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Education, health and care plans: What do we know so far?

September 2019 marked the five year anniversary of the implementation of the special educational needs and disability (SEND) reforms within England. Prompted by concerns raised within public reviews and consultation (Ofsted, 2010; Warnock, 2010; DfE, 2011), the reforms were guided by a desire for; greater involvement of children, young people and their families, increased multiagency collaboration and improved outcomes for students throughout their school years and into adulthood (DfE, 2011).

Included within the revision was the introduction of the Education, Health and Care Plan (EHC plan) as a replacement of the pre-existing Statement of Special Educational Need (DfE & DH, 2015). The stated purpose of the EHC plan is “to make special educational provision to meet the special educational needs of the child or young person, to secure the best possible outcomes for them across education, health and social care and, as they get older, prepare them for adulthood” (DfE & DH, 2015, pp.142).

Early feedback from Pathfinder teams – Local Authorities (LAs) tasked with trialling the reforms prior to their full implementation – gave indications of improved multiagency and family involvement, whilst raising concerns about readiness to effectively implement the reforms once they were finalised (Smith et al., 2014; Hill et al, 2014; Thom et al., 2015). The purpose of this literature review is to outline current research regarding the implementation of the SEND reforms and use of EHC plans within England, five years on. It is hoped this will support staff involved in this process in reflecting upon their practices particularly with regard to the central role of children, young people and their families.

Search Strategy

Studies for this literature review were identified from academic databases including ‘British Education Index (BEI)’, ‘ProQuest Social Sciences’ and ‘Web of Science’, and a subsequent snowball
The search identified 32 articles from the first available date until 20th December 2019, using the term “education health and care plan”, incorporating theses, peer-reviewed and government published research. Articles were identified from a range of sources, including; education-focused journals (10), DfE publications (8), doctoral theses (6), medical-focused journals (4), multidisciplinary journals (2), University publications (2) and a survey report. Findings from articles were synthesised into three key themes; experiences of the EHC needs assessment process, reflections on the EHC plan and outcomes of the EHC needs assessment process.

Experiences of the EHC needs assessment process

Families; parental views

The experiences of families, and particularly those of parents whose children and young people (CYP) have had an EHC needs assessment, constitute a significant proportion of the research undertaken to date regarding the EHC process. Ensuring the inclusion and empowerment of parents within the EHC needs assessment process has been identified as a key function for some school staff and educational psychologists (Cochrane, 2016) and has been associated with greater parental satisfaction (Adams et al., 2018). A generally positive picture has been reported regarding the participation of parents and carers in the EHC needs assessment process. Thom et al. (2015) found that 84% of Pathfinder parents felt their views had been included in the process. Similarly, other evaluations of the process have documented experiences of parental involvement in the co-production of their child’s EHC plan (Redwood, 2015; Adams et al., 2017; Eccleston, 2018; Sale and Vincent, 2018).

Accounts of dissatisfaction and barriers to participation have also been shared (Cochrane, 2016; Eccleston, 2016; Adams et al., 2018). Whilst Eccleston’s participants shared experiences which demonstrated their involvement within the process, including involvement of the family in decision making, the role of the key worker as facilitator and feeling empowered, they also shared
experiences which created feelings of alienation, such as their lack of knowledge regarding the process and terminology, power dynamics between home and professionals and the pressure felt to advocate for their child when they were unable.

Redwood cautions the assumption that parents should act as advocates. She notes that parents may be unaware of or conflict with the wishes of their children and may not be able to remain objective (Redwood, 2015). In addition, some parents continue to report insufficient levels of knowledge and confidence in relation to the EHC needs assessment process, and a reliance on professionals to fully understand their rights, roles and responsibilities (Cochrane, 2016; Eccleston, 2016). These factors indicate parent participation in the EHC needs assessment process must be carefully considered and planned, or else may become tokenistic.

Families; children and young people’s involvement

Ensuring opportunities for children and young people to participate within their own EHC needs assessment appear to have proven a more challenging task. The final Pathfinder Programme evaluation found that only 32% of parents felt their child had been actively involved within the process (Thom et al., 2015). Other research has critiqued the extent to which children and young people with SEND have been given the information and support to genuinely participate in the EHC needs process (RIP:STARS et al., 2018a). Barriers to the participation of children and young people were noted within Redwood’s (2015) survey feedback from advice givers, of whom only 21% felt that they had used the child’s preferred method of communication in EHC assessment meetings. Furthermore, only 48% of respondents felt that the child’s views were equally weighted against those of professionals or parents, and none felt children’s views were given greater priority.

The SEND Code of Practice (DfE/DoH, 2015) suggests that local authorities should take a ‘person-centred’ approach to creating plans. ‘Person-centred support’ is an umbrella term referring to a range of approaches and initiatives that aim to give service users an active role in the organisation and commissioning of their services (Glynn et al., 2008). Similarly, ‘person-centred planning’ places
the views of the service user at the heart of the planning and coordination of support. Parents and professionals participating within the EHC needs assessment process have agreed that the philosophy of child-centred assessment and planning is important to families, and that this involvement can produce crucial insights which support the creation of an effective, realistic and relevant EHC plan (Cochrane, 2016; Sales and Vincent, 2018). The two young people interviewed by Eccleston (2016) highlighted person-centred approaches as important facilitators to their participation within the process. However, the extent to which current research demonstrates the use of person-centred planning within the EHC needs assessment process is questionable.

Redwood (2015) found that only 4% of respondents reported the focus child having choice over the length and location of their meetings. Given the likely power imbalances between a child and a room of adults, the lack of control offered to children and young people is unlikely to promote their confident collaboration in the EHC process. Accounts of the EHC needs assessment process in interviews with parents, SENCOs and educational psychologists indicate that, in some circumstances, child participation can be minimal (Cochrane, 2016), for example limited to the initial ‘child’s views’ paperwork submitted within the initial request for assessment. Indeed, some research has queried whether even this level of participation is achieved. For example, Palikara et al (2018) queried the repeated use of the first person within the pupil views section (Section A) of many students’ plans, given that many of the views presented in this section seemed unlikely to come from the students themselves (i.e. due to the complexity of language used).

**Families; age related differences**

A key development of the SEND reforms was the extension of age range. Previously, only children and young people aged between 2-19 were able to access a statutory assessment of SEN. Under the Children and Families Act 2014 this age range has been extended to encompass children and young people from birth to 25-years-old. There are differences in how the parents of children at differing
ages experienced the process of gaining an EHC Plan, particularly when comparing those under 5 years with those at the upper end of the range.

In their thematic report from Pathfinder families, Smith et al. (2014) found that parents of young children hoped the EHC plans would ease their child’s transition to school, and allow them to be fully involved and consulted throughout the planning process for their child. Additionally, alongside parents of children of all ages, they expected the EHC needs assessment process to unite education, health and care assessments, and to lead to a more holistic understanding of their child by professionals.

In the early stages of implementation, feedback from Pathfinders suggested “the older age group... has generally not been high priority” (Thom and Agur, 2014, p.4). Services report the perception that working to support this age group involves similar skills to those used with younger children, although there is a greater importance placed on the transition towards adulthood. In addition, for young people at the upper end of the age range, local authorities staff report greater importance of participation in order to make plans meaningful and useful. Manning (2016) highlights the value of developing self-advocacy skills for young people approaching adulthood, to support their independent decision making.

In addition, it was felt that some families and young people may be unclear about aspects of post-19 provision (Thom and Agur, 2014). For example, it is not guaranteed that young people will retain their plans until 25. Rather, the plan will remain for as long as it takes to achieve their long-term outcomes. Therefore, if a student achieves these, they no longer require the plan, and it will be discontinued. Finally, Thom and Agur (2014) noted the need to support employers, provide practical support (such as transport to work) and to ensure employment was sustainable. However, Robinson et al. (2018) have critiqued the over emphasis on paid work for young people with SEND. They note the under-resourcing of local authorities has impacted upon the provision of opportunities to support young people’s aspirations.
It has been identified that key elements of the EHC needs assessment process seemed related to the age of the child (Adams et al., 2017). For example, 30% of parent respondents felt that children under 5 years old had been listened to, as opposed to 70% of parents or young people themselves who reported that young people aged 16-25 years old were listened to. In comparison, 28% of parents felt their young child (aged less than 5 years) had positive experiences of the EHC needs assessment process, in contrast with 50% of young people and parents reflecting on the experiences of 16-25 year olds. On the other hand, parents were more likely to feel positive about the likelihood of the EHC plan achieving the stated outcomes for younger children than older (74% vs 49% for children under 5 years old and young people aged 16-25 years respectively).

During the closing stages of the Pathfinder Programme, feedback was sought from families for a final time (Thom et al., 2015). The researchers compared the experiences of families whose children had received EHC plans with those of families whose children received Statements of SEN. They found that families whose children were 11 years-old or over, and particularly for those 17 years-old and over, were more likely to report feeling that their views had been considered, services worked closely together and they were satisfied with the EHC process. Families were particularly satisfied where their EHC plan had been transferred from a Learning Difficulty Assessment (LDA).

**Aspiration in planning**

A key driver within the SEND reforms was the need to ensure high expectations for children and young people with SEND, and to recognise the individual aspirations of the students in planning support (DfE, 2011). Current research indicates the extent to which this aim is being achieved has varied. Redwood (2015) reported a consensus from professional and parent participants that the aspirations of the child had been included within their final EHC plan. However, she urges caution in generalising this finding, highlighting the importance of gathering children’s views directly, rather than making assumptions based on the views of adults around them.
Participants who had experienced the EHC needs assessment process highlighted the importance of having an aspirational approach to planning (Cochrane, 2016). They shared experiences of children with SEND being limited by the low expectations of others, such as their teachers. Similarly, young people participating in the RIP:STARS project felt their individual aspirations were not always considered within the process, and overemphasis on diagnoses impacted the expectations others held for them (RIP:STARS et al., 2018a).

**Multiagency working**

A key hope for the SEN reforms was that families would experience a more streamlined process, with less bureaucracy and duplication (Thom et al., 2015). Multiagency working has been consistently identified as a key purpose of the EHC needs assessment process, and is associated with greater parental satisfaction (Cochrane, 2016; Eccleston, 2016; Adams et al., 2018; Sales and Vincent, 2018). To this end, great emphasis was placed on multiagency working in the SEND Code of Practice (DfE & DH, 2015), in the hopes that sharing of information and joint planning would reduce the burden placed on families to repeat information to professionals. The significance of multiagency working is further reinforced within the title of the EHC plan; signifying the collaboration, where appropriate, of education, health and care services.

The importance of multiagency working has been raised repeatedly through government initiatives, such as Every Child Matters (HM Treasury, 2003), or in response to serious case reviews (Home Office, 2014). Despite this longstanding emphasis, there was felt to be a lack of clarity as to how multiagency planning would work under the new reforms, due to a lack of specificity within the SEND Code of Practice (Redwood, 2015). This may reflect the decentralisation agenda being pursued by previous (Conservative-Liberal Democrat Coalition, 2010-2015) and current (Conservative, 2015-present) Governments (i.e. Clark, 2012), offering local authorities the opportunity to develop processes that reflect their own local contexts.
Early feedback from families within the Pathfinder Programme indicated that many had experienced increased levels of multiagency working. This was particularly the case within initial meetings, where multiple professionals were able to share and jointly plan (Smith et al., 2014; Thom et al., 2015). More recent case studies have also indicated ongoing multiagency input within the EHC needs assessment process (Redwood, 2015; Cochrane, 2016; Eccleston, 2016).

Despite these positive reflections, more recent investigations of multiagency working have highlighted feelings of frustration from families and professionals when other services were unable to attend meetings (Redwood, 2015; Cochrane, 2016). Participants also emphasised the challenges of multiagency working with services whose professionals are generally less accessible, such as those in the health services or in social care. It was felt that these professionals might have had less training regarding the EHC needs assessment process, and that expectations about roles and purposes may widely differ. Eccleston (2016) also draws attention to the power dynamics at play within these relationships, and the potential for parents to feel disempowered or alienated from the process where they lack the knowledge or confidence to work in partnership with professionals.

Despite repeated emphasis on multiagency working, barriers to the effective collaboration of different professionals are regularly identified (Sloper, 2004). Common barriers include; lack of clarity regarding roles, poor leadership, poor information sharing systems, lack of training and lack of time. Concerns have been raised as to how differing disciplines might be able to collaborate to create a holistic view of individual children. Several authors have considered the discrepancy between those who hold the social model of disability and those who adopt the medical model of disability (Norwich and Eaton, 2015; Castro-Kemp et al., 2019). It is anticipated that these groups are likely to construct the needs of children in very different ways. Norwich and Eaton (2015) propose that the “easy-going pragmatism” (pp.127) of the SEND Code of Practice (DfE/DoH, 2015) does not address how professionals from differing disciplines will work together to formulate a cohesive EHC plan.
The inclusion of multiagency working as a statutory duty within the EHC needs assessment may present local authorities with the impetus to address these barriers. In an initial survey of 31 professionals who had submitted advice during EHC needs assessments, 61% reported being happy with their experiences of multiagency working (Redwood, 2015). In addition, 83% felt that the relationships between professionals had been positive. In particular, respondents noted the importance of good interpersonal skills, strong leadership from the key worker, a lack of professional hierarchy and time to co-construct within the process.

**SENCO perspectives**

Whilst the reforms will have implications for health and social care services, they have the greatest impact on schools and other education settings. In particular, they have key implications for those with responsibility for supporting children with SEN and their families; the special educational needs co-ordinators (SENCOs). Prior to the release of the SEND Code of Practice (DfE/DoH, 2015), Robertson (2012) conjectured that SENCOs would likely be expected to champion change within their schools. Gore (2016) shared SENCOs’ accounts of their key roles within the process, acting to support, inform and guide parents. Gore noted the emotional impact some experienced, as participants recounted the importance of relationships, experiences of aggression and the perceived need to extend beyond professional boundaries at times, i.e. sharing their home telephone numbers.

Prior to 2014, SENCOs anticipating the reforms reported predicting a reduction in the numbers of children identified with SEN (Pearson et al., 2015). Indeed, Recent data indicates, whilst the number of students identified as having SEN had been on a downward trend between 2010 and 2016, the number of students identified with SEND in England has steadily increased over the past 3 years (DfE, 2019a). In addition, the total number of students with Statements of SEN and EHC plans has increased from 2.8% of the population to 3.1% (DfE, 2019a). A 2018 NASWUT survey indicates 50% of teacher respondents had taken on additional work to support with writing of EHC Plans.
Research conducted prior to the introduction of the SEND Code of Practice found SENCOs felt optimistic about opportunities for multiagency working, but shared some reservations about how it would be coordinated, and whether access to services would reduce in light of cuts to budgets (Pearson et al., 2015). Boesley and Crane (2018) shared SENCO views about the importance of collaboration within their roles, and shared similar frustrations to families with limited or inappropriate involvement of health and social care services.

SENCOs reported being generally positive about the renewed importance of the family, and anticipated an increased need for strong relationships between schools and parents (Pearson et al., 2015). Subsequent research with SENCOs has reiterated the importance of relationships, for both partners (Gore, 2016). This included the reflection that, as parents are delegated a greater role in the EHC needs assessment process, power balances have shifted and schools may need to rely on their relationships with families to ensure they are fully included.

Early feedback from Pathfinder Programme participants indicated many schools and local authorities were still in the early stages of the program, and systems were still being identified and prepared (Hill et al., 2014). A primary theme drawn through consultation with schools in five local authorities was the need for training and workforce development. The continued need for training and support was identified by Cochrane (2016) and Gore (2016), whose SENCO participants reported low levels of knowledge and confidence when embarking on the process, and poor support offered by staff within Local Authorities. Boesley and Crane (2018) reported SENCOs’ frustrations with a lack of transparency, information and consistency within a process that was constantly evolving. Those whose students lived on boundaries between local authorities described the variability of practice between different areas, and others highlighted the pressure of ongoing funding cuts on school budgets, which increased the desirability of EHC plans, which were often associated with additional funding.
This finding has key implications when considering the value placed on professionals’ knowledge by parents (Cochrane, 2016; Eccleston, 2016). The gap between SENCOs’ perception of their knowledge and skills, and the expectations placed on them by parents may relate to feedback from parents that, whilst they value the support offered by school staff, they frequently desired input from independent advice services (Skipp and Hopwood, 2015).

**Reflections on the EHC plan**

**Quality of EHC plans**

As the SEND reforms have become more embedded, the research focus has begun to shift towards exploring the final product of the EHC process; the EHC plan. Reviews have highlighted the importance of a holistic vision within EHC plans, which were felt to primarily focus on educational needs and outcomes (Castro-Kemp et al., 2019). Quality review of 18 EHC plans, conducted by a panel of ten professionals working with SEND, indicated most plans had been able to include the statutory requirements (Adams et al., 2018). They were found to be less successful at achieving accessibility and in representing the principles of the Children and Families Act and the SEND Code of Practice (i.e. participation, clear description of strengths and needs and unambiguous provision), which has been echoed through young person-led research (RIP:STARS et al., 2018a).

EHC plans have been critiqued for resulting in a reductionist, within-child view of the support needs of students (Buck 2015; Hunter et al., 2019). Rather than developing a wider, holistic understanding of the student and how they interact with their environment, EHC plans may focus overly on the ‘problems’ faced, locating their cause within the student themselves. Hunter et al. (2019) challenges the notion that EHC plans should be assumed to be positive artefacts within the lives of children and young people. Instead they suggest that plans often fail to recognise the role of environment and cultural values in how we position children and young people.

**Quality of EHC plans; Outcomes**
Particular consideration has been given to the quality of the outcomes written into plans (Castro et al., 2019; Castro-Kemp et al., 2019). Using the Goal Functionality Scale, which aims to assess the functionality of an outcome, researchers concluded that the majority of plans within their sample were of low quality (Castro et al., 2019). Further analysis of the data revealed differences in the quality of plans between more or less affluent local authorities, and between the plans of children and young people attending mainstream and specialist provisions.

The inclusion of aspirational, positively framed outcomes has been highlighted by parents as of particular importance (Cochrane, 2016; Skipp and Hopwood, 2016; Adams et al., 2018). Some parents reported concerns about the poor educational outcomes described within their child’s EHC plan, and dislike of assessments that were primarily deficit focussed (Cochrane, 2016; Skipp and Hopwood, 2016).

Specificity within plans has previously been associated with greater parental satisfaction (Skipp and Hopwood, 2016). However, Buck (2015) highlights that care must be taken when considering outcomes, to ensure they do not create a reductionist, within-child approach to supporting children with SEND. He reflects that, over time, there has been a shift towards the social model of disability, which takes a critical look at the impact of wider environmental and societal factors on individuals’ quality of life and experience. This means that wider factors, for example learning environment, teacher expectations and family dynamics might be considered when examining barriers to learning.

**Personal budgets**

Personal budgets are provided by local authorities where parents choose to directly commission some of the support identified within the EHC plan. Limited information about personal budgets is contained within the SEND Code of Practice (DfE & DH, 2015), leading to challenges for both families and practitioners to understand their purpose. Very few respondents reported being aware of personal budgets within Adams et al.’s survey (2017) with a fifth of respondents remembered being given the option of a personal budget, of which 28% chose to request one. 45% of participants
reported that they had not received any information about the personal budget. Overall 5% of the total number of respondents had accessed a personal budget. National statistics indicate 4.4% of children and young people with EHC plans have personal budgets (DfE, 2019b).

Some consideration has been given to the commissioning arrangements of personal budgets, with particular reference to health services (Gough et al., 2014; Ko, 2015). Gough et al. (2014) highlight the need to consider how personal budgets impact block contracts, which are traditionally used to reduce the costs of commissioned services. In a similar vein, SENCOs anticipating the introduction of the SEND reforms approached personal budgets with negative perceptions, predicting implications for staffing (Pearson et al., 2015). The authors note that personal budgets are “seen as a withdrawal, rather than a redirection, of funds” (pp. 15), and that SENCOs were concerned about how to support families in making choices about budgets. This concern regarding a reduction in funding was echoed by parents, whose children had been issued an EHC plan, who stated “…we were always adamant that … whatever money comes from it, it just goes straight into school, because that's where he needs the support most” (pp. 105, Cochrane, 2016).

Despite these concerns, there is some indication that personal budgets have achieved positive outcomes for some children and their families. Qualitative feedback from families within the pathfinder research who had received personal budgets was positive, particularly where these had been used to secure additional services (Thom et al., 2015). It was felt that this improved the young person’s sense of independence and control, particularly for older students. Further examples of successful personal budgets were also highlighted through case studies, including the use of budgets to support travel and encourage independence (Mott Macdonald, 2015).

Outcomes of the EHC needs assessment process

As the EHC process has become more embedded, research has begun to emerge relating to post-assessment experiences for children, young people and their families. Blatchford and Webster (2018) found that additional support from a teaching assistant was the most likely outcome of the
additional funding provided by the EHC plan for students in mainstream schools and was perceived to be central to their inclusion. They raise concerns about the over-reliance on additional adult support to meet needs, without clarity on the approaches and techniques which are most successful in support these students. This consideration has also been reflected in school staff interviews regarding the utility of statutory advice provided by educational psychologists (Vivash and Morgan, 2019). Teachers and teaching assistants report that EHC plans provide the ‘what to do’ but not the ‘how to do it’, leading to ambiguity in practice.

Whilst involvement from a range of professionals has been highlighted as a key aim and benefit of the EHC process, Thom et al. (2015) noted that much of this multiagency working had fallen away by the review, and often this was left to families and schools to complete, perhaps reflecting the cessation of the statutory imperative for external services. Others have noted concerns about the limited involvement of external agencies in the delivery of provision following the EHC plan (Cochrane, 2016). It was felt by some school staff that these specialised aspects of provision were often left to the schools themselves to deliver, without the training and support of the services who had identified the provision.

Preparation for adulthood was a key theme within the SEND Code of Practice (DfE & DH, 2015). Despite this, employment opportunities for young people with disabilities remain limited. Hunter et al. (2019) reflect that, despite the development of supported employment and training opportunities for young people with additional needs, rates of employment within this population remain poor.

Conclusion

Over the last five years, much of the research about the EHC needs assessment process has focused on the experiences of those involved. Generally, parental involvement seems to have improved, and there is some indication that multiagency working has increased. However, there are continued
accounts of limited children and young peoples’ involvement, particularly in considering how children and young peoples’ aspirations can be elicited and built upon throughout the EHC needs assessment process. Guidance such as the RIP:STARS quality and rights-based framework for professionals can provide further support for professionals in this area (RIP:STARS et al., 2018b).

The knowledge of school staff, and particularly that of SENCOs has been highlighted as key to the success of the EHC process. However there is a need for further information and training for school staff, as Local Authorities continue to develop the process, in order to develop SENCOs confidence in working in a person-centred way. In addition, recognition should be given to the increase in workload that has resulted from the SEND reforms with SENCOs continuing to play a central role supporting of parents, coordination of multiagency working and, in some cases, writing of EHC plans. Research highlights the variable quality of EHC plans and the outcomes identified for students. However whilst some express concerns that outcomes and plans lack specificity and functionality, others warn of the potential for a reductionist, within-child perspective.

Emerging evidence regarding the outcomes of the EHC needs assessment process indicates the aim of ensuring an aspirational approach to the support of students with SEND requires further development. Researchers suggest that EHC Plans have typically focused on the ‘what’ and not the ‘how’; focused on the staffing more so than the particular approaches and techniques which will best ensure CYP make progress. To this end, there is a need for future research on how to effectively involve CYP with SEND in statutory processes and how best to implement the plan. In the words of the RIP:STARS – Ben, Eva, Heidi, Jordan, Tom and Vandana – “A good plan should include and support a young person’s skills, strengths, ambitions and rights. We want to make sure that disabled young people have a real say about what is in their plan – it should be ‘Nothing About Us, Without Us’” (pp. 5, RIP:STARS, 2018a).
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