

By email to: [disabilityactionplan@cabinetoffice.gov.uk](mailto:disabilityactionplan@cabinetoffice.gov.uk)

6 October, 2023

## ADCS response to the Disability Action Plan 2023 to 2024 call for evidence

1. The Association of Directors of Children's Services Ltd. (ADCS) is the national leadership organisation in England for directors of children's services (DCSs). Under the provisions of the *Children Act (2004)*, the DCS acts as a single point of leadership and accountability for services for children and young people in a local area, including children's social care and education. ADCS welcomes the opportunity to respond to this consultation.
2. This consultation response considers some of the barriers to, and opportunities for providing children's services to children with disabilities, using the broadest definition possible, and considering children and young people up to 25 years old.

### The changing landscape of disability in children

3. Previously, local authorities have primarily supported children with physical disabilities and/or learning disabilities, however, this picture has changed over the last decade and now our teams are supporting children with a wider array of needs. The number of children with social, emotional and mental health needs (SEMH) has significantly increased in recent years, as has the number of children diagnosed with autism and other neurodiversities. Members report a rise in both the number of children and young people with additional learning needs and disabilities, as well as an increase in complexity in terms of profound disabilities overlaid with chronic needs/long term conditions.
4. Implementation of the 2014 SEND reforms has resulted in an overemphasis on securing an Education Health and Care plan (EHCP) in order to access support. Since then, the total number of EHCPs (and statements up to 2019) increased by 215% between 2015 and 2022. Need has risen sharply in recent years, with the number of initial requests for EHCPs increasing by 23% between 2021 and 2022, and the total number of plans increasing by 9% over the same time period. For some of these children and young people, their need for additional support may stem from the Covid-19 pandemic, the impact of which may subside as they progress through school with effective, timely intervention.
5. This has put severe strain on the SEND system, which is reflected in the financial pressures that LAs are facing. In March 2022, the national total Dedicated Schools Grant (DSG) deficit was estimated to stand at approximately £1.9bn, 5.5 times higher than in 2018-19, and predicted to rise to £3.59bn by 2025 without action from government ([CCN, 2022](#)). With 89 LAs in government intervention programmes designed to lower costs and reduce deficits, and the majority of others with high and increasing DSG deficits, it is clear that systemic issues requiring national solutions are at play. These deficits are currently kept off LA balance sheets, but this statutory override is due to end in March 2026. A significant and growing number of LAs face the possibility of issuing section 114 notices if this were to be removed. A complete system and funding overhaul is required to address this, the DfE's SEND and AP improvement plan is not sufficiently ambitious in this regard.

### Join up between departments

6. Members welcome the development of a cross-departmental plan to improve the lives of disabled people, however, children and young people's rights and needs can easily get lost in all-age approaches, so it is important that children are specifically referenced and prioritised. Strategic join up both between and within departments is essential. For children with disabilities, it is crucial that the SEND and AP, and children's social care reforms are considered alongside related reforms, such as the embedding of the latest health re-organisation, the National Safeguarding Practice Review Panel's review into safeguarding children with disabilities in residential settings, Building the Right Support, expansion of childcare entitlements, etc.

## **Social model of disability**

7. Under the medicalised model of the day, the focus is on diagnosing what is 'wrong' with a child or young person, and ways to treat the problem. This has led to a system where parents and carers feel that obtaining a diagnosis and an EHCP is the only way to access the resources and support they feel their child needs to learn, and a drift away from inclusion in mainstream schools, resulting in more children being taught in special schools. Early labelling can translate into a longer term restrictive view of the child's abilities, which is restrictive and unhelpful. On the other hand, a social model of disability looks at how unnecessary barriers can be removed. With this model, we could build a strengths-based system which supports children to achieve their potential. Disincentives need to be removed from the system in order for mainstream schools to become more inclusive, with schools held to account for exclusions and more collaboration between multi academy trusts and LAs, with backstop powers for LAs to admit a child to school, as proposed in the 2022 Schools White Paper. Without this additional lever, the SEND and AP improvement plan's primary aim for more children with SEND to have their needs met in mainstream schools will not easily be achieved.

## **Integration of health and social care services**

8. Health and social care structures are complex and LA and ICB boundaries rarely align. Children and young people have different access and entitlements depending on where they live, even within the same local authority if they fall under different ICBs, or vice versa. ICBs must have a board-level executive lead for children and young people, however, there is also a SEND lead, as well as a lead for all-age mental health, which adds a further layer of complexity to burgeoning arrangements. ADCS members report that children and young people are rarely prioritised in ICB meetings, often being eclipsed by other competing demands in adult care and savings targets.
9. ADCS has previously called for a new system of placed based leadership with the DCS role as system leader and champion for children, with the levers and influence necessary to deliver on the ambitions we hold for children, young people and their families. This approach would be better able to provide joined up support for children with disabilities.
10. Securing integrated funding agreements for children and young people is complex with different priorities, timescales, and sign off routes between health and children's social care. A Better Care Fund is needed for children which encourages greater integration, pooling of resources, and shared accountability. The Continuing Care framework is outdated and needs to be reviewed to better capture the high level complex needs and behaviours which are becoming more prevalent in children and young people.

## **Provision that meets the child's needs holistically**

11. Opening up integrated residential care provision has benefits for both children's social care and health partners, as well as better meeting the holistic needs of children. Members report difficulties in establishing these settings, including governance issues in terms of decision making, and practical challenges in terms of bringing social care and health care staff together under one service. Guidance would be useful here to make the process more streamlined and accessible.
12. Regulation for children's homes which provide healthcare requires dual registration with both Ofsted and the CQC, which is duplicative and adds unnecessary bureaucracy. This should be simplified.

## **Local support**

13. Services should be available locally to support children with disabilities to live at home with their families wherever possible. Mainstream schools must become more inclusive, however more special schools are needed locally for children whose needs cannot be met in mainstream settings, to avoid the need for children to attend residential educational settings which are often at some distance from home. While there has been a substantial number of new special schools approved in recent years, 30 of these have been in the pre-opening phase for three years or more, a third of which have been in the pre-opening phase for at least six years, impacting on SEND place planning. Support is needed for families to care for their children with disabilities at home, e.g. access to short breaks, household adaptations and wraparound care provided in the home. The funding envelope in which LAs are now working has resulted in reduced support for children in the community. Investment here would reduce the need for children to be placed in residential educational institutions far away from their families.

## **Transitions**

14. Inconsistency in service threshold and arrangements across the partnership makes transitioning from children's to adult services is one of the biggest challenges for young people with disabilities. SEND services go up to 25 years old, CAMHS services vary in age limit, and psychological health services change at 18 years, which changes from a paediatric model to one with multiple professionals. These changes impact young people at different times and it can be hard for families to navigate. Ideally, there would be a clearer standardised transition pathway in the future.

## **Workforce**

15. There is a national workforce shortage in many of the roles involved with assessing, supporting, treating and caring for children with disabilities that is contributing to large waiting lists and long delays. ADCS has previously called for an integrated workforce plan for the wider children's workforce to address these recruitment and retention issues, including educational psychologists, speech and language therapists, occupational therapists, residential care workers, SEND teachers, teaching assistants and more.

## **Early years**

16. Early identification of a child's needs and effective, timely support will help children as they transition into school and beyond, with some needs being mitigated entirely with high quality, intensive, early support. Loosening staffing ratios in childcare settings from 1:4 adults to children, to 1:5, will reduce early year's workers' capacity to provide this support. The early year's sector is unstable, with years of chronic under-funding, a

workforce crisis, and now an ambitious expansion of entitlements to adapt to. Given the ongoing focus on supporting working parents and carers, it is likely that one of the unintended consequences of this reform will be that disadvantaged children, including those with disabilities, will not be able to access a high quality early years education, with nurseries more likely to take on those children who require fewer resources to support. Protections or an enhanced offer should be considered for disadvantaged groups to avoid creating a two-tier system.

17. If you would like to discuss any of the points raised in this consultation further, please contact [sarah.wilson@adcs.org.uk](mailto:sarah.wilson@adcs.org.uk) in the first instance.