**Royal College of Occupational Therapists submission to the Education Committee’s inquiry into support for children and young people with special educational needs and disabilities (SEND).**

This submission is made on behalf of the Royal College of Occupational Therapists, the professional body for 33,000 occupational therapy professionals across the UK.

The submission is made in response to the Education Committee’s inquiry into the success of the 2014 SEND reforms, their implementation and the impact they are having in meeting the challenges faced by children and young people with special educational needs and disabilities. It includes service examples which demonstrate how, when used effectively, occupational therapy can improve children’s outcomes and is cost effective. For further information on any aspect of this response, please contact the Royal College.

**Executive Summary**

This response outlines the vital role of occupational therapists in enabling young people with special educational needs and disabilities to receive the tailored help and support they need to achieve the best outcomes in life. Key points to note from this submission include:

* Occupational therapists are one of the key professionals involved in supporting children and young people with special educational needs and disabilities.
* Occupational therapists work across health, education and social care and are uniquely trained to address physical and mental health, and the environmental and social factors that affect children’s development and participation.
* Occupational therapists work in partnership with families and health, education and social care professionals to enable children and young people with special educational needs and disabilities to reach their potential and engage in meaningful occupations of childhood.
* Increasing demand, limited resources and lack of provision for young people with special educational needs/disabilities aged 19-25 years means that some young people have difficulty accessing occupational therapy.

**Submission**

* **Assessment and support of children and young people with SEND.**

Occupational therapists are one of the key professionals involved in assessing and supporting children and young people with SEND. Working across health, education and social care, we have the skills, expertise and opportunity to assess young people in the most appropriate environment (at home, school/nursery/college or another setting) to identify contextually-relevant recommendations.

Occupational therapists are committed to person-centred practice and the involvement of families/carers in all stages of the therapeutic process. Assessing the views, interests, aspirations and priorities of the young person is the foundation of our assessment process and ensures that our recommendations are meaningful and relevant to the individual.

We understand that the dynamic relationship between the child, occupations and environments change over time, and are skilled in adapting our assessments and support to enable young people to develop skills, participate in meaningful activities and achieve their potential at home, school/nursery/college, at work and in other settings.

As a science-based profession, occupational therapists incorporate evidence–based practice into our work to ensure the best outcomes for children and families.

RCOT has produced guidance and provided training on the EHCP process to ensure occupational therapists write high quality reports, identify appropriate outcomes and include relevant recommendations that address meaningful occupational outcomes at home, at school and in community settings.

***Service example – assessing children’s views and priorities***

Occupational therapists in Solihull use coloured picture cards to explore young people’s views about the activities they do well and those they find more challenging at home and at school. Activities are prioritised and strategies developed to address issues of concern to the young person as well as those identified by parents/carers, other professionals and the occupational therapist. An action plan is agreed with outcomes that are contextually relevant and meaningful to the individual. This forms the basis of recommendations submitted as part of the EHCP process.

***Challenges identified***

Demand for occupational therapy continues to outstrip supply in many areas, and in some regions recruitment to specialist posts is difficult. This means that some children and young people have to wait too long to benefit from occupational therapy assessment and support.

Support for implementing occupational therapy recommendations varies between settings, impacting on well-being and outcomes for the young person and their family. Limited resources and poor understanding of the SEND process means that some settings are reluctant to implement occupational therapy recommendations unless a young person has a diagnosis and an EHCP.

Some parents/carers regard an EHCP as the only way to access support for their child creating inappropriate expectations and disappointment if a child does not meet the required threshold. Limited therapy resources can be taken up by attending or preparing for mediation meetings/SEND tribunals if the SEND process is not properly explained or understood by families.

In some areas systems are not in place for clinicians to review draft EHC plans before they are finalised, meaning that occupational therapy assessment findings and recommendations may be misinterpreted when reports are translated into an EHCP.

Technology and concerns about information governance make communication between occupational therapists, education and social care difficult in some areas causing delays to processes and hindering the co-production of EHCPs. A lack of clear communication pathways between professionals in health and education means that many therapy services receive assessment requests via a variety of different routes with multiple requests for information to the same or the wrong person.

* **The transition from statements of special educational needs and Learning Disability Assessments to Education, Health and Care Plans (EHCPs)**

The requirement to produce up to date reports to support the transition from statements of educational needs and Learning Disability Assessments to EHCPs placed a heavy demand on occupational therapists during the transition period. Prioritising ECHP transition reports meant other children may have waited longer to see an occupational therapist.

* **The level and distribution of funding for SEND provision**

Young people with SEND may require specialist equipment or environmental adaptations to enable them to access learning and living opportunities and occupational therapists have the skills and expertise to identify the most appropriate equipment or adaptation to meet an individual’s needs. Occupational therapists are skilled in assessing the young person and their environment, identifying risks and training staff/carers to use equipment safely.

***Service example - Equipment***

A young lady with physical disabilities in Hackney needed a hi-low powered wheelchair to enable her to access science labs and other classrooms with variable height surfaces. Whilst wheelchair services (funded by social care) were willing to fund a powered chair, the occupational therapist negotiated for health and education to contribute additional resources to provide a height-adjustable chair. The young lady could therefore be supplied with one chair that met all her postural and access needs at home and at school.

***Challenges***

Uncertainty about the responsibility for funding and provision of specialist seating and equipment in schools/settings means that some young people with SEND, experience unacceptable delays in receiving the equipment they need to enable their performance and reduce the risk of long term health complications. This is a particular problem for children in early year’s settings when the local authority will not fund specialist equipment and small organisations are unable to afford specialist equipment.

The squeeze on school budgets means that there are fewer resources available to implement occupational therapy recommendations. In particular, a reduction in the number of teaching/support assistants means that some children are unable to access intervention groups recommended by occupational therapists and delivered by school staff (for example, motor skills groups), or access them less frequently than recommended.

* **The roles of and co-operation between education, health and social care sectors**

Occupational therapists work across health, education and social care and are uniquely trained to address physical and mental health and the environmental and social factors that affect children’s learning, development and participation.

Occupational therapists recognise the need for multi-agency cooperation to ensure that children’s needs are identified and services are delivered effectively to optimise living and learning opportunities in children with special educational needs and disabilities.

***Service example – Multi-agency cooperation***

In Buckinghamshire occupational therapists attend the weekly panel that reviews requests for an EHCP assessment. Although preparing for and attending the meeting takes time, occupational therapists now have a good understanding of the assessment process and can support parents/schools to make appropriate referrals which saves time and frustration. Being present at panel meetings also means that occupational therapists can identify children who would really benefit from an occupational therapy referral as part of the EHC assessment, reducing the number of inappropriate referrals to their service.

***Challenges***

Occupational therapists working in social care settings to support young people with more complex needs are not routinely asked to contribute to the EHCP process.

Many young people who don’t reach the threshold for an EHCP are known to occupational therapists, but don’t always benefit from coordinated support from health, education and social care.

* **Provision for 19-25-year olds including support for independent living, transition to adult services, and access to education, apprenticeships and work**

Occupational therapists work across the lifespan and have the skills and expertise to enable young people aged 19-25 years with SEND to develop independent living skills and to access education, apprenticeships and work.

***Service example – Higher education***

The Student Health and Well-being Team at Leeds College of Music is led by an occupational therapist and supports students aged 18-25 with a range of emotional and mental health issues. Students receive individualised support and reasonable adjustments to promote their health and well-being to ensure they reach their personal and academic potential.

***Challenges***

In the NHS, occupational therapy services for children and young people are traditionally commissioned for people aged 0-18 years. People with SEND aged 19-25 may therefore have difficulty accessing occupational therapy assessments or support as part of an EHCP. This is a particular challenge for young people whose needs do not become apparent until their later teenage years (including those with ADHD, autism, dyspraxia/developmental coordination disorder).

Young people approaching transition to adult services may have received occupational therapy in the past, but may not have had regular, recent involvement. Additional investment will therefore be required to facilitate an up-to-date occupational therapy assessment to ensure that their EHCP recommendations are current and relevant.

**Final comments**

Occupational therapists have relevant skills and expertise to support children and young people with special educational needs and disabilities. Our unique ability to assess physical and mental health, environmental and social factors and to see young people at home, school/nursery, at college/work and in community settings means we are well-placed to identify and address factors to enable their learning, performance and engagement.

Investing in occupational therapy will therefore maximise the potential of the profession to support the SEND reforms to ensure that children and young people aged 0-25 years can access the support they need to develop their skills, optimise their potential and successfully engage in meaningful occupations at all stages of their life.

**About the Royal College**

The Royal College of Occupational Therapists is the UK Professional Body and Trade Union for 33,000 Occupational Therapists, support workers, managers and students. Occupational Therapy enables people of all ages to participate in daily life to improve health and wellbeing. They are the only Allied Health Profession trained at a pre-registration level to work within both physical and mental health and work across both health and social care.

**Contact**

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