

Education, Children and Young People Committee

28 February 2024

Additional Support for Learning

Introduction

This briefing is for the Committee's second formal meeting in its inquiry on Additional Support for Learning.

The Committee agreed to focus on the following themes during this inquiry—

1. the implementation of the presumption of mainstreaming
2. the impact of COVID-19 on additional support for learning
3. the use of remedies as set out in the Act

The intention is that in this meeting, the Committee will be focusing on theme 2 – the impact of Covid on the needs of pupils and the support provided. Themes 1 and 3 may also be covered, although not all witnesses will necessarily speak to every theme.

The Committee has already undertaken a range of work gathering written views which has resulted in a high number of responses from organisations and individuals. The Committee has also undertaken two informal sessions with young people and parents/carers on 19 February.

If Members would like to explore any issues in more detail than covered in this paper, please contact SPICe directly.

Covid and its impacts

In her foreword to the current National Improvement Framework and Improvement Plan ("NIF"), the Cabinet Secretary said—

“Our schools and education settings have faced unprecedented upheaval over the last 3 years, largely as a result of the pandemic, but also due to the cost of living crisis which has had a disproportionate impact on communities

which were already disadvantaged. Higher energy bills and more expensive food have been hitting our poorest children and families hardest, and all while we continue to recover from a global pandemic.

“Being out of school and early years settings during the pandemic has also had a profound impact on our children and young people. It has changed the type of learning we see in our classrooms and settings, and it has altered relationships between settings, school and home, which are usually built over time and with consistent expectations.”

The Scottish Government’s 2021 [Coronavirus \(COVID-19\) education recovery: key actions and next steps](#) included a section on work being undertaken to support health and wellbeing of pupils. This listed a number of interventions supported by Scottish Government funding, such as school counsellors. The [recovery plan’s section on ASN](#) noted, among other things, funding for pupil support staff. The “Next steps” part of the section on ASN focused on the work implementing the Morgan Review. The Government published the latest update on the Action Plan to take forward the recommendations of the Morgan Review in [November 2022](#). The 2022 Action Plan restructured the continuing work following the Morgan Review under four themes. These themes are—

- Children and Young People's Engagement, Participation & Rights
- Parent and Carer Engagement, Participation & Rights
- Teacher and Practitioner Professionalism
- Leadership & Improvement

The UK Government’s Department for Education commissioned two waves of research to understand how primary and secondary schools in England responded to the impacts of the COVID-19 pandemic and what further support they would need. The report on the second and final wave of the research was based on data collected in the 2021/2022 academic year and was published in January 2023. This found that—

“The most common challenge faced by primary and secondary schools as a result of the COVID-19 pandemic was staff and pupil absence. Staff absences had the greatest impact on schools’ ability to deliver their recovery strategies. ... Beyond the immediate challenge of staff and pupil absences, secondary schools viewed pupils’ emotional health and wellbeing as the main challenges in helping pupils recover their lost learning. ... Pupils’ social and emotional related difficulties were the most frequently cited needs and leaders also referred to anxiety, autism, ADHD and learning difficulties. Many of these pupils were awaiting assessment. School leaders identified a shortage of external provision and local specialist support as a barrier to efforts to support pupils’ mental health and wellbeing.”

Similar themes arose in responses to the Committee’s call for views. Many responses highlighted lasting effects in relation to mental health and wellbeing and social and emotional issues. Increased need in relation to speech and language,

attendance, and changing relationships between schools and parents/carers and other services were also themes in responses.

The Scottish Guidance Association's submission stated—

“There is a wide range of factors which may lead to some children and young people having a need for additional support. These fall broadly into the four overlapping themes: learning environment, family circumstances, disability or health need, and social and emotional factors. The closure of schools and the mitigations that needed to be put in place during COVID impacted on all those factors. Additional support falls into three overlapping, broad headings: approaches to learning and teaching, support from personnel, and provision of resources. All of these supports were impacted during lockdown, the return to “normality” and today.”

Increased needs

The Committee sought specific information from local authorities prior to this inquiry. A common theme from these responses was that local authorities are reporting both an increase in the numbers of pupils with additional support needs and an increase in complex needs. Several responses reported an increase since the pandemic, particularly in relation to mental health, dysregulation and speech and language difficulties.

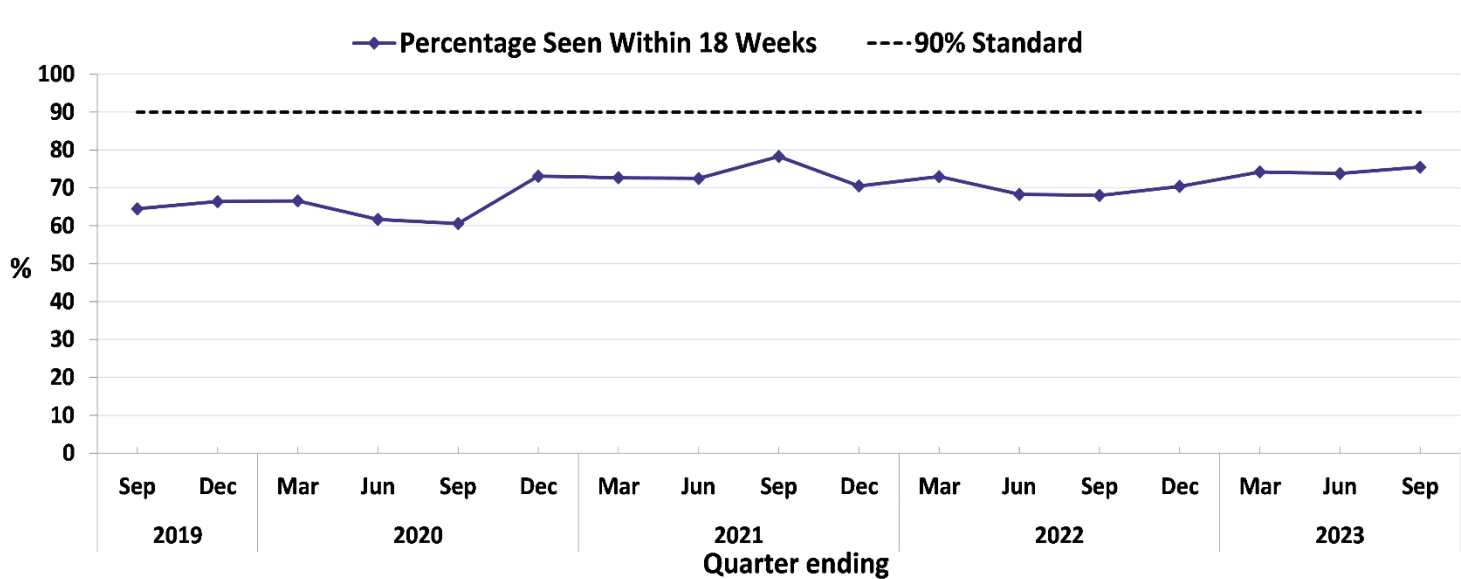
The Royal College of Speech and Language Therapists' submission said—

“We have seen a marked increase in children presenting with speech, language or communication needs since the start of the pandemic, and demand remains high for speech and language therapy even now, over three years on. The impact of COVID-19 continues to be felt by our profession and based on the research and data we have gathered, we believe there are clear systemic interventions required to ensure Scotland's children and young people have the additional support they need for a successful education and future life chances.”

Pressure on specialist services

A number of submissions highlighted the pressure on certain services has increased since the pandemic e.g. CAMHS. Cyrenians suggested that the result of the pandemic had placed even greater stress on CAMHS. It said that the service is now at “breaking point” and reported that “many families have said their children have been waiting for over 2 years to receive an assessment”.

The chart [below is from the latest release on Child and Adolescent Mental Health Services \(CAMHS\) waiting times](#).



The same release reported that, for the quarter ending September 2023, there had been a fall in the number of referrals, a fall in the average waiting times between referral and starting treatment, and a fall in the number children and young people who were waiting to start treatment. All of these decreases have been both year-on-year and quarter on quarter. The waiting list as of September 2023 was 5,344. Of these, 147 children or young people have been waiting over a year.

The Royal College of Speech and Language Therapists' submission said—

“The clearest indicator of the impact of the pandemic on meeting the communication needs of children and young people has been the increased waiting times for speech and language therapy.

“Recent FOI data highlights the key challenges in waiting times for speech and language therapy in Scotland. A snapshot from May 2023 showed:

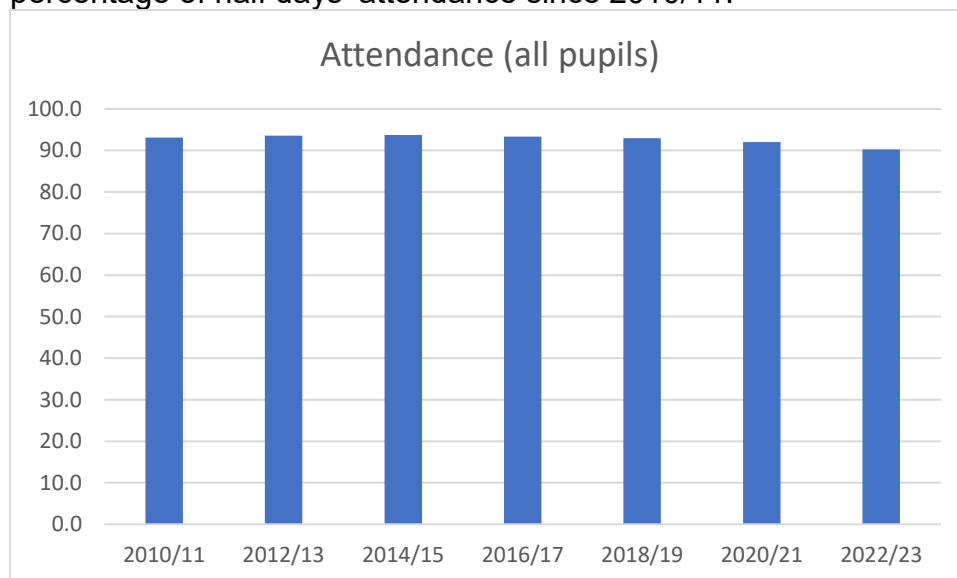
- 6503 children waiting for speech and language therapy in Scotland
- The average longest wait for initial contact is 1 year 1 month
- The average longest wait for individualised therapy – 1 year 5 months
- The longest wait in Scotland is over four years This wait has worsened over the last five years:
- The average longest wait for initial contact has increased in the last five years by 7.6 months
- The average longest wait for individualised therapy has increased in the last five years by 10.2 months

“It’s important to note the impact of these waiting times on children. What may seem an inconveniently long wait for an adult can have lifelong implications for a child in a crucial speech and language development window.”

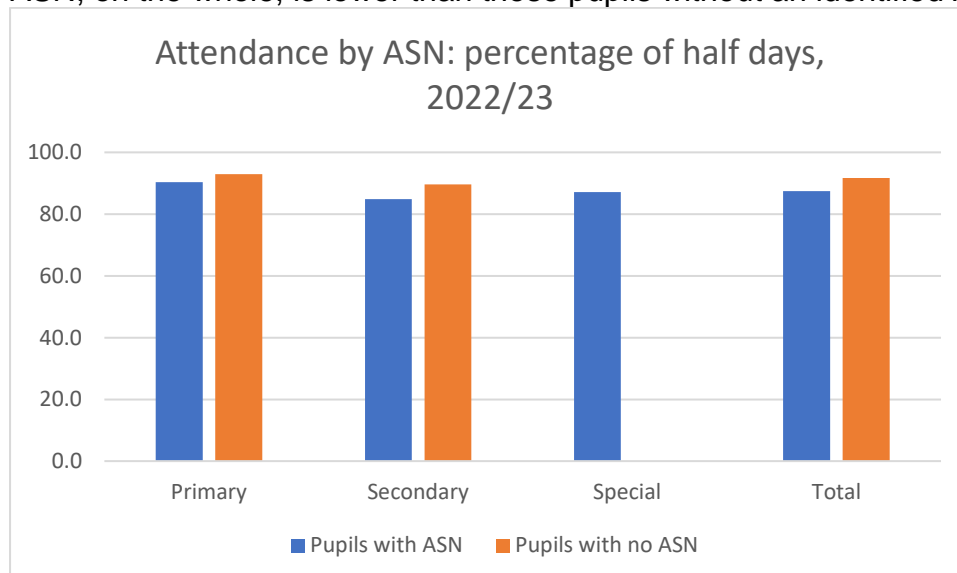
The RCSLT also said that “teachers have highlighted the benefit of preventative approaches and support from agencies such as speech and language therapists but expressed a concern about the delays in accessing this support”. It said that supporting communication can support more positive behaviours.

Attendance

Attendance data is collected in Scotland biennially. The charts below show the percentage of half days’ attendance since 2010/11.



The following chart shows that in 2022/23 the attendance of pupils with an identified ASN, on the whole, is lower than those pupils without an identified ASN.



In [November, Education Scotland published](#) a “deep dive” into issues around attendance. One of the groups that this report highlighted as being “more vulnerable to low attendance” is pupils with additional support needs, including:

- children and young people who have experienced care
- young carers

- children and young people who have experienced exclusion
- anxious children and young people

This report suggested that there were four types of factors that may prevent good attendance. These were:

- Individual factors, e.g. mental health, anxiety, disinterest in education
- Peer factors, e.g. poor relationships with peers
- Family factors, e.g. parental mental health, financial issues, low parental interest
- School factors, e.g. the school ensuring that the child is interested in the curriculum and feels supported.

This report stated that the “relationship between attendance, behaviour, and wellbeing are interlinked”. The report argued that schools should consider the child, their family circumstances, and their needs in supporting attendance.

The SGA submission stated—

“When schools reopened many young people – particularly those with Autism or Anxiety had taken the message to “Stay Home, Save Lives!” to heart and were unable to leave the safety of their home and return to school. There continues to be a higher absence rate than pre pandemic time across the country (a drop of about 3%). Some young people have yet to return to school. This is creating a strain on services and families.

“Guidance and Support Teachers have found that they are increasingly spending time on trying to engage with families who have been affected by the pandemic and are not attending school at a level which is deemed appropriate. We are looking for support from services that are already at capacity and often find that as a Universal Service we are left to try and create supports that are not meeting the need.”

Changing practice after the pandemic

Some pupils experienced some benefits through the experience of learning outwith the school environment. Salvesen Mindroom Centre’s submission noted that for some “not having to cope with the demands of teachers and face to face peer relationships, and not having to cope in unsuitable (sensory) environments” was a benefit. Others may have preferred the autonomy of online learning. SMC continued—

“For some of these learners who have not been able to return to school at all after the schools re-opened or those who are on a reduced timetable- the fact that some schools are still putting class work on digital platforms such as Teams has been really useful-as they can access this work from home. For parents who found in person meetings difficult (due to social anxieties or time

constraints), being able to attend meetings virtually was a real bonus and it is positive that this has continued in a lot of schools.”

The National Autistic Society Scotland’s said that parents have been disappointed that the flexibility of having remote learning has not continued post-pandemic consistently. Its submission suggested that the Government “take forward a programme of work to embed remote and digital learning in Scotland’s education system where it is appropriate, consulting with autistic people whilst doing so.”

The Royal Society of Speech and Language Therapists said that the services that appear to be managing the current need most effectively are:

- a) taking a whole system approach to service delivery; and
- b) have a threshold of resource to meet the need.

The Royal Society of Speech and Language Therapists also argued that how the service is funded should be reassessed. It said—

“The challenge for children’s SLT services is the precarious position they are in, straddling health and education funding streams. In many areas, children’s SLT services rely on funding through service level agreements with local authorities to provide support to children with communication needs in schools, however we’ve seen in recent years that this vital funding can be reduced or withdrawn by local authorities. Withdrawing this funding results in children needing to attend NHS clinics for therapy which disadvantages children living in poverty and also severs the vital partnership working that is required to improve the wellbeing, attainment, behaviour and future life chances of children and young people. Having speech and language therapists embedded in schools, with a strong working relationship with education professionals, is fundamental to improving the lives of children and young people with additional support needs. It’s critical that we find a long-term solution to this funding problem, and transformation to the system as a whole.”

Implementation of the presumption of mainstreaming

A key theme of the submissions the Committee received for this inquiry was that there is broad support for the principle of an inclusive education where all children are educated together, at least to the greatest degree possible. This approach is considered to have the potential to provide educational and social benefits for all, and to support a more inclusive society in the long run.

Equally, a very common theme was that, in practice, these benefits are not being realised for everyone. Some of the reasons highlighted in submissions are: lack of resources, in school; and specialist services in both the public sector and the third sector; training for school staff; culture; and inappropriate physical environments.

Present, Participating, Engaged and Achieving and the ASL Vision Statement

In 2019, the Scottish Government published [guidance on the presumption to provide education in a mainstream setting](#). This guidance says that mainstreaming “must be delivered within an inclusive approach.” The guidance reiterates the “four key features of inclusion” which are—

- Present;
- Participating;
- Engaged; and
- Achieving

In 2021, [the Government published](#) a “national overarching vision statement for success for children and young people with additional support needs.” This was developed by a group of young people, the Young Ambassadors for Inclusion. Their vision is that:

- school should help me be the best I can be.
- school is a place where children and young people learn, socialise and become prepared for life beyond school.
- success is different for everyone.
- but it is important that all the adults that children and young people come in to contact with in school get to know them as individuals. They should ask, listen and act, on what the young people say about the support that works best for them.

There is an action within the national ASL Action Plan to promote this vision. The National Autistic Society Scotland’s submission stated that it “believes that autistic young people can (and should) receive education, where it is appropriate, in a mainstream setting; however, we know that many learners continue to be let-down by the lack of support in such environments”. It continued—

“Whilst Presumption to Mainstream is a laudable ambition, it is, as implemented, failing. We see it is failing because Scotland’s mainstream schools are not inclusive of autistic children and young people. It is apparent in the higher levels of exclusions (both formal and informal), the prevalence of part-time timetabling, and all the negative experiences described [in our submission] by autistic young people and parents.”

NASS made a number of recommendations, these included “that robust ‘awareness training’ in autism and neurodivergence is compulsory for all teachers, both current and future” and for guidance to be produced on use of part-time timetabling.

Last week the Committee heard that some pupils in mainstream education are taught outside the classroom, but not necessarily in a suitable environment. Unison's submission stated—

“It is often the case that support staff in primary schools are now allocated or timetabled to work on a one-to-one basis with pupils who require individual support. This support is given in corridors, isolated rooms or areas (seclusion), with members feeling that the pupils have only occasional educational input from a teacher. Our members feel that the education of these secluded pupils is left to the support staff.”

Salvesen Mindroom centre's submission stated—

“The presumption of mainstream is well-intentioned. However, due to the growth in demand for additional support and a failure to adequately resource the measure, it is not working for too many learners and schools. The presumption of mainstream has put a massive burden on mainstream schools, who very frequently do not have the resources to cater to all the needs of all the children with ASN ... We would suggest that the Committee should consider if now is the time to stop characterising support for learning as 'additional' to mainstream school provision. It is clear that in every class and at every stage there will be at least a third of the class who require support and/or a differentiated curriculum. These needs should somehow become integral, rather than individualised add-ons. Universal Design for Learning may provide a way forward.”

Training and skills

One of the early themes of the Committee's work has been the extent to which practitioners have the specialist knowledge and skills to provide for the range of needs in their classroom. Schools may bring in expertise from the third sector, or other specialist services (such as SLT) to support pupils' needs.

The Government [recently published research into the provision for pupils with complex additional support needs](#). One of the themes this report found which supported a flexible approach to supporting complex needs was “the brilliant, committed and supportive nature of staff surrounding pupils”.

Last week the Committee heard about the difficulties some classroom assistants faced in accessing training, as well as the pressure on teachers' time to obtain training.

Salvesen Mindroom Centre's submission said that in specialist settings—

“[A] high level of specialised training required in schools where pupils require additional support re. mobility, feeding, intimate care, communication, etc. [There are] examples of supply staff working in these contexts without the adequate training or in-depth knowledge of pupil needs and profiles.”

Training and skills is one of the four themes of the ASL Action Plan. It includes

actions around the role of classroom assistants/pupil support, the support provided by Education Scotland, and teachers' education and continuing professional development.

The Royal Society of Speech and Language Therapists said that while there has been an increase in demand for speech and language therapy services there has been "increasing difficulty to fill vacancies in these services". It argued that "we need to train more speech and language therapists in Scotland" and that there should be more flexible routes into the profession.

Physical and social spaces

NASS stated that the "barriers to attending school for autistic pupils is the social, and built, environment." It continued—

"Autistic pupils feel pressurized into socialising in ways that they are not comfortable with ... the built environment (for example, a large, open-plan school or classrooms) can adversely impact an autistic pupil's experiences."

Govan Law Centre's submission said that the physical environment can be a particular issue for children who are "neurodivergent with a particular sensory profile". The GLC said it is perplexed as to why there is a move towards schools becoming larger. It said, "there are far too many children who are unable to access the physical environment of a school causing them to disengage from their education and indeed withdrawing socially from those around them - this must be looked at as a matter of urgency."

Identification of needs

Duties under the Education (Additional Support for Learning) (Scotland) Act 2004 do not require a formal diagnosis; rather the needs of the child should be assessed and met. The Committee last week heard mixed evidence as to whether a pupil would be more likely to receive greater levels of support if they have a formal diagnosis or not. This also reflects the written evidence the Committee received. Salvesen Mindroom Centre's submission reported that, in some cases, education authorities are waiting for formal diagnoses before putting support in place.

Statutory remedies and parental involvement and engagement

Parental and pupil engagement

Involving parents/carers and pupils in the decisions around their education and support is good practice and is expected for all pupils.

Salvesen Mindroom Centre's submission said that there is "variable practice across, and even within, local authorities" in relation to including families and learners in decision-making. It said, "strong leadership and effective communication between schools and families were key factors in determining positive outcomes for children with ASL".

The Additional Support for Learning Action Plan included a number of actions around Children and Young People's participation and rights. These included the continuance of funding for Enquire and the national advocacy service.

Planning

For children with complex additional support needs, there is likely to be a formal planning process and parents/carers and pupils should be meaningfully involved in that process. In 2022, of the 241,639 children who had an identified additional support need, 1,401 had a co-ordinated support plan, 32,898 had an Individualised Educational Programme (this plan may have another name locally), and 49,200 had a Child's Plan. Pupils could have more than one plan.

Of those three plans, the IEP is likely to be focused on the support within a school. Both the CSP and the Child's Plan are likely to be multi-agency plans. Last week Peter Bain from the SLS said that key to whether CSPs are established and to their success is the relationship between the schools and the other services which are likely to be involved – e.g. health services, social work. Other witnesses suggested that the presence or not of a CSP did not necessarily affect the quality of support provided and could create a significant workload.

Advocacy and Remedies

The Committee is exploring the statutory support and remedies available to families and young people in relation to ASL. These are: access to a supporter, advocacy, mediation, and recourse to the Tribunal.

Salvesen Mindroom Centre's submission stated that raising awareness of the various avenues of redress or support for young people and their families is an important first step. Thereafter, ensuring that young people and their families have access to these services or remedies is important. Scottish Autism's submission stated—

“Our advice line receives regular contact from parents who are exhausted and burnt out because they are continually fighting against barriers within the system. For example, parents will attend multi-agency meetings where they are surrounded by professionals and can feel intimidated and ignored. While the right to have a supporter or an advocacy worker exists in legislation, many advocacy services are significantly oversubscribed and under-resourced.”

Last week the Committee was told that parents with more social capital were better able to manage disputes with local authorities around the provision of support for their child. The Commissioner for Children and Young People Scotland's submission said that it has heard evidence that “parents with the most resource who can make use of the [redress] system” and this contrasts with the data which shows that “pupils who experience social deprivation have a greater likelihood of being identified as having an additional support need”.

Some local authorities' view was that the ASN Tribunal can contribute to an

adversarial relationship between the local authority and their staff and parents/carers. For example, Glasgow City Council's submission stated—

“Tribunal process can be perceived as adversarial at times by the Local Authority. It is extremely time consuming and stressful for families, officers and practitioners. Professionals and families can leave the process with fractured and unhelpful, working relationships. Partnership working beyond Tribunal is essential to ensure we keep children's needs at the centre.”

Ned Sharratt, Senior Researcher (Education, Culture), SPICe Research