

Reaching my potential

The value of SEND provision demonstrated
through learners' stories

A report for the National Association of Independent
Schools and Non-Maintained Special Schools (NASS)

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Jim Clifford OBE
Emily Hutchison
Jake Kemp
Catherine Cooke

Founder & CEO
Impact Project Lead
Executive
Executive

j.clifford@sonnetimpact.co.uk
e.hutchison@sonnetimpact.co.uk
j.kemp@sonnetimpact.co.uk
c.cooke@sonnetimpact.co.uk

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Advisory & Impact

Report-at-a-glance

Overall finding



Special educational provision that works gives learners hope for the future: that they can achieve and fulfil their potential. In doing so they may be less dependent on their families and public services, and they may be able to contribute to society. If learners do achieve their potential this is worth on average **at least £380k** over the lifetime of the eight learners whose stories we tell in this research.

Purpose

NASS commissioned Sonnet Advisory & Impact C.I.C. to research the value of special educational provision, and to answer the following research questions for a set of learners with complex special educational needs or disabilities (SEND):

- How do outcomes differ for learners with SEND who have their needs met at the right time?
- What are the wider benefits to learners, their families and society of having their needs met?

What is special educational provision?

It seeks to remove identified barriers to learning for those with SEND. Special educational provision therefore may include: services relating to mental health, speech and language therapy, physiotherapy, occupational therapy and other therapies like music therapy, art therapy and hydro therapy.

What is SEND?

These are physical, emotional, or learning needs that affect learners' ability to access education, and restrict their ability to understand, retain and apply learning. This report focuses on eight learners with complex needs.

Why do we need special educational provision?

We want all children and young people to achieve the 'best possible outcomes' for them. Learners with SEND need greater support to achieve their potential, particularly when it comes to education. Special educational provision can support learners with SEND to reach their potential and make successful transitions into adulthood.

Research approach

We took a mixed-methods approach to explore the stories of learners with SEND and the value of provision that meets their needs. Our research was primarily undertaken with staff in special schools. We also interviewed parents of three learners with SEND and one local authority commissioner. We also drew on academic and grey literature.

Using our findings, we developed profiles for eight learners with complex SEND, and explored how meeting their needs makes a difference to them and those around them. For five of the archetypes (Tim, Ade, Sarah, Olivia and Charlie) we undertook quantitative analysis, expressing the value created in monetary terms.



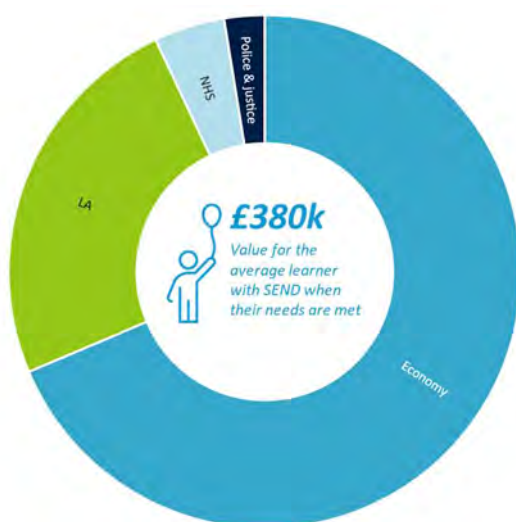
Key thematic findings

- Each learner with SEND has a unique combination of needs, strengths, and potential. Provision that meets needs is tailored to each individual learner in terms of the services delivered and the settings in which it is delivered
- Standardisation of educational provision by identified special educational needs may limit chances for children with most the complex needs to realise their potential, and may have implications for the wider public finances
- Special educational provision that meets needs has the following qualities:



Key quantitative findings

If we invest in provision that meets needs of learners with complex SEND, it could yield an average of at least £380k per learner across their lifetimes in value to society:



Meet our archetypes and the difference that provision that meets needs makes to them:



Tim

Needs: Has autism and communication challenges
Potential if needs are met: Qualifications, paid work and improved relationships with his family
Value created when his needs are met: £744k

Ade

Needs: Has a combination of autism, anxiety and physical needs
Potential if needs are met: Developing key life-skills and volunteering regularly
Value created when his needs are met: £554k



Sarah

Needs: SEMH, experience of abuse and is a looked-after child
Potential if needs are met: Forming and maintaining positive relationships, qualifications and paid employment
Value created when her needs are met: £246k

Olivia

Needs: Has cerebral palsy and has communication challenges
Potential if needs are met: Can communicate more easily, and direct her care and can move into supported living
Value created when her needs are met: £59k



Charlie

Needs: Sensory impairment, learning and communication difficulties
Potential if needs are met: Confidence to build friendships, gains qualifications and paid employment
Value created when her needs are met: £303k

The key question raised by this research

We have demonstrated that special educational provision that meets needs, while more expensive in the short term, in the longer term yields net benefits to children, young people and society. This raises the question: is this net value sufficiently recognised and taken into account when changes in national policy take place, and within the context of localised commissioning decisions?

Report recommendations summary

- A. SEND policy and regulatory changes should be driven by evidence-based analysis of the current and future impact of SEND provision. Any future statutory changes should have their social impacts and financial implications fully assessed. All stakeholders in the SEND system have a role to play in demonstrating impact in its widest sense – financial and social. High quality data gathered at school-level needs to feed through to local authority commissioners and beyond to national policy makers, and to be believed and acted upon.
- B. Benchmarking of provision needs to be approached with care. Young people with special needs must be afforded the same aspiration as the general population – to be the best they can be. The SEND and Alternative Provision (AP) Improvement Plan from the Department for Education (March 23) sets aspirations of ‘good outcomes’ for these young people, but these must not be ‘good’ in the context of the aspirations and approaches of non-SEND provision but must support the reasonable and tailored aspirations of the individual young person, whether with SEND or not. Setting targets and measuring impact should come from the front line of delivery, so standards should be set from a deep understanding of what is happening and aspirational for young people and their teachers.
- C. In preparation for policy changes, schools need to keep good records of provision for each individual learner, learners’ destinations on leaving school and what differences their provision has made for learners. Families can be involved and help with this, reflecting the importance of their role as recognised in the SEND and AP Improvement Plan. This will help improve the evidence base, and will support schools’ discussions with commissioners, as well as inform any future research into longer-term outcomes for people with SEND and the specialist provision they received at school age.
- D. Key current local authority intervention programmes should be closely monitored and evaluated, and where they are having a negative impact be reconsidered. For example, the potential impact on learners in local authority areas subject to Safety Valve and Delivering Better Value in SEND programmes should be tracked. This would provide evidence that can be used to inform regulatory impact assessments on the social and financial costs and benefits of any future changes.
- E. We need further research to determine how to identify the right provision in the right setting at the right time for learners. Ultimately, we need to build on this research to better understand the key factors behind successful placements. Schools and commissioners should gather evidence from and seek to learn lessons from each learner’s individual educational journey, particularly when it involves multiple school placements. Collectively, we also need to better understand what influences parents’ and carers’ school choice decisions, and what factors drive local authorities’ decisions regarding where learners receive special educational provision.

- F. We welcome the planned work on Education Health and Care Plan formats set out in the SEND and AP improvement Plan. The findings of this research indicate that value is often added through elements of provision which are not routinely captured in EHCPs currently, e.g. emotional wellbeing. We would like to ensure that future EHCP templates and guidance capture broad and aspirational outcomes for children and their families, as initially envisaged in the 2014 reforms. All stakeholders within the SEND system have a role to play in this.
- G. Investments made in provision for individual children make returns beyond that individual child over a considerable period of time. Within the SEND change programme, we would like to see scope to explore models which acknowledge and support this. This includes the planned work to secure greater Health involvement in SEND provision but could meaningfully go beyond this to consider whole-place/whole lifetime budgets for those with the most complex needs to move beyond the 'silos' of individual agency budgets. This, in turn, will require a dedicated focus on commissioning for children with the most complex needs and an acknowledgement that this may need local, regional and national focus.
- H. Our findings consistently demonstrate the particular value that good mental health support offered by special schools delivers. To meet the needs of their learners many schools may deliver services without appropriate funding, guidance or oversight (for example nursing services or mental health therapies). We welcome the intent in the SEND and AP Improvement Plan to clarify the role of Health provision within SEND provision. We would like to see a specific focus on mental health within this. Schools should record systematically the care and mental health support they provide to learners, and which interventions are effective. Findings should be used to inform government guidance to support the wider sector in delivery of these services. We would like to see the suggested recommendation from the National Safeguarding Panel in phase 2 of the Hesley report to consider joint Ofsted/CQC inspection of provision explored further as part of this.

Research publication notices

Sonnet and its associates

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Applicable standards

The report has been prepared, and the work underpinning it has been undertaken, in accordance with best practice standards for this type of research, and specifically in accordance with the GECES Standards for the measurement of impact as published by the European Commission.

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Contact

For further information please contact:

Professor Jim Clifford OBE MSc FCA FRSA
Director, Sonnet; Hon. Professor, Sheffield Hallam
University
j.clifford@sonnetimpact.co.uk

Claire Dorer OBE
Chief Executive, NASS
cdorer@nassschools.org.uk

Foreword

For the past eighteen years I have been moved by the stories of what happens when we meet the needs of children with Special Educational Needs and Disabilities. The right education, care and health provision is transformative – it enables young people to work and live independently and supports the emotional and financial wellbeing of their families.

Stories are powerful but, as a sector, we have not always been good at showing the tangible outcomes of getting provision right. I am delighted that in this research we have been able to use the powerful narratives of learner journeys to show the impact of high-quality SEND provision.

Whilst we have drawn on our membership of special schools to conduct this research, I believe the principles behind the work are applicable to a wide range of children and young people with SEND. We can evidence that supporting mental and physical health and building strong, consistent relationships, alongside good teaching and learning, is what makes the biggest difference to long-term outcomes. The strapline of 2022's SEND and AP Green Paper 'Right support, right place, right time' should be the guiding mantra for all who work in the field of SEND. Making this a reality in practice remains a challenge. In a real world of finite resources we need to be sure that the interventions we make are the most likely to be effective.

The Government's recent SEND and AP Improvement plan offers the promise of change. We need that change to be bold and resolutely focused on achieving the best possible outcomes for children and young people with SEND. This research indicates that we need to make brave choices – to invest in higher level support for some children earlier in their lives to improve the opportunities they will have in adulthood. Whilst we have looked here at the value of meeting need, there is an unacceptable cost – emotional, social and financial – to failing to meet needs quickly and effectively.

All significant research should prompt further questions and this study raises many. In the face of new National Standards, we urgently need to explore which support and provision is most effective for which children and young people and to ensure that this can be accessed. All stakeholders need to be part of this solution – Government to ensure impact is at the heart of policy making and schools and other providers to ensure that they are meeting need and capturing outcomes. I hope this research provides an impetus for this – by showing the extraordinary difference that can be made in the lives of children and young people with SEND and their families.

Claire Dorer

CEO NASS

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Definition of terms

The following definitions apply throughout this document, unless the context required otherwise:

Term	Definition
AP	Alternative provision
ASC	Autism spectrum condition
CAMHS	Children and adolescent mental health services
CBT	Cognitive behavioural therapy
CLA	Children looked-after
CMN	Complex medical needs
CPV	Child on parent violence
CYP	Child or young person
DBV	Delivering Better Value
DfE	Department for Education
DHSC	Department of Health and Social Care
EHC	Education, health and care plan
GVA	Gross value added
ICB	Integrated care board
ISS	Independent special schools
LA	Local authority
LAC	Looked-after children (also referred to as CLA)

NASS	National Association of Independent Schools & Non-Maintained Special Schools
NAO	National Audit Office
NEET	Not in education, employment or training
NMSS	Non-maintained or independent special school
PMLD	Profound and multiple learning disabilities
RAG	Red/Amber/Green
SA	Special academies
SEMH	Social, emotional and mental health
SEN	Special educational needs
SEND	Special educational needs or disabilities
SF	Special free schools
SI	Sensory impairment
SpLD	Specific learning difficulties
SLCN	Speech, language and communication needs
SROI	Social return on investment
SSFI	Semi structured focused interview
ToC	Theory of change

1. Executive summary

About the National Association of Independent Schools & Non-Maintained Special Schools (NASS)

This report has been commissioned by NASS, the national membership association for special schools outside local authority control. Its members include Non-Maintained Special Schools (NMSS), independent special schools (ISS), special academies (SA) and special free schools (SF). NASS has over 400 schools and organisations in its membership and is growing.

NASS works with its member schools to support, promote, and improve special school provision and to provide a voice for the sector via engagement with key sector stakeholders such as Government, Ofsted and local authorities (LA).

Scope and purpose of this report

This report explores the difference made to society if learners with SEND receive special educational provision that meets their needs. We have taken a qualitative story-based and person-centric approach to explore the impact of provision that meets needs.

NASS has commissioned this independent report to provide a refreshed evidence base on the value delivered to society by specialist provision. This report builds on and updates research published by NASS and Baker Tilly around a decade ago on the comparative costs and social return on investment (SROI) in specialist schools.^{1,2,3} It takes into account policy changes introduced by the Children and Families Act of 2014 and the wider context in which specialist provision is delivered today in Spring 2023.

Special Educational Needs and Disabilities (SEND) are physical, emotional or learning needs that affect learners' ability to access education, and that restrict their ability to understand, retain and apply their learning. Broad areas in which learners can have special educational needs are: communication and interaction, cognition and learning, social, emotional and mental health (SEMH) difficulties, and sensory and/or physical needs.⁴

¹ Clifford, J. and Theobald, C., (2012), Summary of findings: Extension of the 2011 cost comparison methodology to a wider sample, National Association of Independent Schools and Non-Maintained Special Schools

² Clifford, J., Hamblin, J. and Theobald, C. (2011), Comparative Cost Review of Non-Maintained and Independent Special Schools with Local Authority Maintained Special Schools, NASS/Baker Tilly, Watford/York

³ Clifford, J. and Theobald, C. (2012) National Association of Independent and Non-Maintained Special Schools: Social Impact evaluation of Non-Maintained and Independent Special Schools using Social Return on Investment

⁴ DfE (2015), Special educational needs and disability code of practice: 0 to 25 years, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf

Provision that meets the needs of learners with SEND will generally seek to remove identified barriers to learning such as difficulty concentrating in certain environments or communication challenges. Special educational provision therefore encompasses not only educational instruction but also could include:

- Services relating to mental health
- Speech and language therapy
- Physiotherapy
- Occupational therapy
- Other therapies like music therapy, art therapy or hydro therapy
- Social care

Different sections of this report may be of interest to the following readers:

Policy makers in education, health and care and the public finances

- Sections 3 and 4 may be particularly informative for policy makers as they explore learners' needs and what provision can meet these needs effectively
- Policy makers could use this report's findings to answer some of the policy questions raised in the SEND and AP Improvement Plan published in March 2023
- Discussion in this report on how meeting learners' needs and those of their families can have wider societal implications in terms of public finances and economic productivity could also be of interest to this group (see Sections 4 and 5)

Practitioners in services that meet the needs of children and young people with special educational needs (e.g. schools or NHS services)

- Practitioners may be particularly interested in Sections 4 and 5. They could identify the archetype that is closest to learners in their settings, and use the findings to articulate the impact they could be making through their services
- Services could also use this report to inform discussions with their commissioners regarding the difference their provision can make to their learners. Although the report was commissioned by NASS, the report will provide insight into the needs and provision, regardless of the type of setting in which they are delivered

Commissioners of special educational or health services for learners with SEND and integrated care board (ICB) Chief Medical Officers

- The stories and needs of the learners explored in Section 4 and the implications for the wider public finances of meeting learners' needs in Section 5 may be a helpful illustration of the difference commissioners can make when learners are placed in the right setting

Parents of children with SEND

- Parents may be interested in Sections 3 and 4. These explore the types of provision that meet learners' needs; the stories of the learners and their families may resonate with families who are on the same or similar journeys

A summary of our approach

This research used a mixed-methods approach – meaning quantitative and qualitative data were collected and analysed to evidence the value created by provision that meets learners' needs. The overall approach and methods are summarised in Figure 1 and described in further detail below and in Appendix 1.



Figure 1: High level research approach

Specialist provision that achieves change in the lives of learners with SEND

This report focuses on learners with the most complex SEND; these are the learners who benefit most from tailored and specialist provision. However, the key principle underlying this work – that having needs met makes a difference to outcomes for learners, those around them and society more broadly – also applies to learners with less pronounced SEND.

Our research found that provision that meets needs enables learners to lead a better quality of life, whether that means having more agency, being less dependent on public services, having the ability to engage in their communities, or having the potential to work or participate in voluntary work. It should also improve the lives of family members and carers, by reducing the learners' dependency on them and any subsequent emotional, financial, and physical toll.

Our research found that there are two key features of provision that meets needs (summarised in Figure 2):

- Provision must be tailored to an individual learner's needs and their own potential, and must be responsive to their changing needs
- Provision that is holistic and evidence-based, with teaching and other support required delivered in an integrated way. It must also be delivered in a setting that supports the pupil to engage in learning (for example, with a suitable atmosphere and appropriate levels of stimulus)



Figure 2: Key features of provision that meets learners' needs

This approach to provision could be achieved in a range of settings, from mainstream schools to independent special schools. However, to meet needs these settings would require flexibility, funding, and combination of expert staff and as well as all other staff with a good knowledge of SEND. They would also need to be able to deliver the appropriate levels of stimulus and atmosphere required for some learners. If some settings are not able to adapt to the needs of learners in these ways, then they may only partially meet learners' needs, or will not be able to meet their needs at all. This will be the case for most schools – where, by necessity, they need to focus on meeting the needs of most of their pupils rather than focusing on a small number of the most complex pupils.

Key findings from learner (archetype) journey analysis

In this research we developed profiles of eight 'typical' learners with complex SEND who all have education, health and care (EHC) plans and benefit from special educational provision. They are composites of learners with SEND whose needs and experiences are typical of pupils in special schools. These archetypes were designed to represent and capture the stories of a large proportion of the children with EHC plans in England with the most complex needs.

These archetypes were developed through research activities with NASS member special schools. The impacts of these learners having their needs met were informed by this primary research, as well as by secondary sources. For a summary of our learners and their stories see Table 1.

Drawing on the findings from our research, we developed a model which values the difference in outcomes when learners' needs are met compared to when their needs are only partially met, as well as the incremental cost of

the provision that meets their needs. This analysis has been used to demonstrate the net value to learners with SEND and society of provision that meets needs. This analysis was undertaken for five of the eight archetypes (highlighted in blue in Table 1).

Table 1: Summary of archetypes – their needs and outcomes

Name	Needs	Difference that provision that meets their needs makes
Tim	Has autism and communication challenges	He learns to communicate, to engage effectively socially, gains qualifications and subsequently takes up paid work.
Ade	Has a combination of autism, anxiety and physical health needs	He is able to develop key life skills like preparing his own meals, and is able to volunteer later in life.
Sarah	Has SEMH needs and has experienced significant abuse	She is able to form and maintain positive relationships. She gains a qualification, and she goes on to part-time employment upon leaving school.
Olivia	Has cerebral palsy and has communication challenges	She learns to communicate her needs and can direct her care, for example, she can ask for those supporting her to move her position in her chair. After leaving school she is able to move into a supported living setting, reducing caring demands on her family. Among the archetypes whose stories have been explored quantitatively, the net benefit for Olivia is smallest. However, this does not include the quality and length of life benefits of meeting her needs which could be significant. The value calculated here simply reflects that, among the archetypes, Olivia will require the highest amount of lifetime support which is at higher cost. Even those with highly complex needs and associated costs there is a significant amount of benefit to her, her family and society of meeting her needs.
Charlie	Has a sensory impairment and communication challenges	She is able to leave school with the confidence to build friendships and to engage socially. She is able to gain qualifications and employment later in life.
Abichal	Has SEMH needs related to past trauma, and has dyslexia and physical health needs	His behaviours that challenge reduce over time and his mother is able to return to work.
Frank	Has a degenerative nervous system disorder and experiences mental health challenges	Being able to express his needs improves his mental health, and having therapy support and health services on the school site improves the quality of his day-to-day life.

Name	Needs	Difference that provision that meets their needs makes
Fred	Has profound speech, language and communication needs, and is behind his chronological age academically	He is able to develop communication and other key skills. Getting the right support means that his parents are able to have more secure employment, improving the family's financial security.

Findings from this quantitative analysis indicated that the average net value across their lifetime for a learner with complex SEND as a result of having their needs met could be at least £380k. This represents benefits to learners themselves, their families, government departments and the wider economy in England. This value, broken down by stakeholder, is shown in Figure 3.

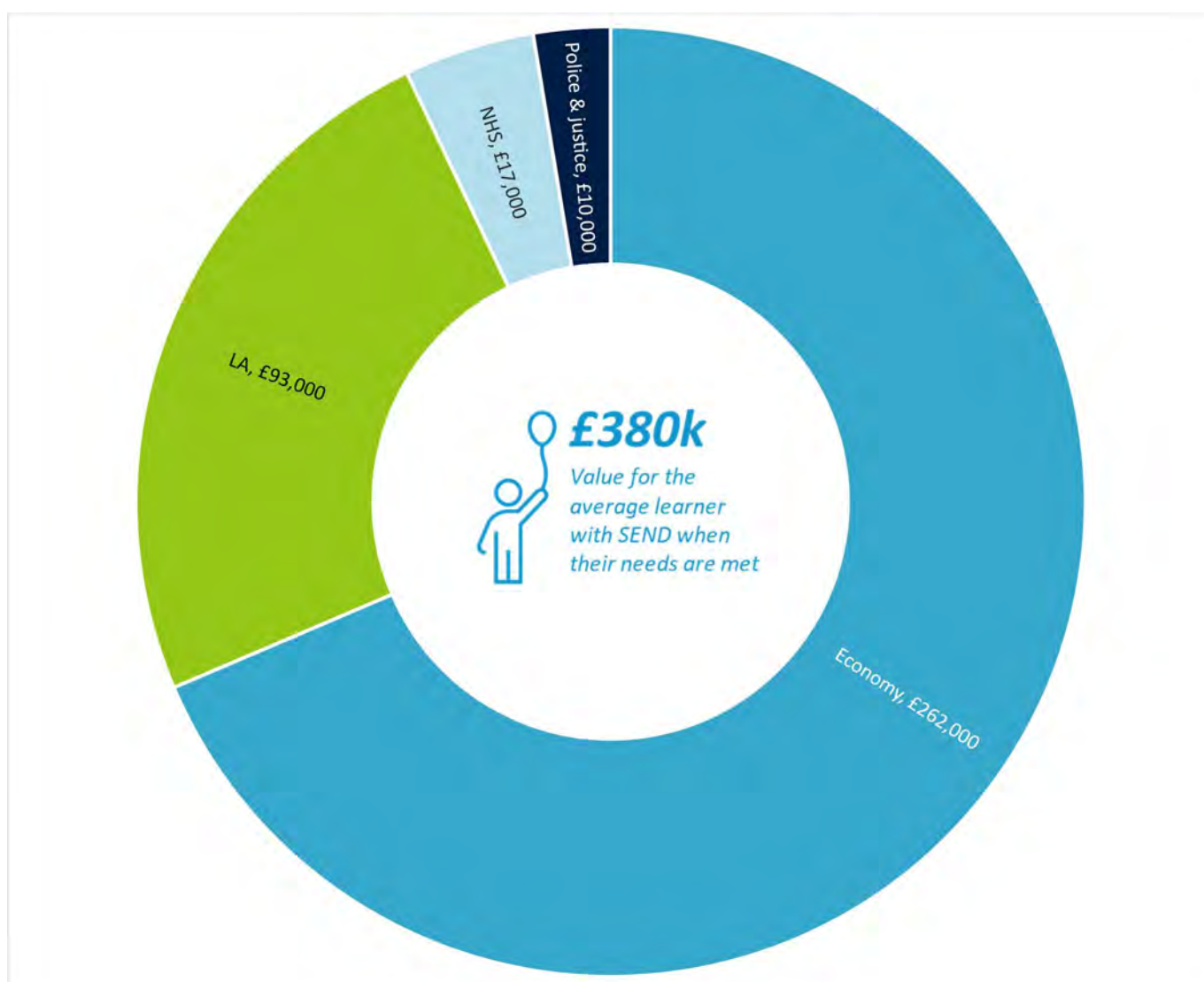


Figure 3: Value generated by meeting the learners' needs – average across five archetypes, broken down by stakeholder

Key thematic findings

Findings from our research have implications for policy, practice and delivery of special educational provision. Below we detail key thematic findings and which part of the report these are drawn from.

Finding 1: Each learner has their own unique potential, and targeted outcomes for each learner need to reflect this

Appropriate target outcomes need to be set for each learner according to their own potential. The 2014 reforms marked a move to a SEND system that had at its core an ambition for learners with SEND to achieve their potential. The SEND and AP Improvement Plan seems to have scaled back ambitions for learners with SEND from 'the best possible outcomes' to 'good' outcomes that are consistent with provision that is 'financially sustainable'.

Furthermore, the Plan uses rates of educational attainment in English and Maths for learners without identified SEND as a benchmark for learners with SEND [See Section 2]. Many learners with SEND will never be able to achieve these benchmarks (some learners with SEND will not have the cognitive ability to engage with mathematics or English at the level of peers without identified SEND) and, as such, these are flawed measures.

Given this research's findings that every learner with SEND has their own unique potential It is concerning to note that this appears to suggest that benchmarks for learners with no identified SEND are appropriate as measures of success for attainment of learners with SEND.

Finding 2: Each learner has a unique set of needs, and provision that works for one learner may not meet the needs of another

Learners with SEND have different learning needs, different strengths and different levels of potential. As such, provision that meets needs will differ from individual to individual. Standardisation of educational provision according to perceived groups of needs may limit chances for children with the most complex needs to realise their potential [see Section 3].

Finding 3: Family stability and mental health of learners and those around them suffer when learners' needs are not fully met

The potential for family breakdown as a consequence of learners not being in settings that meet their needs was a common theme identified across our research [see Section 4]. While the EHC assessment process does encourage consideration of family support needs, these are not prompted in the EHC form itself [see Section 2]. When family breakdown occurs, it compromises one of the key sources of ongoing support for the young person, and places further burden on funded services.

Finding 4: While in the short term provision that meets needs may be more costly, it is likely to have benefits in the future by reducing pressure on wider public budgets

While in the short-term provision that meets needs may be more costly to the high needs budget, it may reduce costs in other areas of public spending. For example, if a young person with autism is able to leave school with the ability to communicate effectively and to regulate their behaviour, they may be less dependent on public services later in life and may be more able to take up paid employment [see Section 4].

Finding 5: A key driver of system cost may be that learners are not being placed in the 'right place, right time' with the 'right support'

Research participants indicated that many of the children in their schools did not arrive in those settings early enough [see Appendix 2]. As a consequence, their needs are elevated and their development delayed significantly; this ultimately requires a higher investment in special educational provision to address their needs. Further research and exploration is required to understand why learners may experience a number of placements before the right one is found: is it driven by constraints on high needs budgets? Is it a lack of evidence of what works for learners with different needs? Is it that EHC assessments are not effective enough in identifying needs?

Finding 6: There is not enough capacity in the system to meet the needs of learners in spite of the increase in the high needs budget

The number of learners with EHC plans has increased by 50% between 2015/16 and 2021/22 (to 355,566 from 236,806). The Government has increased the high needs budget in response; in the three years to 2022-23 it increased by £2.5 billion to £9.1 billion 2022-23, and will reach £10.1 billion in 2023-24. In spite of these increases, many special schools are at or are close to capacity, and funding per place has fallen in real terms. Outside of these figures there may be a hidden group, probably of 14,600 or so, learners who are eligible for EHCPs but are being educated at home [see Appendix 2, section *Is there enough capacity in special schools to meet demand?*]. The financial costs of the 2014 Children and Families Act were estimated prior to its introduction, but did not fully anticipate the increased costs of meeting needs of those aged up to 25 years with SEND [see Section 2].

Finding 7: Special educational provision often encompasses delivery of some health care but this may not be funded appropriately, and the right oversight may not be in place

Per the SEND Code of Practice, special educational provision encompasses providing health⁵ and care services where they support the education of a child. These services may be commissioned and funded through the high needs block rather than care and health budgets. Participants in this research indicated that special schools are expected to provide mental health services without specific funding, or recognition of the services they are

⁵ But not nursing services.

providing. Some schools participating in the research have added therapy to their provision to meet the needs of learners without asking for additional fees from the local authority [see Section 2].


There are a number of implications arising from this lack of joined-up commissioning and from schools delivering health services funded by the education budget:

- Staff delivering mental health or nursing services might not have the appropriate oversight, leading to risks to learners in those settings
- There is no clear framework by which to evaluate outcomes and impacts for these types of support delivered in these schools

Recommendations

Based on our quantitative and thematic findings, we propose a series of recommendations:

- A. SEND policy and regulatory changes should be driven by evidence-based analysis of the current and future impact of SEND provision. Any future statutory changes should have their social impacts and financial implications fully assessed. All stakeholders in the SEND system have a role to play in demonstrating impact in its widest sense – financial and social. High quality data gathered at school-level needs to feed through to local authority commissioners and beyond to national policy makers, and to be believed and acted upon.
- B. Benchmarking of provision needs to be approached with care. Young people with special needs must be afforded the same aspiration as the general population – to be the best they can be. The SEND and Alternative Provision (AP) Improvement Plan from the Department for Education (March 23) sets aspirations of ‘good outcomes’ for these young people, but these must not be ‘good’ in the context of the aspirations and approaches of non-SEND provision but must support the reasonable and tailored aspirations of the individual young person, whether with SEND or not. Setting targets and measuring impact should come from the front line of delivery, so standards should be set from a deep understanding of what is happening and aspirational for young people and their teachers.
- C. In preparation for policy changes, schools need to keep good records of provision for each individual learner, learners’ destinations on leaving school and what differences their provision has made for learners. Families can be involved and help with this, reflecting the importance of their role as recognised in the SEND and AP Improvement Plan. This will help improve the evidence base, and will support schools’ discussions with commissioners, as well as inform any future research into longer-term outcomes for people with SEND and the specialist provision they received at school age.

- D. Key current local authority intervention programmes should be closely monitored and evaluated, and where they are having a negative impact be reconsidered. For example, the potential impact on learners in local authority areas subject to Safety Valve and Delivering Better Value in SEND programmes should be tracked. This would provide evidence that can be used to inform regulatory impact assessments on the social and financial costs and benefits of any future changes.
 - E. We need further research to determine how to identify the right provision in the right setting at the right time for learners. Ultimately, we need to build on this research to better understand the key factors behind successful placements. Schools and commissioners should gather evidence from and seek to learn lessons from each learner's individual educational journey, particularly when it involves multiple school placements. Collectively, we also need to better understand what influences parents' and carers' school choice decisions, and what factors drive local authorities' decisions regarding where learners receive special educational provision.
 - F. We welcome the planned work on Education Health and Care Plan formats set out in the SEND and AP improvement Plan. The findings of this research indicate that value is often added through elements of provision which are not routinely captured in EHCPs currently, e.g. emotional wellbeing. We would like to ensure that future EHCP templates and guidance capture broad and aspirational outcomes for children and their families, as initially envisaged in the 2014 reforms. All stakeholders within the SEND system have a role to play in this.
 - G. Investments made in provision for individual children make returns beyond that individual child over a considerable period of time. Within the SEND change programme, we would like to see scope to explore models which acknowledge and support this. This includes the planned work to secure greater Health involvement in SEND provision but could meaningfully go beyond this to consider whole-place/whole lifetime budgets for those with the most complex needs to move beyond the 'silos' of individual agency budgets. This, in turn, will require a dedicated focus on commissioning for children with the most complex needs and an acknowledgement that this may need local, regional and national focus.
 - H. Our findings consistently demonstrate the particular value that good mental health support offered by special schools delivers. To meet the needs of their learners many schools may deliver services without appropriate funding, guidance or oversight (for example nursing services or mental health therapies). We welcome the intent in the SEND and AP Improvement Plan to clarify the role of Health provision within SEND provision. We would like to see a specific focus on mental health within this. Schools should record systematically the care and mental health support they provide to learners, and which interventions are effective. Findings should be used to inform government guidance to support the wider sector in delivery of these services. We would like to see the suggested recommendation from the National Safeguarding Panel in phase 2 of the Hesley report to consider joint Ofsted/CQC inspection of provision explored further as part of this.
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2. An overview of SEND and policy developments over the last decade

This section provides an overview of SEND, the commitments to learners with these needs per national policy, and recent reviews of sector provision since the Baker Tilly cost comparison and SROI reports were published in 2012. It brings together and creates a joined-up narrative of need and explores where learners with SEND currently receive their special educational provision drawing on evidence from publications over the last decade.

About SEND

Some children and young people may have physical, emotional, or learning needs that affect their ability to access education, and that restrict their ability to understand, retain and apply their learning. Broad areas in which learners can have special educational needs are: communication and interaction, cognition and learning, SEMH difficulties, and sensory and/or physical needs.⁶ Of the 330,447 learners with identified SEND in 2021/22:⁷

- 73% of pupils with an EHC plan and 64% of pupils with SEND support were boys
- 40% of pupils with an EHC plan and 36% of pupils with SEND support were eligible for free school meals
- 56% of children who had been looked-after continuously for 12 months had SEND⁸

Per the government's SEND Code of Practice,⁹ 'a child or young person has special educational needs if they have a learning disability which calls for special educational provision to be made for him or her'. The same guidance states that a child of school age or young person has a learning difficulty or disability if he or she:

- has a significantly greater difficulty in learning than the majority of others of the same age, or
- has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions

In England the number of learners formally recognised as having special educational needs was 1.49 million in 2021/22. This was 16.5% of all learners. The incidence rate of learners with special educational needs declined between 2010 and 2016, but started growing thereafter. Since 2016 the number of pupils with an EHC plan¹⁰ –

⁶ DfE (2015), Special educational needs and disability code of practice: 0 to 25 years, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf

⁷ DfE (2022), Academic Year 2021/22: Special educational needs in England, <https://explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england#dataBlock-b88fba0-6fbe-4100-1661-08da47b0392d-tables>

⁸ DfE (2022), Special educational needs and disability: an analysis and summary of data sources (June 2022), https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1082518/Special_educational_needs_publication_June_2022.pdf

⁹ DfE (2015), Special educational needs and disability code of practice: 0 to 25 years, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf

¹⁰ The 2016 figure will capture Statements of SEN as well as EHC plans as local authorities had the period of 2014-18 to transfer children and young people with Statements of SEN to EHC plans.

learners with the most marked special educational needs – has grown by 50%, and grew by 9% between 2021 and 2022.¹¹

Greater research is required in this area, however, potential drivers of this growth cited by a range of sources include:^{12,13,14,15}

- Greater awareness of special educational needs leading to higher diagnoses
- Changes in diagnostic criteria for autism
- More pupils leading to an absolute increase in the number of learners with SEND
- Changes in expectations for greater support based on the 2014 Children and Families Act
- Greater economic inequality and school closures due to COVID-19
- More children born prematurely surviving into childhood, but often with significant disabilities or difficulties
- Parents, carers and providers being concerned that their child's needs are not being met effectively and therefore request EHCPs to secure the right support for their children

Policy commitments to learners with SEND

The Children and Families Act 2014 is the legislation that currently specifies the support learners with SEND should receive. The main features associated with this Act and corresponding statutory guidance were:¹⁶

- That local authorities must always consider how to support the child or young person to achieve 'the best possible educational and other outcomes'
- A greater focus on support being provided that enables those with SEND to succeed in their education and to make a successful transition to adulthood
- An extended offer of support to those with SEND to the age of 25 years
- The introduction of the EHC plan, replacing Statements of Special Educational Needs and Learning Difficulty Assessments. These plans are for learners for whom special educational needs support is not enough to meet their needs. These plans 'identify educational, health and social needs and set out the

¹¹ DfE (2022), Special educational needs and disability: an analysis and summary of data sources (June 2022), https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1082518/Special_educational_needs_publication_June_2022.pdf

¹² Local Government Association, Bright Futures: SEND funding, <https://www.local.gov.uk/about/campaigns/bright-futures/bright-futures-childrens-services/bright-futures-send-funding>

¹³ Dr Jo Van Herwegen (2022), Why the rise in number of SEN children, especially in the early years?, <https://blogs.ucl.ac.uk/cld/2022/04/04/why-the-rise-in-number-of-sen-children-especially-in-the-early-years/>

¹⁴ Joseph Rowntree Foundation (2016), Special educational needs and their links to poverty, <https://www.jrf.org.uk/file/48923/download?token=3DkPP-d0&filetype=full-report>

¹⁵ UK Parliament Post (2021), Inequalities in education, and attainment gaps, <https://post.parliament.uk/inequalities-in-education-and-attainment-gaps/>

¹⁶ DfE (2015), Special educational needs and disability code of practice: 0 to 25 years, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf

additional support to meet those needs'.¹⁷ It is through the EHC plan process that a young person's needs are assessed, provision that meets their needs identified and then commissioned

- A requirement that the learners themselves and their parents or carers are included the EHC needs assessment process
- Per the statutory guidance, EHC plans would be led by the local authority and would draw on views and insights from a range of professionals including: educational advice and information from a staff member in the learner's current setting, medical advice and information from health care professionals, psychological advice and information from an educational psychologist working in the local authority and social care advice and information from or on behalf of the local authority, among others
- Introduction of guidance on joint planning and commissioning of services between education, health and social care
- Greater rights given to parents to express a preference for specific choices of school placement and a conditional duty on local authorities to meet that preference
- The general 'presumption of mainstream education' and that learners without EHC plans must be educated in a mainstream school, with some exceptions permitted

Per the 2014 Act, learners with EHC plans and their parents have the right to seek a place at a special school, special post-16 institution or specialist college. Where a parent or child has requested a specific academy, NMSS or S41 approved independent school, the local authority has a conditional duty to meet that preference. The only exceptions are where the school is unable to meet need or the local authority can demonstrate that the placement would be an inefficient use of resources. Once a school is named in the EHCP, it has a duty to admit the child, and the local authority is responsible for funding the placement.

Where learners with EHC plans receive education provision

In 2022 just over half (51.3%) of learners with an EHC plan were in mainstream schools: state-funded primary and secondary (see Figure 4). This is most common for learners who are able to meet the national curriculum with additional support, or where mainstream schools are able to provide a curriculum tailored to their needs.

The share of learners with an EHC plan attending independent schools has increased in recent years: in January 2015, the share of all learners with statements attending these schools was 5.3%; in January 2022 the equivalent figure was 7.0% of all pupils with an EHC plan.¹⁸

¹⁷ GOV.UK, Children with special educational needs and disabilities (SEND), <https://www.gov.uk/children-with-special-educational-needs/extra-SEN-help>

¹⁸ DfE (2022), Special educational needs and disability: an analysis and summary of data sources (June 2022), https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1082518/Special_educational_needs_publication_June_2022.pdf

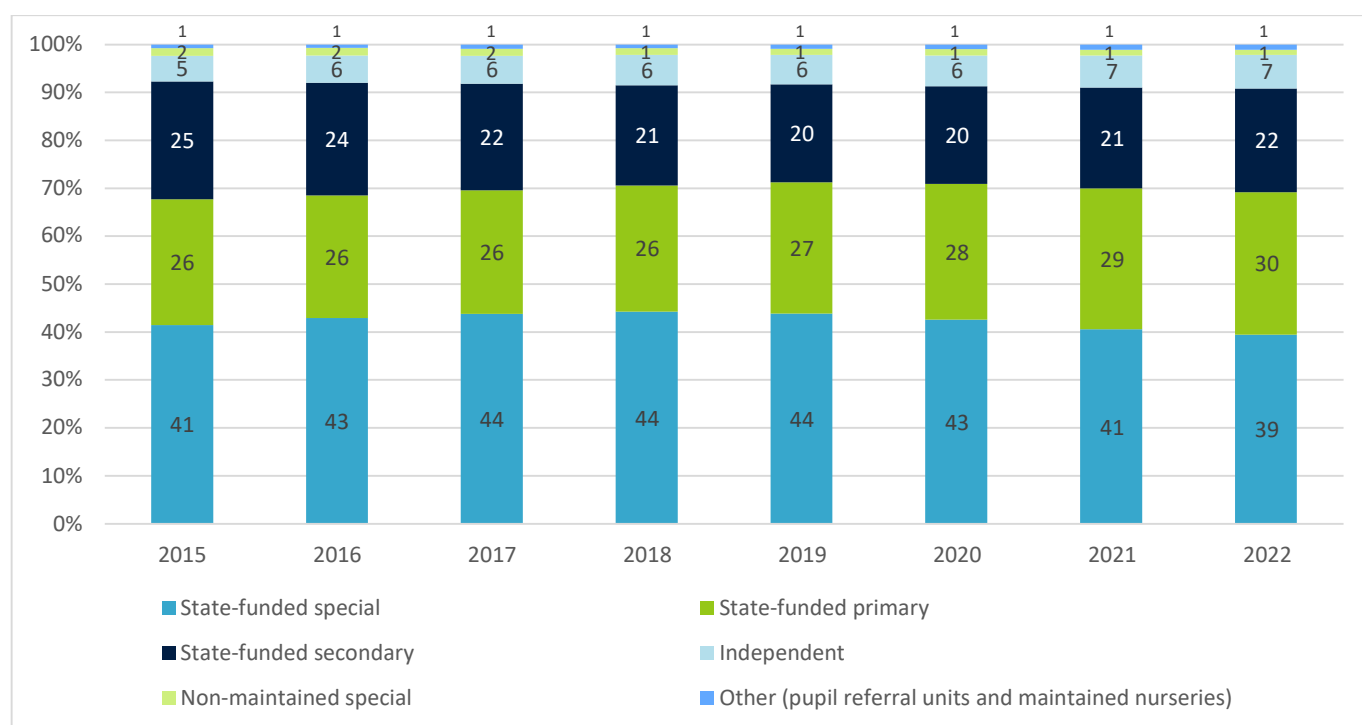


Figure 4: Percentage of pupils with a statement or EHC plan by type of provision, England (2015-2022)¹⁹

Funding for learners with SEND

In the last decade, the key change, introduced by the *School funding reform: Arrangements for 2013-14*²⁰ document, set the broad parameters that schools would be expected to provide additional support for special needs of pupils up to a nationally prescribed threshold per pupil, and that the Education and Skills Funding Agency (ESFA) and local authorities would provide a top-up for high needs in mainstream and specialist settings for individual learners. The purpose of this high needs budget is to support the commissioning of services that meet learners' complex needs.²¹

Commitments to learners with SEND per the Children and Families Act 2014 together with the increases in the number of learners with EHC plans and SEN support have put pressure on the high needs budget in recent years. The net overspend for the high needs budgets across all local authorities was £282 million in 2017-18, with 81.3%

¹⁹ DfE (2022), Special educational needs and disability: an analysis and summary of data sources (June 2022), https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1082518/Special_educational_needs_publication_June_2022.pdf

²⁰ DfE (2012), School funding reform: Arrangements for 2013-14, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/244364/school_funding_reform_-_final_2013-14_arrangements.pdf

²¹ Education & Skills Funding Agency (2023), High needs funding: 2023 to 2024 operational guide, <https://www.gov.uk/government/publications/high-needs-funding-arrangements-2023-to-2024/high-needs-funding-2023-to-2024-operational-guide>

of local authorities overspending on their high needs budget in the same year. This represented a significant increase on the net underspend in this budget of £63 million in 2013-14.²²

In 2019 this area of public spending was subject to a National Audit Office (NAO) review.²³ In this review they found that the spending impact of the 2014 Children and Families Act was not accurately assessed before it became law (more specifically, The Association of Directors of Children's Services stated that 'services were not adequately funded to meet these expanded duties' of entitlement to special education services up to the age of 25 years²⁴).

The NAO also identified that a key driver of the increase in spending by local authorities on the high needs budget between 2013-14 and 2017-18 was spending on independent special schools, which had increased by 32%. They noted that local authorities were making more placements with independent special schools, and, while over time, the price paid per place for these schools had fallen, they were still more expensive than other types of special school. The NAO estimated that, in 2017-18, the price paid per school place was:

- £50,000 per pupil in independent special schools
- £20,500 per pupil in state funded special schools
- Up to £18,000 per pupil with an EHC plan in mainstream schools

The report did not review, however, if these figures are comparing like-with-like as the figure for independent special schools may include more services such as therapeutic interventions that would not sit within the DfE budgets for state funded schools and indeed other provision which is covered out of separate budget headings in local authority and health accounts.²⁵ The NAO review also posited – with limited evidence – that many learners placed in independent special schools could have been educated in state-funded special schools but for lack of capacity.

In response to this increase in need and in recognition of overspends, the Government has increased the total value of the high needs budget in England by £2.5 billion over three years to reach £9.1 billion 2022-23²⁶, and this will reach £10.1 billion in 2023-24 after a further increase.²⁷ Annual growth in this budget to 2022-23 was 14% per

²² NAO (2019), Support for pupils with special educational needs and disabilities in England, <https://www.nao.org.uk/wp-content/uploads/2019/09/Support-for-pupils-with-special-education-needs.pdf>

²³ NAO (2019), Support for pupils with special educational needs and disabilities in England, <https://www.nao.org.uk/wp-content/uploads/2019/09/Support-for-pupils-with-special-education-needs.pdf>

²⁴ The Association of Directors of Children's Services (ADCS) (2019), ADCS Position Paper: A health care system that works for all children,

https://adcs.org.uk/assets/documentation/ADCS_A_health_care_system_that_works_for_all_children_FINAL_web.pdf

²⁵ Clifford, J., Hamblin, J. and Theobald, C. (2011), Comparative Cost Review of Non-Maintained and Independent Special Schools with Local Authority Maintained Special Schools, NASS/Baker Tilly, Watford/York

²⁶ Government Social Research (2022), High needs budgets: effective management in local authorities, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1084458/DFE_HN_Budget_case_study_report.pdf

²⁷ HM Government (March 2023), Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan Right Support, Right Place, Right Time,

place,²⁸ which was higher than planned spending growth per placement in mainstream schools of 6.8%.²⁹ In spite of this growth, the funding per learner with SEND still fell by 2.6% in real terms between 2013-14 and 2017-18.³⁰

This fall in real terms spending per place is likely to have consequences for the ability for schools to meet learners' needs and for the financial position of special schools. These were both themes that emerged from this research. A number of schools that participated in our research said that they were simultaneously facing financial challenges and capacity constraints (see Figure 5 and Appendix 3 for further exploration of this theme).

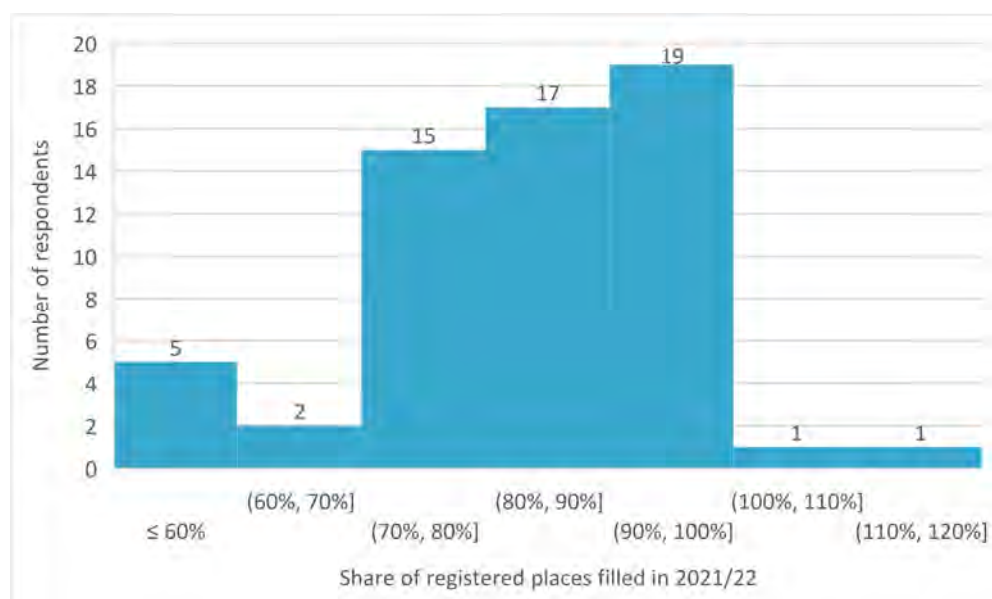


Figure 5: Survey participants' share of places that were filled for the majority of the 2021/22 school year

While the Government has increased the high needs block,³¹ there are broader constraints on public spending, and so overspends for some local authorities remain. For those local authorities with the highest deficits the government is seeking to support them to reduce their spending on their high needs budget. Up to 55 local authorities have been invited to participate in the Delivering Better Value (DBV) in SEND programme and 20+ local authorities in the Safety Valve programme to reduce their overspends.³²

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1139561/SEND_and_alternative_provision_improvement_plan.pdf

²⁸ IFS (2022), School spending and costs: the coming crunch, <https://ifs.org.uk/sites/default/files/2022-10/IFS-BN347-School-spending-and-costs-the-coming-crunch-1.pdf>

²⁹ DfE (2023), Schools' costs: technical note, <https://www.gov.uk/government/publications/schools-costs-technical-note>.

³⁰ NAO (2019), *Support for pupils with special educational needs and disabilities in England*, <https://www.nao.org.uk/wp-content/uploads/2019/09/Support-for-pupils-with-special-education-needs.pdf>

³¹ UK Parliament (6 December 2022), Capital Update: Statement made by Gillian Keegan on 6 December 2022, <https://questions-statements.parliament.uk/written-statements/detail/2022-12-06/hcws414>

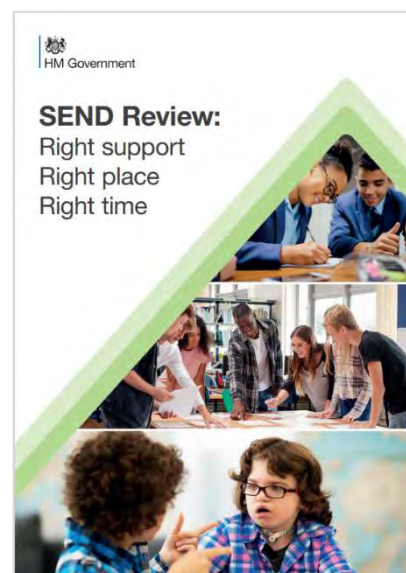
³² DfE (2022), Guidance on our intervention work with local authorities, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1110657/Sustainable_high_needs_systems_guide_-_SV_and_DBV_updates_-_Oct22.pdf

Ultimately funding for education and public services are limited by the bounds of the public finances. Therefore, local authorities need to meet the needs of as many learners as possible in their area, and may place some learners in settings at a lower cost even though there may be other more suitable (but higher cost) settings that may better meet learners' needs.

The SEND review

In the current context all public spending is under scrutiny with real terms public spending increases only allowed in certain budgets. The combination of marked funding increases for the high needs budget and perceived poor outcomes and experiences of learners with SEND have precipitated the SEND Review. This was a three year cross-government review which culminated in the Green Paper and set out the changes the Government wanted to make to the SEND and AP system in England.³³ The Green Paper specifically picked out three key challenges facing the SEND system (quoting from the Green Paper):

1. *Outcomes for children and young people with SEN or in an alternative provision are poor*
2. *Navigating the SEND system and alternative provision is not a positive experience for children, young people and their families*
3. *Despite unprecedented investment, the system is not delivering value for money for children, young people and their families*



It is important to note that these challenges are focused on the system and are not specific about which part(s) or aspects of the system may be causing these challenges. When it comes to the third challenge it is important to distinguish between value for money and expense. The Government's concern in this area was increased spending with little or no improvement in outcomes. However, as demonstrated above, high needs funding per placement has fallen in real terms in recent years, so the expectations that outcomes would improve in line with the increase may have been misplaced. Furthermore, it will be a number of years before outcomes are to be known for learners going through the school system now.

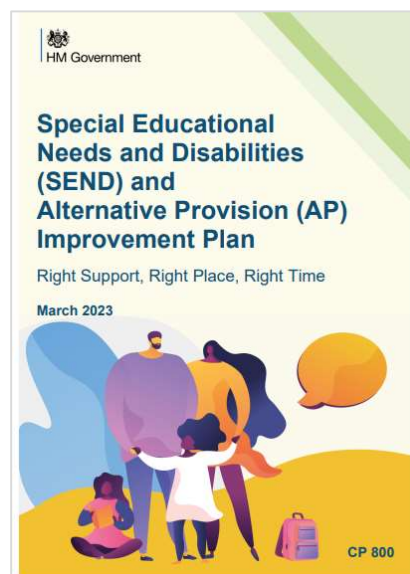
In March 2023 the Government published its response to the consultation and their SEND and AP Improvement Plan.³⁴ Key features of this plan included:

- The mission to fulfil children's potential, to build parents' trust and to provide financial sustainability of the sector

³³ SEND Review: Right support, right place, right time (2022), Government consultation on the SEND and alternative provision system in England [SEND Review - right support, right place, right time \(publishing.service.gov.uk\)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1139561/SEND_and_alternative_provision_improvement_plan.pdf)

³⁴ HM Government (March 2023), Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan Right Support, Right Place, Right Time, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1139561/SEND_and_alternative_provision_improvement_plan.pdf

- The intention to create evidence-based National Standards that set expectations for support for SEND in mainstream settings and that facilitate a system of funding bands and tariffs, setting out parameters for the funding available to meet certain needs of learners
- To improve SEND provision in mainstream settings. These changes are intended to reduce the number of learners with EHC plans and to increase the share of learners with SEND in mainstream schools
- A seemingly scaled back set of ambitions for learners with SEND to achieve ‘good outcomes’, rather than the ‘best possible outcomes’, that are compatible with financial sustainability
- Full integration of alternative provision into the SEND system to ensure alignment of services to facilitate early and targeted support for learners in these settings temporarily, and better transitions to and from these settings



A key reflection on these plans is that by aiming for ‘good outcomes’ for learners with SEND the Government may be creating inequalities between learners with and learners without SEND, as the latter are still promised ‘the best possible education’.³⁵ Notably, attainment outcomes for learners with SEND per this Plan continue to be a comparison of reaching expected standards in reading, writing and mathematics at the end of primary education and at GCSE level with learners with no identified SEND, and a statement that ‘reaching the expected standard may not be an appropriate aim’ for a ‘very small number of children and young people’.

³⁵ GOV.UK – The Education Hub (2022), How we’re raising standards in our schools and colleges – what the Schools White Paper means for you, <https://educationhub.blog.gov.uk/2022/03/28/how-were-raising-standards-in-our-schools-and-colleges-what-the-schools-white-paper-means-for-you/#Higher>

3. Provision that meets the needs of learners with SEND

This section provides a deeper insight into the educational, care and health needs of learners with SEND, how specialist provision meets their needs, and what difference it can make.

The breadth of special educational provision and how it is funded

Provision that meets the needs of learners with SEND will generally seek to remove identified barriers to learning. The SEND Code of Practice recognises the following as special educational provision ‘where they educate or train a child’, and therefore are services that remove barriers to learning for pupils with SEND:³⁶

- Educational instruction
- Services relating to mental health
- Speech and language therapy
- Physiotherapy
- Occupational therapy
- Other therapies

For the learners who have needs in these areas, these kinds of support should be detailed in their EHC plans. These plans must detail the provision that a child or young person requires to achieve their targeted outcomes as specified earlier in the plan. Per government guidance, these outcomes are broad, and must be:

... focused on education and training, health and care outcomes that will enable children and young people to progress in their learning and, as they get older, to be well prepared for adulthood. EHC plans can also include wider outcomes such as positive social relationships and emotional resilience and stability. Outcomes should always enable children and young people to move towards the long-term aspirations of employment or higher education, independent living and community participation.³⁷

It is clear, therefore, that special educational provision can be broad and encompass services beyond educational instruction, and funding for educational provision should, where appropriate, also cover health and care services. This is allowed for in the SEND Code of Practice. There does, however, seem to be inconsistency about how these other services are funded, with some schools delivering health and/or care services from educational budgets only, and some delivering these services with funding from health or care budgets. A survey of special schools as part of this research indicated that just over half of participants provided social care³⁸ to their learners, but just

³⁶ DfE (2015), Special educational needs and disability code of practice: 0 to 25 years, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf

³⁷ DfE (2015), Special educational needs and disability code of practice: 0 to 25 years, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf

³⁸ Social care was defined as the provision of practical help and support to those with needs arising from illness, disability, age or poverty. It encompasses social work, personal care, protection or social support services provided to children in need, children at risk or adults with needs.

under two thirds of those schools received explicit social care funding. Over a third of respondents provided health care services,³⁹ but of those schools just over half of them received express funding for this type of provision (see Figure 6). This tells us that in many instances education funding will be used to fund care and health interventions, and indicates that joined-up commissioning may not be working effectively in these areas.

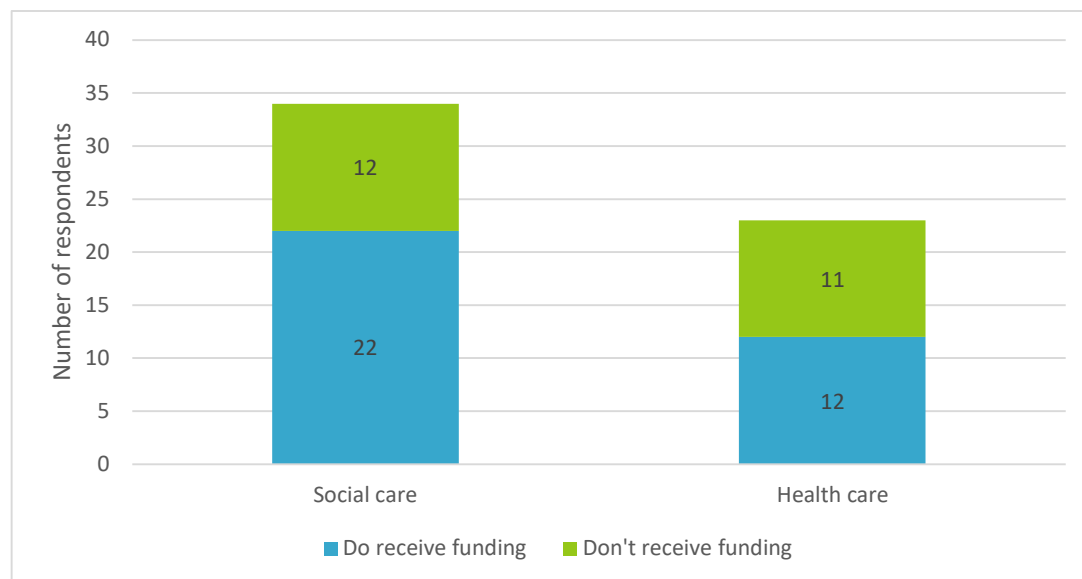


Figure 6: Do you provide social care and/or health care services on your school site(s)? Do you receive other types of funding?

A lack of joined-up commissioning may pose risks to learners:⁴⁰ nursing care, which is vital to some children with physical disabilities in particular, is not classified as special educational provision. In instances where there are no NHS services or nurses on a school site, non-medically trained staff (e.g. teaching assistants) may be required to administer clinical interventions which may pose risks to the safety of children if there is no adequate oversight of these activities.⁴¹

Outcomes available to learners with SEND when they fulfil their potential

Reflecting this broad definition of special educational provision, in interviews and workshops as part of this research with staff in special schools, many participants said that their holistic aim for pupils is to improve their quality of life. The components of a good quality of life for these learners per our own research, secondary sources and government guidance, are summarised in Figure 7.

³⁹ Health care was defined as the provision of medical services to individuals and communities for the diagnosis, treatment and aftercare of illness due to physical or mental health conditions.

⁴⁰ Smith, E. (2020), Nursing Provision in Specialist Education Settings, <https://www.miss-shanidar.org.uk/seecmsfile/?id=10>, Special Schools' Voice

⁴¹ Schools Week (21 November 2019), Investigation: Pupils 'at risk' as special school staff left to 'fill gaps' in medical care, <https://schoolsweek.co.uk/investigation-pupils-at-risk-as-special-school-staff-left-to-fill-gaps-providing-complex-medical-care/>



Figure 7: Ambitions to improve the quality of life for learners with SEND

Learners with SEND may need support in one or more of the four components in Figure 7 to achieve these outcomes and fulfil their potential, and it is worth noting that these areas are interlinked. For instance, having improved mental health may facilitate learning: by reducing instances of dysregulation a pupil may then be able to concentrate in lessons, allowing them to develop new skills and acquire knowledge.

It is, however, important to note that, each learner has a different level of potential that can be achieved in each area of quality of life shown in Figure 7. This is why the areas of need are described in comparatives – for example, to live in **better** physical and mental health, or to be **safer and more included** in their communities. The depth and combination of needs in these four areas are learner specific and could change over time. Through our archetypes (see Section 4) we explore different combinations of needs, and what difference provision that meets needs can make to each learner. Examples of some of the needs of learners with SEND that we have heard in this research in these four areas are outlined in Table 2.

Table 2: Examples of needs in each component of a good quality of life

Components of a good quality of life	Examples of some learners' needs in these areas
To improve potential to learn and to work	Learners with SEND will need additional support to be able to engage in learning and develop new skills, to gain qualifications or the ability to undertake paid or voluntary work. For example, some learners will need to learn to communicate via non-verbal means; others may require a curriculum tailored to their abilities as they may not be able to engage with the full national curriculum.

Components of a good quality of life	Examples of some learners' needs in these areas
To live more independently and to have greater potential for self-determination	Some learners with SEND will not be able to live without care or health support. However, with the right special educational provision they could learn to undertake certain day-to-day activities for themselves (e.g. the ability to dress themselves) that would enable them to move out of the family home into supported living as an adult, thereby maximising their attainable independence.
To be safer and included in their communities	Some learners with SEND may find it difficult to engage socially with others due to their learning difficulties (e.g. autism spectrum conditions) or may have had previous negative experiences in social settings which affect their ability to engage with others. Support to overcome this anxiety, and being in safe settings in which they can form relationships with others, may prepare them to engage with their wider communities.
To live in better physical and mental health	Learners with SEND may experience mental health challenges, for instance anxiety from earlier childhood traumatic experiences, or frustrations due to their inability to express themselves. Others may have health needs that are life limiting and restrict their ability to learn in mainstream settings (e.g. they need to have life-support equipment or nursing care/staff trained and regularly checked for nurse-delegated duties). Special educational provision integrates health and therapy services to meet these needs, and thereby removes barriers to learning.

In research with special schools in workshops at the NASS conference in November 2022, we asked schools what good outcomes were for their learners. We also asked schools if achieving them would make a difference to those around the learners – e.g. their families or siblings, or local public services. Table 3 shows the most frequently mentioned outcomes that constituted success for pupils by the 47 participants. These outcomes were very much in line with the Government's ambitions for learners per the 2015 SEND Code of Practice.

Table 3: Schools' perceptions of good outcomes for their pupils

Theme	Number of times mentioned (% of respondents)
Having independence and agency	28 (60%)
Feeling part of a community or safe within their community	23 (49%)
Being able to work	18 (38%)
Being happy or in good mental health	18 (36%)
Developing key life skills	15 (32%)
Having confidence or developing self esteem	15 (32%)

The full list of responses informed our view of good short-, medium- and long-term outcomes outlined in Table 4. These have been used to inform the theories of change presented later in this section. A key theme emerging

from our research, and captured in this table, is how detrimental being in the wrong settings can be to the mental health of learners themselves and their parents and siblings, with family crisis and breakdown being the ultimate consequence. See Appendix 3 for further detail on this theme and research findings.

Table 4: Good outcomes for learners and those around them in the short-, medium- and long-terms

Group	Short-term outcomes	Medium-term outcomes	Long-term outcomes
For pupils	<ul style="list-style-type: none"> Improved attendance Ability to self-regulate Enjoyment of learning More efficient and effective education 	<ul style="list-style-type: none"> Gaining qualifications or accreditation Possibility of going onto further education Developing a sense of self-worth Less risk of entering the judicial system 	<ul style="list-style-type: none"> Positive transitions to adulthood Being able to live (more) independently Becoming a valued member of society and to be safe in the community Reducing costs to society Sustained physical and mental wellness Ability to develop healthy relationships
For others	<ul style="list-style-type: none"> For families: reduced demands on their time and pressure on them 	<ul style="list-style-type: none"> For parents: a return to work For siblings: reduced safeguarding risk 	<ul style="list-style-type: none"> For families: <ul style="list-style-type: none"> Staying together Better mental and physical health in parents and siblings Improved financial wellbeing Improved relational health⁴² An improved sense of purpose

From specialist provision to outcomes and impact in a theory of change

For this project we have developed nested theories of change: one for each of the four areas of need for learners with SEND per Figure 7 above. These theories of change capture how, by meeting a learner's needs, specialist provision makes a difference to learners, their families, and communities. They trace a logical pathway between a child's needs, the activities in the delivery of special educational provision that meets their needs, and the changes (outcomes) that are achieved in the learner's life as a result. These theories of change were informed by all elements of this research, and particularly by research activity with special schools.

⁴² Relational health is defined as better health and wellbeing due to being able to form and maintain positive relationships, reducing instances of stress and stress-induced poor health.

To support interpretation of these theories of change, the key components of it are outlined in Figure 8 and described below.



Figure 8: Components of a theory of change

Each element of a theory of change can be explained as:

- **Needs:** of learners with SEND as well as the needs of their families and carers (both of which schools often take into account when meeting a learner's needs)
- **Activities:** the provision and services schools deliver to meet the needs of their learners.
- **Approaches:** distinctive features of the methods or qualities of the approach taken by schools that are particularly effective in bringing about change (positive outcomes)
- **Primary outcomes:** the short-term, direct changes for learners that arise from the activities (typically these align to needs and take the form of those needs being met)
- **Secondary outcomes:** the longer-term and indirect changes in the lives of learners, their families and other stakeholders in society; these outcomes arise from the activities (these may align to needs but may also show positive change beyond the needs initially identified)
- **Impacts:** the reflection of social outcomes as measurements, both long-term and short-term, adjusted for the effects achieved by others (alternative attribution), for effects that would have happened anyway (deadweight), for negative consequences (displacement) and for effects declining over time (drop-off)

Approaches

Before exploring each theory of change, we found that special schools took approaches to provision that spanned all four areas of need. A common theme across all aspects of this research was that provision, to be effective in achieving a learner's stated outcomes, must be tailored to learners' individual needs. Schools that wish to have successful outcomes with their learners will seek to understand their individual needs, to identify barriers to learning for them, and then will either provide holistic support that is evidence-based themselves or work with partners in a joined-up manner to ensure learners get this support. This approach is summarised in Figure 9. Delivery of this model of provision is more possible in special settings that are more likely to be funded appropriately to deliver the necessary services and support.



Figure 9: Summary of approach needed by learners with SEND

Building on each circle in Figure 9, Figure 10 and Figure 11 provide examples of approaches taken by special schools to deliver provision that is learner-centric, responsive to changing need, and holistic and evidence-based.

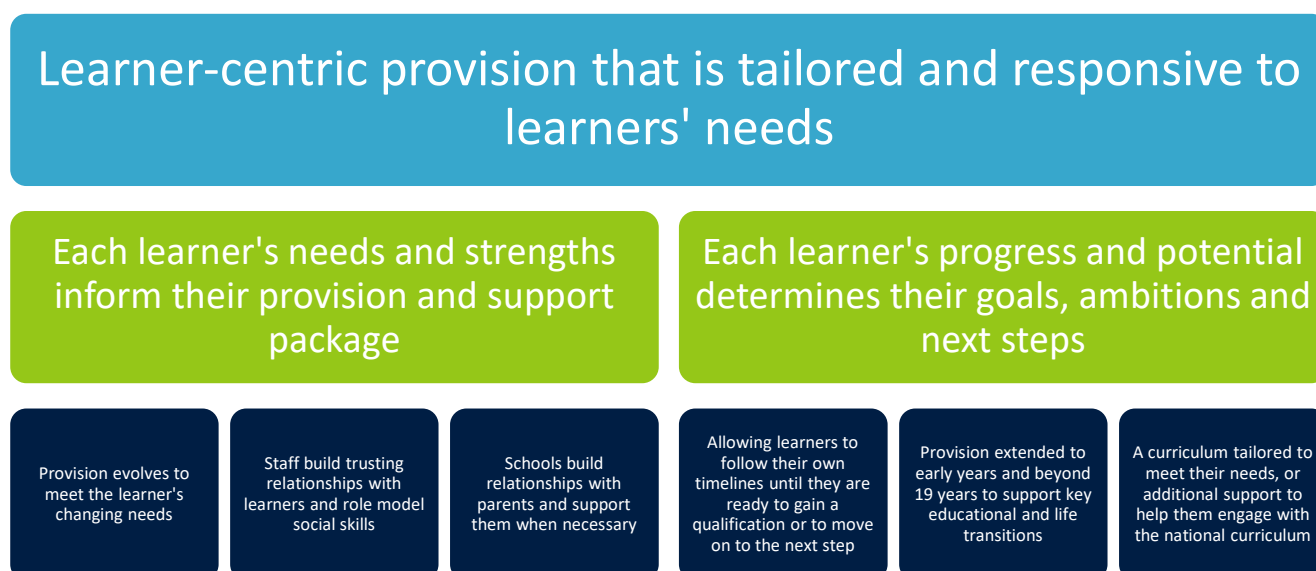


Figure 10: Approaches to delivering provision that is learner-centric

Holistic and evidence-based provision

Integrated and tailored provision that meets needs on one site - a blend of education, care and health services

Practice that is informed by evidence about what works

Stepping up where other external agencies lack capacity and capabilities

Employing experts in the conditions and needs of pupils (e.g. qualified teachers and therapists)

Environment is designed to support pupils - e.g. to support regulation or facilitate mobility

Provision that is responsive to demand from commissioners, e.g. around specialist needs

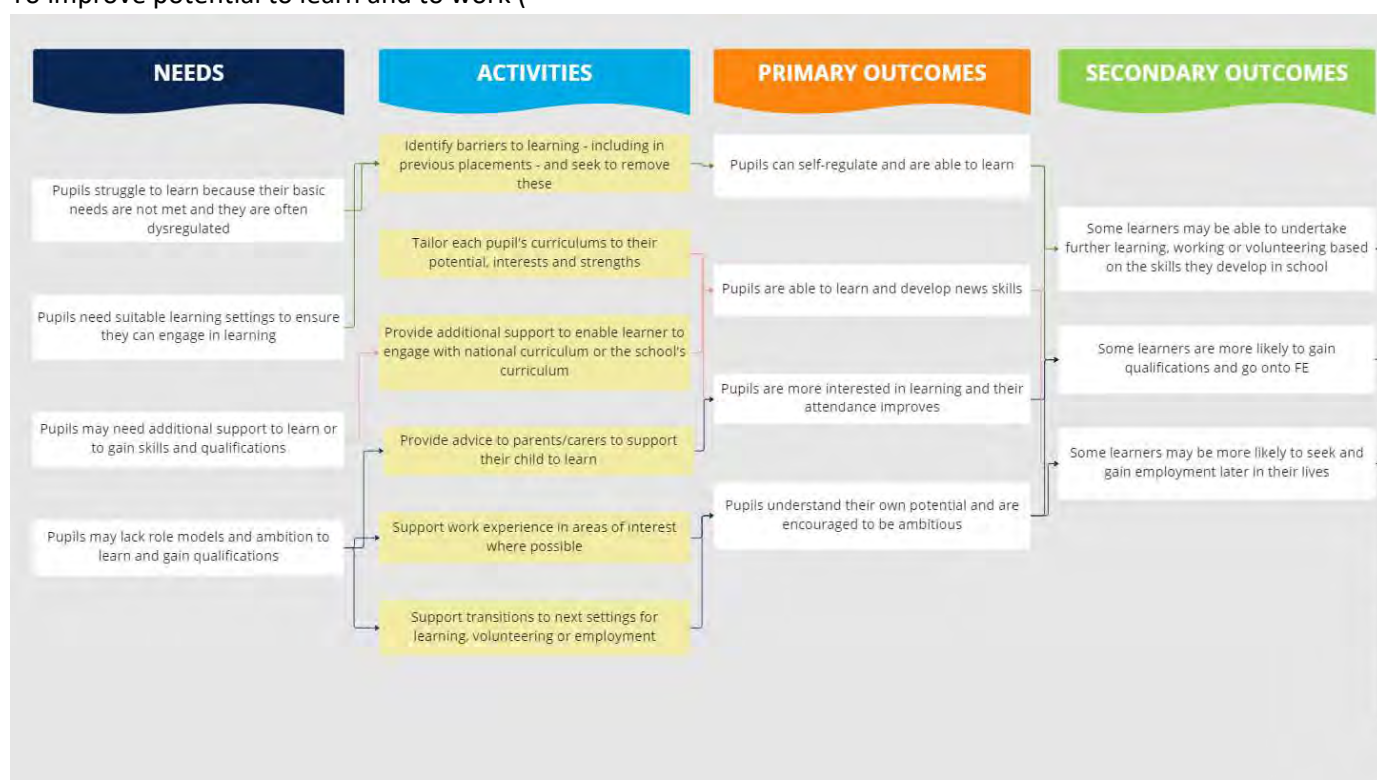
Schools share their expertise and knowledge with others in the system, e.g. mainstream schools

Figure 11: Approaches to delivering provision that is holistic and evidence-based

Special educational provision theories of change

Theories of change for specialist provision appear on the following pages. These demonstrate how provision meets needs in the four areas of Figure 7, and are:

- To improve potential to learn and to work (



- Figure 12)
- To live more independently and to have greater potential for self-determination (Figure 13)
- To be safer and included in their communities (Figure 14)
- To live in better physical and mental health (Figure 15)

These theories of change set out how specialist provision can meet learners' needs in each area and the potential difference this could make to their outcomes – and together across these four areas of need, ultimately improve learners' quality of life.

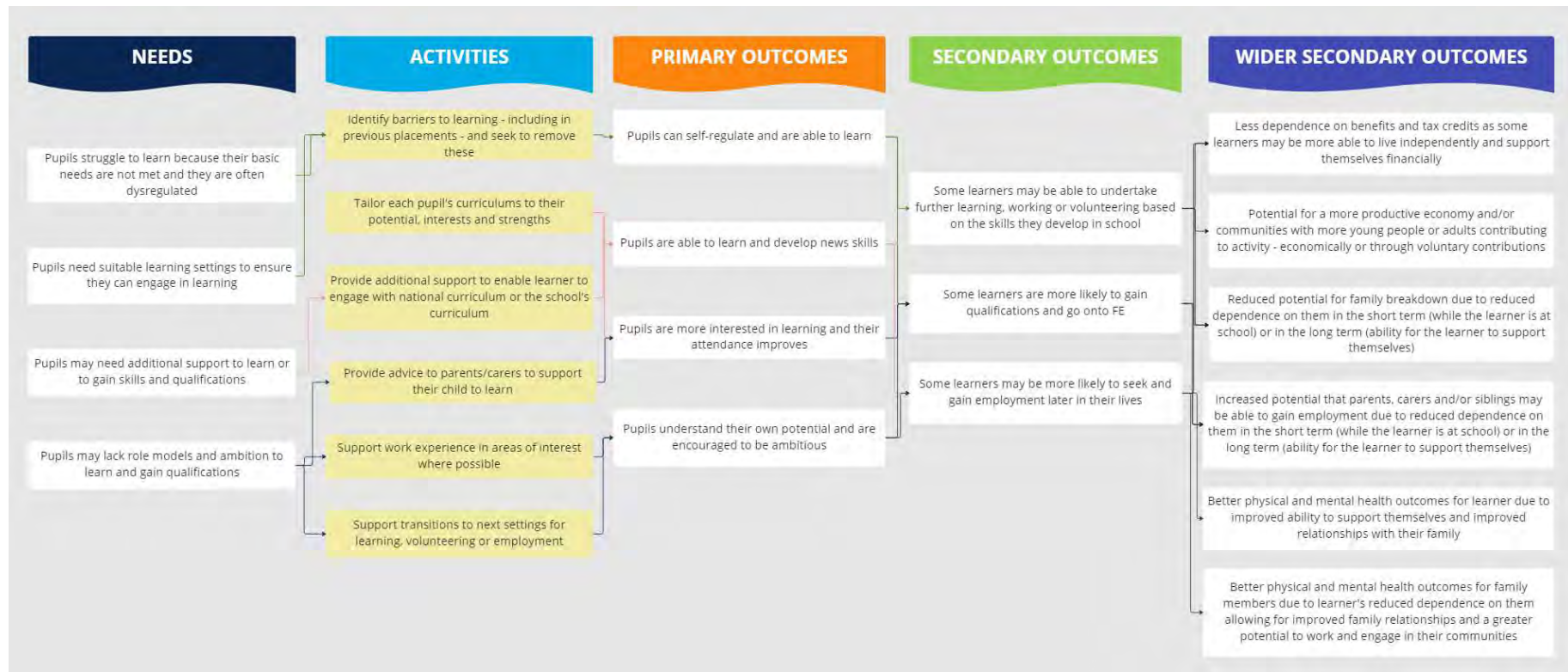


Figure 12: Theory of change - To improve potential to learn and to work

Figure 12 shows that where provision meets the need of learners – which may range from not being able to self-regulate to lacking role models and ambition for themselves – outcomes could include the ability to learn new skills which could then lead to further education or other qualifications for some learners. In turn this could lead to the ability to engage in paid or voluntary work later in life. Tailoring curriculums and providing supported work experience are examples of provision in this area.

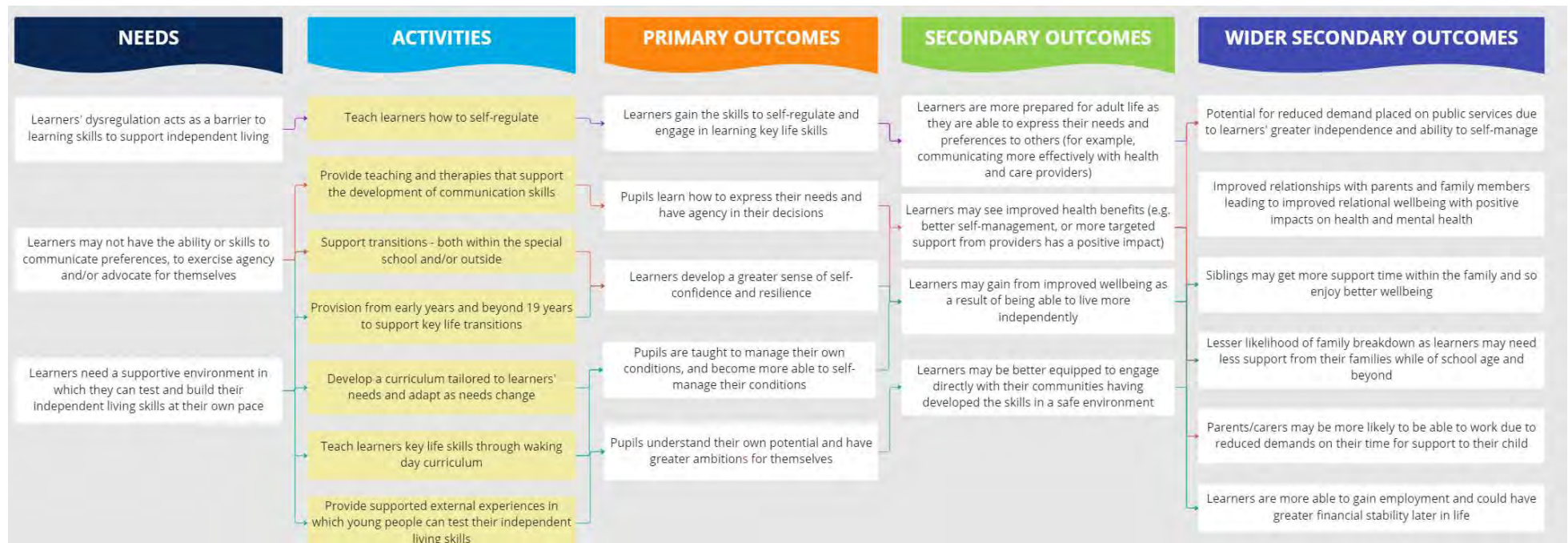


Figure 13: Theory of change - To live more independently and to have greater potential for self-determination

Figure 13 shows that where provision supports learners to develop the ability to learn daily living skills or to be able to manage their own conditions (primary outcomes), their secondary outcomes could include being able to live alone, being able to direct their own health and social care or being able to engage in their communities. Provision that could achieve this could encompass supporting learners to be able to communicate or to provide situations in which learners can practise engaging with others in a safe environment.

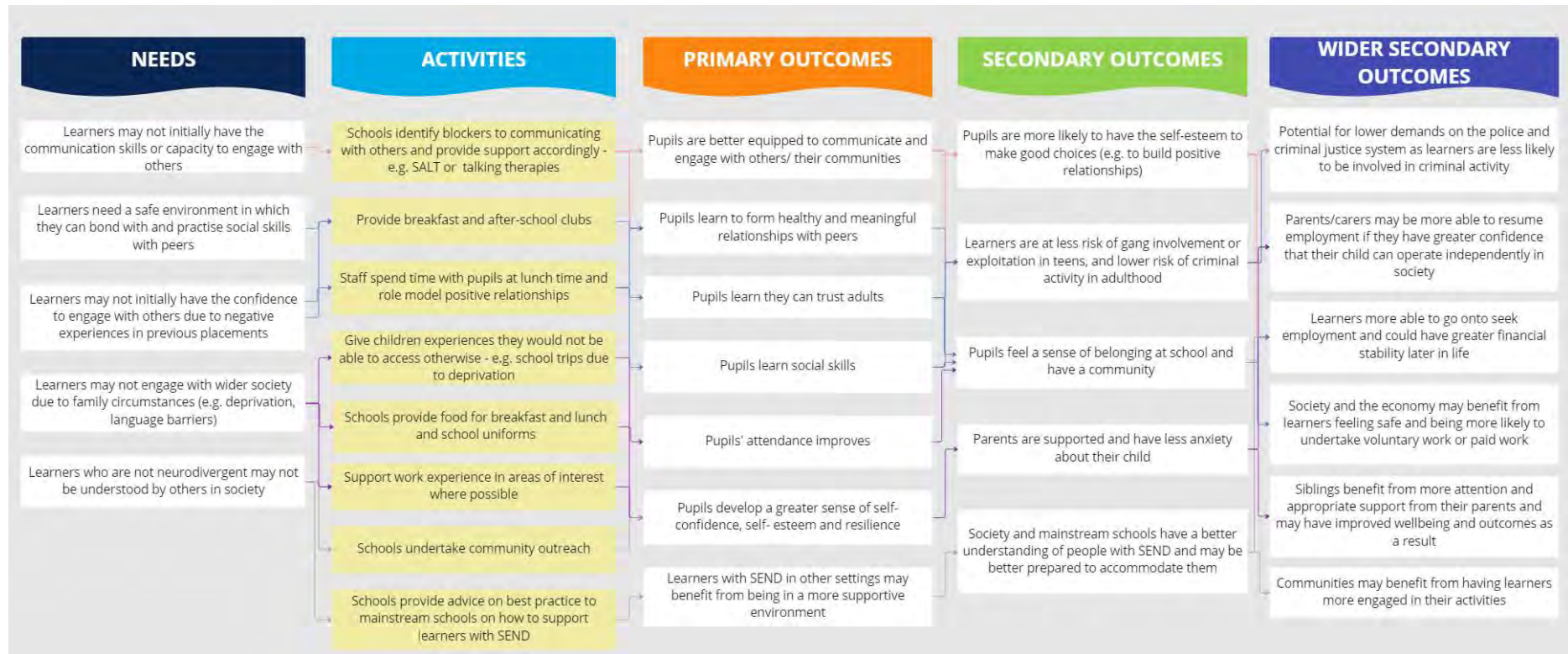


Figure 14: Theory of change - To be safer and included in their communities

Figure 14 shows that needs in this area may include not having the communication skills to socialise, or having anxiety that is too acute to engage socially with others. Specialist provision that helps learners engage with their communities safely include staff role modelling behaviours, providing opportunities to socialise and therapies to reduce social anxiety or to remove blockers to communication. If learners are more equipped to engage with others in a positive way (primary outcomes), then they can build more positive relationships, reducing the burden on their families and the potential to be involved in criminal activity (secondary outcomes).

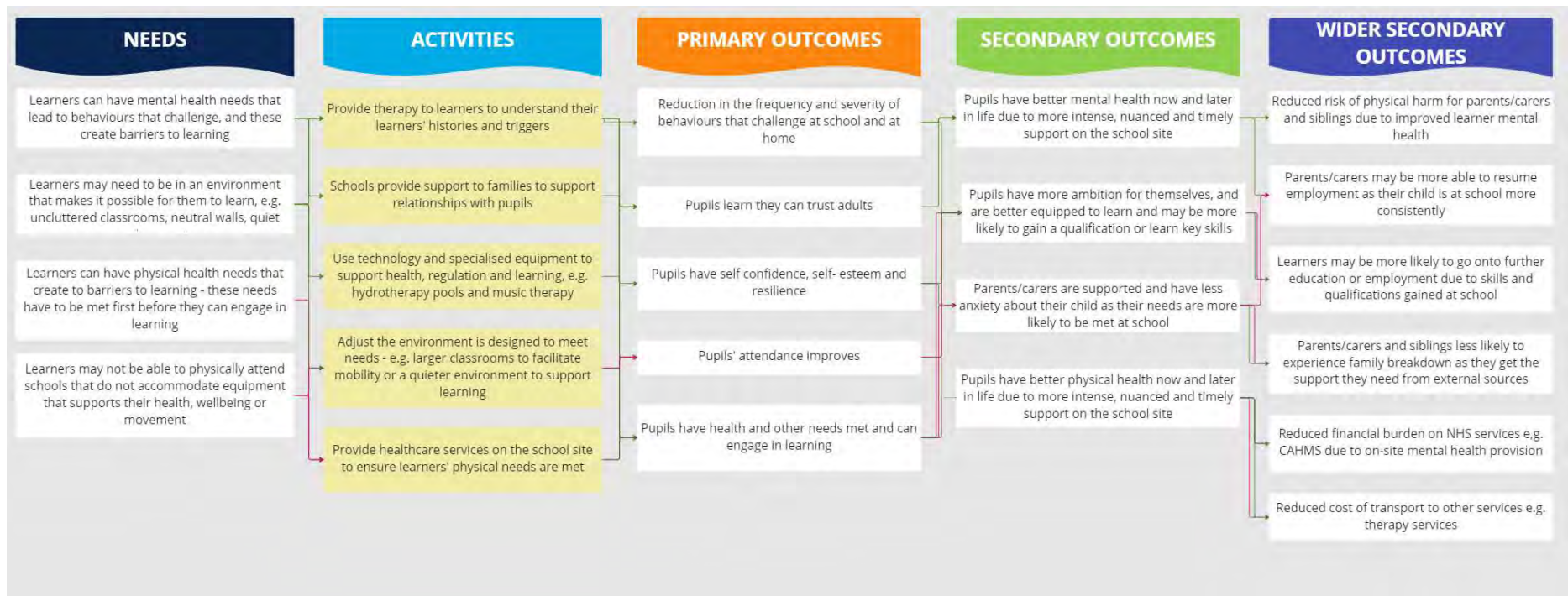


Figure 15: Theory of change - To live in better physical and mental health

Figure 15 captures that learners may have mental or physical health needs that cannot be met easily in non-specialist provision because it requires more 1:1 time with expert staff, or the learning environment must be adapted to accommodate them being in the setting (e.g. a calm and neutral environment). If their health needs are met, this may enable learners to improve attendance, engage in their classes better and develop skills (secondary outcomes). They may also experience a better sense of wellbeing. If pupils' needs are met in this area it may reduce pressure on their families, enabling one or both parents to work, and reduce pressure on public services – particularly if the school provides therapies on site that otherwise would only be provided by Children and Adolescent Mental Health Services (CAMHS).

The above theories of change capture the potential for good outcomes for learners and others in society where needs are met. However, in practice, needs are not always met and outcomes may not be achieved even if the learner has potential in these areas. This may be due to a variety of reasons, including learners not placed in provision that is right for them, to the failure of services that are supposed to meet their needs. For an exploration of potential challenges and barriers to good outcomes for the learners with SEND identified in this research, see Appendix 3.

The following sections of this report explore outcomes for eight archetypical learners who have EHC plans, and how it makes a difference to their lives and those around them when they have their needs met.



4. Archetypes' stories – how provision can meet their needs

This section tells the stories of learners with SEND, and what difference it makes to them if they are in settings that meet their special educational needs.

Approach to developing archetypes

We use stories of learners with SEND to demonstrate the impact that appropriate, specialist and personalised support can make to them. In exploring how provision meets their needs and the difference it makes to them during and after their schooling, it demonstrates the impact that can be achieved by specialist provision. Following best practice for evaluation in complex systems,⁴³ this approach is qualitative, story-based and person-centric, using profiles of eight learners with SEND. The needs and stories of these 'archetypes' – essentially composite profiles of learners in special schools – are representative of a large proportion of learners supported by NASS member schools.

The process for identifying and developing these eight archetypes is summarised in Figure 16 and described in further detail below that.

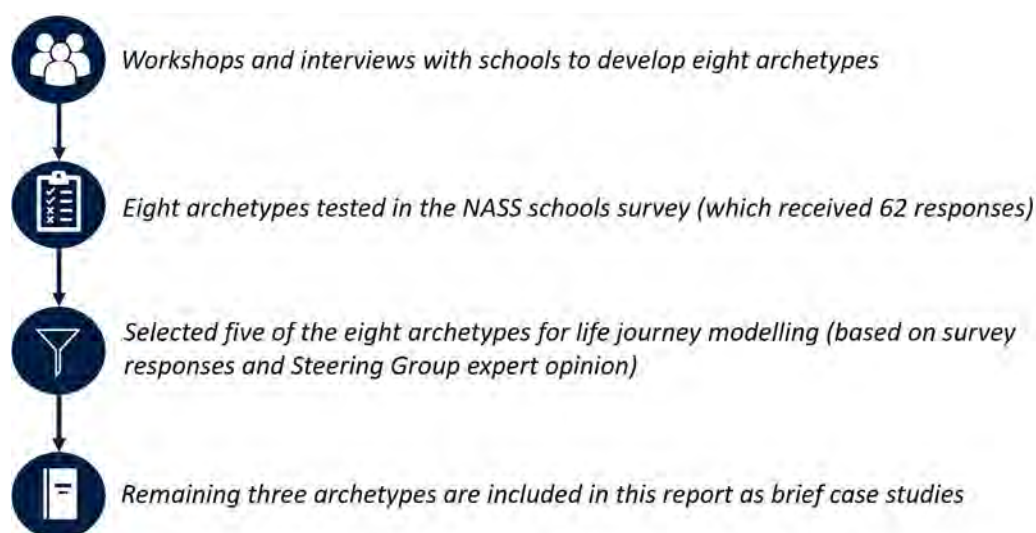


Figure 16: Formulation of learner archetypes

⁴³ HM Treasury (2020), Magenta Book 2020, Supplementary Guide: Handling Complexity in Policy Evaluation, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/879437/Magenta_Book_supplementary_guide._Handling_Complexity_in_policy_evaluation.pdf

Workshops and interviews with schools across the breadth of the provision of NASS members were used to develop the initial eight archetypes. These discussions focused on the needs, background, journeys to specialist provision and outcomes for each of the archetypes. Each of these archetypes is detailed in the section that follows.

These eight archetypes were then tested through a survey of NASS schools. This was an online survey which ran from January 2023 to February 2023. Of the 400 schools invited to participate, we received 62 responses. Participating schools were asked to select up to two of the eight archetypes that were most similar to the majority of their learners. This survey also provided them the opportunity to give further feedback on the archetypes' needs, journeys, and outcomes.

The results of the survey were used to inform a decision as to which of the eight archetypes would be subject to the evaluative stage (i.e. quantitative modelling) of this study, and the final decision was taken by the project Steering Group.

Table 5 summarises all eight archetypes and their outcomes as a result of provision that meets their needs. The rows shaded in blue indicate the archetypes whose stories were subject to quantitative analysis.

Table 5: Summary of eight archetypes in this research

Archetype	Needs	Difference that provision that meets their needs makes
Tim	Has autism and communication challenges	<ul style="list-style-type: none"> He learns to communicate and to engage effectively socially. He gains qualifications and after leaving education he is able to work for a living
Ade	Has a combination of autism, anxiety and has physical health needs	<ul style="list-style-type: none"> He is able to develop key life skills such as preparing his own meals, and is able to volunteer regularly
Sarah	Has SEMH needs, has experienced significant abuse and is a looked after child	<ul style="list-style-type: none"> She is able to form and maintain positive relationships. She gains a qualification and she goes onto paid employment upon leaving school
Olivia	Has cerebral palsy and has communication challenges	<ul style="list-style-type: none"> She learns to communicate her needs and then can direct her own care. After leaving school she is able to move into a supported living setting, reducing care demands on her family

Archetype	Needs	Difference that provision that meets their needs makes
Charlie	Has a sensory impairment, learning difficulties and communication challenges	<ul style="list-style-type: none"> She is able to leave school with the confidence to build friendships and to engage socially. She is able to gain qualifications and paid employment later in life
Abichal	Has SEMH needs related to past trauma, and also has dyslexia and health needs	<ul style="list-style-type: none"> His behaviours that challenge reduce over time and his mother is able to return to work
Frank	Has a degenerative nervous system disorder and experiences mental health challenges	<ul style="list-style-type: none"> Being able to express his needs reduces his anxiety, and having therapy and health services on the school site improves the quality of his day-to-day life
Fred	Has profound speech, language and communication needs and is behind his chronological age academically	<ul style="list-style-type: none"> He is able to develop communication and other key skills. Getting the right support means that his parents are able to have more secure employment, improving the family's financial security

Outline of learner journeys

Stories of each of the eight archetypes are detailed in the pages that follow. For those archetypes whose stories have been used for quantitative modelling there are life-story charts, showing the likely trajectory of their lives, contrasting what happens when they are placed in a provision that is appropriate and meets their needs, or in a provision that does not meet their needs.

Archetypes selected for evaluation

Tim

Needs and background

Tim has autism, which leads to challenges with his mental health. In particular he struggles with anxiety around new people and in busy and unpredictable environments; his routine is very important to him. He also experiences difficulties with speech, language and communication, which leads to frustration. This frustration often gives rise to extremely challenging behaviour. Verbal outbursts are common, and, while far less frequent, physical outbursts can also occur.

In his early years, Tim's parents try to continue working and place him in day care during the day. It quickly becomes clear that this setting is not good for Tim and his mother gives up work so that she can care for him all day and give him a more stable routine.

Initially, Tim attends a mainstream school and he is able to mask aspects of his autism during the school day. While this means that Tim's fellow pupils are not disturbed by his behaviour, at home his behaviour causes significant problems. Suppressing his outbursts during the school day leads to inevitable escalation of his behaviour once back at home.

Tim's behaviour places immense strain on his parents' relationship. They feel guilty about having to spend such significant amounts of time with him, and not with his younger sibling, and they are mentally drained from the constant support that he requires. They never feel like they can relax, and their family life is structured by Tim's need for routine.

In secondary school Tim is initially able to continue to hold in his outbursts until he gets home. However, he is eventually no longer able to mask his autism at school. The secondary school environment is extremely over-stimulating for him and there are too many variables that can influence his daily routine. His behaviour and school life quickly deteriorates. Fellow pupils begin to bully him and this compounds his anxiety to the point that he refuses to go to school. This increases the pressure upon Tim's parents, who now must care for him throughout the day.

Tim's parents know that he cannot continue to refuse to attend school. They also recognise that returning to a school that does not have the knowledge and capacity to support him fully will only lead to further episodes of refusal in the future. Therefore, Tim's parents fight extremely hard for him to attend the most appropriate autism specialist school local to them, for which they are forced to go to tribunal to achieve. Figure 17 and the descriptions below indicate what provision Tim receives in different settings, and the difference this makes to outcomes for him and his family.

Provision that meets his needs and the resulting outcomes (the factual)

Tim's parents are successful in the tribunal. Tim attends a provision that offers a predictable and simple environment, with small class sizes. This serves to reduce his anxiety and prevents Tim from becoming easily overstimulated. It is a day setting in which he receives therapeutic support as part of his regular routine; he learns ways to self-regulate his emotions which affects his behaviour positively. He also no longer needs to mask his autism and experiences much less frustration.

In this setting he is also able to make friends much more easily amongst his fellow pupils, helped in part by their common understanding; and his home life sees a marked improvement, his relationship with his parents develops past purely providing care around his autism and they enjoy time spent as a family much more.

The supportive environment, and understanding of the staff, means that Tim is able to gain some qualifications. Tim is very self-aware, so the knowledge of his progress serves to increase his confidence, so much so that after leaving school he is able to secure a part-time job in a local garden centre, where he enjoys interacting with his colleagues and members of the public.

Tim spends a relatively short amount of time in this specialist provision, just five years between the ages of 14 and 19. What is notable is that through his placement in an appropriate setting Tim's trajectory is largely positive (the green line in Figure 17). His ability to learn, to self-regulate and to gain key skills enable him to live more independently as an adult. This trajectory still acknowledges that there will be points at which Tim still struggles. Importantly, Tim will be better equipped to overcome and adjust to difficulties as they arise.

Provision that does not meet his needs and the resulting outcomes (the counterfactual)

Unsuccessful at the tribunal, there is a brief period after which Tim's behaviour stabilises once the pressure and uncertainty of the tribunal end (see the red line in Figure 17). However, this does not last very long. He is in a supported mainstream placement that does not fully meet his particular needs and his anxiety becomes acute. Tim starts missing school and eventually becomes a school refuser. He officially leaves school at the age of 16.

Tim's mother is forced to give up her job and attempts to home-school him; this sees their relationship decline and adds further strain to family life. Tim regresses to spend most of his time alone in his bedroom. With so much attention on Tim, his younger brother also begins to fall behind at school and his teachers become concerned.

Upon entering adult life, he has no qualifications. Tim does receive some mental health support for his anxiety and for a period he improves. However, an attempt to find work fails. He subsequently turns to petty theft and crime in an attempt to provide for himself, and eventually becomes involved in gang activity. This leads to inevitable involvement with the police and justice system, with one year spent in prison. Tim's criminal behaviour compounds the strain on the relationship between Tim and his family, with the only positive support network he had falling away. His mental health deteriorates to the point where he spends some time in secure mental health wards.

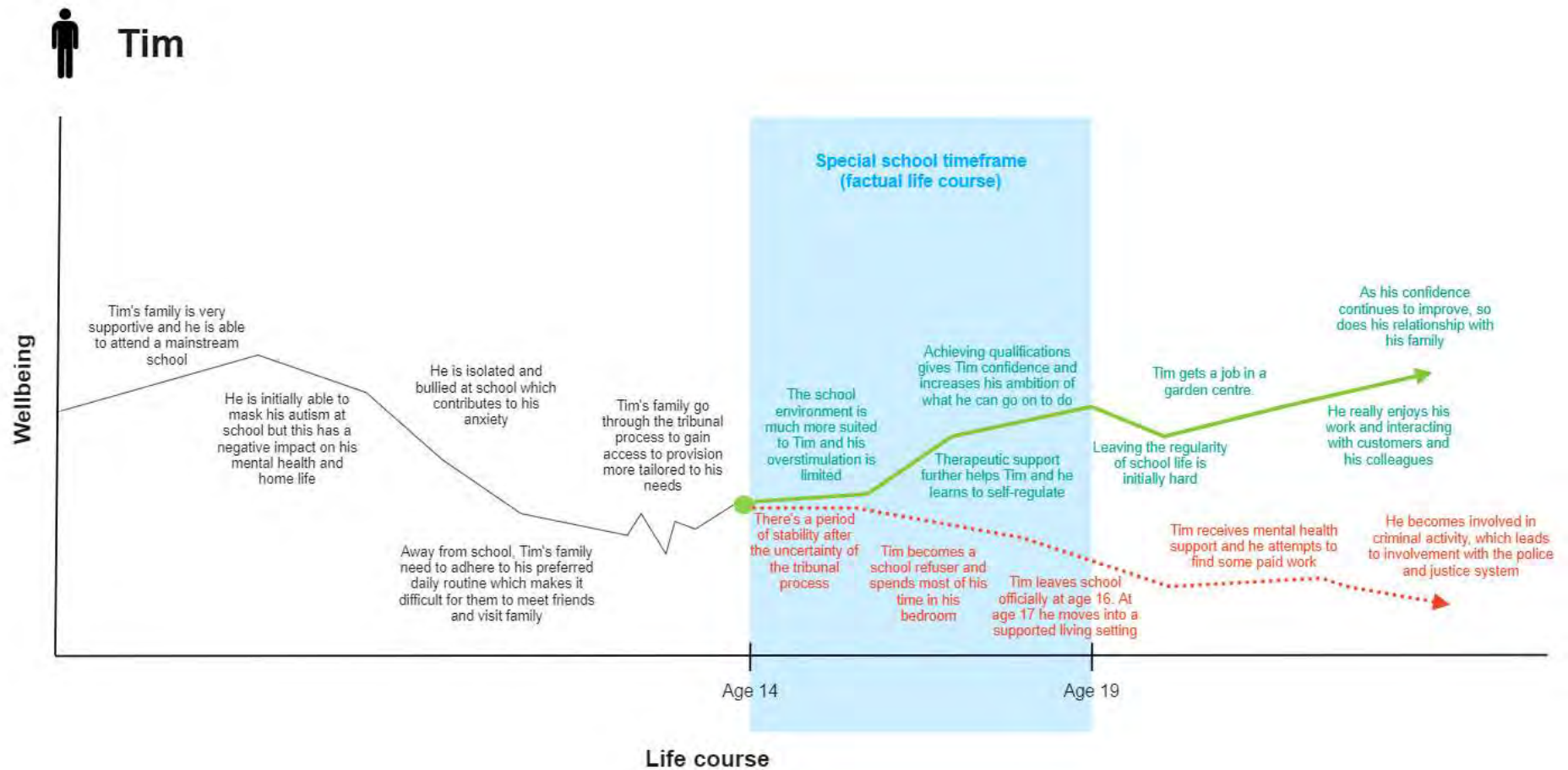


Figure 17: Tim's life-story

Ade

Needs and background

Ade has multiple difficulties and needs that make his and his parents' lives extremely hard. Primarily, he has complex autism coupled with severe learning difficulties. During his early years, Ade had significant delays to his speech, language and communication, which makes attempting to communicate with his family extremely frustrating for both parties. Ade's frustrations can often spill over into his behaviour and he has a history of self-harming as part of these episodes. Ade also has epilepsy and can be prone to fits, especially when his emotions build up and he cannot control them anymore.

Ade's biological parents split up when he was very young but his mother and step-father do their best to help and support him, within the bounds of their limited means. He starts his schooling in a mainstream setting, where the staff and teachers struggle to support him. His behavioural outbursts grow more frequent both at school and at home, where his parents continue to support him as best as they can. Eventually, the school and his parents decide to look for an education setting better able to meet his needs.

In the specialist placement Ade continues to struggle. Adapting to the new environment is challenging for him and his frustration continues to flare up with some instances of him hurting staff. For Ade, having hurt people and seeing its impact is very hard for him to process. His mental health suffers and compounds his anxiety, and he increasingly avoids going to school. Ade moves schools again at the age of 11. Figure 18 shows how outcomes could differ for Ade if he moves to an appropriate provision that is able to provide the therapeutic and educational support to allow him to be healthier and more independent into adult life.

Provision that meets his needs and the resulting outcomes (the factual)

Ade moves to a nearby special school on a day placement. To provide some respite to his family, he has some overnight stays at his new school. These are a regular feature for his first few months, with them tapering off gradually.

To begin with, Ade receives the support of two dedicated staff the whole time he is at his new school. The aim from the beginning is for this to be reduced to 1:1 support once he has settled and begun to make progress. The initial higher support ratio is a big factor in the success of Ade settling so well into this new setting. His teachers and other staff use their expertise to communicate effectively with him and learn to meet his needs; as a result his frustration and outbursts reduce.

He continues to progress and the school, he and his parents agree to reduce his support to 1:1. This is in part due to his success in learning to self-regulate. He has also learned to communicate his interests effectively, and the school can support learning in relevant vocational skills. Ade is proud of himself and the progress he has made.

Ade leaves school at age 19 and his parents help him to find supported living accommodation; living independently of his family means that he is able to continue his progress. Ade's relationship with his family is positive and he is comforted by the knowledge that they are nearby should he need them.

The skills and confidence he learned in school enable him to apply for volunteering roles with local charity shops; one takes him on for two days a week. Ade really enjoys working in the shop, especially his interactions with customers. His confidence improves and he and his family feel pride that he can be involved in the community.

Provision that does not meet his needs and the resulting outcomes (the counterfactual)

Ade is placed at a specialist residential provision, a long way from where his parents live. He misses his family and his mother worries for him. There are times when she feels guilty that Ade has had to go away from her to be cared for.

Although there is support at his school, it is not intensive enough or tailored to his needs. This makes the settling in period very tough for Ade, the support he receives is not consistent and comes from a number of different members of staff. Given Ade's autism this is especially hard for him to adjust to and there are a number of instances when he loses control of his emotions, with harm caused to those around him. The more time-limited provision of therapeutic support also means he continues to self-harm on occasion.

Ade eventually adjusts to his new school and learns some limited self-care skills. Upon leaving at the age of 18, he moves into a residential care home as he still requires a large amount of daily support. He is placed nearby to his family and he is able to see them when he can.

His behavioural outbursts continue into adult life, and his care staff decide to increase the medication he receives in order to lessen the likelihood of further outbursts. In spite of this he loses control of his emotions with increasing frequency; he has several stays in a secure mental health ward during his adult life. For Ade and his family, this is extremely stressful and puts considerable strain upon them all mentally.



Ade

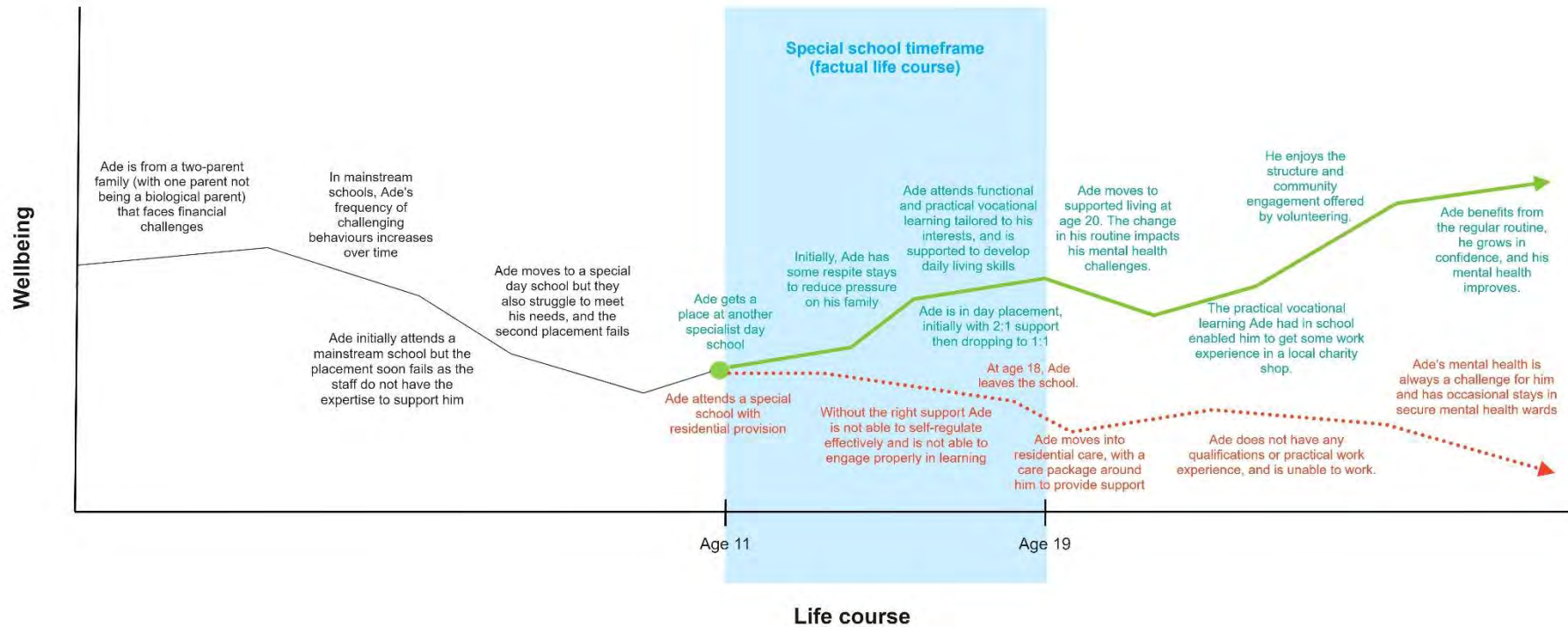


Figure 18: Ade's Life-story

Sarah

Needs and background

Sarah suffered significant abuse in her early years. She was abused physically, emotionally and, it is thought, sexually up until the age of six, when she was removed from her birth family and placed in care. Her early experiences left her with attachment disorder, trauma and developmental delays, as well as a sensory processing disorder. She can often become dysregulated, which impacts upon her ability to learn and communicate.

Sarah experiences a number of foster placements before she is adopted. This adoption placement also fails. These experiences, with multiple episodes of upheaval and uncertainty, give Sarah secondary trauma. This compounds Sarah's attachment disorder and her challenges in trusting people.

Sarah also has to move school a number of times. Some of these moves are driven by changes in her living situation, whilst others are a result of Sarah's behaviours that challenge affecting the education of her classmates. After such intense upheaval in her early life, at the age of 9 she becomes cared for by the Local Authority again and they place her into a residential setting. Figure 19 shows how her outcomes are better if she spends enough time in a suitable setting that supports her to learn and develop key skills, and to gain qualifications at her own pace.

Provision that meets her needs and the resulting outcomes (the factual)

This residential placement has expert staff who can build strong and successful relationships with their residents. For Sarah this is essential for two reasons: she is able to build trust with the staff as they give her time to adjust to her new environment, and they role model positive relationships and interactions - these are new experiences for her. A more immediate benefit of this provision is that her relational wellbeing improves immensely. She begins to understand how to form friendships and how meaningful relationships can work. Her self-awareness, and ability to regulate her own behaviour also improve as she works to build these relationships.

The school develops a bespoke curriculum tailored to her needs and, crucially, her interests. The curriculum prioritises re-engaging Sarah with learning, and this takes into account sensory, play-based and outdoor learning. The personalised nature of the programme and the structure that it provides for Sarah, means that she makes progress quickly.

Her progress is also underpinned by the sense of belonging that she garners over time with the continuity provided by the staff she sees every day, and also from having her own room and space. Staff encourage Sarah to make her bedroom truly her own; she can decorate it to her tastes, and re-decorate as she gets older as her tastes change.



Being a looked after child and having experienced a number of foster placements, having the certainty of living in the same place for a longer period of times helps her develop a sense of belonging. Sarah is able to build a healthy sense of identity, which prepares her for a more stable life upon leaving school.

She leaves school with A-levels, self-confidence, and key life skills. She moves into a supported living setting. She looks for a part-job in retail. Her self-awareness means that she looks for work that she thinks is achievable for her. She is successful in finding a role in a local clothing store, working two days a week. Working part-time means that Sarah has balance and routine in her life; she also has some disposable income to supplement the financial support she gets in the form of Universal Credit. She makes friends at work and is able to socialise with them, and is part of the community. After a year of working two days a week, Sarah's manager offers her an increase to four days a week. Sarah now feels ready to and is excited by the extra responsibility and prospect of increasing her independence. She is also proud to have external confirmation of her hard work and progress.

Provision that does not meet her needs and the resulting outcomes (the counterfactual)

Sarah is placed in a residential school with a rigid structure that is not as adaptable to the needs of pupils; for a long period of time she struggles to adjust to her new school and home. Although the staff are friendly and supportive, there is little consistency in the teachers and other staff who support her; she builds few positive relationships with adults. At times it can feel like when she was in care, and as though there are a lot of people surrounding her but not providing the support she needs.

As Sarah gets older, she would like to have a say in her support and the curriculum she follows, but this is not possible for the school to accommodate. This becomes more and more frustrating for her and she becomes unstable, and prone to outbursts; there are instances when she attempts to self-harm leading to stays in hospital. She needs continued support from CAMHS.

She leaves school at the age of 16, and moves into a local authority residential home. Sarah is unable to care for herself fully and longs to feel part of a community. This desire means she is vulnerable to negative influences, and becomes involved in a local gang. This group are able to convince Sarah to begin shoplifting; she enjoys both the rush from the shoplifting and the fact that she is part of a group. She feels as though she has friends for the first time. Sarah and her new friends begin to steal handbags from shoppers too; this draws the attention of the police. It does not take long for the police to arrest Sarah after a failed attempt to steal a handbag. She receives a criminal record but does not have to go to prison as the judge takes her age and past in care into account.

Her arrest serves as a wake-up call for Sarah and she decides that she should try to get herself a job as a way of building some structure into her life. However, her criminal record does not make this easy for her. Sarah is rejected from a number of the roles that she applies for, feeling discouraged she gives up her job search. Sarah begins to struggle without structure and she also struggles to find a sense of purpose to her everyday life, with her mental health being poor into adult life. She continues to engage in petty crime and associates herself with people who do not look out for her best interests.



Sarah

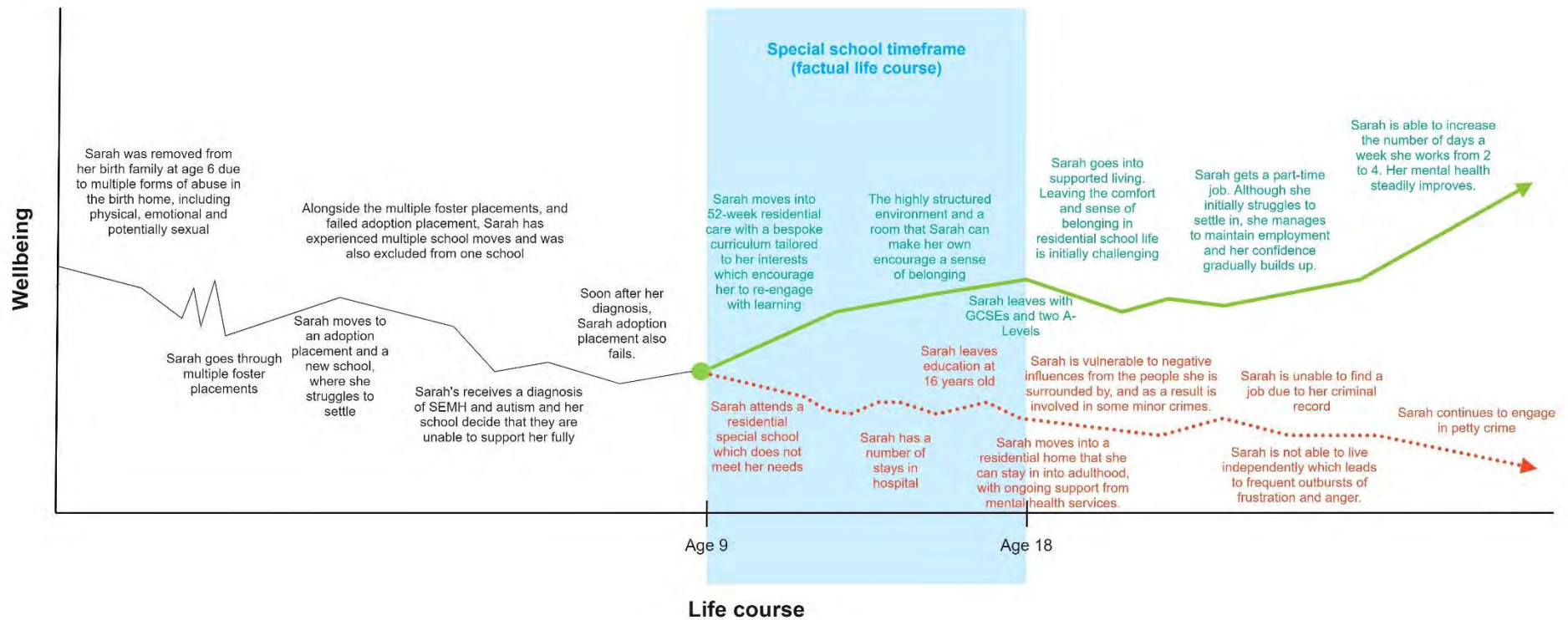


Figure 19: Sarah's life-story

Olivia

Background and needs

Olivia has cerebral palsy. She has profound and multiple learning difficulties, and she has difficulties with speech and communication. She has physical as well as learning needs, and she uses a powered wheelchair.

Figure 20 captures Olivia's story and summarises the discussion immediately below. The green line in the diagram represents her journey in provision that meets her needs and outcomes in that setting. Having the right support means that Olivia learns to communicate her needs and becomes independently mobile, which are critical for her being able to move after leaving school to supported living or residential settings with a less intensive support package. The alternative red line represents what would have happened to Olivia if her needs were not fully met, and the outcomes to her and those around her as a result of her not being able to reach her potential.

Provision that meets her needs and the resulting outcomes (the factual)

Given Olivia's care and special educational needs her family and the local authority agreed that she should join a special school from an early age on a day basis. She joined the school at 3 years old.

Olivia needs at least 1:1 support by a member of staff at all times. In this setting she is able to learn how to use communication aids to convey her wants and needs. Her ability to communicate and the matched peer groups in classes means she is able to build supportive and healthy relationships with peers, and her family can get to know her better. She can tell her family what she likes to do in her free time, and what her favourite colour is.

At her school, her curriculum is built around her individual strengths and potential. This strength-based approach is measured by the staff on the basis of 'Olivia was unable to... So we help her by... Now Olivia can...' Using this basis also means that the objectives and tasks that she is set are constantly reviewed and evolve based upon her progress, and also take account of her wishes and preferences. With the support of the school and expert teachers she is able to make progress in Maths and English.

Olivia receives regular physiotherapy from the on-site physiotherapist to improve her strength through games and play. Despite finding them challenging Olivia really enjoys the sessions. The progress that Olivia makes is helped by the fact that the school offers this provision, alongside other NHS-led health support, onsite. This means that access to such services is simplified. Olivia is not required to travel to appointments, often far away from where she lives, and the appointments are able to take place in an environment that is comfortable and reassuring for her. The physiotherapy is another part of her routine as opposed to a potentially stress-inducing event.

The progress that Olivia makes in her ability to communicate and learn, as well as in her strength and mobility, means that she gains some independence and she begins to be able to take command of her own powered

wheelchair. Initially, this is for short periods and then over time grows to be something that Olivia can do herself without becoming too tired. This feat is something that Olivia's family had thought was never going to be possible for her and they are supremely proud of her progress.

In her teens as it becomes more difficult to care for her at home and it begins to cause strain on her family, she moves into the school on a residential basis but comes home some weekends and during holidays. Due to the separate setting her school has set up for learners aged 18-25 years, she is able to move there and have some continuity in provision until she is 25 years old, and she continues to progress.

During her time in these provisions she has felt part of a community. As she approaches 25 years of age, Olivia, her family, the staff in her provision, and the local authority work collaboratively to find the best suitable destination for her next steps. Due to Olivia having her learning and physical needs met, it is possible for her to continue her progress and to live more independently either in a supported living setting or an adult residential care setting. Supported living provides more independence, and it is decided that they should give Olivia the greatest chance to succeed there first. If this proves too much for her, and she needs more intensive support then the option for residential care will remain there for her.

Olivia's green life-course sees her spend over two decades with personalised and specialist support and therapy around her every day. As such, the potential for improvements to the lives of Olivia and her family is vast. It also allows for steady and measured progress, under the guidance of a number of specialists, to take place and ultimately puts Olivia in a position to live as independently as is possible upon leaving education.

Provision that does not meet her needs and the resulting outcomes (the counterfactual)

Olivia attends a special school that meets needs of learners with a broader range of profound and multiple learning difficulties. In this setting Olivia does not get the 1:1 attention she requires to make progress and also to meet her basic needs – like assistance in going to the toilet. It is a mixed abilities class with seven other children, some of whom are independently mobile. As her teacher is often fully occupied in managing the needs of other pupils, Olivia is vulnerable to behaviours that challenge by other classmates – for instance, she is often pinched or scratched by others. Being in school is therefore anxiety-inducing for Olivia, and she often makes herself sick to avoid going there. Sometimes she makes herself ill to the extent that she needs hospital treatment. Later in her school life it means she becomes a school refuser.

Being in a less specialised setting, she relies more heavily on NHS services for her healthcare needs and needs to spend more time out of school and travelling to these services for her appointments.

Furthermore, her ability to learn to communicate is limited in this setting because the teachers and other staff have only basic training in the use of augmentative and alternative communication (AAC) devices and how to model their use. She also does not receive the support she needs to develop the skills to move a wheelchair, and, as such, cannot become independently mobile. As she is less independently mobile, her parents strain themselves to help her move around the home and outside of the home which sometimes requires A&E visits.

Olivia's mother gave up her work and became a full-time carer to Olivia when the family received confirmation of her cerebral palsy. For Olivia's early years, her mother takes on the majority of her care, with assistance where possible from her father. However, as they grow older, Olivia's older siblings also begin to help their mother to care for Olivia. Whilst she is grateful for the help, and proud of the love and care that they show their sister, Olivia's mother worries about the effect this will have on them in the longer-term. For example, Olivia's brother begins to fall behind at school and is often in trouble with his teachers for not completing his homework.

It also becomes clear to her parents that Olivia will never be able to live anywhere but at home, where everything and everyone is adapted to support her, or in long term residential care. They feel an immense sense of guilt at their perceived failure to give Olivia a life in which she can achieve a level of independence for herself. This has long-term effects on her parents as well as on the security of Olivia's future.



Olivia

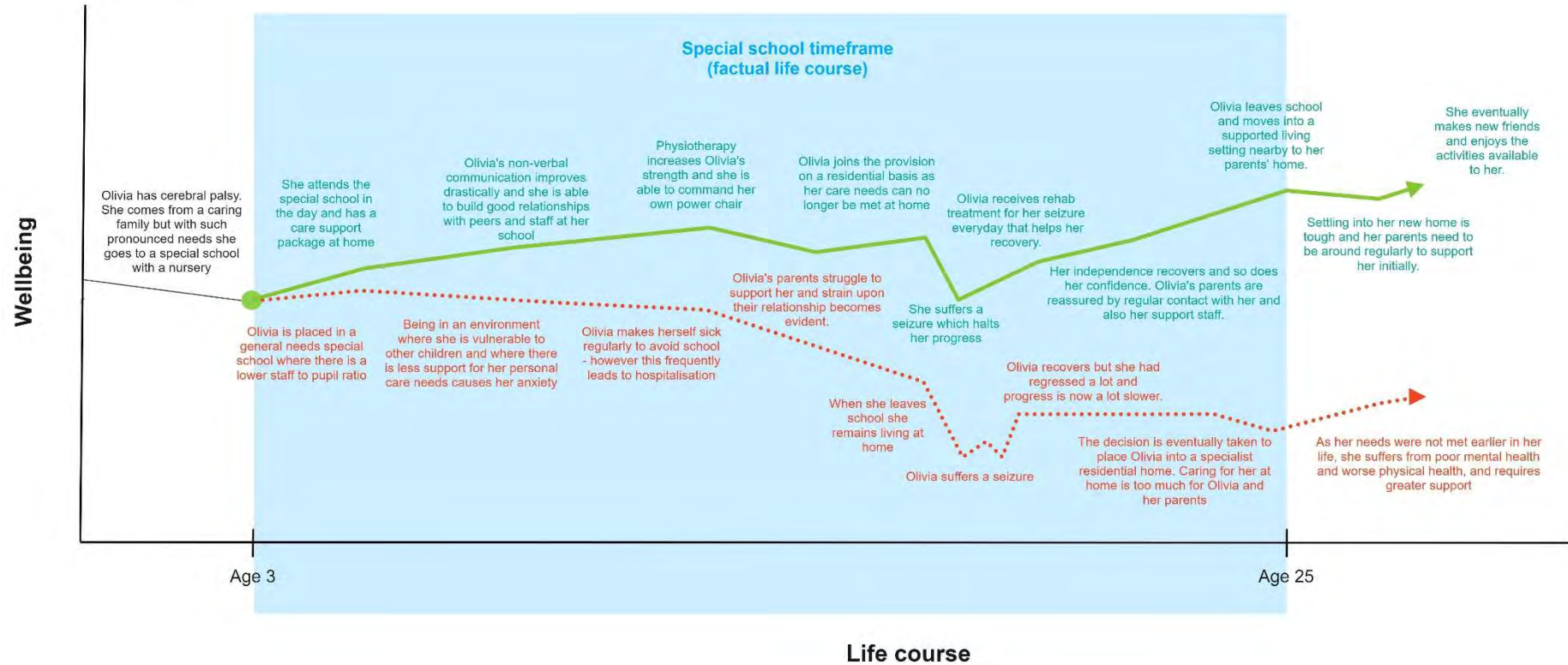


Figure 20: Olivia's life-story

Charlie

Needs and background

Charlie has a sensory impairment, which has caused developmental delay for her speech, language and communication. She also has mild learning difficulties. She lives with her parents, who take a keen interest in her school life and want to do everything they can to support her.

Due to her learning difficulties, Charlie is disapplied from aspects of the national curriculum in her school. This means that she misses out on foundational elements of her learning and she falls behind in her educational progress. As Charlie continues to fall further behind, her family becomes increasingly concerned about her lack of progress in learning and in her development, and the lack of support that she receives at school. It is clear to Charlie's parents that the school is unable to meet her special educational needs.

The knowledge that Charlie's needs are not being met weighs heavily upon her parents and they go through a period of time of feeling extremely helpless. They can see how Charlie seems to be stuck between what the school can do for her and what she actually needs. Although she is young, Charlie struggles emotionally – the awareness that she is different to her peers and the challenges of making friends often leave her feeling alone.

Her parents instigate a legal challenge after the EHC process does not identify their preferred setting as the right next step for her. The tribunal process is lengthy and forces Charlie to initially move into a similarly inappropriate mainstream secondary school. The delay and upheaval have a negative effect on her; she becomes more socially isolated and withdrawn in the new school setting which she finds intimidating. The uncertainty of the tribunal process means she does not immediately seek to make friends.

During this period, Charlie's parents are extremely stressed and find the tribunal process intrusive upon their family life. The legal challenge means that they have to spend a lot of time and energy upon learning the process and making sure that every element of the challenge is covered to ensure that Charlie does gain an appropriate placement.

The contrasting life-courses for Charlie, shown in Figure 21 demonstrate the impact that appropriate provision can have on transitions into adult life. With the right support she is able to learn, gain qualifications and develop skills that allow her to be independent when she leaves school, and also to go into employment. Charlie's story also demonstrates the implications of delays in young learners having access to the right placement at the right time.

Provision that meets her needs and the resulting outcomes (the factual)

There are few specialist settings for learners with specific sensory impairments, so Charlie must move away from home into this residential setting. In this setting all of Charlie's teachers are qualified Teachers of the Deaf or qualified Teachers of Children with Visual Impairment. This means that they have the right expertise and

experience to support young people like Charlie effectively. This is especially important when Charlie first joins the school as her needs are elevated due to the uncertainty and upheaval of the tribunal process which disrupted her educational progress and elevated her anxiety.

Her teachers are quickly able to gain an understanding of Charlie's strengths, weaknesses and learning style. She benefits from being in a small class, in an environment that supports her concentration, and a tailored programme of learning that will help her catch up with others her age. Charlie's interaction with her peers increases as she becomes more settled and begins to recognise others around her who have similar challenges. She no longer feels like an outsider or that she is different to her classmates. As a result, she gradually becomes more confident and begins to enjoy building relationships with her peers.

In addition to making progress with her education, Charlie also benefits from the regular on-site speech and language therapy and she develops noticeable confidence with her communication. This confidence carries over into her relationships; both the existing ones with her family and the new friendships that she is forming with the staff at her school and her fellow pupils. The progress that she is making, and that of her peers around her, inspires her and she develops the ambition to work when she leaves school.

The school also supports Charlie to develop her life-skills, with the intention that she be as independent as possible upon leaving school. One area in which she makes significant progress is her ability to cook, which requires specialist equipment. The school also supports Charlie's parents to acquire the same specialist equipment so that she can cook at home, and continue to do so once she leaves school.

Having been able to communicate this ambition to her family and teachers, the school are able to find her some work experience with a local animal charity. Charlie has always expressed an interest in animals and enjoys the interactions with the animals. Her excitement and enjoyment of this work experience inspires her parents to think about the possibility of Charlie carrying on working with animals when she leaves school.

Eventually, upon leaving school with a number of qualifications, Charlie is accepted onto an RSPCA apprenticeship scheme. Her parents are extremely proud of her and the demonstrable progress that she has made during her time at the residential school.

Although working life is not without its challenges, e.g. the formal assessments that are part of her apprenticeship, Charlie perseveres with the support of her family. She has grown closer to her family now that she can communicate confidently with them and without confusion on either side.

Provision that does not meet her needs and the resulting outcomes (the counterfactual)

Charlie attends a day provision at a general special school. Charlie continues to struggle at school, especially with her communication, she needs an increasing amount of support which the school is not able to provide.

This leads to Charlie's mother giving up her work to provide this support. Her mother, however, does not have the skills or expertise to provide the necessary support for Charlie to make significant progress. Charlie's communication difficulties become more frustrating for her as she grows older and she is unable to exercise agency over what she does and when. Her frustration has a negative impact on her relationship with her family, especially with her mother, who is around Charlie the most.

Being in a day setting allows her to live with her family but it causes them strain. Supporting Charlie is intense and her parents quickly realise that they need regular respite stays in order to rest and rebalance. During his childhood, Charlie's little brother does his best to help his mother to look after her. This begins to impact upon his own performance at school and her parents worry what this could mean for him, especially as he will be sitting exams soon. As a result, they try to stop him helping Charlie so much, which he struggles to understand and feels extremely guilty seeing both his sister and mother struggle. Eventually, his school refers Charlie's brother to CAMHS for some mental health support in an attempt to help him get back on track with his education.

Educationally, although she continues to attend school, Charlie makes very little progress and she leaves without any qualifications and is less well prepared for adult life. Upon leaving school, she is unable to work, and remains at home all of the time with consequent impacts on her parents which leads to family breakdown.





Charlie

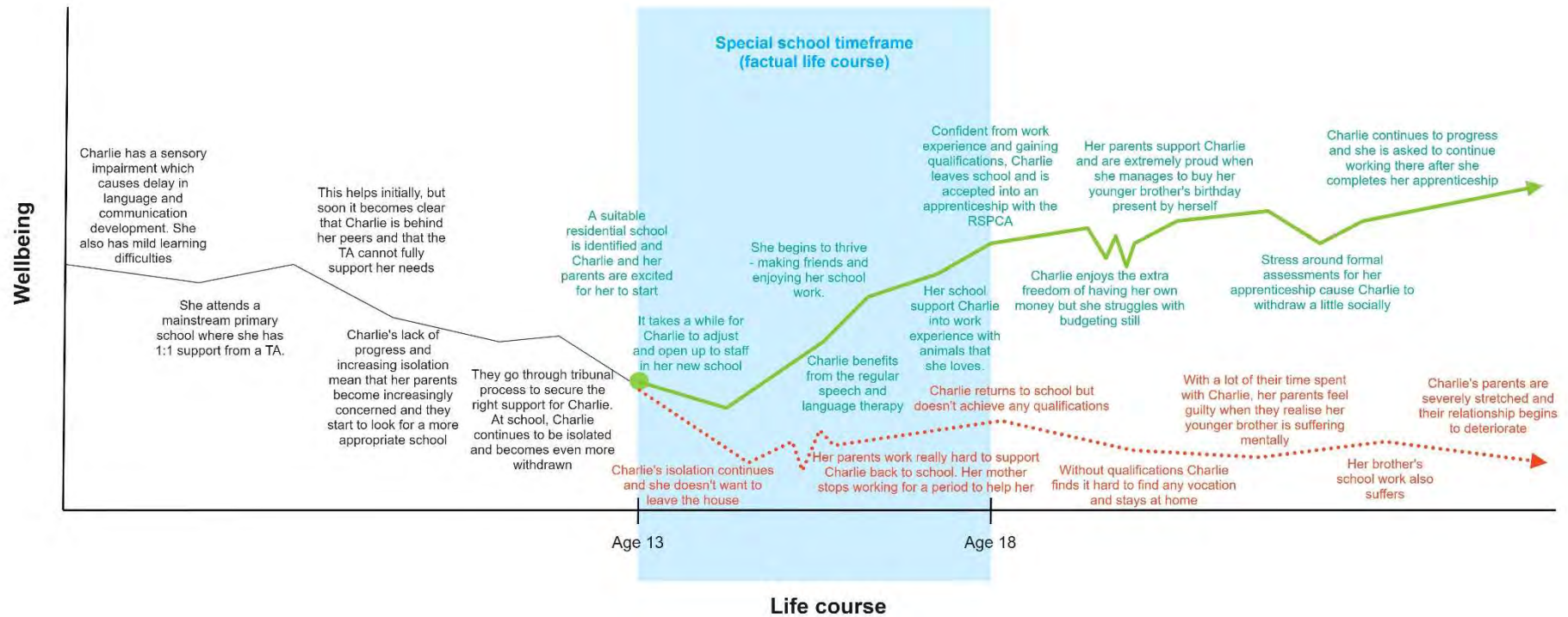


Figure 21: Charlie's life-story

Archetypes not selected for evaluation

Abichal

Needs and background

In his early years Abichal was abused by his birth parents, both physically and psychologically. This led to him being taken into care at the age of three; he was adopted not long after that. The trauma he experienced has caused his social, emotional and mental health needs. It is also suspected that he has further health, social and learning needs associated with foetal alcohol syndrome.

Abichal starts his education in a mainstream primary school but it quickly becomes apparent it cannot properly meet his needs. His behaviour is persistently disruptive and affects both his classmates and his teachers, and on more than one occasion Abichal lashes out physically. The school excludes him, in part to protect his classmates and teachers from any further outbursts.

After being excluded, Abichal's adoptive parents struggled to find a more appropriate school for him, given his complex needs. They therefore resolve to home-school him which means his mother stops working.

Home schooling is a challenging experience for Abichal and his mother. They persist with it for almost two years but there is little sign of improvement for Abichal in his learning and crucially, his behaviour. Abichal's frustrations mean that physical outbursts remain a regular occurrence. This child-on-parent violence requires his mother to attend A&E a number of times, for example when Abichal throws a plate at her, cutting her head.

Eventually these outbursts prove too much for his adoptive parents with the potential for breakdown in the adoption placement. In recognition of this, the local authority begins an intensive search for a placement at a specialist provision.

Provision that meets his needs and the resulting outcomes (the factual)

Abichal is placed in a school that specialises in a therapeutic approach. It is only once he reaches this provision that the true extent of his trauma is discovered. The school takes a holistic approach in supporting Abichal, combining talking therapies and therapeutic equine therapy with support sessions for Abichal's family.

The way that the staff positively interact with their students has a profound effect on Abichal; he begins to pick up and follow their example with his classmates. As a result, his behaviours that challenge become less frequent, with improvements at home too. This greatly improves his relationship with his parents and their life at home.

Abichal develops the ability to self-regulate and this serves to stabilise his adoptive placement. He benefits significantly from the security that comes from this. This stability also benefits the wider family: Abichal's parents

are less anxious and more comfortable in their home life. Furthermore, Abichal's siblings can enjoy an improved relationship with him and are afforded more of their parents' time and attention. Economically, the family unit also benefit as Abichal's mother is able to return to work.

Provision that does not meet his needs and the resulting outcomes (the counterfactual)

Abichal is placed in an alternative provision because the local authority is not able to identify a placement appropriate to his specific needs. It provides sufficient support for him to improve his ability to communicate. However, it does not offer the therapy required to support him to self-regulate and ultimately engage in learning. As such, his behaviour and his physical outbursts are never fully addressed.

As he grows older and physically larger, Abichal's outbursts become more challenging for staff at school and for his family. At home, this behaviour and the stress of trying to support Abichal takes its toll on his parents and his siblings. His parents feel extremely guilty at the amount of time that they have to dedicate to Abichal, and the time that this takes away from his siblings. This starts to put strain on Abichal's parents' relationship.

At one point Abichal's behaviour worsens to such an extent that his mother is forced to give up work again to try to care for him. The loss of household income places financial strain upon his parents, compounding the emotional strain of supporting Abichal. Eventually, this strain becomes so great that his parents' relationship completely breaks down and they separate.

Frank

Needs and background

Frank has a degenerative nervous system disorder, and has difficulties in communication and sensory processing. He is unable to eat with his mouth, receiving all his nutrients and hydration via gastronomy. His health conditions mean that he has been subjected to numerous surgeries during his early life.

Frank attends a specialist school's day provision for children with PMLD. At the school Frank is cared for, but this is not in any way that is stimulating or engaging for him. His family pick up on his frustration when he is at home. As he grows older, it also becomes harder for Frank's family to meet his health and care needs at home.

The greatest point of frustration for Frank is that he is unable to direct his own care. He feels like much of the treatment and support that he receives is primarily to manage his outbursts. Frank's family know that his support and development needs are not being met in his current situation and discuss the potential with the local authority for him to be placed into a different school and a residential placement.

Provision that meets his needs and the resulting outcomes (the factual)

Frank is placed into a 52-week residential setting where he receives substantially greater support, both for his lessons and personal care. In his lessons, Frank receives at least 1:1 support (depending upon the activity)

immediately improving Frank's mental state as this makes him feel heard and important, as opposed to being sat quietly in the corner of the room in his old school. He also receives 2:1 support for his personal care, with staff putting in place a transdisciplinary approach combining occupational therapy, physiotherapy and speech and language therapy, to aid his development every day.

This approach, and the availability of this kind of support on-site, means that Frank can maximise his time in lessons, which he loves as it means he can spend more time with the friends that he has made at the school. It also means that Frank works on things such as his communication all of the time, often without realising it, and he learns to develop different methods of communication with the staff at the school.

The greatest immediate benefit of this is that Frank is able to navigate his care in directions that he wants to make progress in and, as a result, his frustration decreases and his mental health improves. His improved communication skills also mean that Frank is able to make friends and to feel part of a community for the first time. He has a sense of belonging.

For Frank's family, when they speak to him on their regular video calls and when they visit him, they can see that he is a lot happier and calmer. This comforts them, knowing that they made the right decision for their son and reduces any initial guilt they felt at 'sending him away'. This knowledge also enables Frank's mother to return to work and focus fully whilst she is there. When she initially returned to work, she had struggled to focus out of worry about Frank but having seen that he is progressing well she is able to throw herself into her work and progress herself.

Provision that does not meet his needs and the resulting outcomes (the counterfactual)

The tribunal upholds the local authority's decision not to place him in a specialist residential setting. The local authority does, however, agree that Frank cannot continue to live at home with his family, as they cannot properly support his needs, and instead assign him into the care of specialist hospital unit. The specialist clinic is a long way from where his family live and they are understandably worried about him.

Contact with Frank is hard to maintain as he needs staff with him to set up video calls, and they are often too busy with other patients. Travel to visit Frank is expensive and time consuming too, and his mother feels immense guilt at seeing him so infrequently. Frank begins to feel isolated and alone without the regular contact of his family. His frustrations begin to return and his outbursts are for prolonged periods. The staff are instructed to temporarily increase his medication to sedate him and make him physically more manageable.

This type of treatment is confusing for Frank and only serves to make him more frustrated. It also means that he feels less and less in control of his own treatment and life.

Fred

Needs and background

Fred was born with profound speech, language and communication needs and suffers heavily with anxiety. He has largely been able to mask the true extent of his needs in his mainstream primary school but this was to the detriment of his academic progress. Signs that he may have additional needs were outbursts and frustrations that became a more frequent occurrence in his school day.

At the age of 11, Fred moves to a mainstream secondary school. The environment is a lot more intense, unpredictable, and demanding for him, which means that he is less able to mask his difficulties. He increasingly struggles to regulate his behaviour and his anxiety increases. He becomes more disruptive to his teachers and fellow students and this prompts Fred's teachers to recommend he undergoes assessment for an EHC plan.

The conversation with his teachers is a big step for Fred's parents, who also notice the increased strain that his new school seems to be placing on Fred, and consequentially them and their home-life. Fred has a stable family life, but they face financial challenges. Both of Fred's parents work in low-income jobs on a zero-hours contract basis. In some respects this flexible work helps them to support Fred at home.

Following the EHC assessment, the local authority believes Fred's needs can be met in his current mainstream setting with additional support. However, his parents believe more tailored provision will make a bigger difference to his progress and their home life. They appeal to a tribunal. For Fred and his parents this is a daunting prospect and they know that it will be a tough process for them to go through. Their financial situation makes it hard for them to access legal support and they take on much of the work themselves, placing further strain on their home-life.

Provision that meets his needs and the resulting outcomes (the factual)

Fred begins to attend a day placement school with permanent speech and language therapy staff with extensive experience of supporting children similar to Fred. In addition to the specific therapy that he receives, Fred also benefits from the school's integrated approach that sees therapeutic techniques built into every aspect of his school day.

Being less anxious in this setting enables Fred to make significant progress with his education and he is able to develop new skills. Communication becomes far easier and less stressful for Fred at home and in school. He is able to socialise and make friends with his peers. Being around others with similar needs makes it far easier for him to relate to his classmates and to feel more normal. Fred becomes much more empathetic as a result and his parents notice this at home as well in their interactions with him.

As Fred gets older, he grows in independence which is good for his sense of identity and reduces pressure on his parents. This enables his parents to focus their energy in other areas, such as their work. Fred's father had previously been offered a promotion to a permanent, salaried position but had turned it down due to the level of

support Fred had needed. The offer is made to him again and this time he is able to accept, making the family more financially secure in the process.

Provision that does not meet his needs and the resulting outcomes (the counterfactual)

Fred remains at his mainstream secondary school with additional SEN support. In spite of the additional support, he continues to struggle. He spends an increasing amount of his time at school in isolation due to the disruption his outbursts can cause.

Fred's parents notice the effect that being isolated has upon him, he also becomes more withdrawn at home and it is a regular occurrence for him to refuse to come out of his bedroom. His parents decide to try to home school Fred, which means that his mother has to leave her job. Although Fred's behaviour and anxiety stabilise without the need to go to school, home schooling puts a lot of pressure on his mother. She now has to try to support his learning and education in addition to caring for him. At times this can be too much for her, and her husband encourages her to seek help for her own anxiety from their GP.

5. Who benefits and how when learners' needs are met?

This section outlines who benefits in society and how if our archetypes' special educational needs are met. It shares results from the quantitative analysis of five archetypes' life stories explored in Section 4: Tim, Ade, Sarah, Olivia, and Charlie.

Overview of quantitative analysis

Based on the findings from our research, this analysis is underpinned by the assumption that provision that meets needs is more likely to lead to better outcomes later in life for learners with SEND.

The identity in Figure 22 is a summary of how this quantitative analysis is developed.



Figure 22: Summary of the quantitative analysis

In this analysis we analyse the costs and benefits in two different life courses for each archetype: one in which their needs are met (the factual) and one in which their needs are not fully met (the counterfactual) as described in Section 4. These different life courses are represented in diagrammatic respectively by the green line (the factual) and red line (the counter-factual) in Figure 23.



Figure 23: Illustration of life courses modelled for a given archetype

The price paid⁴⁴ for the archetypes' provision, per their EHC plans (A in Figure 22), and the value of outcomes in their lives (B in Figure 22) are the building blocks of this analysis. The modelling extends to estimating the value created of these journeys to different stakeholders – for example, the costs of special educational provision of learners to the local authority, and costs of treating mental and physical health needs to the NHS and CAMHS. The events and outcomes built into this modelling are summarised in Table 6.

Table 6: Description of outcomes used in life journey modelling

Cost theme & stakeholder(s)	Description
1. Educational outcomes Local Authority & DfE	<p>If learners' needs are not fully met, they are less likely to gain qualifications and develop skills. The implications of these are captured in the economic and social care outcomes categories – for example having skills and qualifications enables the ability to work or volunteer, and the potential to live independently.</p> <p>Where pupils' needs are not fully met they may become school refusers when they do not go to school. The costs of becoming a school refuser are built into this analysis as educational outcomes.</p>
2. Economic outcomes Economy	<p>Captures the additional productivity generated in the economy by pupils and their parents or carers being able to volunteer or work longer and in better paid roles as a result of better engaging in learning and being equipped with key skills for work. It also encompasses the costs of learners not being in education, employment, or training (NEET) immediately after leaving school.</p>
3. Physical health NHS	<p>Accounts for the costs to the NHS for treatment of physical conditions for the archetypal learners, families, teachers and other learners. For the archetypes this may encompass being in a school site which is located far away from specialist services leading to poorer health outcomes in the counterfactual. For families and teachers, physical health needs may include the treatment for injuries as a result of child-on-adult violence.</p>
4. Mental health NHS & local authorities	<p>Captures the costs to the NHS and local authorities of treatment for mental health conditions experienced by learners and those around them, e.g. their families, and other pupils.⁴⁵</p>
5. Social care Local authorities	<p>Covers the costs of living support into adult life (e.g. supported living and residential care), the cost of equipment installed in homes if they are not in a residential setting, and mobility services.</p>

⁴⁴ We use the terms cost and price of provision interchangeably in this report. We recognise that in reality cost of provision and price of provision may differ depending on the level of profit made by providers. Exploring this is beyond the scope of this project.

⁴⁵ If some learners with SEND do not have their needs met, they may display behaviours that challenge which might be disturbing to other pupils.

Cost theme & stakeholder(s)	Description
6. Criminal justice	Represents the costs where pupils may be involved in criminality, either as a perpetrator or victim. This encompasses the costs of arrests, detention, and prison.
Police and courts	

As not all learners achieve the best possible outcomes, due to factors like access to services later in life or other life events, we model three factual scenarios: low, medium and high (see Figure 24). To arrive at the final numbers in our analysis and to give us one value of outcomes in the factual, outcomes for each archetype are adjusted for weights determining likelihood of each archetype achieving their low, medium or high outcomes (for further detail on these weights and outcomes under each scenario see Appendix 4).

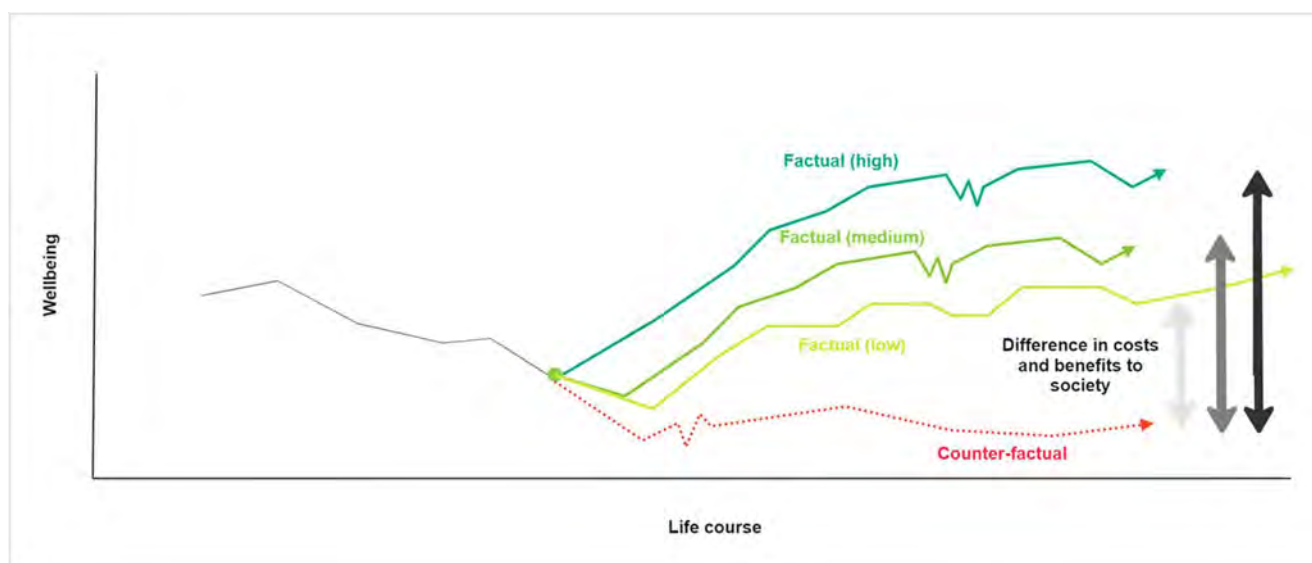


Figure 24: Illustrative example of three factual scenarios for a given archetype

Per best practice, we also make further adjustments to these outcome values for deadweight loss – that the young people would have experienced these outcomes anyway - and alternative attribution – that other bodies in society, including the pupils themselves, are responsible for outcomes for learners with special needs.

The resulting numbers from our analysis (taking the difference between the additional value of outcomes as a result of meeting learners' needs and the incremental cost of provision that meets their needs, per Figure 22) demonstrate the net value to society from investing in special educational provision for learners with SEND.

Overview of findings from this analysis

This analysis shows that there is net value to the public purse and society from investing in learners' special educational provision. Overall, the net value generated to society from meeting their needs is on average at least £380k per archetypal learners over their lifetimes. This is the estimated value of these benefits in net present value terms – i.e. if all benefits were experienced today – and are expressed in 2022 values.

This figure is the difference between the:

- Value of improved outcomes from meeting their needs (on average +£524k across the archetypes – see Figure 25); and
- Incremental price paid for provision that meets needs (-£143,000 when averaged across all archetypes – see Figure 26).

The net benefits are primarily driven by the positive impact specialist provision is likely to have on the 'productivity' of their former pupils and families in the workplace (see Figure 25). Other sizeable net benefits include the reduction in need for more intense care support for learners into adult life, and improved mental and physical health of learners, reducing use of health services funded by the NHS and local authorities.

The difference in the price paid for provision (per EHC plans) in the factual and counterfactual scenarios is shown in Figure 26. It shows that the price paid for provision is higher in the factual scenarios than the counterfactual scenarios for four out of the five the archetypes (excepting Ade) if their needs are met. Figures presented from this analysis have been rounded to the nearest £1,000.

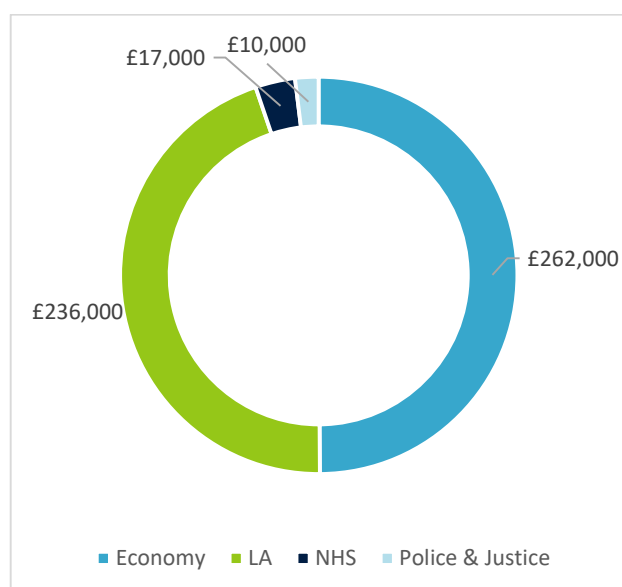


Figure 25: Net average value across all archetypes of improved lifetime outcomes if needs are met, presented by stakeholder

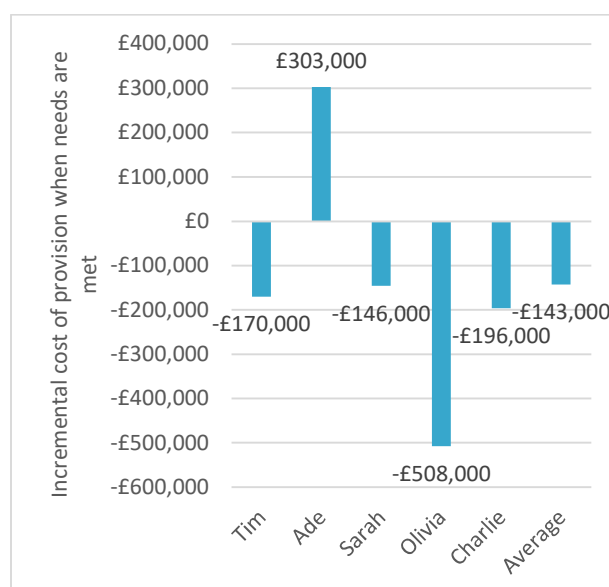


Figure 26: Net difference in price paid for EHC plans that meet needs

Detailed findings by archetype

To undertake this quantitative analysis, we first estimated the price paid for provision per their EHC plans for each archetype in the factual and counterfactual scenarios (see sub-section A below). We then estimated the costs and benefits of different lifetime outcomes for each archetype in the factual and counterfactual scenarios (see sub-section B below).

A. Incremental price paid for provision that meets needs

The first step of this analysis is to explore the price paid for special educational provision in the factual and counterfactual for each of our learners. To do this analysis we need to know the educational setting for the learners in the factual and counterfactual scenarios, and the length of time each learner stays in school for. Table 7 sets out what these are for each learner based on the stories outlined in Section 4. The annual cost of each of these settings can be found in Appendix 4.

Table 7: Settings for educational provision and key storylines

Archetype	Factual (needs met)		Counterfactual (needs only partly met)		Key storylines
	Setting	Ages	Setting	Ages	
Tim	Day special school	14 – 19	Supported mainstream	14 - 16	Tribunal
Ade	Day special school	11 – 19	Residential special school (term time boarding)	11 - 18	Number of failed previous placements
Sarah	Residential special school	9 – 18	Residential special school (52 weeks)	9 – 16	Failed adoption placement
Olivia	Day special school till age 13 Residential special school thereafter	3 – 25	Day special school	3 – 18	Pronounced needs
Charlie	Residential special school	13 - 18	Day special school	13 - 18	Tribunal

Table 8 shows the net cost of provision for each learner if they are in a setting that meets their needs. It shows that, across all learners, on average it is more expensive to meet their needs. For four out of five of the archetypes the net cost of provision that meets their needs is negative – i.e. their EHC plans are more expensive to commissioners. For instance, Tim's provision is more expensive in the factual scenario as he is in school for 3 years longer, and he benefits from more dedicated staff support time in this scenario. The only archetype for whom the net cost of provision is cheaper in the factual scenario is Ade. This is because Ade is in day provision in the factual, whereas in the counterfactual he is in a residential special school.

Table 8: Difference in costs of special educational provision in the factual and counterfactual

Archetype	Cost of provision		
	Factual	Counterfactual	Net difference
Tim	-£250,000	-£80,000	-£170,000
Ade	-£679,000	-£982,000	£303,000
Sarah	-£745,000	-£599,000	-£146,000
Olivia	-£1,512,000	-£1,004,000	-£508,000
Charlie	-£466,000	-£270,000	-£196,000
Average	-£730,000	-£587,000	-£143,000

B. Change in value of outcomes when needs are met

Our next step was to estimate the value of socio-economic outcomes when their needs are and are not met, as captured in the archetypes' life stories in Section 4. Outcomes valued in the model are a blend of costs avoided by events not happening in each life course, costs reduced, or economic value created through greater productivity in the opposing life course, and are summarised in Table 6 above.

Table 9 provides a brief summary of the outcomes in the life stories for each archetype. For example, in Tim's factual life course where his needs are met, he is able to leave school with qualifications and is able to get a job. In his counterfactual life course, however, where his needs are not fully met, he is not able to apply himself to learning at school, cannot not see a positive future for himself and ultimately becomes involved in criminal activity later in life. This analysis compares the costs to the public purse and economy (among other stakeholders) of these different life courses.

As a further example, Table 9 also shows that if Sarah is in provision that meets her needs she is:

- Less likely to refuse to go to school (improves education outcomes)
- More likely to work after leaving school (improves economic outcomes)
- More likely to have better mental health (improves mental health outcomes)
- Less likely to be dependent on social care into adult life (improves social care outcomes)
- Less likely to be involved in criminal activity as a teenager and into adult life (improves criminal justice system outcomes)

Table 9: Outcomes in each archetype's storyline to learner and those around them (key below the table)

		Archetype				
Cost theme	Brief description	1. Tim	2. Ade	3. Sarah	4. Olivia	5. Charlie
Education outcomes	Costs from school non-attendance	✓	✓	✓	✓	✓

		Archetype				
Cost theme	Brief description	1. Tim	2. Ade	3. Sarah	4. Olivia	5. Charlie
Economic outcomes	Productivity gains from working or volunteering	✓ ✓	✓	✓	✓	✓ ✓
Mental health	Cost of treatment for mental health difficulties	✓ ✓ ✓ ✓	✓ ✓ ✓	✓ ✓ ✓	✓ ✓ ✓ ✓	✓ ✓ ✓ ✓
Physical health	Cost of treatment due to poor physical health	✓ ✓	✓ ✓ ✓	✓	✓ ✓	
Social care	Cost of supported living, residential care, or support packages	✓	✓	✓	✓	✓
Criminal justice	Cost of arrests, juvenile custody and prison	✓	✓	✓		

Key – impact in relation to...

- ✓ – The learner
- ✓ – To the learner's parents or carers
- ✓ – To the learner's siblings
- ✓ – To a teacher
- ✓ – To other pupils

The model assumes that by having received provision that meets their needs their outcomes will have been improved. However, not every young person will enjoy the same outcomes despite being broadly within the same archetype. To capture the potential for this range of outcomes, we develop 'low', 'medium' and 'high' scenarios in the factual life course for each archetype. High represents very good outcomes for the archetype compared to the counterfactual, and low represents outcomes which are still better than the counterfactual but to a lesser extent than in the medium and high life courses.

Table 10 summarises how outcomes in our analysis vary according to factual and counterfactual life courses for each archetype, and how outcomes are assumed to be different in high, medium and low scenarios within the factual life course. We model outcomes up to the age of 35 years for all the archetypes, assuming tail off in the strength of outcomes for learners due to their special educational provision later in life.

For example, key drivers of net benefits in Charlie's story are that she is able to work full time in the factual life course with a higher income assumed in the high scenarios and she lives independently. In the counterfactual –

where she has not been able to develop and learn key skills at school – she cannot work later in life and lives in a supported living setting.

Table 10: Outcomes assumed in living situations and employment

Archetype	Factual		Counterfactual	
	Adult living setting	Employment	Adult living setting	Employment
Tim	Independently (high, medium), supported living (low)	Employed (high and medium) Volunteering (low)	Supported living	Does not work
Ade	Supported living (high, medium and low)	Volunteering (medium and high only)	Residential care	Does not work
Sarah	Supported living (high, medium and low)	Employed (level of income varies according to high, medium and low scenarios with the most earned in the high scenario)	Residential care	Does not work
Olivia	Supported living (high), residential care (medium, low)	Parents working	Residential care	Does not work
Charlie	Independently (high), supported living (low, medium)	Employed (high, medium), volunteering (low)	Supported living	Does not work

The potential for each archetype to achieve low, medium, or high outcomes will be affected by factors beyond their control – for example, support being available to them after they leave school. Examples may include a lack of support from adult services, a lack of support and understanding from employers around needs like autism, a challenging family situation, or joining provision that meets their needs too late. These external factors in the lives of our learners inform the weights placed on high, medium, and low outcomes for each archetype in our analysis (see Table 11).

Table 11: Weight on outcomes for each archetype

Archetype	Low	Medium	High	Justification
Tim	40%	40%	20%	Tim joins provision that meets his needs after a tribunal at age 14, which is relatively late for his educational journey.
Ade	30%	40%	30%	Ade joins specialist provision at age 11 after a number of failed placements. He is in special school for long enough to have his needs met properly.

Archetype	Low	Medium	High	Justification
Sarah	30%	30%	40%	Sarah joins specialist provision at the age of 9, and was placed relatively swiftly avoiding time out of school. Her outcomes are therefore weighed towards being 'high'.
Olivia	20%	30%	50%	Olivia's outcomes are weighted towards 'high' because she joined provision that meets her needs at a very young age. They are not close to 100%, however, because her condition will require a lot of support into adult life which may be difficult to access.
Charlie	30%	40%	30%	Charlie joins specialist provision at age 13 following a tribunal. Her needs became more pronounced upon joining specialist provision as they were not met during the period of the tribunal. Her outcomes are balanced.

Results from our outcomes analysis indicate that the net benefits to society for each learner from having their needs met could range from at least £251,000 for Ade over his lifetime, and £914,000 in the case of Tim (see Table 12). These figures are in net present values and have been adjusted for alternative attribution (ranges between 10% and 30% for each archetype) and deadweight loss (ranges between 2.5% and 7.5% for each archetype); these adjustments and assumptions are explained in further detail in Appendix 4.

Table 12: Value of outcomes for each archetype presented by cost theme (net present value £)

Cost theme	Archetype				
	1. Tim	2. Ade	3. Sarah	4. Olivia	5. Charlie
1. Education outcomes	£2,000	£2,000	£4,000	£4,000	£1,000
2. Economic outcomes	£319,000	£116,000	£190,000	£333,000	£350,000
3. Physical health	£1,000	£3,000	£14,000	£19,000	£0
4. Mental health	£13,000	£4,000	£11,000	£25,000	£14,000
5. Social care	£550,000	£126,000	£153,000	£187,000	£135,000
6. Criminal justice	£28,000	£1,000	£20,000	£0	£0
Total	£914,000	£251,000	£392,000	£568,000	£499,000

C. Evaluation results – the value generated to society when learners' needs are met

The final stage of the modelling is to take the difference between the value outcomes and costs of specialist provision in the factual and counterfactual scenarios. The resulting figures (see Table 13) show the value generated to society when learners in the archetypes that we have described have their needs met.

Table 13: Value generated to society when their needs are met – lifetime gain per learner (£)

	Net outcomes gained per archetype	Net incremental cost of provision	Difference – net value generated to society
Tim	£914,000	-£170,000	£744,000
Ade	£251,000	£303,000	£554,000
Sarah	£392,000	-£146,000	£246,000
Olivia	£568,000	-£508,000	£59,000
Charlie	£499,000	-£196,000	£303,000
Average	£525,000	-£143,000	£381,000

Presenting these results by theme for each archetype, Figure 27 to Figure 31 set out the per learner net value generated, with the green bars representing net costs when needs are met and the blue bars representing the net benefits from meeting needs. The level at which the final bar on the right hand side rests represents the total net value generated to society of having their needs met.

Figure 27 shows that provision that meets Tim's needs is £170k more expensive than the provision that only partly meets his needs. However, this additional cost is easily outweighed by the economic benefits of his parent being able to work when his needs are met, and his ability to work or volunteer when he leaves school. Furthermore, there are significant savings in terms of social care due to his ability to live independently after having his needs met at school.

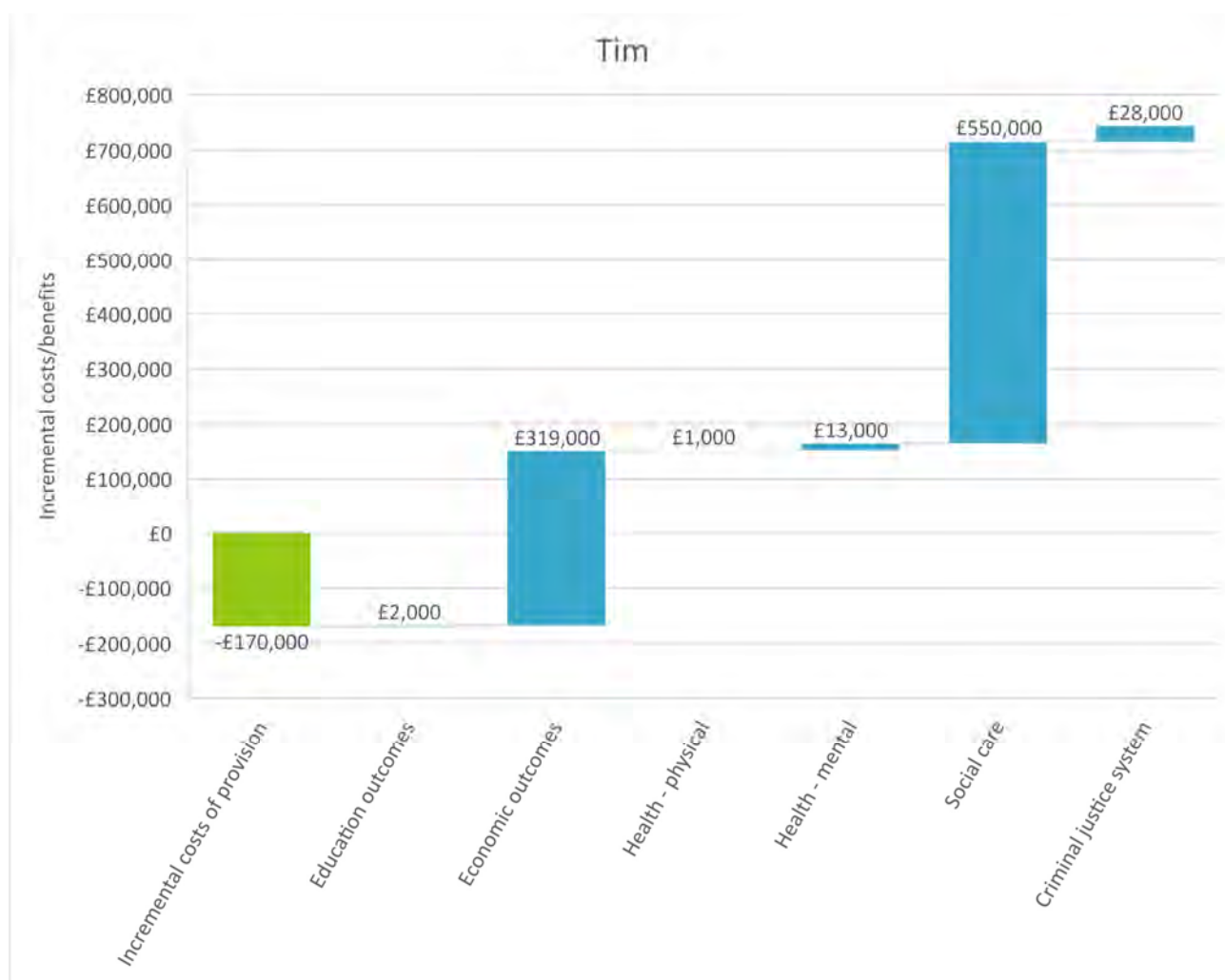


Figure 27: Tim's summary (a net benefit of £744,000)

Figure 28 shows that provision that meets Ade's needs is actually cheaper as he is able to stay at home with his family in the factual life course rather than be in a more expensive residential setting. This is the main driver of value in his life course. His ability to volunteer later in life and to live in a supported setting rather than a residential setting also drive benefits in his story.

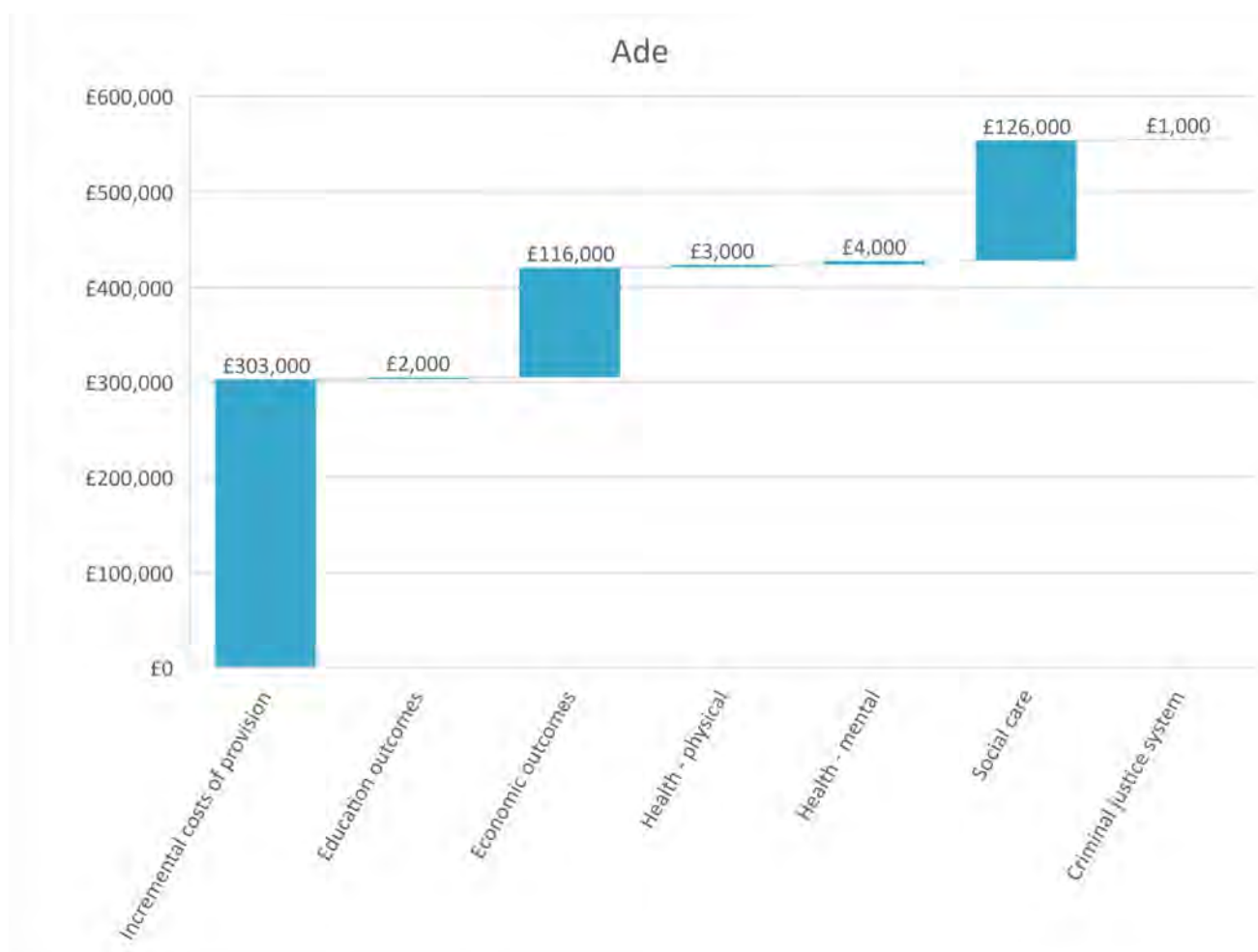


Figure 28: Ade's summary (a net benefit of £554,000)

Figure 29 shows that provision that meets Sarah's needs in the factual life course is more expensive. This is primarily driven by her staying in provision for two further years in the factual life course than in the counterfactual. The additional costs, however, are offset significantly by the economic outcomes (productivity benefits) of Sarah being able to work later in life and to live in a supported rather than residential setting.

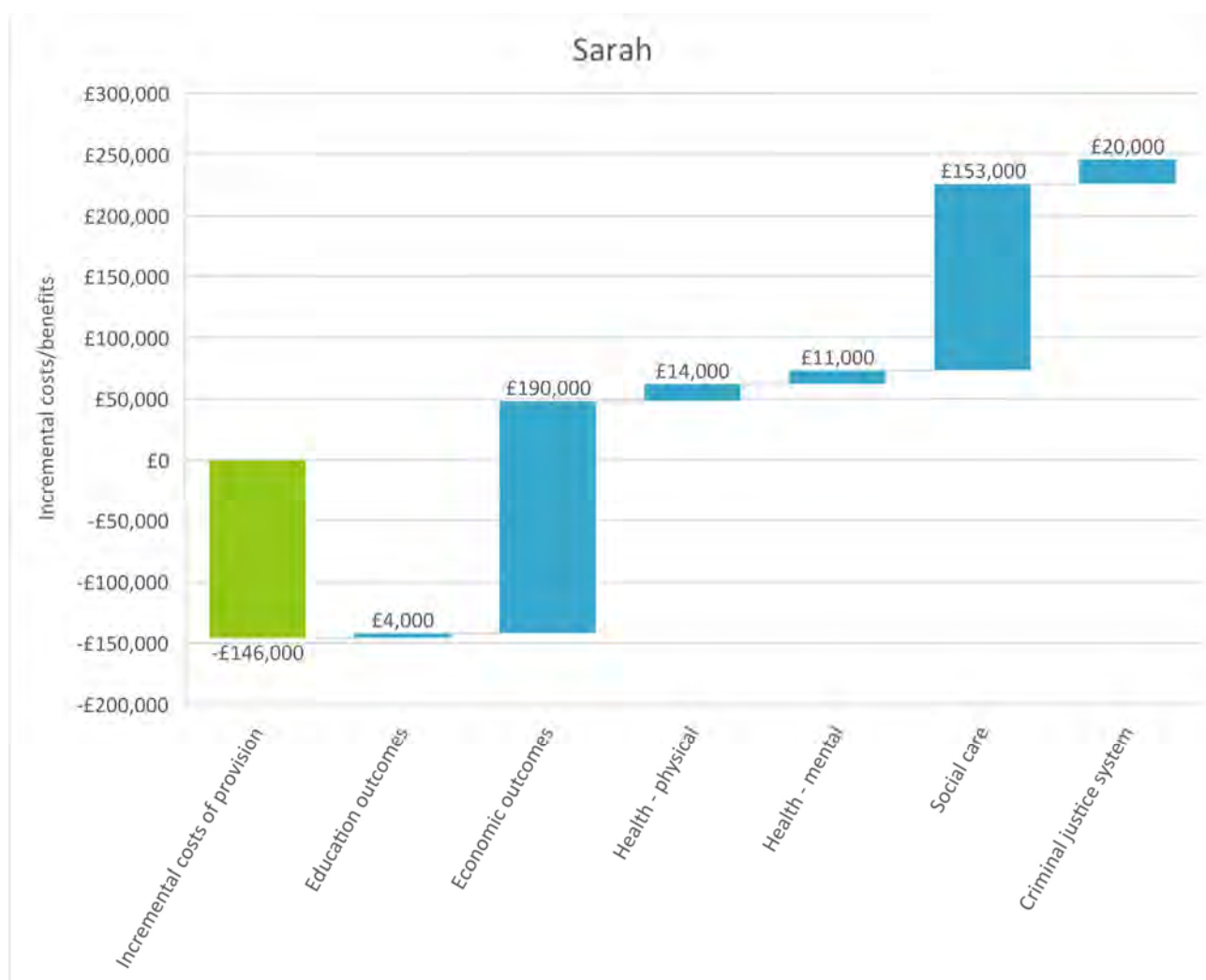


Figure 29: Sarah's summary (a net benefit of £246,000)

Figure 30 shows that provision that meets Olivia's needs is significantly more expensive than provision that only partly meets her needs. However, this cost is offset by a combination of Olivia's parents being able to work when she has her needs met, and Olivia's ability to live in a less costly supported living setting as a result of learning how to communicate her needs and how to be independently mobile with a powered chair. Of all five archetypes, the value of meeting Olivia's needs shows the smallest value. This net value of £59k, however, does not include the potentially significant gains in the length and quality of her life if her needs (particularly her health needs) are met, and met more quickly.

A potential extension of work around the profile of Olivia would be to determine the Quality of Life (QALY) gains of having her needs met – this would centre around how much longer she would live and in what better physical and mental health as a result of her provision. This can be valued using measures of quality and increased length of life due to health and wellbeing interventions. An additional year lived in good health is

valued at between £30k and £60k a year,⁴⁶ so if provision improved either one of or both her length or quality of life, then the net value to society of this provision would be higher than the £60k additional value estimated here.

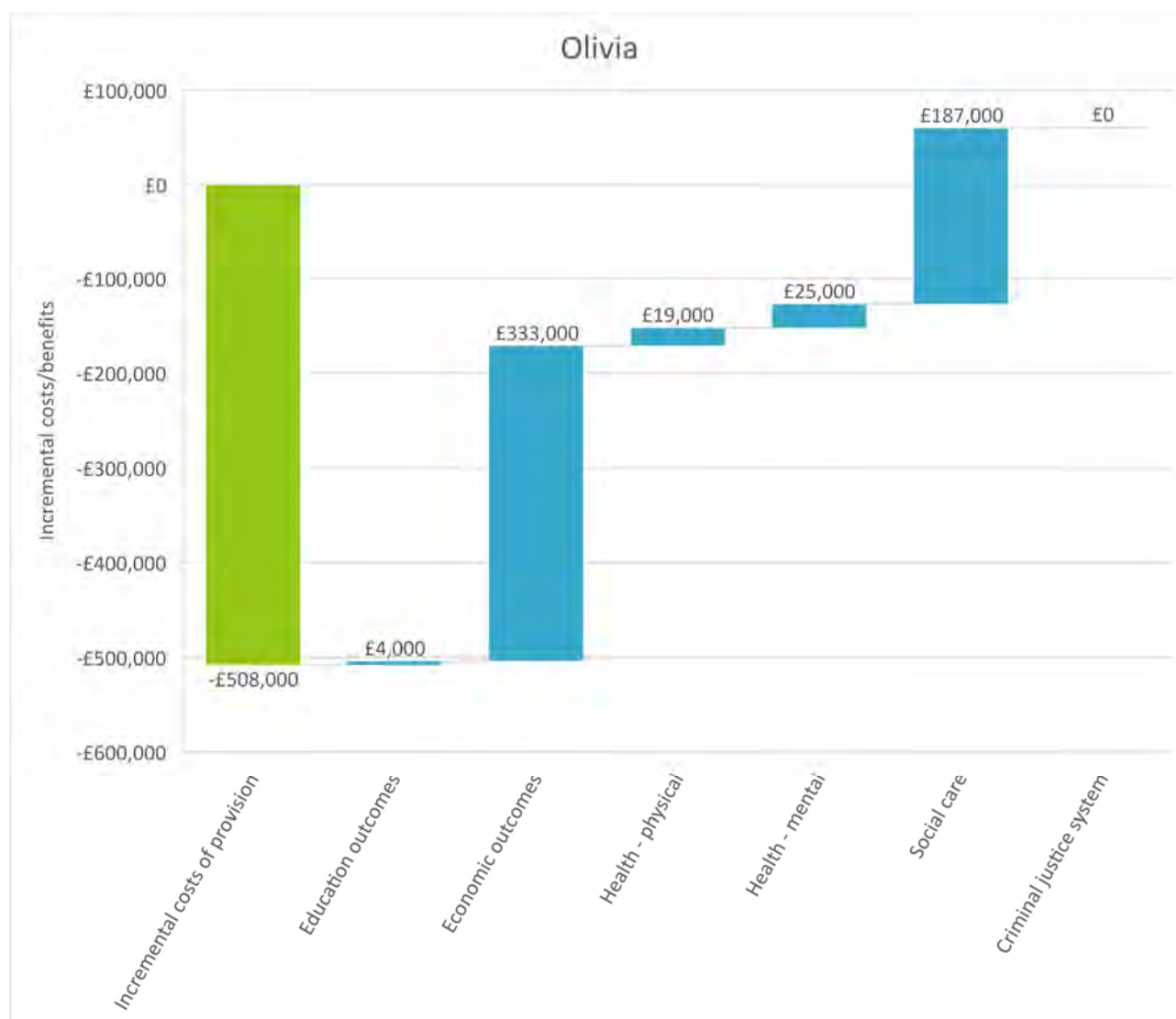


Figure 30: Olivia's summary (a net benefit of £59,000)

Figure 31 shows that provision that meets Charlie's needs is also more expensive. This is because it is residential as opposed to a day placement; there are a small number of settings specifically for learners with SI and so she must move away from home to benefit from this provision. However, this provision 'gives her back

⁴⁶ HM Treasury (July 2021), Wellbeing Guidance for Appraisal, Supplementary Green Book Guidance, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1005388/Wellbeing_guidance_for_appraisal_-_supplementary_Green_Book_guidance.pdf

her future' as she is able to work and live more independently later in life, generating net benefits in terms of productivity and reducing social care needs.

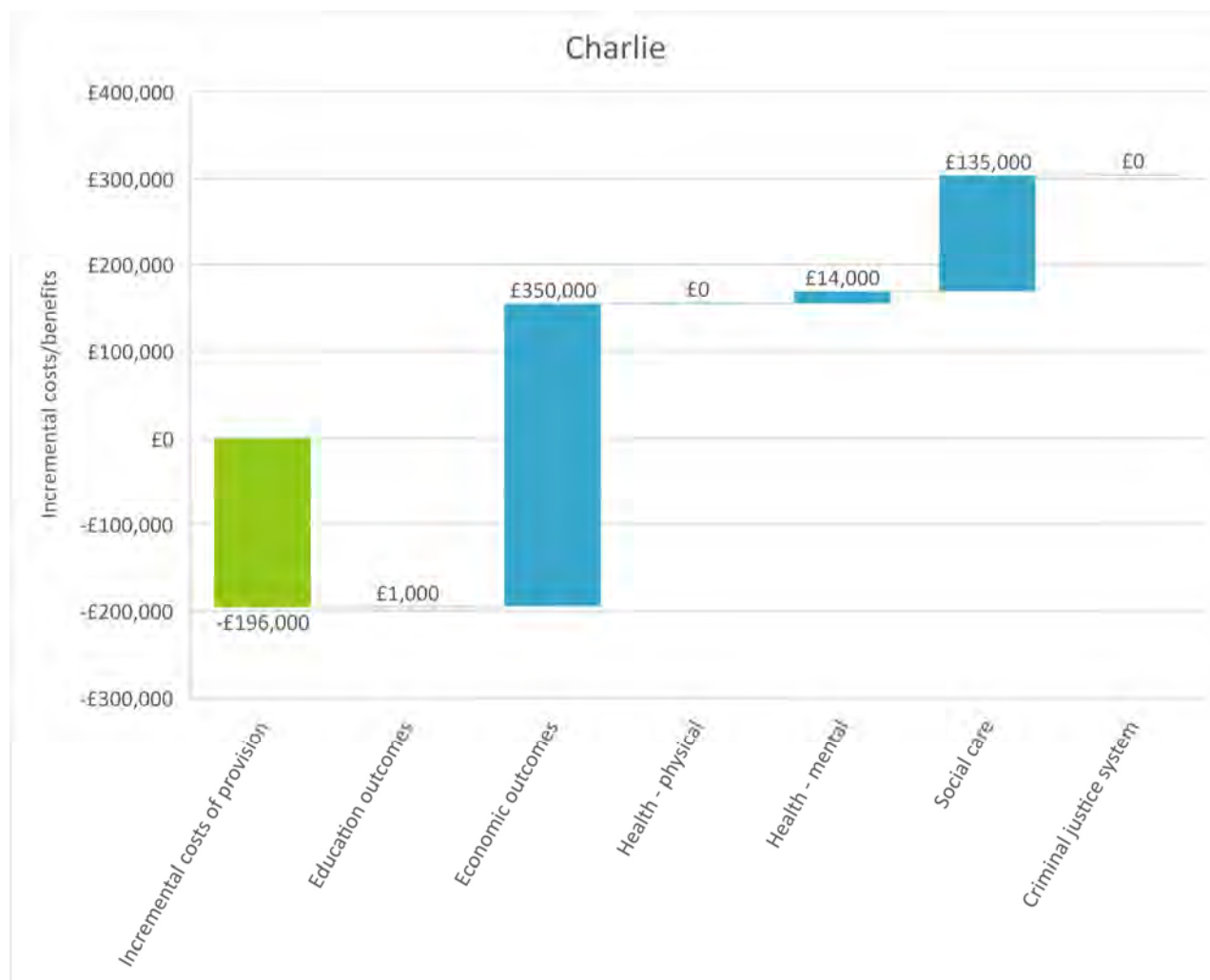


Figure 31: Charlie's summary (a net value of £303,000)

Results by stakeholder

Exploring the value created by stakeholder rather than by theme produces the results shown in Figure 32. Reflecting the individual stories explored above – the largest value is generated to the economy due to the increase in productivity of our learners and their parents. The second largest value generated is to the local authority – even though they may be paying more in the short run for provision that meets learners' needs, in the longer run the support packages they need to provide to learners who have had their needs met are less comprehensive, and hence less costly.

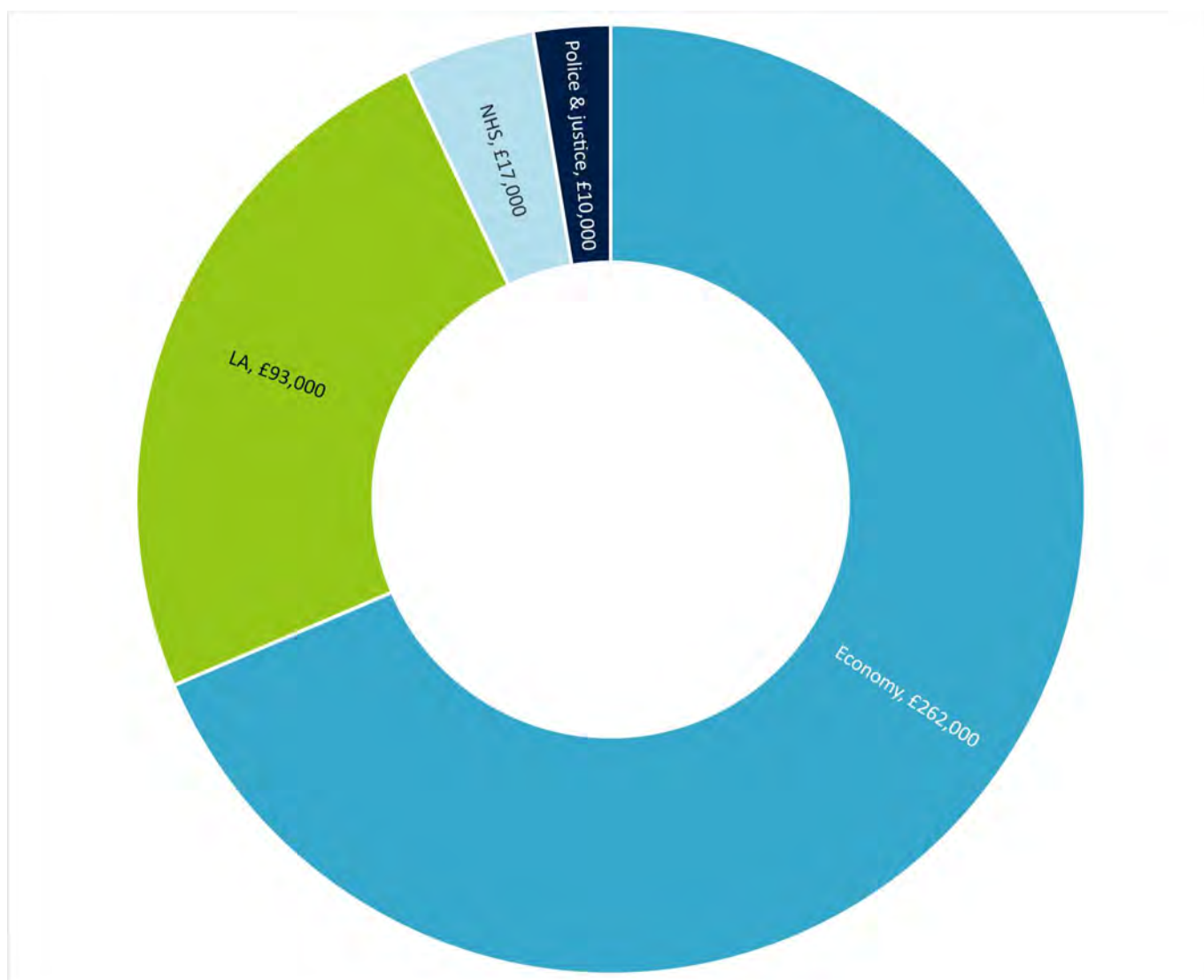


Figure 32: Value generated by meeting the learners' needs – average across five archetypes, broken down by stakeholder

Impacts not quantified and modelling limitations

It is important to note that not all outcomes for learners with SEND are quantified in this modelling. Due to a lack of evidence or complexity of modelling the following outcomes, these are not accounted for in the results explored above.

Family breakdown and health impacts on quality and length of life

When learners' needs are not met it may present financial and psychological challenges for parents – particularly if they are not able to work or their child frequently exhibits behaviours that challenge. These challenges can sometimes lead to family breakdown, and to worse mental and physical health outcomes for pupils and their families.

While we have taken into the costs of treating mental health and physical health needs of families when learners' needs are not met, we have not built the costs of family breakdown into this analysis. Similarly we have not estimated the potentially longer and better quality of life experienced as a result of the right support. This is due to a lack of information and evidence in these areas.

Cost of further education

In some of the life stories, learners go onto further education. Provision that meets their needs will have increased the likelihood of this being some learners' destination upon leaving school. The costs of further education are not taken into account in this analysis since they are not directly attributable to specialist provision.

Social worker costs

Many participants in this research indicated that if learners have their needs met then this would reduce demands on social workers to assess their needs and to coordinate or commission other services. The impact of this has not been taken into account in this modelling due to a lack of evidence on the likely scale of this impact.

Impacts on school staff

When learners have their needs met their behaviours that challenge reduce, and the risk of harmful events to themselves or those around them in schools – most notably staff – reduces. Similarly, the levels of stress staff will experience in working with learners will reduce too. Aside from violence against a member of staff in one of our archetypes' life stories, other impacts on school staff are not included in this research due to scope limitations.

Harm to others

In our research with NASS schools we heard that without their needs met, some of the archetypes may engage in criminal activity or anti-social behaviour which has impacts on their neighbours and communities. These impacts have not been accounted for in the modelling due to a lack of evidence on the nature of the criminal activities the archetypes would be likely to engage in and therefore the nature of the costs to victims.

Some assumptions in the model are subject to additional uncertainty

The model's scope is broad, and we might not have costed all elements of a particular story in the life of an archetype. For example, if an archetype is involved in a crime and goes through a process within the criminal justice system, we might not have factored in all of the costs of this process due to the limited time to model every aspect of this journey. We are confident, however, that we will have captured the key outcomes that generate costs to stakeholders.

6. Conclusions and next steps

Key findings

This research demonstrates the difference that can be made in the lives of learners with SEND and those around them when their needs are met. It also demonstrates the potential value this creates for them and offers to society more broadly if we have high ambitions for learners with SEND and prepare them appropriately for adulthood.

Provision that meets learners' needs can be located in any kind of setting that takes a learner-centric and holistic and evidence-based approach to provision. Based on our research, however, for some children and young people this may be more achievable in special schools given the limited additional support available to mainstream schools to meet the needs of learners with SEND.

The stories of the archetypes explored in this analysis showed that meeting learners' needs may have the short-term positive outcomes for them and their families:

- Improve their ability to engage with learning
- Improve their mental and physical health
- Improve their school attendance
- Increase the efficiency of education of other pupils in settings where learners' needs are not fully met
- Reduce demands on parents' time and increase their potential to work
- No learners – either those with SEND or those around them – are made vulnerable by not having the right support for learners with SEND

These improved outcomes – and the skills they develop once they have their needs met – should make a difference to the medium- and longer-term outcomes for learners with SEND and those around them. As a result, they may be able to lead a better quality of life, whether that be having more agency, being less dependent on public services, having the ability to engage in their communities, or having the potential to work or participate in voluntary work.

Quantitative modelling of these outcomes, relative to a situation in which they did not have their needs met, indicates that on average lifetime benefits for a learner with complex SEND could be at least £380k. This represents benefits to learners themselves, their families, government departments, and the wider economy in England.

Together these qualitative and quantitative findings imply that provision for learners with SEND should be assessed through the lens of social and financial benefits, net of social and financial costs. While meeting need was stated to be the main determinant of provision for learners with SEND per the Children and Families Act 2014, budgets made available to local authorities to meet learners' needs are capped. Ultimately funding for

education and public services are limited by the bounds of the public finances. Therefore, local authorities need to meet the needs of as many learners as possible in their area, and may place some learners in settings at a lower cost even though there may be other more suitable (but higher cost) settings that may better meet learners' needs.

Key findings

Finding 1: Each learner has their own unique potential, and targeted outcomes for each learner need to reflect this

Appropriate target outcomes need to be set for each learner according to their own potential. The 2014 reforms marked a move to a SEND system that had at its core an ambition for learners with SEND to achieve their potential. The SEND and AP Improvement Plan seems to have scaled back ambitions for learners with SEND from 'the best possible outcomes' to 'good' outcomes that are consistent with provision that is 'financially sustainable'.

Furthermore, the Plan uses rates of educational attainment in English and Maths for learners without identified SEND as a benchmark for learners with SEND [See Section 2]. Many learners with SEND will never be able to achieve these benchmarks (some learners with SEND will not have the cognitive ability to engage with mathematics or English at the level of peers without identified SEND) and, as such, these are flawed measures.

Given this research's findings that every learner with SEND has their own unique potential It is concerning to note that this appears to suggest that benchmarks for learners with no identified SEND are appropriate as measures of success for attainment of learners with SEND.

Finding 2: Each learner has a unique set of needs, and provision that works for one learner may not meet the needs of another

Learners with SEND have different learning needs, different strengths and different levels of potential. As such, provision that meets needs will differ from individual to individual. Standardisation of educational provision according to perceived groups of needs may limit chances for children with the most complex needs to realise their potential [see Section 3].

Finding 3: Family stability and mental health of learners and those around them suffer when learners' needs are not fully met

The potential for family breakdown as a consequence of learners not being in settings that meet their needs was a common theme identified across our research [see Section 4]. While the EHC assessment process does encourage consideration of family support needs, these are not prompted in the EHC form itself [see Section 2].

When family breakdown occurs, it compromises one of the key sources of ongoing support for the young person, and places further burden on funded services.

Finding 4: While in the short term provision that meets needs may be more costly, it is likely to have benefits in the future by reducing pressure on wider public budgets

While in the short-term provision that meets needs may be more costly to the high needs budget, it may reduce costs in other areas of public spending. For example, if a young person with autism is able to leave school with the ability to communicate effectively and to regulate their behaviour, they may be less dependent on public services later in life and may be more able to take up paid employment [see Section 4].

Finding 5: A key driver of system cost may be that learners are not being placed in the 'right place, right time' with the 'right support'

Research participants indicated that many of the children in their schools did not arrive in those settings early enough [see Appendix 2]. As a consequence, their needs are elevated and their development delayed significantly; this ultimately requires a higher investment in special educational provision to address their needs. Further research and exploration is required to understand why learners may experience a number of placements before the right one is found: is it driven by constraints on high needs budgets? Is it a lack of evidence of what works for learners with different needs? Is it that EHC assessments are not effective enough in identifying needs?

Finding 6: There is not enough capacity in the system to meet the needs of learners in spite of the increase in the high needs budget

The number of learners with EHC plans has increased by 50% between 2015/16 and 2021/22 (to 355,566 from 236,806). The Government has increased the high needs budget in response; in the three years to 2022-23 it increased by £2.5 billion to £9.1 billion 2022-23, and will reach £10.1 billion in 2023-24. In spite of these increases, many special schools are at or are close to capacity, and funding per place has fallen in real terms. Outside of these figures there may be a hidden group, probably of 14,600 or so, learners who are eligible for EHCPs but are being educated at home [see Appendix 2, section *Is there enough capacity in special schools to meet demand?*]. The financial costs of the 2014 Children and Families Act were estimated prior to its introduction, but did not fully anticipate the increased costs of meeting needs of those aged up to 25 years with SEND [see Section 2].

Finding 7: Special educational provision often encompasses delivery of some health care but this may not be funded appropriately, and the right oversight may not be in place

Per the SEND Code of Practice, special educational provision encompasses providing health⁴⁷ and care services where they support the education of a child. These services may be commissioned and funded through the high

⁴⁷ But not nursing services.

needs block rather than care and health budgets. Participants in this research indicated that special schools are expected to provide mental health services without specific funding, or recognition of the services they are providing. Some schools participating in the research have added therapy to their provision to meet the needs of learners without asking for additional fees from the local authority [see Section 2].

There are a number of implications arising from this lack of joined-up commissioning and from schools delivering health services funded by the education budget:

- Staff delivering mental health or nursing services might not have the appropriate oversight, leading to risks to learners in those settings
- There is no clear framework by which to evaluate outcomes and impacts for these types of support delivered in these schools

Recommendations

Based on our quantitative and thematic findings, we propose a series of recommendations:

- A. SEND policy and regulatory changes should be driven by evidence-based analysis of the current and future impact of SEND provision. Any future statutory changes should have their social impacts and financial implications fully assessed. All stakeholders in the SEND system have a role to play in demonstrating impact in its widest sense – financial and social. High quality data gathered at school-level needs to feed through to local authority commissioners and beyond to national policy makers, and to be believed and acted upon.
- B. Benchmarking of provision needs to be approached with care. Young people with special needs must be afforded the same aspiration as the general population – to be the best they can be. The SEND and Alternative Provision (AP) Improvement Plan from the Department for Education (March 23) sets aspirations of ‘good outcomes’ for these young people, but these must not be ‘good’ in the context of the aspirations and approaches of non-SEND provision but must support the reasonable and tailored aspirations of the individual young person, whether with SEND or not. Setting targets and measuring impact should come from the front line of delivery, so standards should be set from a deep understanding of what is happening and aspirational for young people and their teachers.
- C. In preparation for policy changes, schools need to keep good records of provision for each individual learner, learners’ destinations on leaving school and what differences their provision has made for learners. Families can be involved and help with this, reflecting the importance of their role as recognised in the SEND and AP Improvement Plan. This will help improve the evidence base, and will support schools’ discussions with commissioners, as well as inform any future research into longer-term outcomes for people with SEND and the specialist provision they received at school age.

- D. Key current local authority intervention programmes should be closely monitored and evaluated, and where they are having a negative impact be reconsidered. For example, the potential impact on learners in local authority areas subject to Safety Valve and Delivering Better Value in SEND programmes should be tracked. This would provide evidence that can be used to inform regulatory impact assessments on the social and financial costs and benefits of any future changes.
- E. We need further research to determine how to identify the right provision in the right setting at the right time for learners. Ultimately, we need to build on this research to better understand the key factors behind successful placements. Schools and commissioners should gather evidence from and seek to learn lessons from each learner's individual educational journey, particularly when it involves multiple school placements. Collectively, we also need to better understand what influences parents' and carers' school choice decisions, and what factors drive local authorities' decisions regarding where learners receive special educational provision.
- F. We welcome the planned work on Education Health and Care Plan formats set out in the SEND and AP improvement Plan. The findings of this research indicate that value is often added through elements of provision which are not routinely captured in EHCPs currently, e.g. emotional wellbeing. We would like to ensure that future EHCP templates and guidance capture broad and aspirational outcomes for children and their families, as initially envisaged in the 2014 reforms. All stakeholders within the SEND system have a role to play in this.
- G. Investments made in provision for individual children make returns beyond that individual child over a considerable period of time. Within the SEND change programme, we would like to see scope to explore models which acknowledge and support this. This includes the planned work to secure greater Health involvement in SEND provision but could meaningfully go beyond this to consider whole-place/whole lifetime budgets for those with the most complex needs to move beyond the 'silos' of individual agency budgets. This, in turn, will require a dedicated focus on commissioning for children with the most complex needs and an acknowledgement that this may need local, regional and national focus.
- H. Our findings consistently demonstrate the particular value that good mental health support offered by special schools delivers. To meet the needs of their learners many schools may deliver services without appropriate funding, guidance or oversight (for example nursing services or mental health therapies). We welcome the intent in the SEND and AP Improvement Plan to clarify the role of Health provision within SEND provision. We would like to see a specific focus on mental health within this. Schools should record systematically the care and mental health support they provide to learners, and which interventions are effective. Findings should be used to inform government guidance to support the wider sector in delivery of these services. We would like to see the suggested recommendation from the National Safeguarding Panel in phase 2 of the Hesley report to consider joint Ofsted/CQC inspection of provision explored further as part of this.

DELIVERING IMPACT MATTERS

Appendix 1: Research approach and methodology

This appendix outlines the research approach taken for this work. This research used both qualitative and quantitative approaches to evidence the value created by provision that meets the needs of learners with complex SEND. A more detailed description of the life journey modelling (quantitative aspects of this work) can be found in Appendix 4.

Exploring the impact of meeting learners' needs through archetypes

To explore what provision meets learners' needs, we took a qualitative story-based and person-centric approach. Through this we developed profiles of eight typical learners with complex SEND who have EHC plans (our 'archetypes'). These archetypes were designed to represent and capture the stories of a large proportion of the children with EHC plans in England.

The eight archetypes reflect the different needs of learners with SEND and explores what provision meets their needs, and what difference that makes to the learners themselves as well as their communities and wider stakeholders like local authorities, government departments and the economy.

These archetypes were developed through research activities with NASS special schools, and the impacts of having their needs met were informed by this primary research as well as by secondary sources.

Model-based quantitative evaluation

Informed by the likely assessment of outcomes for the archetypes with and without their needs met, we developed an Excel model which captured outcomes to these archetypes with and without their needs met, respectively the 'factual' and 'counterfactual'. The model compared their journeys in provision that meets their needs against a counterfactual in which they stay in an educational placement that does not fully meet their needs. The model therefore captures the difference in outcomes when their needs are met, and the incremental cost of this more suitable provision. This analysis has been used to demonstrate net value that specialist provision can make to learners with SEND.

Research approach

A mixed-methods approach was used to develop the archetypes and outcomes modelling. Figure 33 provides an overview of the research stages in this project.



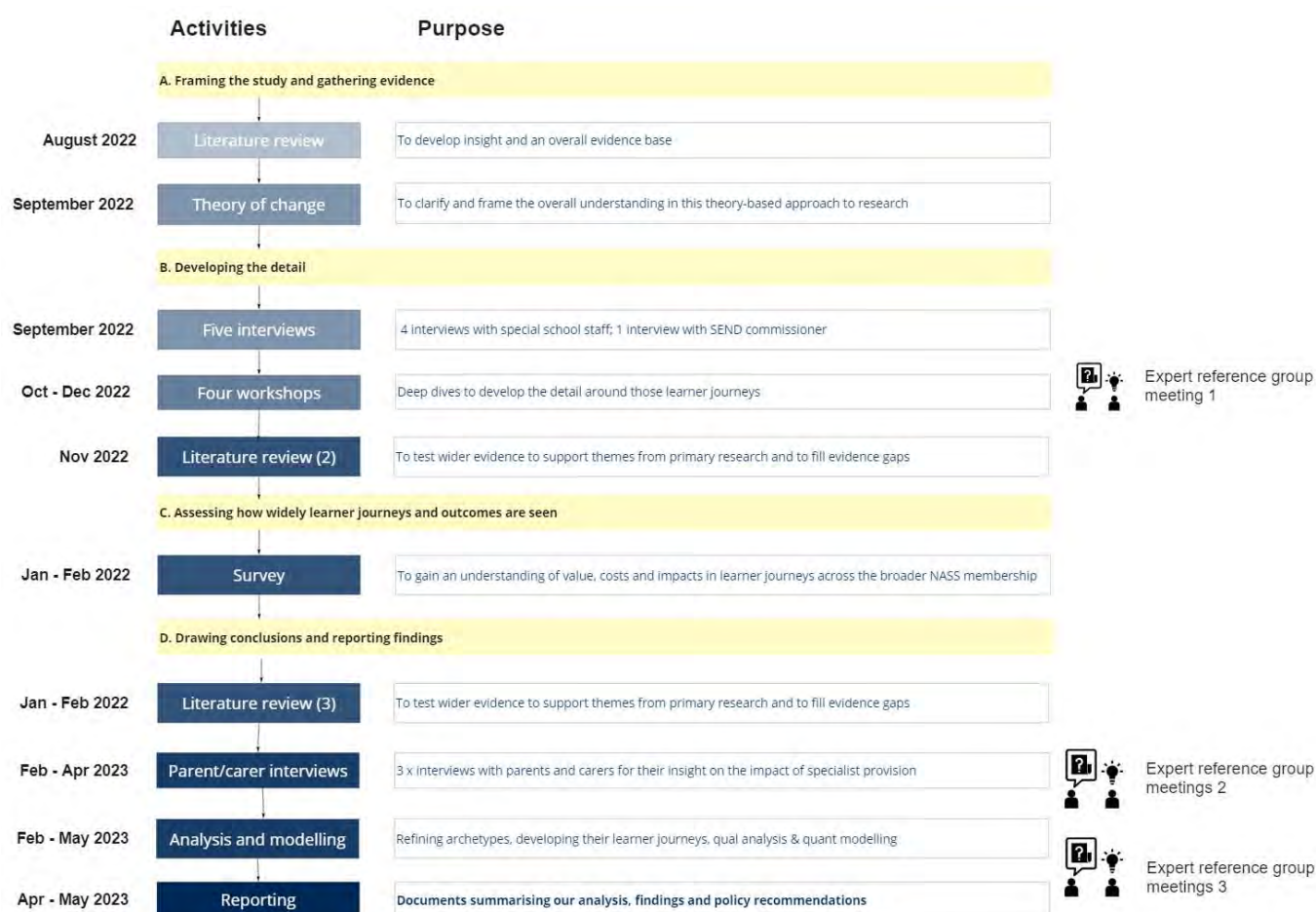


Figure 33: High level research approach

Table 14 provides further detail on each stage of research and the numbers of research participants involved. Participants were primarily staff drawn from NASS member schools, or parents of children who attend NASS member schools.

Table 14: Summary of research activities

Research activity	Description and purpose	Participants
Rapid-literature review	<ul style="list-style-type: none"> Review of national statistics, academic and grey literature Topics explored included: SEND policy, education spending, impact of specialist 	N/A

Research activity	Description and purpose	Participants
	<p>provision, and parental/carer views of the difference specialist provision can make</p> <ul style="list-style-type: none"> The purpose of this review was to determine what evidence already existed and could be drawn on to inform the eight archetypes and the life journey modelling 	
Interviews	<ul style="list-style-type: none"> A number of semi-structured focused interviews (SSFI) with staff in special schools to understand how specialist provision is designed to meet the needs of learners, and what key cost drivers are An interview with an education commissioner to understand budgets and constraints in public spending, and how decisions are made regarding educational placement of children and young people in light of budgets Interviews with parents and carers of learners with SEND to understand their experience of the EHC plan process and the difference that provision that meets their child's need made to them 	<p>Recruited via NASS contacts:</p> <ul style="list-style-type: none"> Two teachers with specialism in SEND Two with finance directors of specialist schools One education commissioner working in a local authority. We wanted to interview up to five commissioners of specialist provision but were unable to recruit further participants Three parents of learners with SEND whose children attend NASS schools, and whose children align to the archetypes of Tim, Olivia and Charlie
Two workshops at the annual NASS conference	<ul style="list-style-type: none"> The structure, topics and content of the two workshops were the same, but the participants were different. The three Sonnet facilitators asked participants to provide their views on the following: <ul style="list-style-type: none"> Successful outcomes for their learners Impact on learners and wider society when learners have their needs met Top 3 barriers to achieving success with learners Where learners would receive education provision in absence of their type of provision and implications for stakeholders Biggest challenges facing their schools 	<ul style="list-style-type: none"> There were up to 30 participants in the first workshop and 16 in the second
Two archetype workshops	<ul style="list-style-type: none"> Discussions to identify a number of archetypal student profiles, their journeys to provision that meets their needs, and the 	<ul style="list-style-type: none"> Two workshops with 16 staff from 13 NASS member schools

Research activity	Description and purpose	Participants
	<p>difference it makes to them and those around them</p> <ul style="list-style-type: none"> These discussions also explored the counterfactual – what would have happened to learners if their needs were only partially met 	<ul style="list-style-type: none"> Workshop participants represented schools whose provisions meet the needs of learners' with SEMH, ASC, SI, PMLD and SI
Post-workshop paper-based exercise	<ul style="list-style-type: none"> Following the workshops we sought further input on learners' with primary needs in SLCN and SI since these needs were not fully covered in the two archetype workshops 	<ul style="list-style-type: none"> 3 responses from NASS member schools meeting the needs of learners with SI We received no responses from schools with provision in SLCN
Survey	<ul style="list-style-type: none"> A survey to test recognition of the archetype profiles, their journeys, and the nature and scale of outcomes for each archetype in the factual and counterfactual life courses The survey also gathered information about the provision the school offers, the primary needs they meet, and their views on thematic topics like step down and 'right place right time' 	<ul style="list-style-type: none"> NASS invited all of their members to complete the survey There were 62 individual responses to the survey; this was a response rate of approximately 16%

Expert reference group

Reviewing and providing a check on this research and findings was the project expert reference group – a group of sector leaders and experts. Their role was to provide scrutiny on the form of research inquiry used on this project, and our analysis of value and impact created by specialist provision, and to review and advise on this final report. For a list of the group members see Appendix 5.

The expert reference group met virtually three times during the course of the project with each meeting aligning to the following activities:

- Testing our research approach
- Testing the archetypes developed and thematic findings
- Reviewing our modelling approach, our recommendations and conclusions, and the final report

NASS and Sonnet made final decisions regarding the content, structure and results presented in this report.

Limitations of this research

Limited involvement of participants from commissioners of services

A topic that we would have explored in greater depth, had we been able to secure more participants from local authorities in this research, was how local authorities meet the requirements placed on them in the Children and Families Act 2014 in the face of budgetary pressures.

Similarly, we have not been able to ascertain a view from sector partners on how special schools work with them to meet the needs of learners, and how joined-up commissioning works in practice from a commissioner's perspective. The research team sought to recruit local authority and health commissioner participants on a number of occasions; however, those approached who did respond to the invitation to participate indicated that they did not feel well placed to take part in the research, were leaving their roles, or did not have the capacity to take part.

A limited number of interviews with parents

This research sought to gain the perspective of parents or carers whose children have SEND, and what difference having their child's needs met made to their child and their family life. Due to limited time and budgetary constraints, we prioritised interviewing parents or carers for archetypes whose life journeys we modelled. As such, interviews were held with parents of three children who aligned to the Tim, Olivia, and Charlie archetypes.

Given Ade's family setting – living in a family with limited financial means – his parents are likely to be vulnerable themselves. Therefore, it was judged best not to seek an interview with a parent for a child whose needs and experiences align to Ade's.

Since Sarah is looked-after by the local authority having experienced trauma and abuse in the birth family home, we did not seek to identify a local authority to get a carer perspective for her archetype; this was because of wider challenges in recruiting local authority participation in this research more generally.

Limited evidence on longer term outcomes for learners with SEND of having their needs met

The main participants in this research were staff working in NASS schools. As such, they will be well informed about the immediate differences tailored and specialist provision can make to learners. They will also know the destinations of their pupils upon leaving their settings. However, they will not always know the longer-term outcomes for their former pupils.

Academic literature could not fill this evidence gap; we could find no studies that compared outcomes for people with SEND based on the educational provision they received earlier in life. In this research we therefore have made the assumption that better outcomes on leaving provision should lead to better life outcomes for learners

with SEND. This seems to be a reasonable assumption to make given that government policy in SEND is targeted towards meeting learners' needs to prepare them for adulthood. The DfE has commissioned a longitudinal study of outcomes for learners with SEND as part of the SEND Futures project,⁴⁸ so more evidence in this area will be available in the future.


Direct involvement of learners with SEND in the research

We did not involve learners directly in this research. On the face of it this may seem to be a methodological weakness if this research does not draw on the experiences of the people whose stories we are telling. However, the people who are best placed to support us in developing broad typical profiles of learners with SEND and their educational journeys are those who have worked with a large number of learners in these educational settings.

While learners may be able to comment on their current educational experience, they will not be able to anticipate what their education means for their future outcomes, e.g. in terms of qualifications, and their long-term wellbeing, health and productivity. As such, learners themselves are a less well-informed audience on the topics of outcomes and costs of specialist education provision.

Those working in schools and delivering this specialist education are better placed to discuss likely outcomes - short and long term - for learners, and have access to data held by schools on pupils' progress, school leaving destinations and performance against national benchmarks and psychological stress. This perspective is vital to develop typical learner journeys that are well supported by evidence and expertise.

⁴⁸ National Centre for Social Research, SEND Futures, <https://natcen.ac.uk/participant-contents/send-futures>



Appendix 2: Evidence on impact of specialist provision

A rapid literature review was a key part of this research into the impact of specialist provision. This appendix outlines the key findings from the literature reviewed.

Academic attainment

The SEND code of practice required local authorities to consider how to support the child or young person to achieve ‘the best possible educational and other outcomes’. The NAO has noted, however, that DfE ‘has not set out, in measurable terms, the outcomes it wants to achieve from its support for pupils with SEND’.⁴⁹ The SEND Review, however, made a comparison between learning outcomes between children with SEND and those with no identified SEND and used this as evidence of a system not working well for learners with SEND.⁵⁰ What this evidence does not tell us, however, is how outcomes for those with SEND varied by their school setting.

The Institute for Fiscal Studies has acknowledged the lack of evidence when it comes to the outcomes achieved in special educational provision. The only metrics currently identified and being used to measure the outcomes for children and young people with SEN is their educational attainment. In 2021, Jo Hutchinson found that ‘in the 2019 GCSE cohort, 48% of pupils without identified SEND achieved good GCSEs in English and maths, compared with 17% of pupils with SEND support in place’.⁵¹ Among pupils with more severe SEND, more than half were not entered for GCSEs and just 6% achieved good GCSEs in English and maths.’⁵²

However, it is likely that the ambition for SEND learners to achieve the same academic outcomes is mis-specified, as this ambition is unlikely to be achieved. It may be difficult for many learners with SEND to achieve academic attainment at the level of learners without SEND as many will not be able to follow the national curriculum, or may have insurmountable barriers to learning.

Evidence that holistic, whole school approaches and support that is targeted to meet the needs of individual learners, particularly when it comes to wellbeing and mental health, are more effective in supporting learning outcomes includes:

⁴⁹ National Audit Office. Support for pupils with special educational needs and disabilities in England. [Support for pupils with special educational needs and disabilities in England \(nao.org.uk\)](https://nao.org.uk/publications/support-for-pupils-with-special-educational-needs-and-disabilities-in-england)

⁵⁰ SEND Review: Right support, right place, right time (2022), Government consultation on the SEND and alternative provision system in England [SEND Review - right support, right place, right time \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/consultations/send-review-right-support-right-place-right-time)

⁵¹ Hutchinson, J. (2021), Identifying pupils with special educational needs and disabilities, Education Policy Institute and Nuffield Foundation [SEND-Identification 2021-EPI.pdf](https://www.eppi.org.uk/wp-content/uploads/2021/06/SEND-Identification-2021-EPI.pdf)

⁵² Farquharson, C., McNally, S. and Tahir, I. (2022), ‘Education inequalities’, IFS Deaton Review of Inequalities

- NICE guidance and the supporting qualitative evidence review 2022^{53,54}
- Research by Dr Matthew Silver⁵⁵

Outcomes in adult life

There is some limited evidence on outcomes for people with SEND; however, in our research we could find no studies that compared outcomes for people with SEND based on the educational provision they received earlier in life.

The Government SEND review indicates that outcomes, particularly in terms of employment, for learners with SEND are not on par with learners with no SEND identified. In the report they flag that learners with SEN by age 27 are less likely than their peers to be in sustained employment, are at more risk of harm and may be more likely to be a victim of a crime.⁵⁶

We should expect to see some difference in these outcomes for these groups, however, given the needs of learners with SEND, some may never be able to secure paid employment, and those who can seek employment may face disadvantages in the labour market.⁵⁷ Per Robinson et al (2017):

There is a lack of recognition in existing policy that, for some young people, paid employment may not be a viable opportunity. However, if we understand 'career' more broadly as a term which describes the individual's passage through life, learning and (all forms of) work it is clear that this group of young people also have career planning and management needs. The outcomes for young people with SEND may be more varied and complex and the corresponding decisions which need to be made may require more time, specialist knowledge and support.⁵⁸

⁵³ NICE (July 2022), NICE guideline: Social, emotional and mental wellbeing in primary and secondary education, <https://www.nice.org.uk/guidance/ng223>

⁵⁴ Hennessy, A. et al (2021), Children and young people's perceptions of social, emotional, and mental wellbeing provision and processes in primary and secondary education: A qualitative exploration to inform NICE guidance, <https://www.nice.org.uk/guidance/ng223/evidence/focus-group-report-pdf-11132541469>

⁵⁵ Silver, M. (2020), An Exploratory Study of the Impact of a Meaningful, Mastery Project Based Learning Curriculum Structure Based on Self-Determination Theory and Agentic Engagement on Motivation, Engagement and Outcomes in a SEND Secondary School in England, UCL, <https://discovery.ucl.ac.uk/id/eprint/10129105/1/Matt%20Silver%27s%20Final%20Thesis%20for%20EdD%202020.pdf>

⁵⁶ SEND Review: Right support, right place, right time (2022), Government consultation on the SEND and alternative provision system in England [SEND Review - right support, right place, right time \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/111325/send-review-right-support-right-place-right-time.pdf)

⁵⁷ Parsons, S., Platt, L. (2022) Special educational needs and disability: a lifetime of disadvantage in the labour market? CLS Working Paper 2022/4. London: UCL Centre for Longitudinal Studies, <https://cls.ucl.ac.uk/wp-content/uploads/2017/02/CLS-Working-Paper-2022-4-Special-educational-needs-and-disability-a-lifetime-of-disadvantage-in-the-labour-market.pdf>

⁵⁸ Deborah Robinson, Nicki Moore & Tristram Hooley (2018) Ensuring an independent future for young people with special educational needs and disabilities (SEND): a critical examination of the impact of education, health and care plans in England, British Journal of Guidance & Counselling, 46:4, 479-491, DOI: 10.1080/03069885.2017.1413706

There is limited quantitative evidence, however, on how these outcomes differ for learners with SEND according to the type of specialist education they received. The SEND Review highlighted the following statistic, but this reflects more on the adequacy of alternative provision and the needs of learners who are in those settings: 55% of pupils from state place-funded alternative provision sustained an education, training, or employment destination after key stage 4 in 2019/20, compared with 89% and 94% from state-funded special and mainstream schools respectively. It is also key to note that only some learners in alternative provision will have special educational needs.⁵⁹

Parental perceptions of the impact of special provision

In our primary research we heard from schools that caring for a child with SEND is likely to create demands on parents' and carers' time and may affect their ability to work and to engage with society. Furthermore, it could affect the families' mental and physical health and wellbeing.

To get a broader picture of the impact of having their child's needs met and how this makes a difference to parents, we reviewed existing literature. We found that there is a limited number of recent studies and literature that focus primarily on parents' and carers' views on special educational provision: whether specialist provision is better at meeting their child's needs, and what difference specialist provision has made to them and their day-to-day lives. The below summarises findings from the small number of studies and grey literature that we have found that explore parents' and carers' views on schools, the processes and children themselves.

Based on this review there is sufficient evidence to suggest that parents and carers feel that special schools meet their children's needs *better* than the previous schools they attended. Nevertheless, this may be due to a lack of information about other schools - either mainstream or other special schools – that could still meet the needs of their child. However, that many parents and carers pursue tribunals to ensure their children are placed in specialist provision illustrates that they see the value of their child attending a specialist school despite all of the obstacles.

From the parents perspective – what evidence exists

The most in-depth evidenced based research and data collection that has focused on parents' perspectives is collated in the *Lenahan Review of Residential Special Schools Paper 4* which was compiled⁶⁰ by NASS in 2017. The team launched an online survey which ultimately had 308 responses from parents and carers who had at least one child attending a NASS member school (with 17 having more than one) and to date is the largest survey that has been done solely on parents and carers of children in residential Special Educational Provision.⁶¹ The majority of parents and carers surveyed were pleased with the schools and the differences they made to their children's lives (examples including having specialist staff and programmes available to enable their children to, for

⁵⁹ SEND Review: Right support, right place, right time (2022), Government consultation on the SEND and alternative provision system in England [SEND Review - right support, right place, right time \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

⁶⁰ But never officially published; it has been used internally by NASS and partners but is not part of the public knowledge domain.

⁶¹ This volume of responses is extremely meaningful, not simply because of the sheer number of responses and active engagement, but also because previous studies have been significantly smaller and the responses significantly less positive.

example, to improve their communication skills and to make friends) and the benefits that come along with securing places at these schools. The report also highlighted many of the challenges that exist to even get their children into a special school (most commonly having to go to SENDIST to secure a placement or having to hire legal representation), let alone the one that is the best fit for them. One interviewee noted that ***'this was stressful for the whole family, including the children who did not know if they would be able to go to the school they needed and wanted to'***.⁶²

One key point to note is that for almost 70% of parents surveyed, their child's current placement was at least the third different school they had attended and for 11%, their current placement was at least their fifth school.⁶³ This signifies one of the many challenges that parents face (the administrative side of finding and securing the best school for their children), which may not be considered in reports that exclusively focus on children.

The most quantitative-based research regarding parent and carer experiences and thoughts comes from *Ofsted Parent View report*. The most recent survey was collected between September 6 2021 – September 5 2022 and there were over 316,000 submissions. Among other questions, this survey asks to what extent parents or carers agree with questions like: 'Q1. My child is happy at this school', 'Q2. My child feels safe at this school' and 'Q7b. My child has special educational needs and/or disabilities, and the school gives them the support they need to succeed'.

Question 7b (see image below) is the only question in this survey where there is some insight into the experiences of parents or carers with children who have special needs or disabilities across different school settings. Due to limitations around the methods of collection and numbers surveyed (including the low number of parents and carers who completed the survey), these figures should be understood as such. However, they do show that parents and carers whose children attend special school are more likely to agree that their children get the support they need to succeed than parents with children in mainstream primary or secondary schools.

Q7b. My child has special educational needs and/or disabilities, and the school gives them the support they need to succeed.										
	Number of submissions	Response rate (%)	Average Number of Submissions per School	Strongly agree	Agree	Disagree	Strongly disagree	Don't know	Positive	Negative
Ofsted Parent View benchmarks for schools in England										
Independent schools	7,801	9.0	6.7	66	19	6	8	2	85	14
Maintained schools and academies	316,992	3.8	14.4	42	25	15	14	4	67	29
Phase (All data below refers to maintained schools and academies only)										
Nursery	1,279	3.4	3.3	76	16	4	3	2	92	7
Primary	183,279	3.9	10.9	45	25	14	12	4	70	26
Secondary	126,780	3.6	37.2	33	27	17	18	5	60	36
Special	5,212	3.6	4.8	67	18	6	7	2	85	13
Pupil referral unit	442	3.1	1.3	61	23	5	9	2	85	14

⁶² The Lenahan Review of Residential Special Schools. (2017), Paper 4: The experience of parents of children currently attending residential special schools (pg. 3)

⁶³ The Lenahan Review of Residential Special Schools. (2017), Paper 4: The experience of parents of children currently attending residential special schools (pg. 3)

There are other reports, but the majority are over 10 years old and/or lack the same amount of in-depth qualitative and quantitative data; however, they still provide significant insight into the experiences of parents and carers. These reports include:

- Keeping in Touch with Home, Parents' experiences of choosing a Special School
- Educational experiences of young people with special educational needs and disabilities in England: February to May 2022
- The SEND review: Right support Right place Right time
- Children's Commissioner Reports - The Big Ask
- Then There Was Silence: The Impact of the Pandemic on Disabled Children, Young People and their Families
- Omnibus survey of pupils and their parents or carers: Research report Summer 2019

These various reports detail many of the circumstances that led to parents' and carers' children moving to special schools (with most research focusing on residential schools as they are seen as a more significant step to meet needs as it removes a child from their home), what worked once the child started at school (and what barriers existed), and the delicate balance of parents and carers missing their children but wanting them to settle in and excel at their new schools. Numerous reports, particularly *'Supporting SEND'*, also highlighted the importance of multi-agency collaboration and partnership among the various relevant organisations and the need for systematic overhauls to fix roadblocks for both children and their parents/carers. These reports also do a surface-level dive into the role that local authorities play and some of the legal frameworks that create barriers for children and their parents and carers, such as EHCPs not being carried out.

One of the main themes that emerged across the existing research is the complexity, both administratively but also emotionally, of the process of finding the right school for children with SEND. Parents and carers did emphasise positive experiences they had had once their child had been placed; these included seeing their children finally thrive in the right environment, not having to constantly battle with various institutions and the wider impact the right school placement had on the family as a whole. However, although many of the parents and carers that were interviewed and surveyed were content with certain aspects, there were still prominent issues that consistently emerged. Concerns parents and carers generally had include worrying about i) their children starting out in a new placement; ii) importance of communication with their child and the school; iii) seeing children regularly; iv) the importance and acknowledgement of emotions; and v) their child being safe and well taken care of. Ultimately, all of the literature available points to parents and carers facing extremely difficult decisions – made all the more difficult by institutional barriers and viewpoints – and worrying about their children thriving at school while simultaneously maintaining a relationship with their family.

Limitations of evidence on parental perceptions

This aforementioned research is extremely helpful in better understanding different perspectives from different sources about SEND schools and their holistic impact on learners and their parents and carers. However, within many of the available reports, there is also a very heavy reliance on researching residential schools rather than a range of special schools. This is likely because taking children out of the parental home will always be controversial.

There is also a limit to the detail that much of this research has gone into: there are a small number of studies and within that research, the intersectionality of experiences of parents/carers is not acknowledged. Much of parents' and carers' experiences will be driven by individual factors, circumstances and how they interact with the larger institutions within the system; not concentrating on this aspect does leave a gap in some of the research.

Similarly, there tends to be an emphasis on surface level quantitative data when researching parents and carers and this can again exclude the important story and individual factors. For example, the Ofsted source is numerically-centred and although it may contribute to a foundational understanding, relying solely on numbers discounts the nuances of the lived experiences of those parents/carers.

Finally, it is also important to note that many of these reports were published over 5 years ago – given the current climate and that it was prior to the Children and Families Act 2014, some of these findings, although they may still be valid, their roots and their impact (immediate and ripple out) are based in specific cultural and social climates that may not mirror the current time.

Overall assessment of evidence and identification of gaps

In this research we therefore have made the assumption that better outcomes on leaving provision should lead to better life outcomes for learners with SEND. This seems to be a reasonable assumption to make given that government policy in SEND is targeted towards meeting learners' needs to prepare them for adulthood. The DfE has commissioned a longitudinal study of outcomes for learners with SEND as part of the SEND Futures project,⁶⁴ so more evidence in this area will be available in the future.

Furthermore, there are institution-based reasons that outcomes for children with SEND in special schools may achieve better educational outcomes in those schools compared to mainstream, especially if they are placed at the right time to meet their needs:

- Per government guidance, the funding provided to mainstream schools from the high needs budget is fungible with the entire school budget, and therefore there is little control to ensure it is spent on learners with SEND
- Mainstream school staff may lack training or resources to meet the needs of pupils with SEND⁶⁵

⁶⁴ National Centre for Social Research, SEND Futures, <https://natcen.ac.uk/participant-contents/send-futures>

⁶⁵ NAO (2019), *Support for pupils with special educational needs and disabilities in England*, <https://www.nao.org.uk/wp-content/uploads/2019/09/Support-for-pupils-with-special-education-needs.pdf>

- Earlier intervention and support make a difference to later outcomes in educational attainment⁶⁶

We would recommend more systematic research with a greater number of participants and over longer time frames to close gaps in the evidence base. This would strengthen the potential for evidence-based policy making in the area of SEND policy. This research should aim to address the following questions:

- What relationship there is between the longer-term outcomes for people with SEND and the education, health and social care provision they received at school age
- What factors drive local authorities' decisions regarding where learners receive special educational provision, and the extent to which financial decisions have been the lead factor in this decision-making process
- What influences parents' and carers' decisions about where to request their child receives education provision in their child's EHC plan

⁶⁶ Farquharson, C., McNally, S. and Tahir, I. (2022), 'Education inequalities', IFS Deaton Review of Inequalities

Appendix 3: Thematic findings

This appendix explores thematic findings primarily from the surveys and workshops with special schools that took part in this research. Many of these thematic findings relate to how the SEND system may not currently operate in a way that ensures the ‘best possible outcomes’ for learners with SEND. These thematic findings have been used to inform archetypes’ life stories, quantitative modelling and have informed our report recommendations.

Right place, right support, right time

This was the strapline for the government’s 2022 SEND Green Paper. It is an ambition that the Government recognises is not currently achieved in the sector. The Government’s view on the *right place, right support, right time* may differ from other organisations in the sector: the SEND Review indicated that their ambition was to have more learners with SEND have their needs met in ‘high-quality mainstream provision’.⁶⁷

Asked in the NASS schools survey, what does ‘the right provision at the right time’ mean to them, special schools’ views tended to coalesce around a system that meets a child’s needs as soon as possible and avoids failed placements, supported by an agile system that facilitates this matching process.

Most special schools surveyed also aligned to the view of the government that this ambition is not achieved. In response to the question, ‘Can you estimate the typical number of education placements your pupils will have experienced before reaching your school?’, 66% of participants indicated that by secondary age their typical pupil will have experienced 3 or more prior placements (see Table 15).

Table 15: Typical number of placements per learner before joining your provision

Number of prior placements	Primary age	Secondary age
0	3	0
1	20	4
2	24	16
3	4	24
4+	3	15
Total	54	59

When looking at the share of children who had come to their school ‘at the right time for the child’, it is evident that most respondents think that only small proportion of pupils came to them at the right time. Only 4 out of 61 (7%) respondents to this question answered that most (defined as 81% or more) of their pupils have come to their

⁶⁷ SEND Review: Right support, right place, right time (2022), Government consultation on the SEND and alternative provision system in England [SEND Review - right support, right place, right time \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/consultations/send-review-right-support-right-place-right-time)

school at the right time for them (see Figure 34). The most frequent response to this question was that only 1 to 20% of their pupils came to their school at the right time, with 19 survey respondents selecting this option.

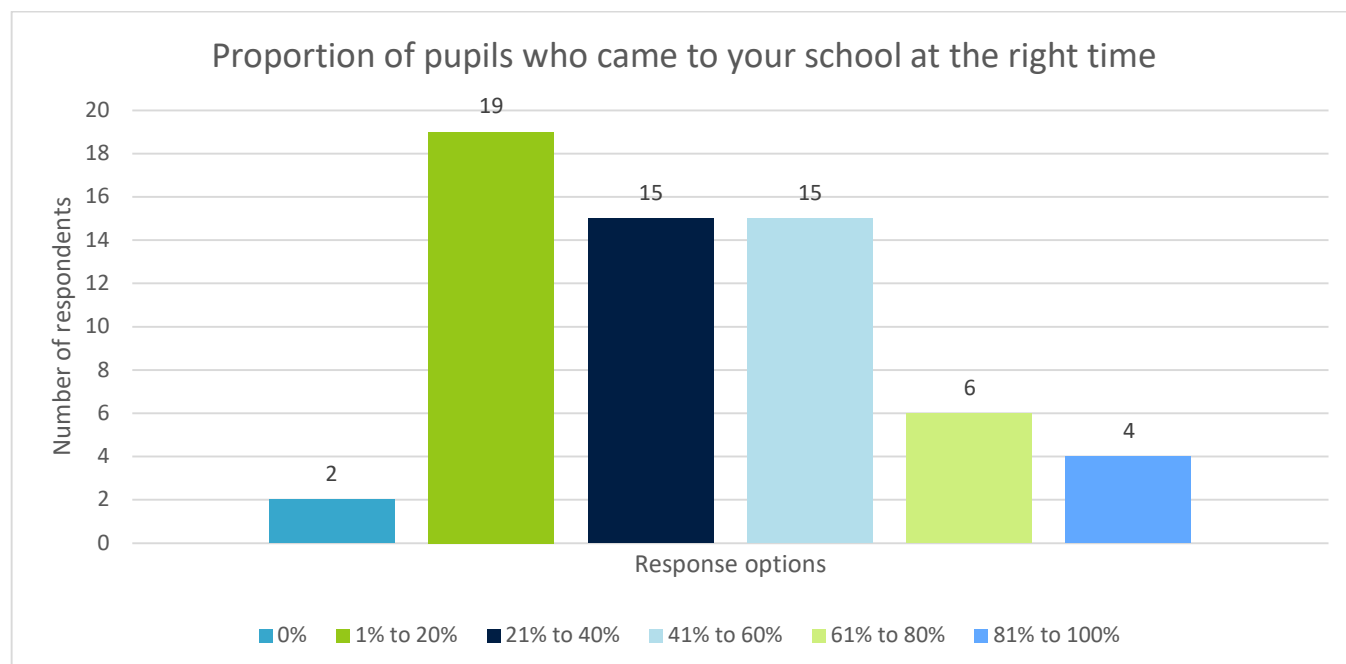


Figure 34: Survey respondents' views on what proportion of your pupils come to your school at the right time for them?

In workshops, we heard the implications of pupils not coming to them at the right time. These included:

- Time spent out of education slowing their learning and skills development
- Further delays in cognitive development
- More pronounced needs, particularly around therapeutic needs
- Trauma

The implication of all of these outcomes is to elevate support needs, and to prolong time in education. This has consequences for education, social care, and health care budgets.

Figure 35 may help explain why some pupils do not enter the right school for them at the right time. Out of the 59 schools answering the question on the number of respondents joining via tribunals, 5 said no pupils had joined them via tribunals, but the most common response was that between 1 and 20% of their pupils had joined after a tribunal, with 36 schools giving this response.

While 36 out of 57 respondents to this survey question said they had no learners joining them as an emergency placement, 15 said that up to 20% of their pupils came in via that route, and 3 said that between 21% and 40% of their pupils came to them via that route.

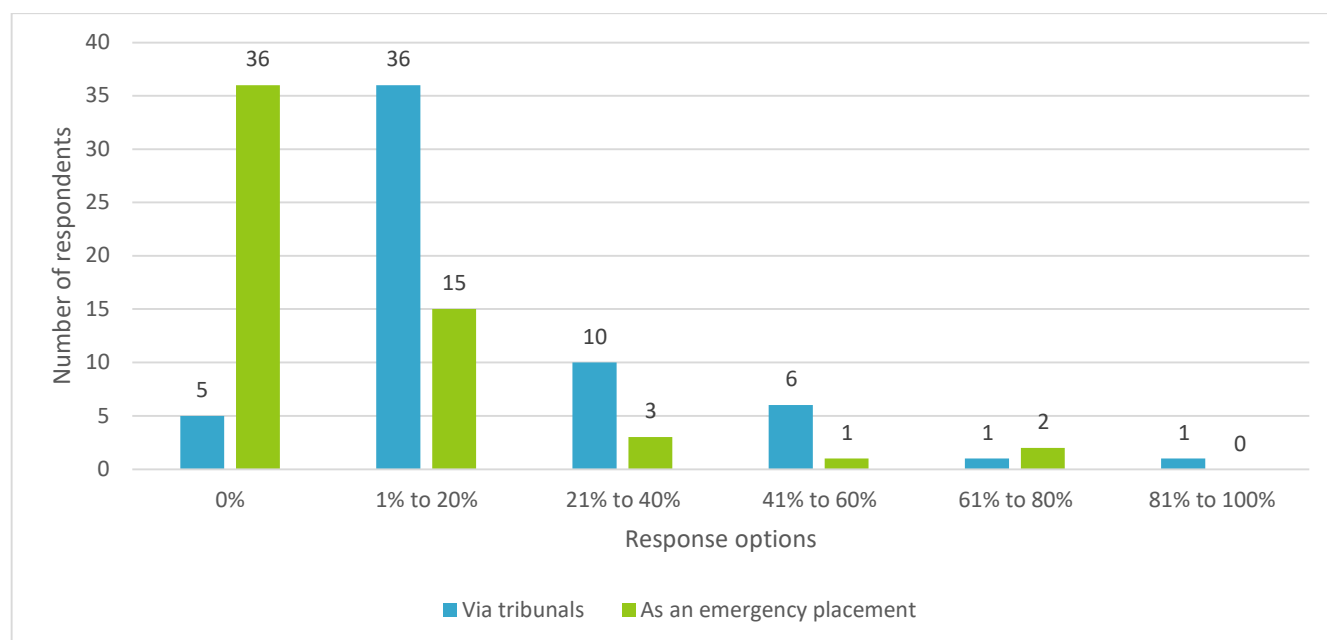


Figure 35: What proportion of your pupils join your schools via tribunals or as an emergency placement?

Step down

The SEND Review indicated that the Government would build into the process of reviewing EHCPs a requirement to discuss and record whether ‘a step down to targeted support, and cessation of an EHCP, is more appropriate for meeting a child or young person’s needs’.⁶⁸ It has been perceived by some, however, as a tool to help reduce spending on provision for SEND. This research defines it more broadly as the concept of reducing support to learners as their needs lessen. This can be done within a given setting or may encompass the move to another setting (see Figure 36). Some special schools have step down to other settings as a stated objective.⁶⁹

⁶⁸ SEND Review: Right support, right place, right time (2022), Government consultation on the SEND and alternative provision system in England [SEND Review - right support, right place, right time \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

⁶⁹ One example is the [Mulberry Bush School](#) which seeks to return their learners to a stable family home base and to return to an appropriate school setting.

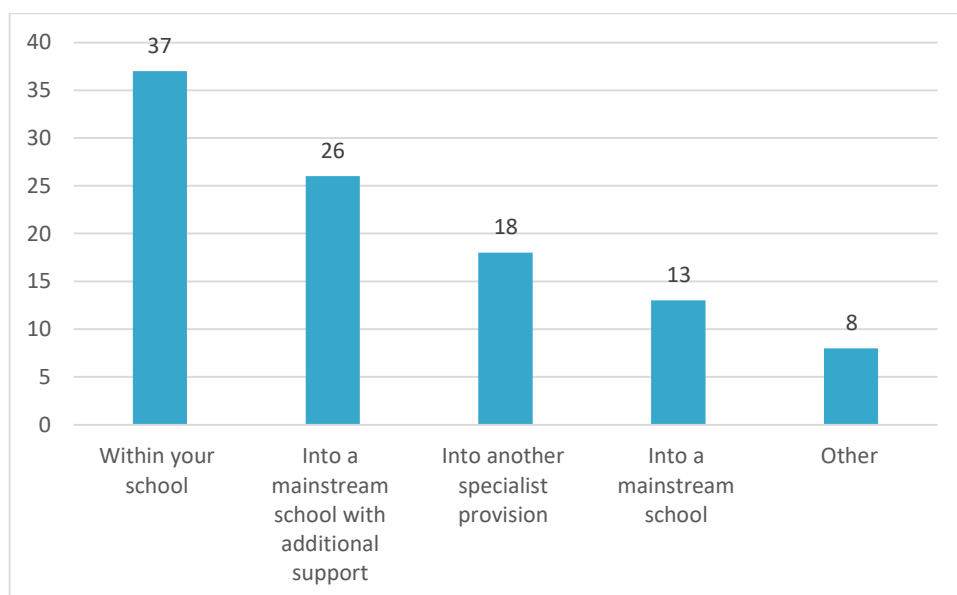


Figure 36: Schools' responses to the question: Where can the 'step-down' take place for those learners where it is possible? Please select all options that can apply.

Findings from our survey of NASS school indicates that some degree of 'step down' may be possible for a reasonably large number of pupils with SEND in their schools (see Figure 37).



Figure 37: For what share of your learners is a 'step-down' possible?

This was coupled with the finding that of the schools surveys, a relatively low share of pupils who could step down, actually go on to do so – 21 survey respondents said that only 1-10% of their learners tended to be stepped down (see Figure 38).

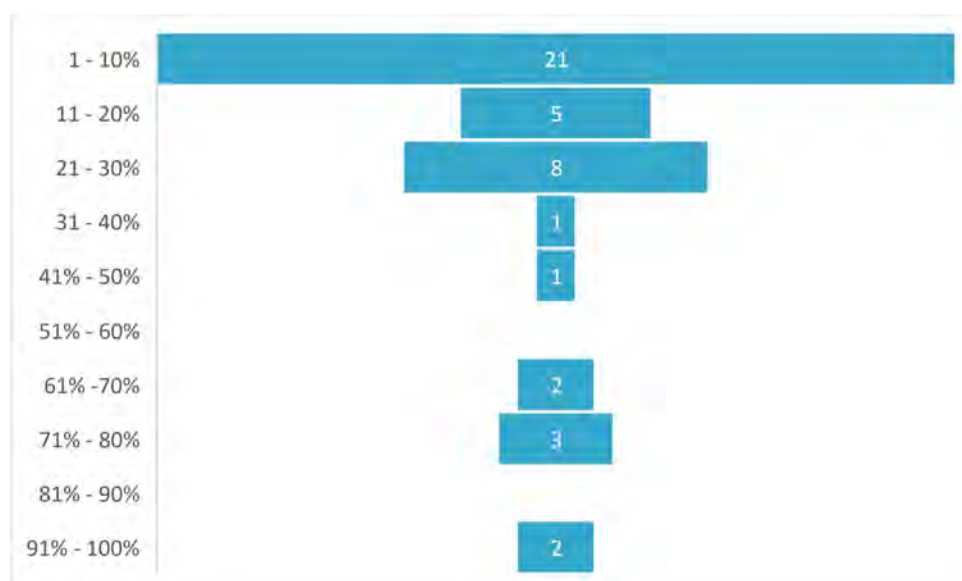


Figure 38: Number of survey respondents indicating the share of learners who can step down and actually do so

Further investigation is required to understand what barriers stand in the way of step down of provision. However, this research identified the following potential factors:

- The resource intensity required to decide on step down – for this decision to be taken it must take account of the views of services meeting the needs of learners and experts. When resources are limited in public bodies, facilitating this process may be a challenge
- Step down to external provision may not be preferable where a learner is thriving in their current setting. For example, moving to another setting may not be the best course of action where children have made friends and have a supportive network in a given school
- Where step down happens too quickly or in the wrong direction, the impact on the child may be deleterious and may undermine the prior progress made
- Special schools may not have developed good enough relationship with other schools – potential step down settings – to facilitate this process
- We heard an example of a commissioner not allowing for step down of support for a learner within the same setting on a term-by-term basis

Is there enough capacity in special schools to meet demand?

In Section 2 of this report we explored the growth in EHC plans and the increasing number of learners in special schools. With the prevalence or identification of SEND increasing, many of the schools involved in this research are at, or are at close, to capacity (see Figure 39). This is also seen in state-funded specialist schools.⁷⁰

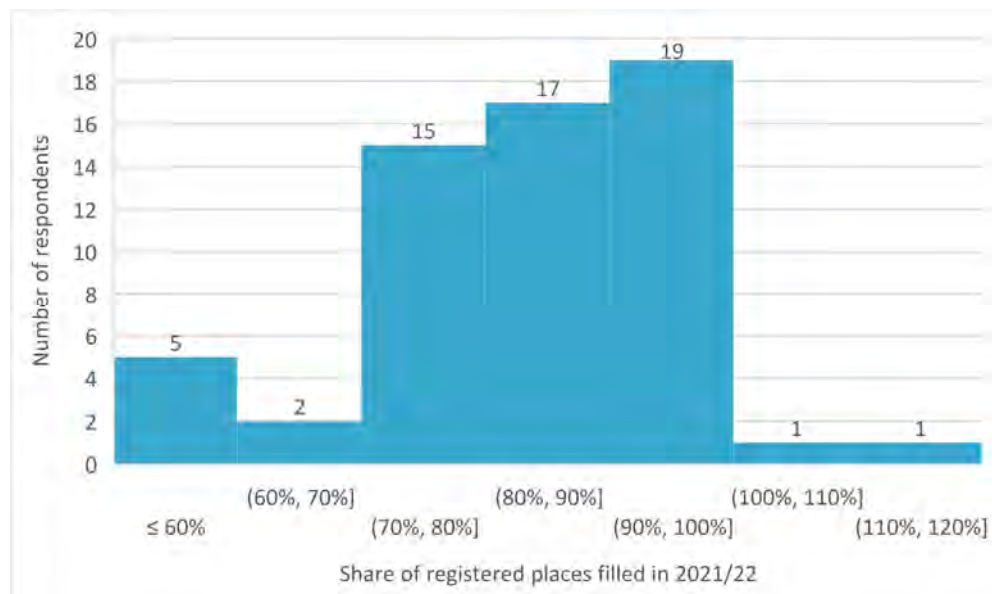


Figure 39: Survey participant share of places that were filled for the majority of the 2021/22 school year

In the past a number of NASS schools involved in this research have been able to expand – through a combination of increasing or expanding school sites, and recruitment of key staff – to meet demand. This is increasingly challenging now as schools face more immediate capacity constraints. Many schools are having difficulty recruiting and retaining qualified staff, e.g. carers and teaching assistants. This is something we heard from all of the schools we interviewed as part of this research, and was a key concern mentioned by schools taking part in our conference workshop in November 2022 (see Table 16). Ofsted also recognised this as an issue facing the wider sector in their annual review of Education, Children’s Services and Skills of 2021/22.⁷¹ These concerns reflect post-COVID 19 wider economic issues with fewer people seeking work after the pandemic.⁷²

⁷⁰ BBC News (20 February 2023), Overcrowded specialist schools: ‘We’re teaching in cupboards’, <https://www.bbc.co.uk/news/education-64418797>

⁷¹ Ofsted (December 2022), [The Annual Report of His Majesty’s Chief Inspector of Education, Children’s Services and Skills, 2021/22](#),

⁷² Bank of England (February 2023), [Monetary Policy Report – February 2023](#)

Table 16: Most common concerns facing schools mentioned by participants

Theme	Number of times mentioned (% of respondents)
Recruitment of staff	23/38 (61%)
Funding	22/38 (58%)
Retention of staff and staff burnout	19/38 (50%)
Central government's lack of knowledge and uncertain policy direction	13/38 (34%)
Rising costs (e.g. staffing, capital or energy costs)	13/38 (34%)

This capacity constraint may be a driver for a number of learners with SEND to be home educated. There may be a further group of learners whose needs are not being met, for whom there is little capacity in the sector to receive special educational provision. Estimates of the number of children and young people being home educated are between 50,000 and 80,000. In 2022 the number of children being home educated with special needs was 4,098.⁷³ What we cannot tell from the overall figures is the number of children and young people being home educated who would have warranted an EHC plan if they were not home educated; there is no duty on local authorities to assess every home educated child to see whether they have SEND.

The total number of children on EHC plans in 2022 was 473,300,⁷⁴ which has increased every year since 2010. The DfE's statistics for England for July 2019 showed 1,318,300 pupils (14.9%) with special needs, and 3.1% of all learners with EHCPs.⁷⁵ Taking this ratio, we might suppose that the total home educated children or young people with special needs is over four times those with EHCPs, so may be at least 14,600.

Partnership working

The Government's ambition is that services for young people are 'joined-up' – i.e. health, care and education services that meet a child or young person's needs work together to meet his or her needs. Ensuring that provision of services is joined-up is the responsibility of local authorities. Per the SEND code of practice:

Local authorities should ensure that local systems and processes for assessment and review of EHC plans and care and support plans are fully joined-up for young people who will have both. Every effort should be made to ensure that young people with both EHC plans and care and support plans do not have to attend multiple

⁷³ Long, R, and Danechi, S.. (2022). Home Education In England. Commons Library, <https://researchbriefings.files.parliament.uk/documents/SN05108/SN05108.pdf>

⁷⁴ Gov.uk, Education, health and care plans, Reporting year 2022, <https://explore-education-statistics.service.gov.uk/find-statistics/education-health-and-care-plans>

⁷⁵ DfE (July 2019), Special educational needs in England: January 2019, https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/814244/SEN_2019_Text.docx.pdf

reviews held by different services, provide duplicate information, or receive support that is not joined-up and co-ordinated.⁷⁶

There were some good examples of partnership work shared by participations in this research. These included:

- NHS services on the school site for schools who meet the needs of pupils with profound health needs
- Special schools working with colleges to help students' transition to further education
- Special schools providing training and support to local mainstream schools to support their SEND offer

However, some of our research found that that joined-up provision continues to be an ambition rather than a reality in most cases. Many special schools participating in this research saw their schools as taking pressure off other delivery system partners e.g. NHS CAMHS and social services. For instance, some schools indicated that they have had to bring in more therapy staff because CAMHS lacks capacity to meet the needs of their learners.

This is allowed for in the SEND code of practice; there does, however, seem to be inconsistency about how these other services are funded with some schools delivering health and/or care services from educational budgets only, and some delivering these services with funding from these specific budgets (see Figure 40).

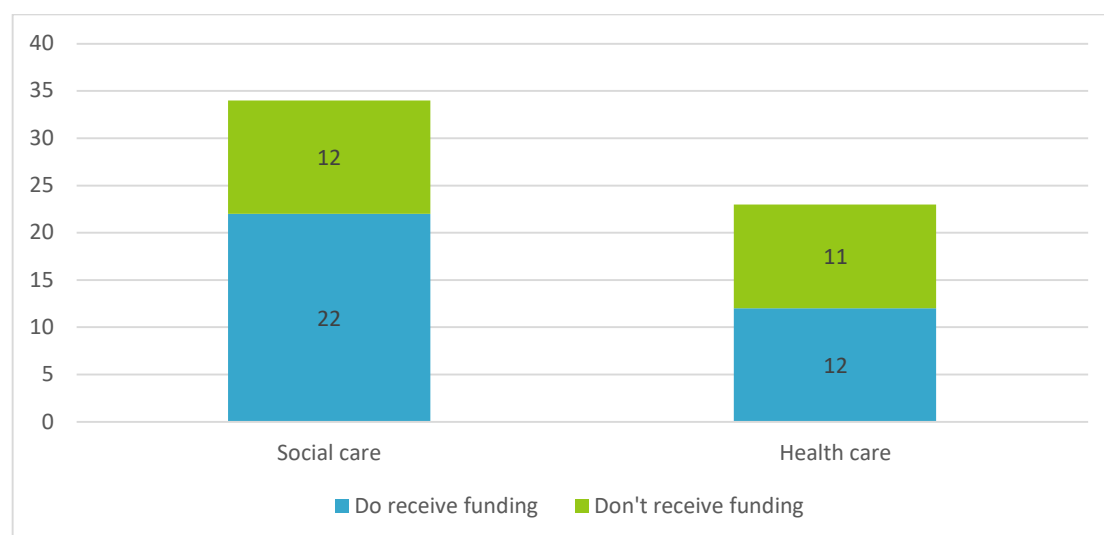


Figure 40: Do you provide social care and/or health care services on your school site(s)? Do you receive other types of funding?

A key institutional barrier to more joined-up provision of services identified in this research included inflexible funding arrangements for mental health services funded by local authorities. These are fractured across a few different budgets, and cannot be spent in other ICB areas.

⁷⁶ SEND Review: Right support, right place, right time (2022), Government consultation on the SEND and alternative provision system in England [SEND Review - right support, right place, right time \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

A key aspect of joined-up working mentioned by research participants is the ineffective transition of young people to adult services, with uncertainty around these transitions. Many identified that support for their learners upon leaving education is lacking, and could undermine the progress they had made with their learners. The Children and Families Act of 2014 had facilitated services to extend their provision to meet the needs of learners with SEND of up to 25 years of age. However, this may simply push the 'cliff edge' out to the age of 25 years when services for learners fall away, rather than solve the underlying issue of support lacking into adult life.

Mental health and family crisis

Provision that meets their needs and its impact on the mental wellbeing of learners and those around them has been a common theme in our research, whether or not a learner's primary needs are in SEMH. When learners are in provision that does not meet their needs, their mental health is compromised, and they often experience anxiety. This may be driven by experiences in unsuitable provision leading to trauma, or continued inability to engage productively with learning or with classmates. These could also have consequent impacts on these children's parents or carers and siblings.

Around 2 in 5 NASS conference workshop participants said that a learner being happy or in good mental health would be considered a successful outcome for students in their school. In the survey of NASS schools, they were asked what difference it would make to their chosen archetypes if their needs were met. Their responses indicated that it would make an appreciable difference to their mental health (see Figure 41).

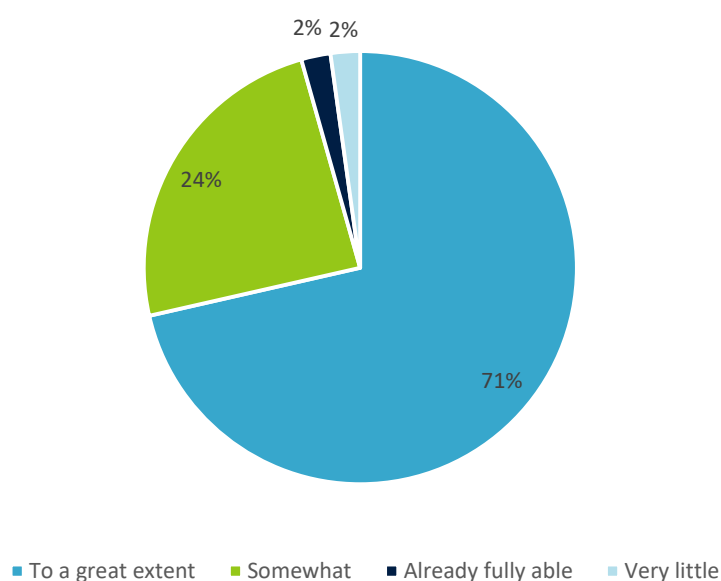


Figure 41: To what extent will the archetype be able to live in better mental health if his or her needs are met?

Just under half of the NASS conference workshop participants said that there was greater risk of family breakdown if a learners' needs were not met. For many of the research participants, if learners' needs are not met in their education placement, in many instances they would become a school refuser, or receive a more informal home education, putting pressure on families.

Child's needs being unmet can lead to deterioration in mental health and behaviour, which often impacts on other family members and home life... Increased safeguarding risk to all members due to financial pressures, mental health and risk of family crises/breakdown

*Quote from a respondent
to the NASS schools survey*

The SEND code of practice encourages the needs of families to be taken into consideration; however, per the prompts in the code of practice the EHC plan itself centres solely around the educational, care and health outcomes of the child. Consistency around this would be beneficial not only in terms of clarifying the criteria for determining provision, but also to ensure family needs are taken into account systematically when determining what provision meets a learner's needs. This may go some way in counteracting the impact of the SENDIST appeals process which may disadvantage parents with fewer resources at their disposal, or who lack the ability to navigate the tribunal system.⁷⁷

⁷⁷ Joseph Rowntree Foundation (2016), Special educational needs and their links to poverty, <https://www.jrf.org.uk/file/48923/download?token=3DkPP-d0&filetype=full-report>

Appendix 4: Approach to modelling life journeys

Model overview

This section sets out data and key assumptions used to develop the archetypes life journey modelling, the results of which are presented in Section 5 of this report. The key feature of this model is that it compares the societal costs and benefits of the archetypes if they have their needs met in the factual scenario with the societal costs and benefits if they are in a setting in which their needs are not fully met – in the counterfactual. The difference in these two scenarios captures the net value to society of learners with SEND having their needs met.

The model is based on the following sequential steps:

1. Estimates the costs of special educational provision in factual and counterfactual life courses during the school years for each learner
2. Values a range of outcomes in the counterfactual and factual life courses for each learner, with a range of outcomes (low, medium and high) explored in the learners' factual life journeys
3. Brings together the incremental costs of the special educational provision against the value of incremental benefits achieved when learners have their needs met

These steps are explored in further detail below:

1. Costs of special educational provision in factual and counterfactual

Different approaches were taken to estimate the costs of educational provision for the archetypes in the factual and counterfactual life courses. This was because we had different types of information about archetypes' provision in the factual and counterfactual.

Factual

For the archetypes in the factual we received data from the survey of NASS special schools on the contact time per week for each archetype with different types of staff. The average number of hours for different staff types for each archetype was used to inform the modelling, as was the number of years they spend in this provision (see Table 17). We use a RAG (red/amber/green) rating⁷⁸ in these tables to indicate the assumptions that we are confident in, and those that are subject to more uncertainty. Table 17 shows that we are confident in most assumptions based on our survey data as there was stability across responses.

Departures from these were made from survey data where necessary – for instance where we have revised the archetype based on survey responses indicating that residential care would meet their needs rather than day care (this was the case with Ade). These are highlighted as slightly less certain in Table 17. It is also worth noting that

⁷⁸ Green indicates an assumption that we have confidence in. Amber represents an assumption that may be challenged. Red represents an assumption where evidence supporting it is lacking.

the mental health therapists' time for Ade is relatively low. One survey respondent indicated that Ade receives his mental health support from CAMHS; this makes sense because his trauma and mental health needs are pronounced and therefore he receives support primarily from the NHS to meet his needs in this area.

Table 17: Number of hours of contact time per staff member each week in the factual costings

Archetype	Length of time in provision (years)	Day or residential (res)	Teaching staff	Learning support assistants	Speech and language therapy	Mental health therapists	Physiotherapists	Occupational health therapists	Care staff	Behaviour expert	Office staff	School nurse	Play therapist
Tim	5	Day	27	26	2	2	0	2	5	1	10	0	0
Ade (phase 1)	3	Day	24	26	3	0	0	2	5	4	0	0	0
Ade (phase 2)	5	Day	24	26	3	0	0	2	5	0	0	0	0
Sarah	9	Res	28	24	3	6	0	1	24	0	0	1	0
Olivia (phase 1)	10	Day	30	31	2	0	1	1	5	0	0	0	0
Olivia (phase 2)	11	Res	30	31	2	0	1	1	50	0	0	0	0
Charlie	5	Res	27	29	8	1	0	3	30	0	0	0	0

These hours were then multiplied by the cost of staff time proxied by a national salary average based on information on the GOV.UK website (see Table 18), and uplifted by 30% to account for true social cost of staff time, covering the additional costs of staff time, like national insurance contributions and pension payments per HM Treasury Green Book conventions.⁷⁹ The sources in Table 18 are RAG rated green as they are based on National Statistics and are therefore likely to be robust and representative of true salaries across England.⁸⁰

Table 18: Staff role and hourly wage assumed in model

Role	Annual salary (£)	Est. hourly salary (£)	Source
Teaching staff	39,386	22.69	https://nationalcareers.service.gov.uk/job-profiles/special-educational-needs-sen-teacher

⁷⁹ Financial Conduct Authority (2018), How we analyse the costs and benefits of our policies, <https://www.fca.org.uk/publication/corporate/how-analyse-costs-benefits-policies.pdf>

⁸⁰ <https://nationalcareers.service.gov.uk/help/salary-information>

Role	Annual salary (£)	Est. hourly salary (£)	Source
Learning support assistants	18,500	10.66	https://nationalcareers.service.gov.uk/job-profiles/special-educational-needs-sen-teaching-assistant
Speech and language therapy	39,437	22.72	https://nationalcareers.service.gov.uk/job-profiles/speech-and-language-therapist
Mental health therapists	46,637	26.86	https://nationalcareers.service.gov.uk/job-profiles/psychotherapist
Physiotherapists	35,746	20.59	https://nationalcareers.service.gov.uk/job-profiles/physiotherapist
Occupational health therapists	37,364	21.52	https://nationalcareers.service.gov.uk/job-profiles/occupational-therapist
Care staff	19,500	11.23	https://nationalcareers.service.gov.uk/job-profiles/care-worker
Behaviour expert	40,689	23.44	https://nationalcareers.service.gov.uk/job-profiles/cognitive-behavioural-therapist
Office staff	18,000	10.37	https://nationalcareers.service.gov.uk/job-profiles/school-secretary
School nurse	36,832	21.22	https://nationalcareers.service.gov.uk/job-profiles/school-nurse
Play therapist	34,500	19.87	https://nationalcareers.service.gov.uk/job-profiles/play-therapist

As a further check on these results, we compared our time-based estimates with answers to a question in our survey of special schools asking respondents to estimate the price of provision to the nearest £1,000 for each archetype they recognised. We found that our time-based estimates were generally in the middle of the range of survey responses on the estimated price of provision, and are therefore likely to be appropriate.

In addition to the hourly cost of staff time delivered within special schools, we added in external support where we had heard in our research that these were part of their EHC plans. For example, for Ade we have built in the costs to the local authority of respite care⁸¹ during phase 1 of his provision, and we have built in the annual cost of CAMHS which provides his mental health support for both phases of his factual provision.⁸² It is worth noting though that, given that we have primarily undertaken research with special schools, there may be aspects of each archetype's EHC plan delivered by other services that are not accounted for in our estimates of the cost of provision.

⁸¹ At the assumed cost of £5,249 per year to the local authority per NICE guidelines for a low intensity respite care package: see Table 1 in Service models guidance: individuals with intellectual disabilities and behaviour that challenges Economic Appendix C3, found at <https://www.nice.org.uk/guidance/ng93/documents/guideline-appendix-4>

⁸² At the assumed cost of £7,150 per year to capture the cost of psychology delivered outside of school, per the Clifford, J. and Theobald, C., (2012), Summary of findings: Extension of the 2011 cost comparison methodology to a wider sample, National Association of Independent Schools and Non-Maintained Special Schools.

Counterfactual

For the counterfactual we only had more general information from workshop participants and the survey about where the archetypes would be most likely to receive special educational provision if not in the most appropriate setting. To estimate the price of this provision in the counterfactual we used information about these likely counterfactual settings and support (see Table 19), as well as publicly available evidence on the cost of those settings (see Table 20). Many of the costs in Table 20 are rated amber as some of the sources are around a decade old, and may not accurately cover the true price of provision as the provision can be very learner-specific based on individual EHC plans.

Table 19: Counterfactual support package

Archetype	Education setting	Care support	Health support
Tim	Supported mainstream for 2 years	N/A	<ul style="list-style-type: none"> CAMHS support
Ade	Residential special school for 7 years	<ul style="list-style-type: none"> This is part of his residential special school support package 	<ul style="list-style-type: none"> CAMHS support
Sarah	Residential special school for 7 years	<ul style="list-style-type: none"> This is part of her residential special school support package 	<ul style="list-style-type: none"> CAMHS support
Olivia	Day special school for 15 years	<ul style="list-style-type: none"> One off cost of equipment installed in her family home Daily care package to help prepare for school Taxi services to transport her to school daily Physiotherapy, occupational therapy, speech therapy 	<ul style="list-style-type: none"> Hospital visits
Charlie	Day special school for 5 years	<ul style="list-style-type: none"> Respite stays to support her family 	<ul style="list-style-type: none"> CAMHS support

Many of these are rated amber as some of the sources are around a decade old, and the costs of support and provision can be very learner-specific based on their individual EHC plans.

Table 20: Assumed prices of counterfactual settings and support

Setting/support	Assumed cost (£)	Type of cost	Source
Supported mainstream	£26,636	Per annum	Clifford, J. and Theobald, C., (2012), Summary of findings: Extension of the 2011 cost comparison methodology to a wider sample, National Association of Independent Schools and Non-Maintained Special Schools – adjusted for inflation
Residential special school (52 weeks)	£ 167,268	Per annum	Clifford, J. and Theobald, C., (2012), Summary of findings: Extension of the 2011 cost comparison methodology to a wider sample, National Association of Independent Schools and Non-Maintained Special Schools – adjusted for inflation
Residential special school (term time only)	£120,901	Per annum	Clifford, J. and Theobald, C., (2012), Summary of findings: Extension of the 2011 cost comparison methodology to a wider sample, National Association of Independent Schools and Non-Maintained Special Schools – adjusted for inflation
Day special school	£40,000	Per annum	Local Government Association (2020), Briefing: Special Educational Needs and Disability Funding – House of Commons – the cost of independent provision adjusted for inflation ⁸³
Cost of equipment being installed	£16,647	One off	https://www.pssru.ac.uk/blog/the-hidden-costs-of-adapting-the-homes-of-older-and-disabled-people/
CAMHS support	£7,150	Per year	Cost of psychology delivered outside school per Clifford, J. and Theobald, C., (2012), Summary of findings: Extension of the 2011 cost comparison methodology to a wider sample, National Association of Independent Schools and Non-Maintained Special Schools – adjusted for inflation
Respite stays	£5,249	Per week	Low intensity support package per NICE NG 93, Service models guidance: individuals with intellectual disabilities and behaviour that challenges, Economic Appendix C3, https://www.nice.org.uk/guidance/ng93/documents/guideline-appendix-4

⁸³ Local Government Association (2020), Briefing: Special Educational Needs and Disability Funding – House of Commons, <https://www.local.gov.uk/sites/default/files/documents/29012020%20LGA%20briefing%20-%20SEN%20support-WEB.pdf>

Net cost of the support package

Table 21 shows the net difference in the price paid for provision in the factual and counterfactual scenarios based on the assumptions explored above.⁸⁴ Where an archetype is in the same type of provision in the factual and counterfactual, we treat these prices as equivalent – this is a simplifying assumption and may be cautious given that the alternative provision could be more inexpensive.

Table 21: Difference in the price paid for provision between factual and counterfactual

Archetype	Price of support up to the age of 25 years (£)		
	Factual	Counterfactual	Difference
Tim	-£250,000	-£80,000	-£170,000
Ade	-£679,000	-£982,000	£303,000
Sarah	-£745,000	-£599,000	-£146,000
Olivia	-£1,512,000	-£1,004,000	-£508,000
Charlie	-£466,000	-£270,000	-£196,000
Average	-£730,000	-£587,000	-£143,000

2. Value of outcomes

To value the difference that learners having their needs met makes, we use a cost-based and economic approach which values outcomes like the costs incurred or avoided by stakeholders and productivity gains through employment or volunteering in each of the factual and counterfactual story lines. These follow the stories and impacts outlined in Section 4.

The outcomes assumed in the modelling and their assumed values are set out in Table 22, and are arranged by cost theme. These have been rated amber where data are from older sources, and where there may be variability in reality in the scale of the cost due to need – for example, mental health treatment may vary from one individual to the next but we have proxied its cost with typical costs for a course of cognitive behavioural therapy (CBT).

Table 22: Unit value of outcomes assumed in modelling (separately inflation adjusted and expressed in 2021 values)⁸⁵

Cost theme	Outcome	Unit value	Source
Education outcomes	Persistent non-attendance	£706	Misspent Youth, 2007, Education costs of truancy only 2005 values from source, https://www.thinknpc.org/resource-hub/misspent-youth/

⁸⁴ We use the terms cost and price of provision interchangeably in this report. We recognise that in reality cost of provision and price of provision may differ depending on the level of profit made by providers. Exploring this is beyond the scope of this project.

⁸⁵ Adjusted for inflation using [HM Treasury GDP deflator](#) from 31 March 2023

Cost theme	Outcome	Unit value	Source
Economic outcomes	Productivity benefit per person p.a.	£30,443	ONS estimate of GVA per capita in 2021 used to proxy parents' productivity
	Baseline productivity per person p.a.	£21,736	Assumed baseline productivity in the model for learners with SEND based on full time employment at the national minimum wage
	NEET per lifetime	£137,244	Drawn from academic and government sources and includes JSA and productivity costs during the ages of 18-21 years
Physical health	GP appointments (excluding direct care)	£32	PSSRU and CHE (2022) , Unit Costs of Health and Social Care 2022
	A&E visits	£359	Kings Fund , 2022
Mental health	Cost of a series of CBT for an adult	£2,000	Based on NICE guidance for social anxiety disorders
	Cost of counselling for a child with mental or emotional difficulties	£1,217	PSSRU and CHE (2021), Unit Costs of Health and Social Care
Social care	Equipment installed in homes	£16,647	PSSRU blogs (2018), The hidden costs of adapting the homes of older and disabled people, https://www.pssru.ac.uk/blog/the-hidden-costs-of-adapting-the-homes-of-older-and-disabled-people/
	Supported living	£1,569 per week	Mencap (2018), Funding supported housing for all
	Residential care (adult)	£1,760 per week	Mencap (2018), Funding supported housing for all
	Mobility services	£5,400	Isos partnership (2019), Understanding the drivers for rising demand and associated costs for home-to-school transport
Criminal justice	Cost of arrest - detained	£826	Manchester Unit Cost Database v.2.3.1
	Cost of arrest – no further action	£397	Manchester Unit Cost Database v.2.3.1
	Prison place p.a.	£48,409	Ministry of Justice Information Release , 2022
	Court appearance (robbery under 18)	£6,321	Manchester Unit Cost Database v.2.3.1
	Robbery (over 18)	£4,680	Home Office (2018), The economic and social costs of crime Second edition Research Report 99
	Violence with injury	£2,500	Home Office (2018), The economic and social costs of crime Second edition Research Report 99
	First time entrant to criminal justice system (young offender)	£3,152	Ministry of Justice (2011), The cost of a cohort of young offenders to the criminal justice system Technical Paper,

Cost theme	Outcome	Unit value	Source
			https://www.nao.org.uk/wp-content/uploads/2010/12/1011663_technical_paper.pdf
	Later year cost of young offender to criminal justice system	£10,738	Ministry of Justice (2011), The cost of a cohort of young offenders to the criminal justice system Technical Paper, https://www.nao.org.uk/wp-content/uploads/2010/12/1011663_technical_paper.pdf

Low, medium, and high outcomes

The model has three different outcome scenarios for each archetype in the factual life course when needs are met: low, medium, and high. These scenarios capture the idea that learners with SEND will not always realise their full potential. In our research we heard that learners may not always be able to achieve their full potential because of factors like:

- Being placed in provision that meets their needs at a relatively late point in their school aged lives
- Other public services not providing the support learners need during their education, for example CAMHS services
- Insufficient support from other public services for people with SEND as they transition into adult life
- Lacking a supportive family

The weights on the outcomes for each archetype assumed in this modelling, and justification for these assumptions, are set out in Table 23.

Table 23: Weights placed on low, medium and high outcome scenarios for each archetype

Archetype	Outcome weights			Justification
	Low	Medium	High	
Tim	40%	40%	20%	Tim joins provision that meets his needs after a tribunal at age 14, which is relatively late for his educational journey. As such we place a greater weight on low and medium outcomes for Tim.
Ade	30%	40%	30%	Ade joins specialist provision at age 11 after a number of failed placements. He is in a special school for long enough to have his needs met properly. The outcome weights for Ade are equally balanced across the three scenarios.
Sarah	30%	30%	40%	Sarah joins specialist provision at a relatively young age of 9, but was placed swiftly avoiding time out of school. Her outcomes are therefore weighed towards 'high' outcomes.

Archetype	Outcome weights			Justification
	Low	Medium	High	
Olivia	20%	30%	50%	Olivia's outcomes are weighted towards 'high' because she joined a provision that meets her needs at a very young age.
Charlie	30%	40%	30%	Charlie joins specialist provision at age 13 following a tribunal. Her needs became more pronounced upon joining specialist provision as they were not fully met during the period of the tribunal. Her outcomes are balanced.

Assumed outcomes

The model is informed by assumptions on how often certain outcomes occur in the archetypes' lives in the factual (low, medium and high scenarios) and counterfactual life courses. These are summarised for each archetype in the following tables:

- Table 24 - Tim
- Table 25 – Ade
- Table 26 – Sarah
- Table 27 – Olivia
- Table 28 - Charlie

These tables show how many times each outcome occurs in the lives of each archetype in the factual (in low, medium, and high scenarios) and counterfactual life courses when they are a child and young person (up to age 17 years) and in adulthood (ages 18 – 35 years). We model outcomes up to the age of 35 years for all the archetypes, assuming tail off in the strength of outcomes.⁸⁶ Where archetypes would have the same support later in life in factual and counterfactual life stories, these have not been built into the analysis as they would not drive any value differences in the alternative life stories, for example mobility services for Charlie.

⁸⁶ We only extend the modelling to 35 years of age for costs of provision and benefits to ensure the modelling is appropriately cautious.

Table 24: Tim - key life course assumptions

	Counterfactual		Factual					
			Low		Medium		High	
Tim	Childhood	Adulthood	Childhood	Adulthood	Childhood	Adulthood	Childhood	Adulthood
Education outcomes								
Persistent truancy	3	0	1	0	0	0	0	0
Economic outcomes								
NEET	0	1	0	0	0	0	0	0
Baseline productivity	0	0	0	0	0	16	0	16
Parental productivity	0	0	2	2	3	2	4	2
Volunteering	0	0	0	16	0	0	0	0
Health - physical								
A&E visits - pupil	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - pupil	3	4	2	0	2	0	1	0
A&E visits - sibling	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - sibling	0	0	0	0	0	0	0	0
A&E visits - parent	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - parent	0	0	0	0	0	0	0	0
A&E visits - teacher	2	0	1	0	0	0	0	0
A&E visits - other pupils	0	0	0	0	0	0	0	0
Community physiotherapy	0	0	0	0	0	0	0	0
Community occupational therapy	0	0	0	0	0	0	0	0
Community speech therapy service	0	0	0	0	0	0	0	0
Self-harm	1	0	0	0	0	0	0	0
Non-elective inpatient stays	0	0	0	0	0	0	0	0
Health - mental								
Mental health learner	4	1	2	0	1	0	0	0
Mental health learner when adult	0	4	0	2	0	1	0	0
Mental health sibling	4	0	2	0	1	0	0	0
Mental health parent	3	0	2	0	1	0	0	0
Mental health other pupils	1	0	0	0	0	0	0	0
Secure mental health services	0	3	0	0	0	0	0	0
Social care								
Equipment installed in homes	0	0	0	0	0	0	0	0
Supported Living	1	17	0	16	0	0	0	0
Residential care (adult)	0	0	0	0	0	0	0	0
Mobility services	0	0	0	0	0	0	0	0
Daily care package	0	0	0	0	0	0	0	0
Criminal justice system								
Cost of arrest - detained	1	1	1	0	0	0	0	0
Cost of arrest - no further action	1	3	1	1	1	0	0	0
Prison	0	1	0	0	0	0	0	0
Court appearance (robbery under 18)	0	0	0	0	0	0	0	0
Robbery (over 18)	0	0	0	0	0	0	0	0
Violence with injury	0	1	0	0	0	0	0	0
First time entrant to criminal justice system (young offender)	0	0	0	0	0	0	0	0
Later year cost of young offender to criminal justice system	0	0	0	0	0	0	0	

Table 25: Ade - key life course assumptions

Ade	Number of occurrences							
	Counterfactual		Factual					
			Low		Medium		High	
	Childhood	Adulthood	Childhood	Adulthood	Childhood	Adulthood	Childhood	Adulthood
Education outcomes								
Persistent truancy	3	0	2	0	0	0	0	0
Economic outcomes								
NEET	0	1	0	1	0	0	0	0
Baseline productivity	0	0	0	0	0	0	0	0
Parental productivity	0	0	0	0	0	0	0	0
Volunteering	0	0	0	0	0	10	0	16
Health - physical								
A&E visits - pupil	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - pupil	0	0	0	0	0	0	0	0
A&E visits - sibling	5	0	3	0	1	0	0	0
GP visit (excl. direct care) - sibling	0	0	0	0	0	0	0	0
A&E visits - parent	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - parent	0	0	0	0	0	0	0	0
A&E visits - teacher	1	0	0	0	0	0	0	0
A&E visits - other pupils	0	0	0	0	0	0	0	0
Community physiotherapy	0	0	0	0	0	0	0	0
Community occupational therapy	0	0	0	0	0	0	0	0
Community speech therapy service	0	0	0	0	0	0	0	0
Self-harm	3	3	2	2	1	1	1	0
Non-elective inpatient stays	0	0	0	0	0	0	0	0
Health - mental								
Mental health learner	0	0	7	2	7	2	7	2
Mental health learner when adult	0	4	1	2	0	2	0	1
Mental health sibling	5	0	2	0	1	0	0	0
Mental health parent	2	1	0	0	0	0	0	0
Mental health other pupils	1	0	0	0	0	0	0	0
Secure mental health services	0	6	0	2	0	1	0	0
Social care								
Equipment installed in homes	0	0	0	0	0	0	0	0
Supported Living	0	0	0	16	0	16	0	16
Residential care (adult)	0	17	0	0	0	0	0	0
Mobility services	0	0	0	0	0	0	0	0
Daily care package	0	0	0	0	0	0	0	0
Criminal justice system								
Cost of arrest - detained	1	1	1	0	0	0	0	0
Cost of arrest - no further action	0	0	0	0	0	0	0	0
Prison	0	0	0	0	0	0	0	0
Court appearance (robbery under 18)	0	0	0	0	0	0	0	0
Robbery (over 18)	0	0	0	0	0	0	0	0
Violence with injury	0	0	0	0	0	0	0	0
First time entrant to criminal justice system (young offender)	0	0	0	0	0	0	0	0
Later year cost of young offender to criminal justice system	0	0	0	0	0	0	0	0

Table 26: Sarah - key life course assumptions

Sarah	Number of occurrences							
	Counterfactual		Factual					
			Low		Medium		High	
	Childhood	Adulthood	Childhood	Adulthood	Childhood	Adulthood	Childhood	Adulthood
Education outcomes								
Persistent truancy	7	0	3	0	2	0	1	0
Economic outcomes								
NEET	0	1	0	0	0	0	0	0
Baseline productivity	0	0	0	18	0	18	0	18
Parental productivity	0	0	0	0	0	0	0	0
Volunteering	0	0	0	0	0	0	0	0
Health - physical								
A&E visits - pupil	2	0	1	0	0	0	0	0
GP visit (excl. direct care) - pupil	0	0	0	0	0	0	0	0
A&E visits - sibling	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - sibling	0	0	0	0	0	0	0	0
A&E visits - parent	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - parent	0	0	0	0	0	0	0	0
A&E visits - teacher	0	0	0	0	0	0	0	0
A&E visits - other pupils	0	0	0	0	0	0	0	0
Community physiotherapy	0	0	0	0	0	0	0	0
Community occupational therapy	0	0	0	0	0	0	0	0
Community speech therapy service	0	0	0	0	0	0	0	0
Self-harm	3	2	2	1	1	0	1	0
Non-elective inpatient stays	3	0	0	0	0	0	0	0
Health - mental								
Mental health learner	3	0	3	0	2	0	1	0
Mental health learner when adult	0	7	0	3	0	2	0	1
Mental health sibling	0	0	0	2	0	1	0	0
Mental health parent	0	0	0	0	0	0	0	0
Mental health other pupils	5	0	2	0	0	0	0	0
Secure mental health services	0	2	0	0	0	0	0	0
Social care								
Equipment installed in homes	0	0	0	0	0	0	0	0
Supported Living	0	0	0	17	0	17	0	17
Residential care (adult)	0	18	0	0	0	0	0	0
Mobility services	0	0	0	0	0	0	0	0
Daily care package	0	0	0	0	0	0	0	0
Criminal justice system								
Cost of arrest - detained	0	0	2	1	0	0	0	0
Cost of arrest - no further action	2	0	1	0	0	0	0	0
Prison	0	0	0	0	0	0	0	0
Court appearance (robbery under 18)	1	0	0	0	0	0	0	0
Robbery (over 18)	0	4	0	0	0	0	0	0
Violence with injury	0	0	0	0	0	0	0	0
First time entrant to criminal justice system (young offender)	2	0	0	0	0	0	0	0
Later year cost of young offender to criminal justice system	0	0	0	0	0	0	0	0

Table 27: Olivia - key life course assumptions

	Number of occurrences							
	Counterfactual		Factual					
			Low		Medium		High	
Olivia	Childhood	Adulthood	Childhood	Adulthood	Childhood	Adulthood	Childhood	Adulthood
Education outcomes								
Persistent truancy	6	0	0	0	0	0	0	0
Economic outcomes								
NEET	0	0	0	0	0	0	0	0
Baseline productivity	0	0	0	0	0	0	0	0
Parental productivity	0	0	5	8	5	8	15	8
Volunteering	0	0	0	0	0	0	0	0
Health - physical								
A&E visits - pupil	8	9	3	3	0	1	0	1
GP visit (excl. direct care) - pupil	0	0	0	0	0	0	0	0
A&E visits - sibling	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - sibling	0	0	0	0	0	0	0	0
A&E visits - parent	5	0	0	0	0	0	0	0
GP visit (excl. direct care) - parent	6	1	0	0	0	0	0	0
A&E visits - teacher	0	0	0	0	0	0	0	0
A&E visits - other pupils	0	0	0	0	0	0	0	0
Community physiotherapy	0	0	0	0	0	0	0	0
Community occupational therapy	0	0	0	0	0	0	0	0
Community speech therapy service	0	0	0	0	0	0	0	0
Self-harm	0	0	0	0	0	0	0	0
Non-elective inpatient stays	3	5	3	2	0	2	0	1
Health - mental								
Mental health learner	4	0	1	0	0	0	0	0
Mental health learner when adult	0	7	0	3	0	2	0	1
Mental health sibling	4	3	0	0	0	0	0	0
Mental health parent	7	3	0	3	0	1	0	0
Mental health other pupils	0	0	0	0	0	0	0	0
Secure mental health services	0	0	0	0	0	0	0	0
Social care								
Equipment installed in homes	0	0	1	0	1	0	1	0
Supported Living	0	0	0	0	0	0	0	10
Residential care (adult)	0	14	0	10	0	10	0	0
Mobility services	0	0	0	0	0	0	0	0
Daily care package	0	0	0	0	0	0	0	0
Criminal justice system								
Cost of arrest - detained	0	0	0	0	0	0	0	0
Cost of arrest - no further action	0	0	0	0	0	0	0	0
Prison	0	0	0	0	0	0	0	0
Court appearance (robbery under 18)	0	0	0	0	0	0	0	0
Robbery (over 18)	0	0	0	0	0	0	0	0
Violence with injury	0	0	0	0	0	0	0	0
First time entrant to criminal justice system (young offender)	0	0	0	0	0	0	0	0
Later year cost of young offender to criminal justice system	0	0	0	0	0	0	0	0

Table 28: Charlie - key life course assumptions

	Number of occurrences							
	Counterfactual		Factual					
			Low		Medium		High	
Charlie	Childhood	Adulthood	Childhood	Adulthood	Childhood	Adulthood	Childhood	Adulthood
Education outcomes								
Persistent truancy	0	1	0	0	0	0	0	0
Economic outcomes								
NEET	0	1	0	0	0	0	0	0
Baseline productivity	0	0	0	0	0	17	0	17
Parental productivity	0	0	0	0	5	1	5	1
Volunteering	0	0	0	17	0	0	0	0
Health - physical								
A&E visits - pupil	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - pupil	0	0	0	0	0	0	0	0
A&E visits - sibling	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - sibling	0	0	0	0	0	0	0	0
A&E visits - parent	0	0	0	0	0	0	0	0
GP visit (excl. direct care) - parent	0	0	0	0	0	0	0	0
A&E visits - teacher	0	0	0	0	0	0	0	0
A&E visits - other pupils	0	0	0	0	0	0	0	0
Community physiotherapy	0	0	0	0	0	0	0	0
Community occupational therapy	0	0	0	0	0	0	0	0
Community speech therapy service	0	0	0	0	0	0	0	0
Self-harm	0	0	0	0	0	0	0	0
Non-elective inpatient stays	0	0	0	0	0	0	0	0
Health - mental								
Mental health learner	1	0	1	0	0	0	0	0
Mental health learner when adult	0	8	0	5	0	2	0	1
Mental health sibling	3	0	4	0	0	0	0	0
Mental health parent	3	1	1	0	1	0	1	0
Mental health other pupils	0	0	0	0	0	0	0	0
Secure mental health services	0	0	0	0	0	0	0	0
Social care								
Equipment installed in homes	0	0	0	0	0	0	0	0
Supported Living	0	15	0	16	0	17	0	0
Residential care (adult)	0	0	0	0	0	0	0	0
Mobility services	0	0	0	0	0	0	0	0
Daily care package	0	0	0	0	0	0	0	16
Criminal justice system								
Cost of arrest - detained	0	0	0	0	0	0	0	0
Cost of arrest - no further action	0	0	0	0	0	0	0	0
Prison	0	0	0	0	0	0	0	0
Court appearance (robbery under 18)	0	0	0	0	0	0	0	0
Robbery (over 18)	0	0	0	0	0	0	0	0
Violence with injury	0	0	0	0	0	0	0	0
First time entrant to criminal justice system (young offender)	0	0	0	0	0	0	0	0
Later year cost of young offender to criminal justice system	0	0	0	0	0	0	0	0

Table 29 shows the results from the outcomes modelling by each archetype in the high, medium, and low outcomes.

Table 29: Value of outcomes per learner - adjusted for alternative attribution and deadweight

Archetype	Net outcomes gain per archetype		
	Low	Medium	High
Tim	£477,000	£1,174,000	£1,266,000
Ade	£127,000	£288,000	£325,000
Sarah	£323,000	£404,000	£434,000

Archetype	Net outcomes gain per archetype		
	Low	Medium	High
Olivia	£414,000	£428,000	£713,000
Charlie	£241,000	£327,000	£987,000
Average	£317,000	£524,000	£745,000

Table 30 shows the results once weights are applied on low, medium, and high outcomes to create one factual value of outcomes when needs are met. It shows the value gained to learners, their families and societies from provision that meets needs due to improved outcomes.

Table 30: Value of outcomes per learner - weighted outcomes and adjusted for alternative attribution and deadweight

Archetype	Net outcomes gained per archetype (weighted average)
Tim	£914,000
Ade	£251,000
Sarah	£392,000
Olivia	£568,000
Charlie	£499,000
Average	£525,000

Key drivers behind these results are as follows, with Table 31 providing the underlying outcomes broken down by cost theme:

- Outcomes for Tim's life story are relatively high in the medium and high scenarios compared to the outcomes for other learners – this is driven by the assumption that he is able to work in these scenarios if he develops skills, confidence, and knowledge at school. The low scenario value is relatively small as it captures the impact of Tim not working but volunteering and contributing to the community in this other way
- Outcomes values for Ade are the lowest of all the archetypes because he is not able to work later in life even if provision meets his needs, and likewise, his family struggles to find employment whether or not Ade's provision is suitable
- Economic outcomes for Charlie are the highest and are driven by the outcome that both she and her parents will be able to work for a number of years as a result of having provision that meets her needs
- Outcomes values for Ade are the lowest of all the archetypes because he is not able to work later in life even if provision meets his needs, and likewise, his family struggles to find employment whether or not Ade's provision is suitable

Table 31: Value of outcomes per learner presented by cost theme (£)

Cost theme	Tim	Ade	Sarah	Olivia	Charlie
Education outcomes	£2,000	£2,000	£4,000	£4,000	£1,000
Economic outcomes	£319,000	£116,000	£190,000	£333,000	£350,000
Health - physical	£1,000	£3,000	£14,000	£19,000	£0
Health - mental	£13,000	£4,000	£11,000	£25,000	£14,000
Social care	£550,000	£126,000	£153,000	£187,000	£135,000
Criminal justice system	£28,000	£1,000	£20,000	£0	£0
Total	£914,000	£251,000	£392,000	£568,000	£499,000

The outcomes calculated in this model take reasonable account of the key areas of deduction required in impact evaluations – they adjust for deadweight and alternative attribution. For a summary of these adjustments see Table 32.

Table 32: Key model adjustments to outcomes

Adjustment	Description	Key assumptions / source
Deadweight	Best practice ⁸⁷ requires any evaluation of outcomes to be adjusted to exclude ‘deadweight’ - the extent to which those outcomes could have arisen without the intervention.	We assume a relatively low (2.5%) deadweight loss for Ade and Olivia as their needs are relatively pronounced – with health and social care needs. As such, if their support needs are not fully met then it is very unlikely that they are able to fulfil their potential. For Tim, Sarah and Charlie we assumed a relatively high deadweight loss of 7.5%.
Alternative attribution	This accounts for positive outcomes that are reasonably attributable to a partner or third party.	We assume a relatively high (30%) alternative attribution for Ade given the importance of CAMHS in provision that meets his needs. For Tim and Charlie, it is set at a modest level (20% and 15% respectively) as they are in day provision but do not draw significantly on external services. For Olivia and Sarah it is set at a low 10% as they are in settings that meet most of their needs, and spend a large amount of time in residential provision.

3. Evaluation results – the value generated to society when learners’ needs are met

The final stage of the modelling is to take the difference between the value of improved outcomes and incremental costs of specialist provision in the factual and counterfactual scenarios. The resulting figures (see Table 33) show the value generated to society when learners in the archetypes that we have described have their needs met.

⁸⁷ Clifford, J., Hochenberger, L. and Fantini, M. (2014). Proposed Approaches to Social Impact Measurement in European Commission legislation and in practice relating to: EuSEFs and the EaSI

Table 33: Value generated to society when their needs are met - lifetime gain per learner (£)

	Net outcomes gained per archetype	Net incremental cost of provision	Difference – net value generated to society
Tim	£914,000	-£170,000	£744,000
Ade	£251,000	£303,000	£554,000
Sarah	£392,000	-£146,000	£246,000
Olivia	£568,000	-£508,000	£59,000
Charlie	£499,000	-£196,000	£303,000
Average	£525,000	-£143,000	£381,000

It is important to note that both future values of outcomes and costs in the model are discounted per HM Treasury guidelines for social cost/benefit analysis with brief details provided in Table 34. Impacts taking place in adult life are discounted appropriately; for example, employment benefits in the learners' life are discounted till at least their school leaving age.

Table 34: Key model adjustments to outcomes

Adjustment	Description	Key assumptions / source
Discounting cash flows	This analysis takes into account, where necessary, the premise that the value of money changes over time.	We adjust future cash flows by 3.5% per HM Treasury Green Book convention and methodology ⁸⁸

Sensitivity analysis

In this aspect of the modelling we explore alternative assumptions to determine what difference that makes to our results. This demonstrates how sensitive our results are to key assumptions.

Sensitivity analysis on different alternative attribution and deadweight assumptions

Table 35 shows the value generated to society when needs are met when alternative attribution and deadweight loss are assumed to be 20% and 5% respectively across all archetypes' profiles. This analysis shows that overall, with these alternative assumptions the average value to society across all profiles reduces by £14,000 (£381,000 in the central analysis versus £367,000 in the sensitivity analysis), with increases in value in Tim and Ade's life stories and a reduction in that of the other archetypes'. It does demonstrate how sensitive Olivia's profile is to an alternative assumption here, with costs of provision outweighing the value of improved outcomes when her needs are met.

⁸⁸ HM Treasury (2022), The Green Book: Central Government Guidance on Appraisal and Evaluation

Table 35: Sensitivity analysis on model adjustments - Value generated to society when their needs are met – lifetime gain per learner (£)

	Sensitivity analysis results (model adjustments)			Central analysis		
	Net outcomes gained per archetype	Net incremental cost of provision	Difference – net value generated to society	Net outcomes gained per archetype	Net incremental cost of provision	Difference – net value generated to society
Tim	£945,000	-£170,000	£775,000	£914,000	-£170,000	£744,000
Ade	£279,000	£303,000	£582,000	£251,000	£303,000	£554,000
Sarah	£356,000	-£146,000	£210,000	£392,000	-£146,000	£246,000
Olivia	£487,000	-£508,000	-£22,000	£568,000	-£508,000	£59,000
Charlie	£483,000	-£196,000	£287,000	£499,000	-£196,000	£303,000
Average	£510,000	-£143,000	£367,000	£525,000	-£143,000	£381,000

Sensitivity analysis on different outcome weight assumptions

Table 36 shows what difference is made to the results if we assume symmetric weights on outcomes for each archetype – i.e. 30% on low outcomes, 40% on medium outcomes and 30% on high outcomes. This makes very little difference to the overall results (+£4,000), showing that this analysis is not sensitive to the outcome weights. Similar to the above sensitivity analysis, the value of outcomes for Olivia are reduced to the extent that net benefits to society from meeting her needs reduce to £1,000. This simply reflects that the additional cost of provision for Olivia that meets her needs is more expensive than for the other archetypes, and it still shows the investment in her provision is worthwhile.

Table 36: Sensitivity analysis on outcome weights - Value generated to society when their needs are met - lifetime gain per learner (£)

	Sensitivity analysis (outcome weights)			Central analysis		
	Net outcomes gained per archetype	Net incremental cost of provision	Difference – net value generated to society	Net outcomes gained per archetype	Net incremental cost of provision	Difference – net value generated to society
Tim	£993,000	-£170,000	£823,000	£914,000	-£170,000	£744,000
Ade	£251,000	£303,000	£554,000	£251,000	£303,000	£554,000
Sarah	£389,000	-£146,000	£243,000	£392,000	-£146,000	£246,000
Olivia	£509,000	-£508,000	£1,000	£568,000	-£508,000	£59,000
Charlie	£499,000	-£196,000	£303,000	£499,000	-£196,000	£303,000
Average	£528,000	-£143,000	£385,000	£525,000	-£143,000	£381,000

Appendix 5: Research participants and expert reference group members

We would like to thank all of those who have contributed to our research. Research participants include, but are not limited to:

- Ailsa Moore, Head of Children's Services & Enrichment, Hollybank Trust
- Annette Smith, Head of Education, Ingfield Manor School
- Carl Wright
- Caroline Booth, Deputy Principal, The William Henry Smith School
- The Children's Trust
- Inscape House School
- Jane Goodman, Head Teacher, Doncaster School for the Deaf
- Jane Ring
- Jessica Hooper, Head Teacher, The Mulberry Bush School
- Kiran Hingorani, Chief Executive Officer, Swalcliffe Park School
- Lesley Fleming, Head of Autism Practice, Training & Research, Autism Initiatives
- Mary Hare School
- New College Worcester
- Philippa Kortright
- Rob Piner, Principal, Swalcliffe Park School
- Sam Ofori, School Business Manager, Inscape House School
- Stacey White, Principal Head, Small Haven School
- St Catherine's
- Specialist Education Services Holdings Ltd

We are grateful to the members of the expert reference group for this project:

- Mark Dale-Emberton, Principal, Charlton Park Academy
- Kathy Evans, Chief Executive, Children England
- Corinna Grindle, Associate Professor, The Centre for Educational Development, Appraisal and Research, University of Warwick
- Helen Hewitt, Former CEO of Chailey Heritage Foundation, Independent consultant and NASS trustee
- Sue Jones, Bursar, Breckenbrough School
- Dame Christine Lenehan, Director, National Children's Bureau
- Dr Jill Pluquailec, Senior Lecturer in Autism, Department of Education, Childhood and Inclusion, Sheffield Hallam University

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