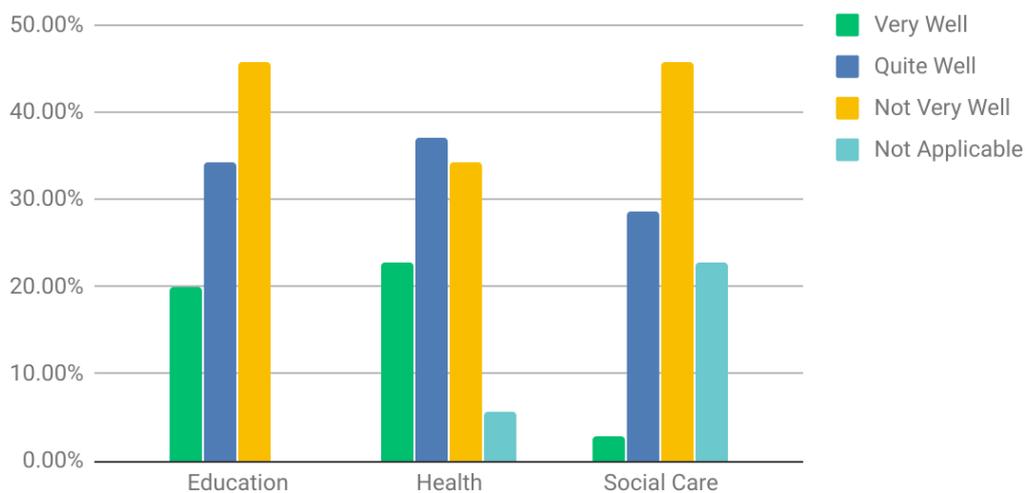


Fig. 15 Level of performance by services in identifying young people's needs.

Identification of need remains an area of difficulty for parent carers to navigate. The Early Help Pathway is still a relatively new tool for support and diagnostics, with parents reporting that the system is long winded and confusing, with information accessibility being difficult. As most neurological disabilities become apparent later in infancy, Education remains the primary diagnostic pathway for young people. As Education is traversed by teaching and support staff with differing levels of SEND training the experiences of individuals can vary drastically. Parents are reporting difficulties in getting diagnoses when their children exhibit different behaviours in school and at home, and suggesting that additional training in mainstream schools would provide a bridge in working practices leading to better support for young people entering the pathway, and lessening the fight that parents have to go through in order to gain a diagnosis. The best performing service here is Health, which is to be expected considering the professionals that are parent facing are experts in their fields, and specialist in children and young people with additional needs. Identification of needs in social care is the worst performing in popular opinion, the reasons for which will be discussed in detail below.

How well do you think your child/ young persons needs are met by the following service areas?

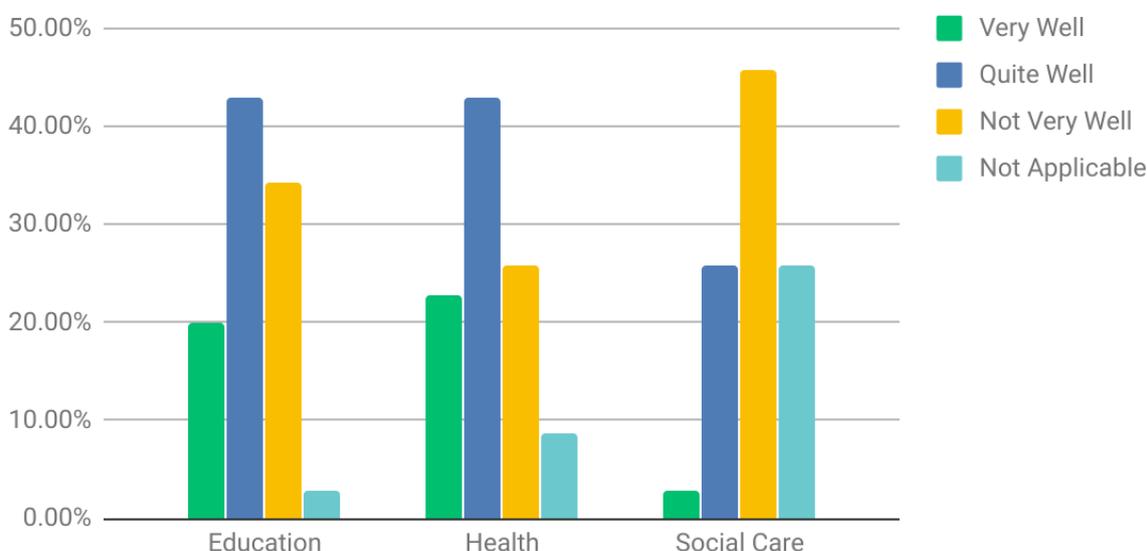


Fig. 16 Level of performance by services in meeting a young person's needs

Considering the ethos of joint working has now had five years to embed into SEND management culture, one might expect that experience of service provision may be equal across the board, however this is not the case. In this years survey parents recorded the highest level of satisfaction with Health and Education, with Social Care trailing in third with 45% of respondents declaring their child's needs as managed "not very well." This is an interesting break from last year's equivalent survey in which education was at the bottom of the board for satisfactory service provision. 2019 has seen the finalisation of the commissioning of Peterborough's Short Breaks service provision. The new services provide a range of community short breaks by differing providers, offering a progressing system which allows young people to meet needs set out within their EHCp and develop into accessing mainstream services where possible. Regardless of the austerity measures enforced by the current central government, and cuts to funding across the board, Peterborough's Short Breaks provision has not suffered from a funding cut, however as the population expands funding per individual becomes lower as services are stretched to meet the growing need. We have also had reported struggles with social worker stability in Peterborough - we appear to be in a time of transition within the service, which has led to some parent carers being assigned numerous different social workers within a short period of time. This leads to a lot of frustration, parents have repeatedly reported to us that having stability within a support team is hugely important, both for the trust and respect they build up with an individual, but also in terms of continuity for their young person. It is essential that information regarding the new short breaks service be distributed as widely and transparently as possible, and that

social work teams gain stability with speciality workers dealing with young people with SEND.

Sadly we have never had any kind of support from 0-25 disability team from social services and even though we now have a social worker she is not helping to access any much needed services, such as short breaks that are so much needed for her as well as the rest of the family.

Communication between professionals involved with my

The criteria for short breaks and respite services is a minefield! How do we know if our son meets the criteria?

Top that with social workers leaving meaning I have had 3 in 6 months!

I was without respite for 8 months because the link carer who my child was going to had left and the social worker for the disability team kept saying he was going to panel too try and get my child a different respite but the social worker wasn't doing

It feels like lots of services don't talk to each other.

Fig. 17 Parents comments on the successes of services in meeting needs

As a parent carer, how involved generally are you in identifying needs and setting targets/outcomes for your c...

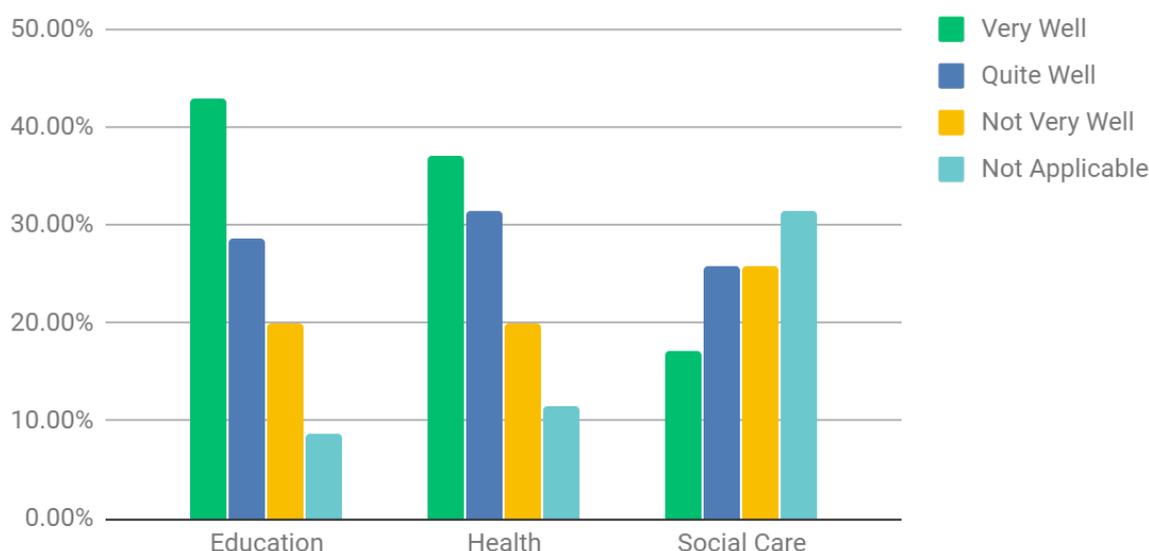


Fig. 18 Level of Parental Participation in Young Person Outcomes

“The voices of children, young people and their parents are at the centre of Children and Families Act, clearly set out in the principles of Section 19. This means that children, young people and their families should be involved in decision making at every level of the system..”²

As described in the above except from the Council for Disabled Children, following the Children and Families Act of 2014 public bodies now have a statutory duty to consult with parent carers and young people on their own needs identification, target setting, aspirations and direction for the future. The highest levels of reported satisfaction are across education and health, with social care again trailing in public opinion. This data is reassuring in that it indicates a high level of satisfaction within education services, indicative of the successes of SENCO training and joint working practices, sharing information between schools and regular updates and meetings with parents regarding steps that can be used to support young people in accessing a differentiated curriculum.

²

https://councilfordisabledchildren.org.uk/sites/default/files/field/attachemnt/CFAUpdate_Issues%20relating%20to%20Health%20%28004%29.pdf

How satisfied are you with the ongoing monitoring and assessment of your child / young person's needs?

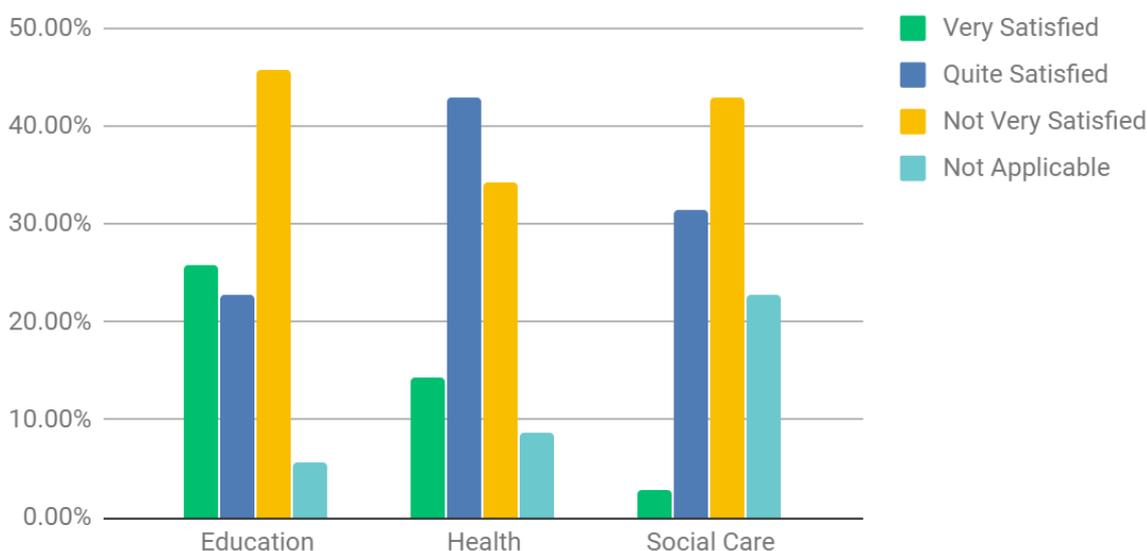


Fig. 19 Level of parental satisfaction with services monitoring of need

Even though parents are reporting a general level of satisfaction with their levels of input into the identification of needs and settings of targets for their young people the same cannot be said for opinions regarding the monitoring of needs by service providers.

Parents are reporting to us difficulties in getting their children access to diagnostics and support to investigate changes in behaviour and need felt at home. During a recent coffee morning a parent shared their experiences in attempting to gain a paediatric referral for her young person who had been diagnosed very young with GDD, but was now exhibiting signs of ASD and Dyspraxia, leading to him now frequently injuring himself. The referral from school was reportedly refused by community paediatrics twice, with the young person's GP offering no support, due to the existing diagnosis. Although 56% of parents reported being either "quite" or "very satisfied" with monitoring of need in health care we must not bypass the remaining 34% who declared themselves to be "not very satisfied."

Parents are also reporting to us a feeling of adversary when it comes to having to fight for their children's needs. When they are reporting behaviours that may not be seen within education parents can feel stigmatised by professionals who don't support their assertions. Of course it is difficult for professionals to make judgements based on behaviours that young people do not exhibit in their presence, but more support and guidance for parents on how to monitor and report on home based behaviours needs to be provided, so that there is an evidence based portfolio that can be viewed in order for families to get the support and referrals that they need to best support individuals with SEND.

Not to be labelled as a difficult parent if you do NOT agree with professionals

Fig. 20 Parental Comments referring to difficulties faced when monitoring needs.

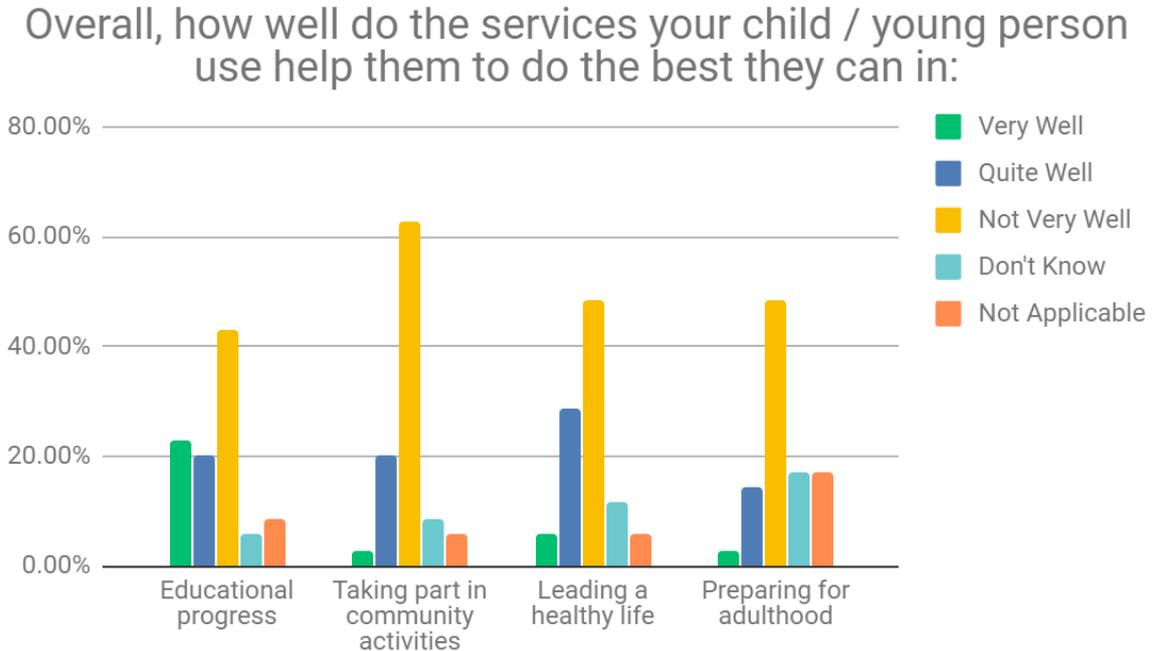


Fig. 21 Identified gaps in support for young people

Support for young people with SEND and their families is governed by two main pieces of legislation: The Children and Families Act 2014 and the Care Act 2014, between them they provide support and guidance for local authorities in identifying where processes overlap; consideration must be given to how to effectively join up the services and provide a comprehensive service for ages 0-25.

As this data shows, the highest level of discontent once again comes in relation to taking part in community activities. Short breaks are a service which are causing consternation amongst parents. Work needs to be done to reassure families that those most in need will have access to support, and more transparency around the panel process and decision making will raise public opinion in favour of a system they currently view as faceless.

Feedback that we have been receiving from parents indicates there is a current gap in service provision relating to access to youth/community groups for teenagers with ASD/ADHD. There is a feeling that young people who will not be ready to transition to adulthood at 18

may be able to access mainstream services and living with additional support in their teens, for a longer period of time so that they might gain the skills needed.

Peterborough city council in co-production with Family Voice have created a comprehensive guide on transition to adulthood, which should now be distributed to all educational settings so that parents have easy access to the information within. In addition to this guide, there is a collaborative effort between Cambridgeshire and Peterborough, with funding from the National Development Team for Inclusion to create a piece of work around preparing for adulthood, with a focus on raising aspirations and entering the world of work. The aim is to create a videoed piece of work containing experiences and advice from young people with SEND that is accessible and relatable. The project has funding for promotion and we must ensure this is done to maximum effect, reaching the widest possible audience.

3. Education and Health.

The definition of SEN is set out in the 2015 Code of Practice. Chapter 6.36 declares that the first step in supporting and assessing a child with SEN is High Quality Differentiated Teaching. High quality teaching should be used to identify and work on a targeted area of weakness. Teachers must gather evidence, put in place extra or focussed support and then monitor. This is also known as Assess- Plan - Do- Review.

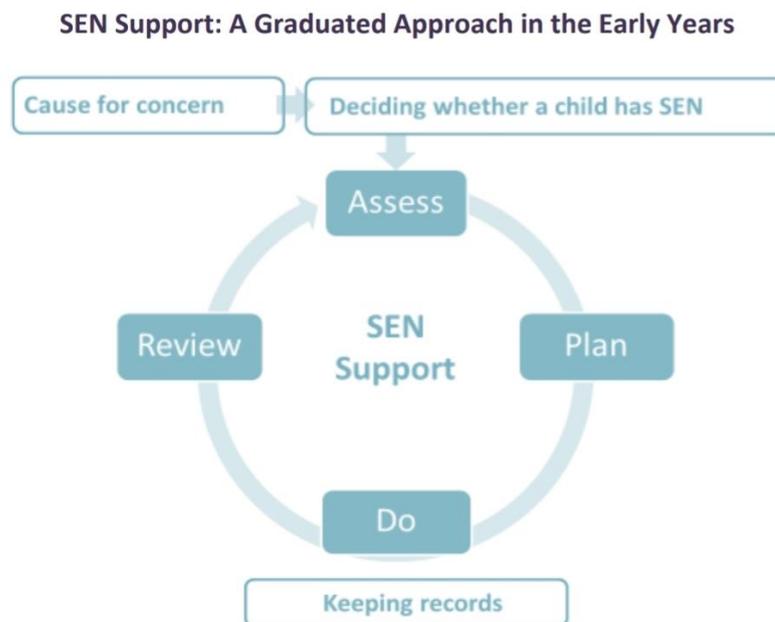


Fig. 22 Graphic showing the graduated approach to teaching

One cycle of assess plan do review should take an average of six weeks, and there is a requirement of two cycles before a child is considered for entry on the SEN register. Parents

should be informed before a child is entered on to the register, and parents have a right to be involved in the process of diagnosis and monitoring their children's needs.

Then SEN Code of Practice sets out four main areas of need:

- 1) Communication and Interaction
- 2) Social and Emotional and Mental Health
- 3) Cognition and Learning
- 4) Sensory and Physical needs

There is an onus on keeping a young person in mainstream schooling, with the right levels of support to enable the best possible outcomes for the individual. If a child is failing to make progress schools can consider involving specialists - such as Occupational Therapists, Speech and Language experts and Educational Psychologists.

If a young person's needs are not being met, regardless of the educational setting following a course of high quality differentiated teaching, a request for an EHCp can be made:

*“the local authority should consider whether there is evidence that despite the early years provider, school or post-16 institution having taken relevant and purposeful action to identify, assess and meet the special educational needs of the child or young person, the child or young person has not made expected progress”.*³

If a young person is to attend a specialist school they must have an EHCp. The plan amalgamates all of an individual's needs across the areas of Education, Health and Care, creating a need for only one assessment, and one document to review. A young person can have an EHCp up until the age of 25, but if they are considered likely to need continuing care support post-18 they also need to undertake a Child's Needs Assessment; a process which should begin in school year 9, and will inform commissioning groups of the lifelong needs and an idea of costings for the individual. During the lifespan of the EHCp the CNA should be incorporated as a part of the overall plan to prevent unnecessary duplication.

The national average for pupils receiving SEN support is 14.6%, while only 2.9% of pupils have an EHCp. This demonstrates that the vast majority of our young people with SEN do not have the complexity of need required to request an EHCp, and indicates that the population of respondents to the survey is not indicative of the population as a whole, as over 60% had a young person with an EHCp in Peterborough.

³ Paragraph 9.14 SEN and Disability Code of Practice

As a result of identifying your child/ young persons needs are they receiving any of the following support with their e...

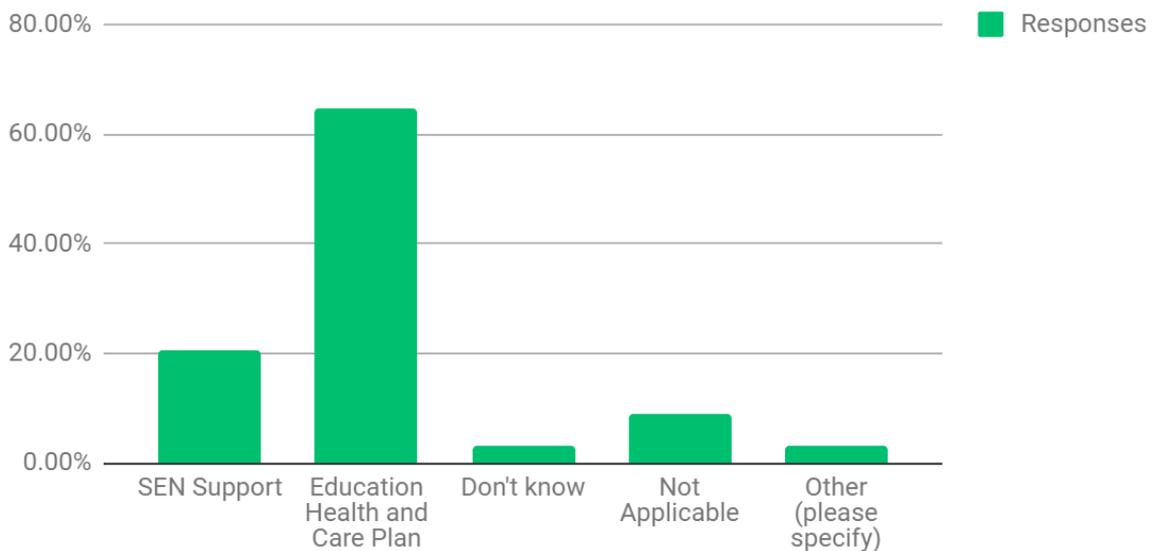


Fig. 23 Assessment of Need and SEND Outcomes for the Young Person

Parents are reporting that there is still a lot of confusion surrounding the area of SEN Support. Areas of doubt are fuelled by an apparent lack of transparency and information around the levels of support young people are being given, and how that support addresses each individual's needs. This is in contrast to the statutory duty placed upon educational settings to consult with parents at every stage of SEN support, parents should be met with at least 3 times a year to discuss their child/young person's progress and to coproduce their aims and targets moving onwards. It is also concerning that a percentage of survey respondents did not know what form of support their child was receiving - there should not be any parents who are unaware of how their children are being supported. Over 20% of survey respondents declared that they are not involved at all in identifying or reviewing their young person's needs. While this is a relatively small percentage it is still significant, Peterborough SENCOs need to be supported further to manage parental contact, and trained on best practice. It is positive to see that the sign ups to the Peterborough SENCO Network are increasing, and as a forum we would like to see all schools making the time to free up their SENCOs to get involved, as the Network provides an invaluable opportunity to share best practice and receive training at very little cost on current issues.

“I have to be in contact with them for it to happen. It is not a two way process. The school feels threatened and does not welcome my opinion or views as a parent”

“It varies depending on the issues that arise. It is very inconsistent and communication can be abrupt and intimidating”

“No involvement from LEA anymore, since I was forced to take my child out of school, it's like they don't want to know”

Fig. 24 Parental Response to question demonstrated in Fig. 26

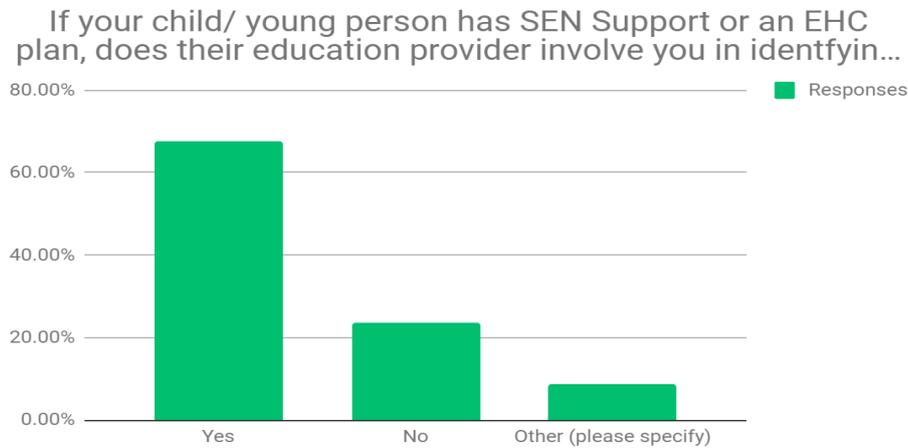


Fig. 25 Parental Involvement in Identifying/reviewing support

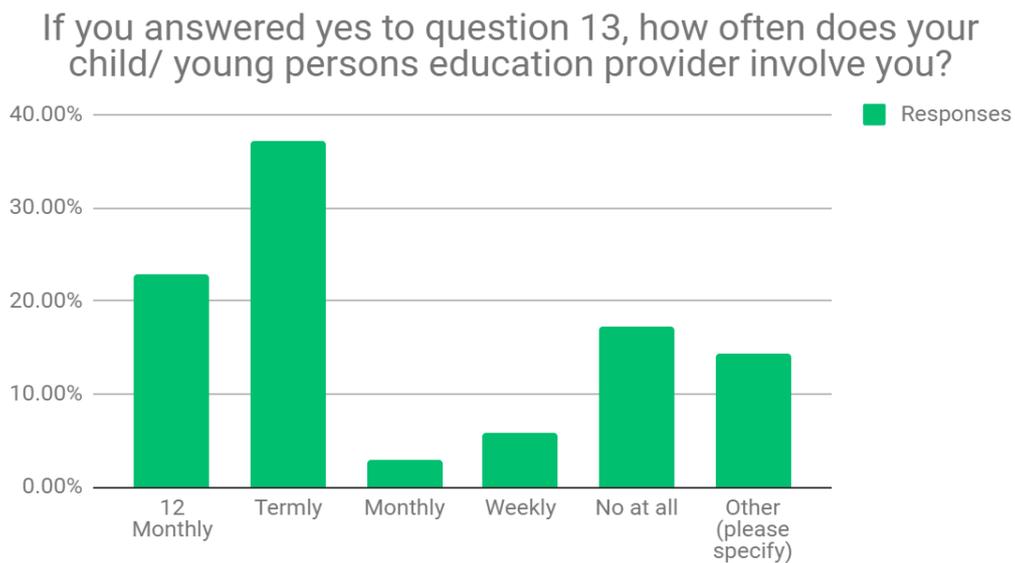


Fig. 26 School Level of Parental Involvement

The highest percentage of respondents are consulted with regards to their child's development in line with statutory requirements, however 40% noted that they are only contacted annually or less. This is illustrating that schools idea of co-production is still limited in some cases, and this will ultimately lead to less attainment and lower outcomes for the young person. Home schooling should also be considered, where a child is educated out of a setting, the

local authority still has a duty to review an EHCp annually, but they no longer have to provide any special educational provision, because the parents are deemed to be making their own suitable alternative arrangements. It is important to ensure that parents have access to all of the facts when they are deciding how their child should be educated, with viable alternatives to full time setting based education, and that their EHCp is set up accordingly so that they don't find themselves isolated and unsupported.

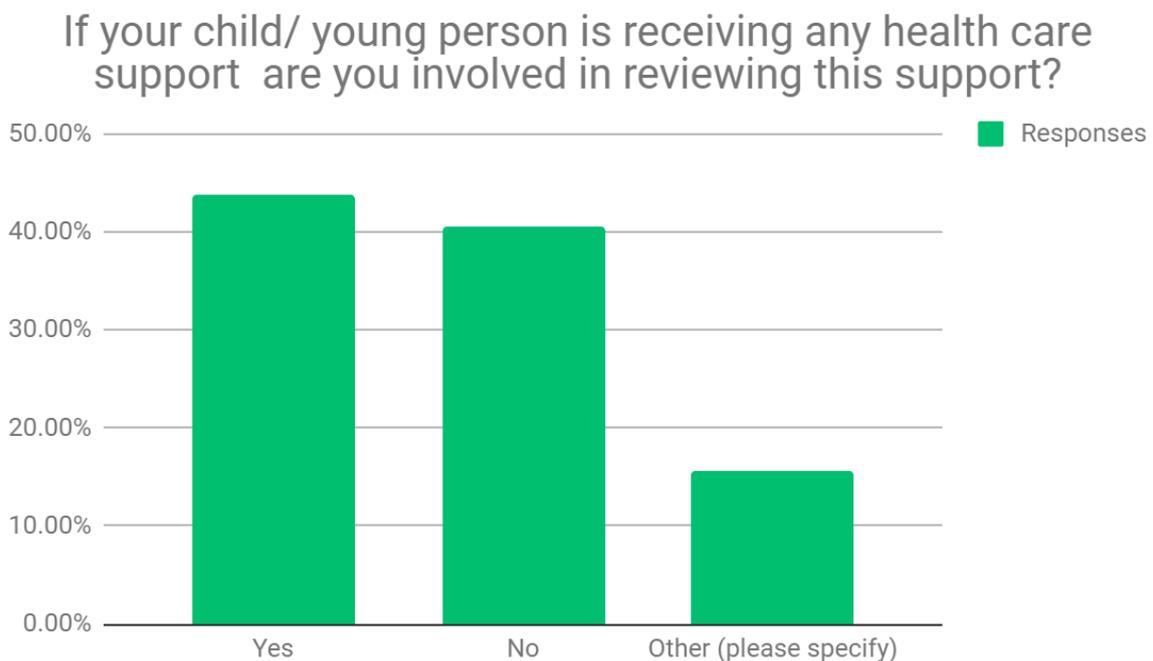


Fig. 27 Parental involvement in health monitoring of need

Reported co-production between parents and health services is significantly lower than reported co-production within education. This may be because health professionals feel that decisions on treatment are clear cut, but it is important to discuss alternatives and options with parents as individuals - to discuss progress and discuss how treatments are progressing and effecting each young person in a concerted effort to make sure that information is being shared openly to facilitate the best possible outcome.

If your child/ young person has an EHC plan, was this plan issued after

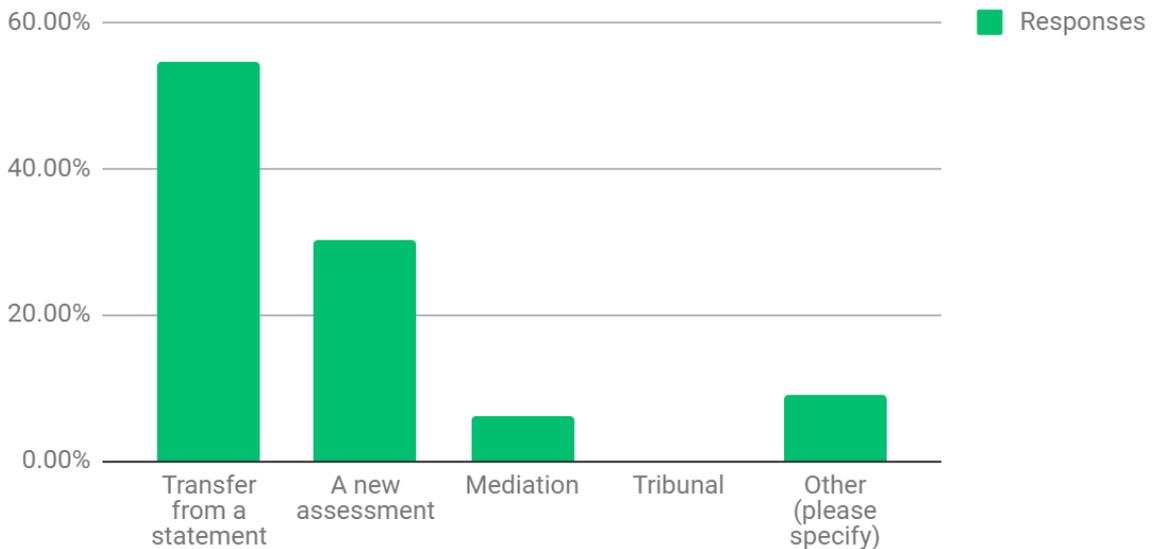


Fig.28 Parental report of means of obtaining an EHCp

The majority of respondents have young people that were transferred to an EHCp from an existing Statement of Special Educational Needs.

There appears to be confusion, both in educational settings and amongst parent carers of what the requirements, and thresholds are for being awarded an EHCp. In 2018/2019 Peterborough received 260 requests for assessment, but only 160 EHCps were awarded. Greater awareness of guidance should be given to all interested parties to ensure that educational settings are not giving misinformation to parents, leading to time being wasted applying for plans that are unlikely to be granted which could instead be spend focussing on ensuring the young person has the right level of support in place to meet their needs under SEN support. Parents often report that they feel they are battling to get their children's needs met, this feeling can be intensified by being turned down for additional support, not entering the process they are likely to be turned down on would go some way towards mitigating this - and ensuring that aspirations and future hopes are attainable and parents feel supported and involved.

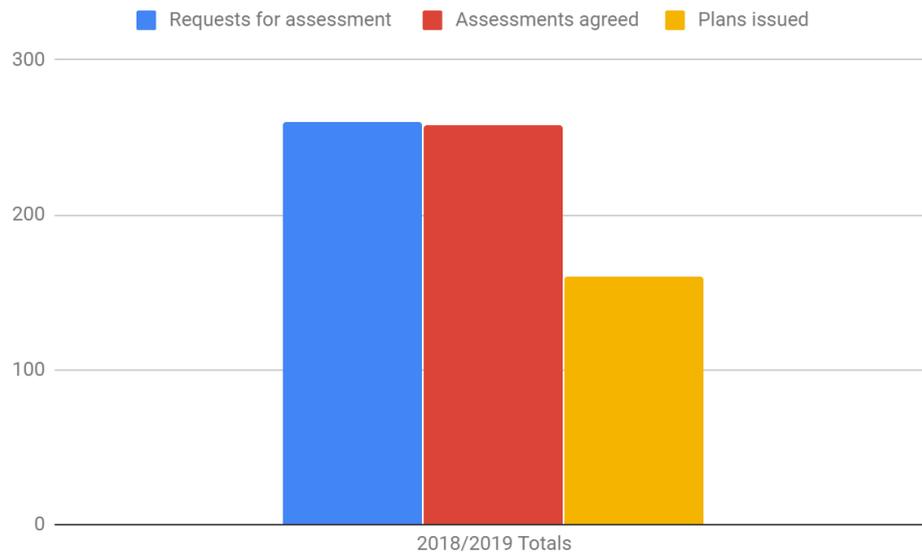


Fig. 29 Peterborough 2018/2019 EHCp data

Data acquired from Peterborough City Council also shows that EHCp requests taken to tribunal is increasing year on year, this could be related to the misinformation given to parents regarding guidance for placements and assessment. The majority of cases appealed are settled in mediation prior to tribunal, which indicates that there may have been an issue in information sharing in the initial request made, or that the parents were not aware of guidance, and once they understood the threshold compromises could be made.

Total Number of Appeals Received	Refusal to Assess	Refusal to Issue	Content	Placement	Content & Placement
18	5	0	2	8	3
Outcome:					
Parents appeal upheld	0	0	2	1	0
LA decision Upheld	3	0	0	0	0
Agreement	2	0	0	4	2

reached by both parties prior to hearing					
Awaiting hearing	0	0	0	3	1

Fig. 30 Peterborough EHCp appeal data 2018/2019

As a result of identifying your child/ young persons needs are they receiving any of the following support with their h...

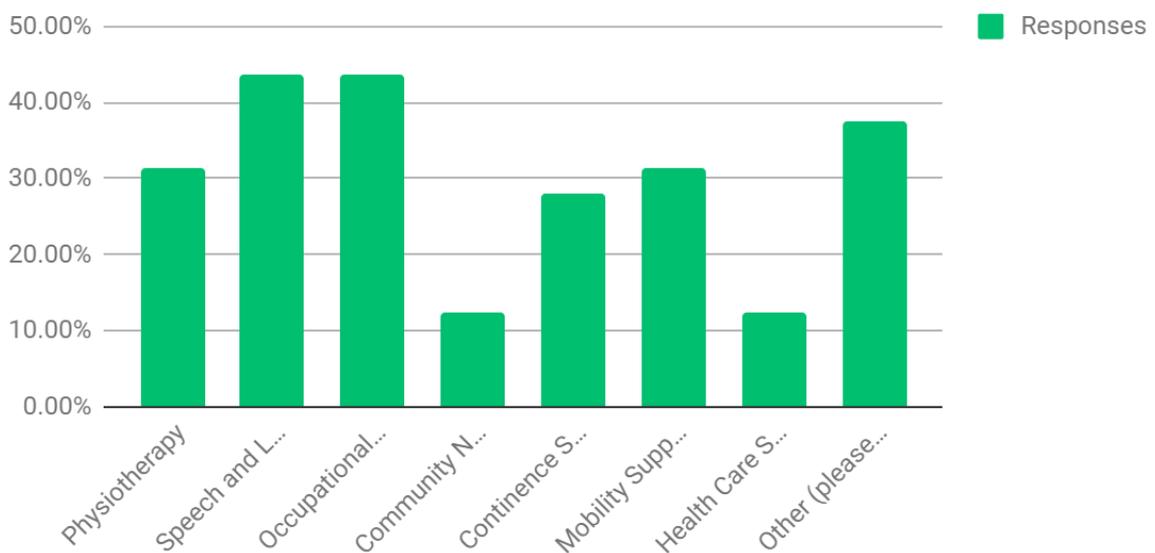


Fig. 31 Health Service support for needs

The above infographic displays the differing types of health services accessed by respondents young people. What is interesting are the comments accompanying the “other” responses:

These are provided by school- not Nhs or local services

Pay for private SALT nothing through NHS

Ptsd treatment but have waited a whole year after diagnosis

Keep Referring but keep getting a letter back saying no continually fighting for the services your child needs

Fig. 32 Parental comments in response to support with health

Parents are reporting that they have to fight to get their children the support that they need, and there also seems to be a misconception and confusion surrounding funding for health services for children with SEND especially when delivered in educational settings; Services can have multiple funding routes and it would be better for all the information to be explained more clearly.