



Highland Children's Forum

Not in Full Time Education Consultation Report: Views from Parents

March 2018

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Acknowledgements:

Thank you to all the parents who took part in this consultation, sharing their views, experiences and suggestions for improved practice.

Abbreviations:

NIFTE – Not in Full Time Education

ICT – Information Communication Technology

PSA – Pupil Support Assistant

PDA - Pathological Demand Avoidance

ASN – Additional Support Needs

CAMHS - Child and Adolescent Mental Health Services

SDS – Self-Directed Support

HCF- Highland Children’s Forum

About the Project



This consultation project was funded by Highland Children's Forum in response to anecdotal evidence of an increasing number of young people in Highland with additional support needs who were not accessing their right to a full-time education.

Through Getting it Right for Every Child and Curriculum For Excellence, the Scottish Government has set out its ambition for services provided to children and young people, including getting the most from the learning opportunities which are available to them so that they can realise their full potential, in learning, in work, and in life.

The Highland Council has a duty to provide 'adequate and efficient' school education to all pupils within its area (Education (Additional Support for Learning) (Scotland) Act 2004 and 2009). Young people have a right to be provided with a school education and this is enshrined in The Standards in Scotland's Schools Act 2000.

The aim of the Not in Full-time Education (NIFTE) consultation was to explore with young people, parents and professionals the main issues facing young people's ability to access this right to a full-time education that enabled them to be successful learners who were supported to reach their full potential.

Three separate, but linked, consultations were carried out: with young people who are not in full-time education; with parent-carers and with professionals. The wording of issues for discussion were varied for each group in recognition of the different relevant experience and understanding of each group. Each consultation sought examples of good practice, barriers/challenges, and suggestions for improved practice. Young people and parents were asked about the impact of school experience. Young people were asked about what helped them get back to school. Professionals were asked to reflect on aspects of their practice. While each report had particular emphasis, there were some clear cross-cutting themes emerging.

Participants were recruited via community support groups, Third Sector organisations, social media posts, word of mouth and Statutory Sector providers. As participation was self-selecting and voluntary (we were not attempting to find a representative sample of parents from across the



additional support needs spectrum) the majority of those who took part were parents of young people on the autistic spectrum. Informed consent was sought from all participants.

This analysis draws on interviews conducted between January – June 2017 with 21 parents from across the Highlands in 2 focus groups and 15 one-to-one interviews. A qualitative approach enabled us to explore and examine issues from the perspective of participants and their personal views and experiences. Thematic analysis was used to code the data and identify developing themes from the interview transcripts.

The parents identified that their young people had the following additional support needs:

- Autistic spectrum disorder - 17 young people
- Chronic fatigue – 2 young people
- Mental health problems - 1 young person
- Complex social and communication support needs – 1 young person

One young person was from the Gypsy/Traveller community.

For 19 of the young people their problems with school started in primary school. Eight changed schools, 5 were excluded from school or threatened with exclusion, 6 were non-elective home-educated and 3 were/had been in a special education provision.

The parents' children were aged between 8 – 16 years old at the time of the consultation; 13 were primary school age (5 of whom were currently or had been home educated), 5 secondary school age and 3 in a special education provision.

Two other reports are available analysing the responses from parent carers and professionals. A briefing report, comparing and contrasting the findings from the three reports is available on the Highland Children's Forum website.



What Worked: Examples of Good Practice

Parents were asked to share examples of good practice; approaches that worked well for families, parent-carers and their young people. Most parents were able to give some examples of positive practice. However, this was often limited to specific individuals in specific situations and was not reflected in the wider practices of the staff, services and organisations parents encountered.

The main examples identified are detailed below:

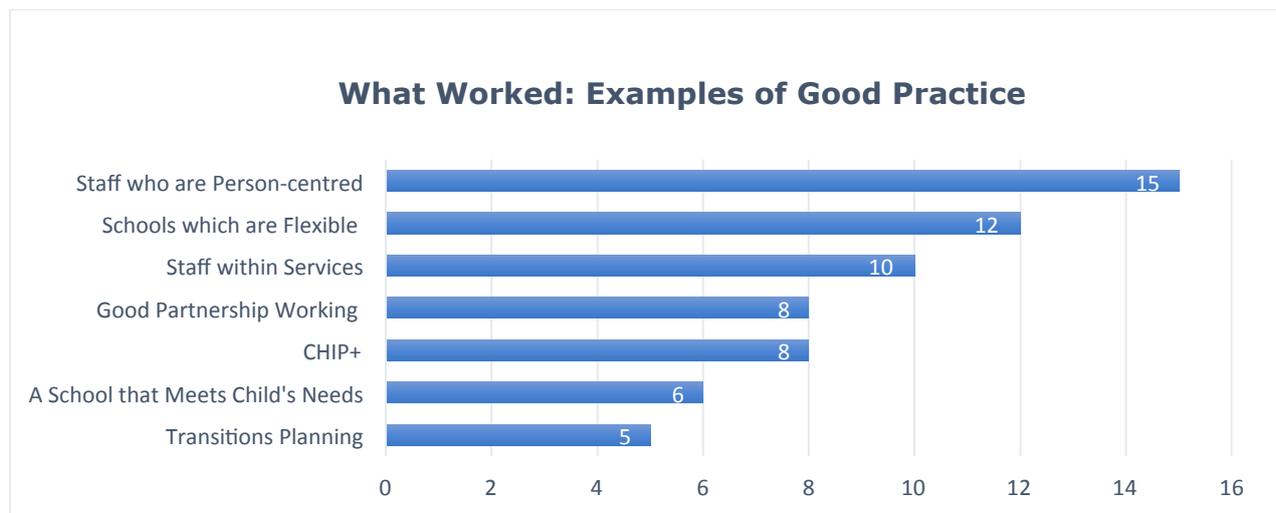


Chart Indicating Areas of Good Practice as Identified by Parents

Staff Who Are Person-Centred

Most of the parents shared some experiences of good practice by school staff. Parents praised staff who were person-centred in their approaches, who connected with and respected the young people they worked alongside, who provided structure and routine and supported parents with home-learning.

The specific qualities and attributes that were particularly valued by the parents included staff who:

- Provided one-to-one support.
- Were gentle, caring, kind and encouraging.
- Worked at the young person's pace and were patient.



- Were knowledgeable about additional support needs and understood the specific needs of their child.
- Were passionate and committed to their work.
- Were creative and innovative in their approaches.
- Engaged well and found connections and common interests.
- Were respectful, approachable and listened to the young people.

Schools Which Are Flexible

Schools which were flexible and responsive to young people's needs were mentioned by just over half the parents. Parents praised staff who: adapted and changed approaches and support as the young person grew/developed; used play and creative approaches, and who looked at individual needs and tailored support.

Staff who made even small changes could make a significant difference to their child, as this parent explained:

“She moved his desk a tiny bit as he had the space as he hated the push and shove. If he was upset she would give him a hug. Just these little things made a difference.”

For other parents a key issue was schools that made adaptations to meet their child's sensory needs:

“The Head spoke to us about our son's sensory needs and he removed some of the posters on the walls, a safe, quiet space was found - they were able to address these elements and have always been very proactive in implementing our solutions.”

Staff within Health and Social Care Services

Some parents had positive experiences with professionals from Integrated Family Teams in Children's Services; parents spoke about supportive individuals such as Children's Services Workers and Family Support Workers. Others spoke about a Primary Mental Health Worker, a GP, an Occupational Therapist, an ASN Manager and a Speech and Language Therapist.



What was noticeable, however, is that these were limited instances of individuals from services who parents found helpful and supportive during this challenging time in their children’s lives; particularly when considering the wide range of professionals involved in the lives of these young people and their families.

Good Partnership Working

Parents spoke about staff who worked alongside them and who:

- Involved, listened to and communicated regularly with parents.
- Acknowledged parents’ views and opinions.
- Were proactive and organized.
- Arranged regular meetings with key staff members, particularly at significant periods such as transitions:

“High school is pretty good. Before he started high school, staff came back and forwards to the house for about 6 months to see how we communicated with him. We had detailed meetings with the high school.”

Children in the Highlands Information Point (CHIP +)

Over a third of parents spoke about the positive role CHIP+ had played in supporting them by empowering them as parents, informing them of their rights and connecting them to professionals and specialist services. CHIP+ was regarded as an organisation that could step in when parents felt that they were at stalemate with schools.

Schools that Met Young Person’s Needs

For some parents, moving to a more supportive school provided a positive solution. Common themes were schools that: were small in size and pupil number; were in a more rural setting; included an element of outdoor learning; had a reduced sensory overload, and where the young people felt included and nurtured:

“He is now in a new school which is small-scale and nurturing. He doesn’t feel different as a lot of the solutions put in place to meet his needs are used by all the children.”



For some parents what worked most successfully and positively was their child leaving mainstream school and attending a special education provision which provided the staff, the environment and a value-base that enabled their children's needs to be met.

Transitions Planning

Some parents spoke about positive transitions due to early planning, frequent visits and preparation with key staff members, and parents feeling listened to and involved in the transitions process. For one parent a 'buddy' had proved important:

“The planning initially went well for transition into Primary 1, mainly due to the help and support of her P7 buddy.”

Other positive factors mentioned were: soft starts; early finishes; small group work; children having their own space; classrooms being physically accessible, and an innovative use of Information Communication Technology (ICT) to support learning. Consistency of staff, particularly Pupil Support Assistants (PSAs) was important, and PSAs were mentioned positively several times.

Barriers and Challenges



The most commonly identified barriers and challenges to young people accessing a full-time school education, as reported by a majority of parents are presented below:

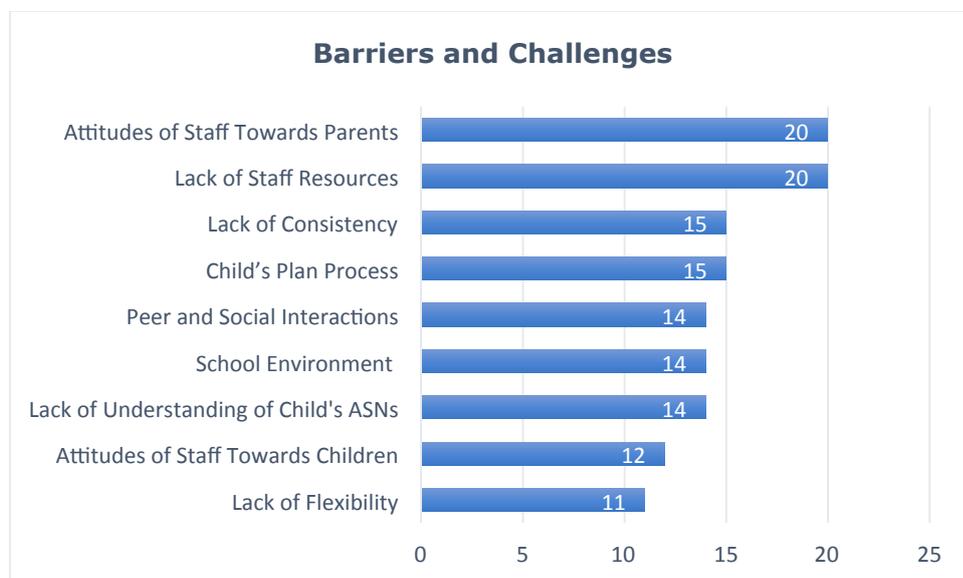


Chart Indicating the Key Barriers and Challenges, Identified by Parents, facing their Children in Accessing a Full-Time Timetable

Attitudes of Staff Towards Parents

A major barrier, described by almost all parents, was the negative attitudes held by school staff towards them. The specific issues are described below:

Parents not being listened to or believed

Most parents said they had not been listened to or believed by school staff. The sense of frustration and powerlessness that many felt is summed up in this parent's comment:

"I was definitely not listened to by the school. It felt like you were banging your head against a brick wall and you felt useless as a parent as I knew what she needed but they didn't listen."

Parents spoke about the specialist knowledge they had of their children that was not harnessed or recognised, how they were not treated as equal partners with professionals, of not being believed and of formal diagnoses being ignored:



“The nursery teacher said one of the worst things they could say to a parent - 'he seems normal to me'. This made me feel absolutely awful but he had the diagnosis. They said they couldn't see a problem.”

Almost all parents reported issues had started in nursery or primary school. This failure to listen to the specific knowledge of parents meant that a crucial opportunity was missed in almost all cases to implement, often small, changes that could have met the needs of the young person.

A minority of parents did feel that, as their child moved into high school, they were listened to more. This was due to the parent's voice being reinforced by the young person's as they became more able to express themselves and through persistence on the part of the parent.

Parenting Skills

Most parents reported that school staff or health professionals had either implicitly or explicitly blamed poor parenting for the challenging behaviour exhibited by their children at school. Schools often implied the issues were due to problems in the young person's home-life rather than due to a diagnosed condition or any actions of the school or staff. Parents talked about being made to feel 'at fault' and told to be stricter parents; that their child's behaviour was due to lack of parental discipline or poor/inappropriate attachments:

“The teacher said the issue was with my parenting style. The school's line was always that everything was fine and the problems at home are not connected and were our problem.”

Some parents spoke about how their concerns were often not validated and staff claimed their child was managing and coping at school. Others spoke about their children coming home from school in intensely distressed states after managing to hold themselves together all day in school but then needing to release the build-up of tension, anxiety and frustration when they got home.



Five of the parents believed that their children exhibited signs of Pathological Demand Avoidance (PDA). As such, the parents felt that parenting a child with PDA is very different from parenting a 'neurotypical' child due to the high levels of anxiety, need for control and resistance to following commands and that currently accepted parenting techniques were counter-productive:

“They see me being soft with him. I was told to be stricter. All the things that go against a child with PDA if you have the demand avoidance it turns your parenting upside down. I got stuck on parenting courses.”

Parents Not Being Supported

Many of the parents felt that they were not supported by their school. One parent described how they had to 'keep battling on and on'; other parents talked about feeling alone and having to cope without any help, support or information from schools or services.

Parents Feeling Judged

A third of parents reported they felt judged by school staff and professionals within services. One parent spoke about the impact of professionals and school staff observing every move they and their child made, and the emotional exhaustion of this:

“...it makes you feel as if you are under a microscope the whole time.”

Other parents spoke about being judged by people within the community at large and by people whose role was to help and support them within schools and services.

The 'expert' Professional

Staff viewing themselves as the 'expert' was an issue raised by several parents of young people on the autistic spectrum. Parents felt that school staff felt they 'knew best' and that, as professionals, they had all the knowledge and experience. However, parents felt they themselves had a

unique insight and understanding into the needs of their own children, which should be taken into account:



“The teachers have done a course and they *think* they know it all, rather than thinking ‘yes this course is a starting point but if I want to learn and really understand the child I should listen to the parent’.”

For some parents, school staff even dismissed the views and recommendations of specialist staff:

“The Speech and Language Therapist wanted to come into the nursery to discuss the diagnosis but the school staff would not see it ... they didn’t listen to the professionals. I think they just think they know best.”

Lack of Staff Resources

A lack of staff resources was identified by most parents. A repeated issue was that parents felt that decisions to reduce young people from full-time to part-time timetables were often made because of a lack of available staff to provide the necessary classroom support, rather than due to the needs of the young person (and often contrary to the wishes of the parents):

“It [the timetable] just started getting reduced and reduced – ‘oh we don’t have anyone to cover him for there or for then’ – it wasn’t my choice.”

One parent, whose young person was on a severely reduced timetable, spoke about how her child desperately wanted to go to school but the school did not have enough support in place. Another described her child, who was on the autistic spectrum, as having a ‘hidden disability’, who appeared to cope and manage in school and, therefore, was not allocated support or resources:

“When you get a child like our son who is not kicking off or being violent to other kids they slip under the radar. Their self-esteem is being eroded constantly and they are not getting the help because the under-resourced schools have to deal with the ones who are kicking off.”



Many parents raised concerns about the lack of additional support needs provision including a lack of staff to supervise pupils with additional support needs during lunch and break-times, a lack of Pupil Support Assistants (PSA) and a reduction in support staff hours.

For some parents the schools were unable to provide their children with suitable or appropriate alternative space if this has been identified as a need:

“When he was going into P1 they did not have a room for him so they were going to turn a cupboard into a room but it was tiny. We took him out of primary school. We felt school wasn’t going to provide what was suitable for him.”

Lack of Consistency

Most parents raised the issue of lack of consistency or continuity. A recurring issue was when skilled and understanding staff members leave the school, or young people move class in the new academic year and get a different teacher who parents worried may be less supportive.

Repeated staff changes, especially of specialist ASN staff, often had a negative impact on the young person’s school experiences. As most of the parents were parents of children on the autistic spectrum, this change and lack of consistency was particularly challenging:

“They kept changing the PSAs - the school said they liked to swap the PSAs as they said it wasn’t good for the children to get used to them. The problem is an autistic child doesn’t like change - they need continuity.”

A small number of parents spoke about lack of consistency in terms of teaching methods and approaches, and support initially being put in place for their child but then withdrawn.

One parent recalled how her child had sensory touch issues and was unable to sit on the floor at school due to the feel of the carpet. A simple solution was found – she was given a cushion to sit on and this easily resolved the child’s anxieties. However, a new Year Teacher decided the cushion was no

longer needed and stopped giving it to the child, who subsequently became more agitated and anxious.



Another parent raised the issue of staff who job share; how her child struggled with the frequent changes of teaching staff and the variety of approaches and methods employed by different teachers:

“Part of the problem all along is that there were 2 teachers in charge of the class so you would have one style of teacher for part of the week and then another style as well as different ages of children – that was a very difficult thing to cope with.”

Child’s Plan Process

Most parents felt that Child’s Plan meetings were a barrier to finding a successful educational outcome for their children. The major issue raised was that Child’s Plan meetings failed to initiate any action or positive change.

For some parents a key issue was that the solutions agreed upon in Child Plan meetings were not implemented ‘on the ground’ in schools and classrooms:

“Various things were suggested, from providing a mentor from an older child – which sounded fantastic – coming back to school gradually and at first just after hours. Nothing much happened. “

Many parents reported not feeling listened to in meetings:

“They didn’t listen to us and put in lot of standard stuff. They didn’t take us seriously. The professionals took over the meetings...”

For some parents, there were delays in getting a Child’s Plan in the first place. Others spoke about: professionals not having the authority to act or make decisions; a delay in getting key professionals to meetings; Child’s Plans being set-up but no meetings scheduled; significant gaps between



meetings (18 months in one instance); meetings being little more than talking shops where issues remained unresolved over long periods of time and a general feeling of ineffectiveness.

Some parents reported that the communication from and within the school was poor, with Head teachers being mentioned negatively several times, particularly Primary School Heads. The main issues raised were: parents felt that staff were not open in their communications with parents; that important information was not shared with or between appropriate staff members; staff did not respond to emails or conversely refuse to meet parents face-to-face and would *only* communicate by email, and staff did not provide adequate information if required.

Other issues raised in connection with the Child's Plan process were young people not being listened to; schools refusing soft starts; lack of transitions planning and failure to provide one-to-one support.

Peer and Social Interactions

Many parents of young people with an autistic spectrum disorder spoke about the social challenges faced by their children at school. This became increasingly problematic moving up through primary school when relationships become more complex, resulting in young people exhibiting various inappropriate behaviours such as running away, losing their temper, aggression and fighting, swearing, and losing control:

“... he has a lot of control issues and he wants everything to go his way and when it doesn't he can have melt-downs. I don't think he fully understands that that prevents him being with class-mates.”

Many of the young people were isolated and lacked friendships. Parents were aware of the importance of friendships but often felt that this wasn't recognised in the same way by school staff, as this parent of a child with Chronic Fatigue said:

“As part of his recovery he should have social time as well but he didn't have time to go to school *and* have a social life so it was important to get a balance of both. When you are a young child the social aspect is very important. The school clearly didn't understand this at all.”



School Environment

Sensory overload was a significant school environmental barrier in school for many of the young people, most of whom were on the autistic spectrum.

Noise was the main sensory issue, with the school bell being mentioned several times. Parents also spoke about smell, touch, lighting, visual stimulation and a general onslaught of over sensory stimulation leading to heightened anxiety levels:

“There was noise, there was smells - it was a sensory overload. He couldn't concentrate.... They did not appreciate his sensory issues - it was causing him physical pain and none of them cared.”

Lunchtimes were a serious barrier; the smells and noise of school canteens were overwhelming for most of the young people who tried to avoid eating in the canteen at all or would eat their lunch as fast as they could. Consequently, those times during the school day when most young people can relax and re-charge are often a time of increased anxiety and stress for many young people with additional support needs.

Some parents spoke about the difficulty with the school environment and current interactive learning:

“The environment in primary school are totally not helping – round tables, children getting up and about and moving classrooms, touching each other.”

For some parents this lack of structure in the classroom and interactive and 'learning through play' approaches were a significant barrier for their children. For others, there was too much structure and 'set times' for activities such as going to the toilet.

The physical size of the school buildings and large number of young people in a class was often identified by the parents as a barrier for their children leading to increasing anxiety and sensory overload.



For one parent, whose child was an intermittent wheel-chair user, lack of physical accessibility was a major barrier:

“The high school is not accessible. I have no idea how he is going to get around that building as walking around this building exhausts him. I have a big concern about how he will manage in high school.”

Lack of Understanding of Needs

Parents reported that often school staff did not understand their child’s additional support needs, which resulted in unsuitable or inappropriate interventions or responses:

“He was in full-time education at the start but changes happened in the school and he doesn’t cope with change. So instead of breaking it down for him they just reduced his hours and started to exclude him.”

This lack of understanding was an issue for this parent of a young person with Chronic Fatigue:

“The teacher just didn’t understand about Chronic Fatigue and the fact that he got exhausted.... she would say things like ‘he says he’s not feeling well’. We got the feeling they felt he was just lazy.”

Staff lacking training, understanding and awareness, particularly around autism, was specifically highlighted by several parents. They felt that staff who worked alongside young people with additional support needs needed greater awareness and that training should be compulsory and part of on-going continuous professional development.

Parents also talked about the challenges of staff not having the experience or understanding of how to deal with their child if they became anxious or how to de-escalate a situation.



Attitudes of Staff towards Young People

Over half the parents spoke about the negative impact of staff attitudes towards their children, with most mentioning staff who were strict or inflexible in their approaches, who shouted or were stern as being particularly problematic. The consequences for these young people were often an increase in distress and anxiety.

Some parents talked about staff who failed to recognise their child's behaviour as being due to their additional support needs; children were seen as 'bad', 'trouble', 'immature' or 'naughty'.

A small number of parents talked about staff who viewed their children in a negative light or who failed to recognise their full potential. These children were not treated the same as the other children or given the same opportunities (such as taking part in school sports' days or school trips). Staff who focused only on the young person's perceived inabilities rather than their strengths had a negative impact on the young people:

"The positive comments rarely happened – he has had 10 years of the assumption he is going to get things wrong and not manage."

For this parent above, these types of attitudes were a significant reason why her son eventually disengaged from school and the education system.

Lack of Flexibility

Nearly half the parents felt that the education system was rigid and inflexible and failed to adapt or respond to the requirements of young people with additional support needs. Parents understood that their children did not fit into neat boxes and required schools to show greater flexibility. They talked about their children having to "slot in" and "fit in", about them being "forced into inclusion" and the system trying to put "a square peg into a round hole".

Some parents spoke about schools' strict adherence to processes and procedures, rather than taking a person-centred approach:

"They wanted her full-time in The Base. I told them I didn't think this was appropriate for my daughter as she will expect to move into P1 with the

rest of her nursery class. The response I kept getting was that that was the procedure for kids with additional support needs.”



These were the major barriers and challenges reported by parents; below are those reported by a minority of parents:

Lack of Specialist Resources

A lack of specialist resources and services, or a failure for current provision to meet need, resulted in young people experiencing a number of negative consequences such as: poorer outcomes; disengagement and school-refusal; increased stress and emotional distress, and delays in the implementation of appropriate support or interventions and delayed assessments and diagnosis.

Some parents felt that the resources were simply not currently there:

“The resources just don't exist - they [Education] keep trying to find them. He needs outdoor learning as he struggles in the classroom by 11am. The one school that was successful was a very small school and had an outdoor focus so they were only in class for half the day.”

For a parent of a young person with multiple and complex needs current education provision was unable to meet his educational, support or care requirements; he was unable to function in mainstream schools but, equally, current special education was unsuitable.

A lack of services was reported by some parents, including lack of services in rural areas and no or insufficient access to specialist staff. The challenge of living in rural Highland and trying to access specialist services, which were often Inverness-based, is clearly illustrated by this parent who said:

“All the help is in Inverness, a 3-hour drive. Time and cost for us and anxiety for him taking him out of school and routine. If you live in Inverness The Pines is great but not if you live here. You sink or you swim.”



Several parents felt forced into home-educating their children as the provisions were simply not available in school to meet their child's needs. Often this decision had a significant financial impact on families (with parents having to leave work) but parents felt they had little choice as they were so concerned about the emotional and mental wellbeing of their children.

Social Stigma

Some parents reported that a key issue was the social stigma their children felt when specialist support was put in place for them. The parents felt it was important that their child's additional support needs were met but not in a way that made them stand out and staff need to find ways of ensuring the young people do not feel 'different'.

Parents talked about ASN departments which were stigmatized by other pupils, about the acute self-awareness their children had about having additional support needs, and how solutions could be implemented for all young people to the benefit of the whole class:

“The [support] could be for all the children, not just for my daughter, as this would be highlighting her again as different. It's simple things – if the entire class used these strategies as it's good practice for all children.”

Impact on Young People and their Families



Parents identified 5 main areas where they and their children had been negatively impacted by their experiences at school, as shown in the chart below:

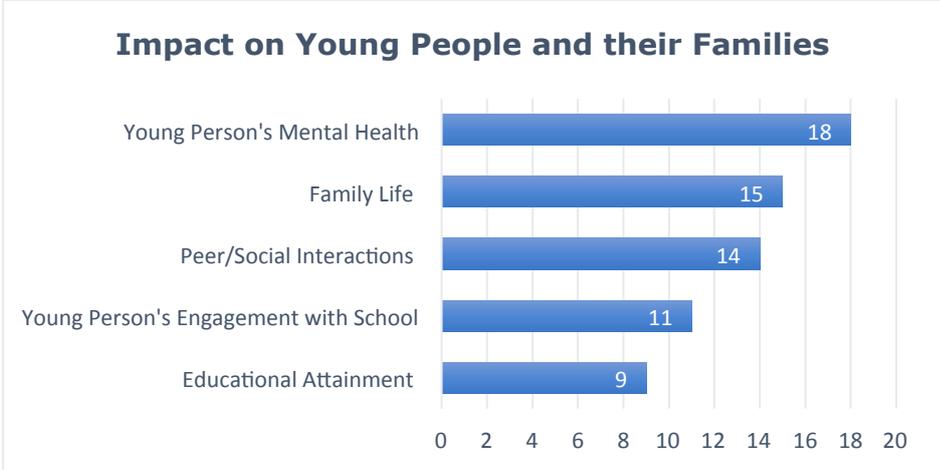


Chart indicating the impact on young people and their families

Young Person's Mental Health

Most parents reported that their children developed significant mental health issues as a direct consequence of their experiences at school. Parents were deeply concerned about the emotional harm that had occurred and the potential impact of this longer-term.

Anxiety was the most frequently reported mental health issue and many of the young people were attending school in high states of anxiety and distress:

“At school, generally she was able to contain and control how she felt ... But when I went to pick her up after school I could see what was going to happen – the minute she got hold of my hand she would nip and nip and dig her nails in she was so anxious.”

Most of the parents saw an escalation in their child's emotional distress and this being expressed in behaviours such as crying, refusing to leave the

house, sleep problems, self-harm, loss of self-confidence and the young people withdrawing within themselves.



For 5 of the parents their children were so distressed due to their experiences in school that their child expressed suicidal thoughts:

“She was screaming and I had to restrain her - she said she was going to kill herself because of school.”

Family Life

For many parents their family lives had significantly changed or been impacted. A repeated theme was parents feeling isolated within their communities and their family networks due to family and friends not understanding the challenges and difficulties facing the family:

“It’s increasingly difficult as my family just kept saying ‘oh he’s just being a little boy’ - but they only get a snapshot but try 24 hours.”

Family life was affected as parents struggled to balance the needs of their child with additional support needs with the needs of other siblings. Parents talked about the worries they had that siblings were not being given the same opportunities and experiences often due to the struggling child’s mental health issues and/or their refusal to leave the safety of the family home.

Siblings’ mental health was also affected, with the consequences often escalating into other areas of family life:

“It causes more anxiety for all of us. It impacts on his siblings not knowing what is going to happen. It impacts not just on school but also all the out-of-school support and makes it harder to manage this too. Once one setting starts to fail it impacts on the other.”

In addition, parents’ own emotional and physical health were affected, often significantly, with parents regularly reporting high levels of anxiety themselves.



Families were often impacted financially with a third of parents consulted being forced to give up work to enable them to meet the needs of their children:

“I gave up my job. I was probably quite low during that time. Mentally and financially it was hard. I lost that interaction from work colleagues which makes you more isolated.”

Peer/Social Interactions

Parents expressed concern about their child’s loss of peer relationships and clearly recognising the importance of friendships and social interaction, even if these relationships were often challenging for their children.

“He also misses out on the people he has grown up since nursery and being around a group of people. That peer support he doesn’t get any of that now, even though the relationships were hard.”

Some of the young people were aware of their own social isolation but were not fully aware why this was the case:

“Socially it’s difficult for him, he doesn’t quite understand why he is not with his mainstream peers. When he is collected from school all his peers are outside playing – he must wonder what is going on.”

The young people were becoming more isolated with their increasing disengagement from school or reducing school timetables. Further, there was a recognition by the parents that the activities that most young people enjoyed, such as swimming, football and school playtime could be difficult for their children, either due to their challenges with social interaction or due to their behaviour.

School Engagement

For half of the parents a failure to provide sustainable solutions that met the needs of their young people resulted in an escalation of distress in the children and a subsequent disengagement from school and formal learning.



For some of the young people an irrevocable breakdown in trust with school staff meant that they stopped feeling safe or secure and lost confidence in the school, which led to them disengaging:

“He had lost confidence with the school by this stage and he wasn’t sure who was on his side. He was looking for his allies – those who he felt safe and supported by at school - but there had been no consistency and support so he didn’t feel he had anyone to trust.”

Educational Attainment

Almost half the parents expressed concern about how their children’s education had been negatively affected due to:

- Timetables being so severely reduced (one child attended school 1 hour a week, another 7 hours)
- ‘Softer outcome’ approaches of special education provision
- Chronic long-term mental or physical health problems
- Lack of stimulation and challenging classwork:

“He’s so bored with classes such as maths and he hasn’t had to do anything that he doesn’t want to do but they need to find an approach that will challenge him a bit as he is much more capable than he is given credit for.”

Improvements



Twenty out of the 21 parents gave their views on what improvements were needed, with the majority focusing on 4 main areas:



Chart Indicating the Main Improvements Suggested by Parents

Improved Person-centred Practices

Most of the parents spoke about the need for a more flexible and creative approach to education and schooling and, connected to this, a person-centred approach to meeting their children’s needs:

“We need people who are able to say ‘what do you need and let’s see if we can help you’”.

Parents felt that, currently, their children often had to fit in with strict processes, structures and procedures within schools; they felt that schools needed to be more adaptable and responsive to their children’s individual needs and requirements. Central to this person-centred approach is knowing the young person and their interests and engaging with them in a way that does not highlight their differences.

The need for a flexible and personal timetable was highlighted by some parents, again emphasising a person-centred approach:

“More creative and flexible education - maybe part-time and part of time in the ASN Base, taking classes he is interested in. It may be that we

need to find a new route for him and not one that the neurotypical kids take.”



The need for outdoor learning was important for some parents who felt that advantage could be taken of the vast and varied outdoor spaces and natural environment in the Highlands:

“More flexible outdoor learning. We have beautiful beaches, lovely forests and a mountain of outdoor things we could do with kids rather than stick them in school for 6 odd hours a day, sitting at a desk.”

Other improvements in school-based practices suggested by a small number of parents included: the need for consistency in staff and staff approaches; the provision of a quiet space in the class or at lunch-time (but in a way that is inclusive rather than segregating); young people having a trusted adult with whom they can speak ; more structure within the school day and staff having more time to get to know the young person and understand their needs.

Some parents spoke about how the approaches for ASN pupils would benefit *all* pupils:

“It’s simple things – if the entire class used these strategies [e.g. visual timetable] as it’s good practice for all children.”

Improved Attitudes of Staff

A key improvement was for improved attitudes towards young people; for staff to show kindness, be respectful and show empathy and compassion:

“If all teachers took all children and treated them as human beings with rights and with compassion and understanding it’s about people relating to others.”



Parents wanted staff who did not underestimate their children's skills and abilities but who focused on their strengths and supported them to reach their full potential. School staff need to encourage and support young people and increase their self-esteem and self-confidence:

“He is much more capable than he is given credit for. He could be such an active member of the school if they got it right for him and it would also benefit the school. He has so much potential but school give up too quickly.”

A number of parents felt an important improvement was positive/respectful/appropriate attitudes by staff towards them as parents. One parent of a young person with a longer-term health condition felt strongly that staff should not patronise parents and should be aware that often parents lacked confidence in the 'system':

Not to be told things like 'It'll be OK. / Trust us. / Don't worry. / Let go.' It often isn't OK, nor can anyone guarantee it's going to be. We can't always trust professionals to do the right thing and a small mistake can have a massive impact.”

Improved Communication

The need for schools and school staff to improve their communication with parents and young people was raised by most parents.

A recurring theme was the need for school staff to listen to parents, who are often the first to spot early signs of potential issues or needs. Parents wanted the expert knowledge they have of their children to be respected and a recognition that parents live with their children 24/7 whereas schools only see their children for a few hours a day.

Parents felt that by being listened to, unnecessary distress could be avoided and their children's needs better met:

“If they [the school] had listened to me and respected me as an expert in my daughter, instead of heightening a situation a quick 2-minute conversation with me could have been all that was needed.”



Parents spoke about the need to be taken seriously and their suggestions acted upon:

“I know the High School will need to learn about him and his condition... We have lots of information we can share – I don’t feel confident they will take this on board.”

Other improvements around communication included the need for young people themselves to be listened to, for schools to work in partnership with parents and build positive relationships, and for schools to have regular contact with parents.

One parent, who felt forced into home education whilst waiting for a transition to another school, felt strongly that schools needed to be honest with parents if they felt they were not able to meet the young person’s needs:

“I wish they had told me it wasn’t working as we could have made changes and moved him earlier and his mental health wouldn’t have been jeopardized.”

More Resources and Support

Parents felt a key improvement was the need for more resources (in particular specialist ASN staff) and class-based support to enable their children to succeed in school and be included, as this parent said:

“Inclusion isn’t just coming into class, sitting at a desk. Inclusion is belonging and doing all the things the other kids are doing whether that means more resources, more support or more adaptations.”

The need for more resources in rural areas was raised by some parents as was the need for smaller schools offering more choice and options.



Nearly half the parents spoke about the need for an additional specialist facility around Highland to complement current special education provision. Parents spoke about a facility which was flexible, adaptable, had an element of outdoor learning, smaller classes, specialised staff, a high staff to pupil ratio and met the sensory needs of children and young people; a facility for children and young people who could not cope full-time in mainstream but who also did not meet the criteria for Drummond school (for instance if they were high functioning and/or didn't have a severe learning disability).

One parent talked passionately about the need for 'dignity' and a school that provided safety and sanctuary:

“We would like him in a special place for him where there's dignity involved and he's benefitting. An outdoor, open door place, a refuge, a shelter and a safe place.... I would love a place he feels free and we don't have to worry how other people or kids will react.”

Parents wanted a place where their children were included, rather than being forced to 'fit in' and a facility that provided a link between mainstream and current special education provision.

Other improvements suggested by the parents were the need for:



Chart indicating the other improvements suggested/identified by parents

Greater Understanding of Additional Support Needs (ASNs)

Just less than half the parents said that there needed to be greater understanding of young people's additional support needs. The specific issues parents identified as needing improvements in were:



- A whole-school approach in improving the ethos and value base of schools.
- Staff knowledge and understanding of special needs, particularly greater insight into autistic spectrum disorders.
- The approach and manner of staff i.e. greater empathy, sensitivity and awareness of the difficulties and challenges some young people face in the classroom.

“Staff need to come into his world and understand that he has to have control over his world and if things need to change to fully explain.”

Safeguarding

For some parents the main improvements needed were around ensuring their children were emotionally, mentally and physically safe when they were in school. Parents spoke about the importance of greeting children with a smile; providing an encouraging environment rather than a damaging one by tackling bullying; letting children know they can leave a situation if they find it stressful or anxiety provoking. Mainly parents simply wanted their children to be happy.

ASN Training for Staff

Parents felt staff needed more, regular and better quality training on additional support needs:

“There should be at least annual training on additional support needs because guidelines and practices change so fast.”

Improved Services

The most mentioned service that parents felt needed to be improved were Child and Adolescent Mental Health Services (CAMHS). Parents were aware that their children’s mental health was vulnerable and required early and timely intervention; anxiety, depression and poor sleep were identified as mental health issues affecting the children.

A number of parents felt that there needed to be improvements in access and information about Self-directed Support (SDS) as well as assessment procedures, resources and ethos.



Improved School Environment

The need for access to out-door spaces and out-door learning was raised by a minority of parents:

“Space to run around in he needs physical activities as he can get quite frustrated so he needs that release.”

Other improvements suggested were: improved Child’s Plan meetings; greater support for non-elective home education; local/rural services; access to specialist equipment (such as electric wheelchair); physically accessible schools (e.g. with ramps and automatic doors); a more innovative use of ICT to enhance learning, and support for home-learning.

Conclusion



Parents were able to identify areas of good practice that helped and supported their children to enable them to access their right to a full-time education. Central to this was school staff who were person-centred in their approaches and who sought to ensure that the views of the young people themselves, and their family and carers, were listened to, respected and validated. Schools that were flexible, adaptable and responsive to the young people's needs were greatly valued by the parents.

A significant number of barriers and challenges to the young people accessing a full-time education were identified by the parents, and this section provided the richest data in the report. The main barriers were around the attitudes of staff, lack of staff resources, lack of consistency and the Child's Plan process. The majority of the parents were parents of young people on the autistic spectrum and the school environment was an issue for their children, in particular, sensory overload and the noise of the school were an issue. These young people also experienced challenges with understanding social interactions and maintaining peer relationships and friendships. Many parents were concerned that staff did not understand their child's additional support needs, held negative attitudes towards their children and schools were rigid and lacked flexibility.

The impact of their school experiences had a negative effect on the young people and their families. The parents reported that their young people experienced significant mental health problems, difficulties with peer and social interactions, disengagement from school and poorer educational attainment. Family life was also impacted greatly, with parents' and sibling mental health affected, parents feeling isolated and facing financial difficulties.

The main areas for improvements were improved person-centred practice by all staff, improved staff attitudes, improved communication and partnership working and more resources and support. Parents also felt that school staff should have greater awareness of their young people's needs and an improved whole school ethos and value-base.



In conclusion, there are positive pockets of good practice across Highland but they are patchy and specific to particular individuals. The improvements suggested by parents and the recommendations detailed below aim to ensure that there is a consistent, high quality approach taken by all schools and staff across the area, approaches that are already clearly laid out in current Highland policy and procedure.

This report is only one of three consultations and should be read in conjunction with the briefing comparing and contrasting the results. Recommendations from across the reports are made.



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