

Our Voice ‘Meet the SEND Heads’ panel session 11.3.22 Questions and Answers

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SEN Services & Education

Capacity at schools and approach to children out of school

1. With regards to children who have been out of school for extended periods and whose parents don't feel that addressing this has been a priority for the LA - Is there a problem with capacity at our schools (particularly special schools) and if so, what is being done to address this? Who is responsible and why doesn't this seem to be a priority?

There is no real issue with capacity in our schools. However, there have been some issues in some schools with staff absence due to COVID and this continues. There is a strong recognition at school, LA and government level that COVID has had a massive impact on Children's education so this is a priority and additional funding through, for example, the tutoring programme has been provided.

2. How does the borough track and monitor our SEN population from when they enter the SENs radar, and ensure that there is sufficient provision for them? It appears that there are too few places for our children at Special schools. Mainstream is not always an option, and, in some cases, parents are being told to go out of borough. How can this be right, and what options are available to parents? Are SEN parents expected to hunt possible places down on their own?

We have a Knowledge and Insight team, and we also calculate within the service the increases in our EHCP population. Further we are expanding our schools through Designated units, Additional Resource Provision and we are preparing to develop further special schools within the borough.

3. My son has got an EHCP, and we have been waiting for a special school since 2020, and have not been offered a place yet? Why is it this hard? [See above](#)

4. My 9-year-old son is not attending school full time he only attending 2.5hrs a day, he is waiting for EHCP to be put in place, but until that's in place the school is only allowing him to attend for this short time. He was diagnosed as Autistic in 2018. Isn't this illegal? What should I do?

Without knowing the detail of your situation, I cannot comment on the delay. Normally the plan is drafted within 14 weeks and the service then consults with a school. Where we are unable to identify a local place then we do consider places outside of Enfield. If you provide the SEN Manager, Zulkifl Ahmed with the detail, he will be able to consider this for you.

School normally does a reduced timetables if the child is struggling to make a transition to school. That means they are struggling to separate from parents, or they find it difficult to be in the classroom with other children, but the school should inform you and agree a way that the child can manage with a full-time programme. You should discuss this with the school SENCO.

Communications issues

5. How are parents meant to be communicated with and kept up to date with what's happening? Should the SEN team not be initiating contact in situations like this (where children are out of school for extended periods) and giving regular updates and if so, how often should parents expect to hear?

If the child has an EHCP, and you have a problem with the placement, you should discuss this with the school in the first place. You can also discuss this with your EHC co-ordinator if there is a EHCP



in place. We endeavour to respond to all queries within 5 days. There are times of the year when we are extremely busy, this is when we are doing phase transfers to primary and secondary, and this occurs between January and February. If you do not get a response from your SEN EHC Co-ordinator, you should contact their team-leader, SEN Manager and if not, the Head of Service.

6. I never seem to get any response to my emails to the SEN Services Manager. What is being done to improve communication? Why do the team not keep parents updated on what is going on, so parents have to keep chasing up all the time?

If you have a concern about your EHCP then you should contact your SEN EHC Co-Ordinator, if you don't get a response from them in the required 5 days, you should contact their manager, this should be at the bottom of their emails. Where a team-leader does not respond you should contact the SEN Manager then and if they do not respond then it is the Head of SEN. Please see the attached structure chart.

Annual Reviews

7. Why did I not receive copy of the updated EHCP following the annual review which took place last June?

You should have received this, please get in contact with the service.

8. My child's annual review is coming up, but I still haven't received last year's – so what will the review be based on? My child's annual review is coming up, but I still haven't received last year's – so what will the review be based on?

We know that this is an area to be developed and we are currently reviewing this to make sure that the process is clear and that we are co-ordinating with the schools so that we can make certain that the amendments happen within 2 weeks.

9. Does the team expect to change their approach following the recent High Court Judgement stating that within 4 weeks of an Annual Review the LA must issue the draft updated version (or maintain it unchanged or cease it) and that the updated EHCPs must be finalised within 12 weeks? (Ref R (L, M, and P), v Devon County Council (2022 EHC+WC 493 (Admin))? [See above](#).

10. My kids' school have said they do not have to carry out EHCP reviews. Is this correct and if not, what should I do? [This is incorrect. In these circumstances you should contact your SEN officer \(see SEN structure chart\) and they will work with the school to undertake the Annual Review.](#)

11. Additional questions/comments on the same topic:

- we had our review on 14th Jan and I'm still waiting to finalise it.
- Our son's EHCP annual review took place in June last year and we still have not received the revised copy for 2021/2022

[Please get in contact with Seema Shah, the manager for young people up to age 14 and Melanie Alder for young people who are aged 14 plus.](#)

Accountability for ensuring funding for provision in EHCP is spent on child

12. My child has funding for 22 hours LSA support. Does the school have to provide one to one for those ours or is her support expected to be shared amongst others in the class or school? The school are telling me that it's not that straight forward.

The school do not have to provide 1-1. They may provide some 1-1 for specific areas of learning. They may do small group work, or they may spend more time making sure that your child can access learning. This should be set out in Sections E&F of the EHCP.

13. Can you explain why our son's case officer refuses to meet the school to ensure the money is given by the LA (from us all and all taxpayers) is spent on the provisions outlined as in the EHCP and backed up by SENDIST? The officer says that she will only attend the AR at the end of the year. How does the LA ensure the EHCP it is being followed by school after parent raises her concerns? The SEN officer's role is to support with the implementation of the EHCP and coordinating the Annual Review process. At present we do not audit how schools spend their budgets and you should discuss this in the first instance with the school.

14. Why do schools accept kids with special needs if there are not facilities for them? What is being done to ensure that mainstream schools in Enfield provide adequate support for children with special needs and allocate the funding for the child's EHCP and is there any accountability for implementing that plan and do you feel that it is happening effectively?
All schools where a child has an EHCP have the support in place through the plan, this is monitored at the Annual Review. We are currently developing our Annual Review framework and also dip-sampling the support in schools to make sure that the child/young person is receiving the right support. The LA have never had concerns with schools implementing the funding in EHCPs. We are by exception going to do a dip-sampling of some of the plans to review some of the plans so that we gain a deeper understanding of how schools are implementing them.

15. Our daughter has an EHCP for social, emotional and specific learning difficulties. She receives very few interventions, and we believe the school is using both her EHCP and Pupil Premium Plus funding to provide small group support to the 5x kids in her class who have behavioural issues and no EHCP between them. Who is responsible for ensuring that the funding is used for her benefit and do we have the right to see how the budget is spent or get some kind of reporting on how this is done? If the school cannot provide 1-2-1 or small group interventions with children with similar issues can EHCP funding be used to be pay for external tutorial support?
This question has been answered above. You can pick this up with the school and ask them directly or you could have a discussion with your allocated SEN officer.

Help and support

16. When parents are struggling to get help (especially those with children in mainstream schools), is there one place where they can call to get real help rather than being sent round in circles?
It depends on what the needs are. For EHCP related issues it is the SEN team, otherwise the school or educational setting should be the first place to ask questions about support.

SENCOs and teachers' knowledge and training

17. Are SENCOs fully trained and do they hold recognized qualifications or certifications on SEND/Autism?

- It seems like any member of staff can become a SENCO with no SEN training or qualifications.
- Most teachers and TAs do not know how to teach children with autism
- Are Senco retrained on a yearly basis? One Course can't be sufficient
- I agree, my daughter's schools senco is a lovely lady, but she has no clue on autism in girls unfortunately

- my children's needs were not picked up by the school. In fact, a year 6 teacher refused to teach my son because she thought he was just playing up
- What about refresh courses for senco?
- Will you ensure that a SENCO is definitely a qualified member of staff in SEN?

SENCOS are qualified teachers and follow training in how to support children across a wide range of SEN, this includes Autism. Some then specialise in specific areas of SEND.

See also this [additional response from EASA](#) SENCOS usually undertake additional post-graduate training such as the National Award for Special Educational Needs Coordinator (NASENCo). <https://nasen.org.uk/page/nasenco> This covers all aspects of the role and different special educational needs, including autism. These courses usually require trainees to choose an area of interest to specialise in, so not all SENCOS would necessarily know autism in depth, but they should have a good general knowledge. In Enfield, course leaders encourage all trainee SENCOS to learn about local needs and services and I gave a presentation to the current cohort recently about the work of EASA, our role in supporting schools and resources available for learning more about autism e.g. the Autism Education Trust's suite of resources for School Leaders.

The majority of schools also buy into the SEN traded offer where they are learning about new methodologies and teaching practice around specific areas of SEN. All teachers and SENCOS are required to undertake Continued professional development.

18. How much training do schoolteachers and TAs in mainstream schools receive on autism and SEND?

EASA has a training offer available to all schools, and PL SEND offer is available too as well as so many other services. Most schools hold weekly INSET training twilights and SEND may be on the agenda as well as all other school matters. It really does vary from school to school. Sorry to be vague. All schools have to have a qualified SENCO. [Additional response from EASA](#)

This varies from school to school. The borough has a good autism training offer, much of which is free for staff to access provided by EASA and the local Speech and Language Team. However, it is not compulsory for staff to be trained, so take-up varies. EASA is now gathering information about levels of training across schools and strongly advising staff to book and attend training.

19. My son has autism. He is 5 years' old. Originally from September until January he went to the school only 2 hours daily, but since he has had his EHCP in place in January he has been attending full time and needs a person to support him there. Can this person be a specialized one, who can understand autism or at least to have experience of working with children? Otherwise, I don't think the EHCP will be properly implemented. Who is responsible for checking that it is implemented effectively?

The school should identify what the right support is. Schools cannot have specialists for every child. The SENCO should be able to co-ordinate and advise on the right support. There are also LSA's that have specialist areas of knowledge to support students. Any concerns about teacher competence should be picked up with the Head Teacher. [Additional response from EASA](#) Schools employ Teaching Assistants and Learning Support Assistants to work with pupils with additional needs. There is no guarantee that the person employed will have previous experience or understanding of autism but they should be willing to learn. Enfield has training available for them and schools should encourage and support their staff to access this training.

EHCPs

20. Legislation states that provision in EHCPs should be 'SMART' and must state who is doing what, when and for how long/often. However, in many Plans wording around provision is very vague with phrases like "have access to" or "will need adult support" being used. What are the SEND team doing to ensure that provision in plans is more specific?

SEN have developed a new quality assurance procedure and we have reviewed our advice processes so that plans are SMART. Any plan issued in the last 3 months should be SMART. All previous EHCP will be picked up at the Annual Review and amended to the new ENFIELD template and to reflect the changes we have introduced.

21. When do you plan for all EHCPs to have the same look and template by? [Answered above in Q20.](#)

Needs Assessments

22. As you are unable to get accepted by CAMHS for assessments for Autism, do SEN Services accept private assessments in order to get intervention and support such as EHCPs?

[You do not need a diagnosis to request a statutory EHC needs assessment. We do consider other reports, but we would not want parents to spend money unnecessarily.](#)

Covid impact and catch up after Covid

23. Due to the situation last year my son has missed a huge amount of learning, particularly as he wasn't able to engage with online learning. I am worried about how much he has regressed, and it isn't clear to me what additional support he is getting to get back to where he was. Can you tell me what has been put in place to support children with SEND, and whether this support will be available for the extended period it may take some children to get back on track?

[The government put in a range of support in place to support children to catch up in school. Schools also put in their own support as well to help children and young people to catch up.](#)

24. The Covid pandemic has had a huge impact on children with SEND and their families, my son developed greater level of anxiety and phobia leading almost to OCD for which we are seeking help. I almost feel these children and their families were forgotten. At the start of the pandemic there were no clear guidelines and as a result the school wasn't taking children with SEND. Children were left without their normal structure and routine and parents were left to home-school with no support and no respite. What are your views on this, and what would you do differently if there was a next time?

[We are aware that the Pandemic has had a significant impact on our children and young people. We had a Covid19 inspection that reviewed our practices and how we responded to the pandemic. We have also as part of our Self-evaluation framework started to include lessons learned from the pandemic. No borough in the country or even the government had a plan for a pandemic, but clearly now all boroughs will be more prepared. Some of our schools for example have now developed their online learning and as a SEN service we have also realised that TEAMS has helped the service to attend more meetings with schools and that we can have more people attend meetings. There has been some good learning for the SEN service. This is also now part of our Self Evaluation Framework.](#)

Other questions

25. If we wanted to keep our son back a year to help him progress, is this something that it's possible to do?
You would have to discuss this with the school to see if it is appropriate and will benefit the child.
26. What is the agenda of Enfield Council when it continuously refuses a service that child with SEN is entitled to? This continuous refusal extends to Director level as part of the appeals process. Only when you involve the Local Government Ombudsman (when the appeals process has been exhausted) do you get what your child is entitled to in the first place as your departments fail to follow Statutory Government Guidelines. These delaying tactics are obviously to save the council money at the expense of children with special needs. Why is that fair?
It is unclear as to what this question refers to. However, the council does follow statutory guidance. Schools receive funding from the government through the Designated Schools Grant which is a fixed pot of money which comes from central government – this is always spent and indeed the High Needs part is overspent!
27. If an EHCP is written up after the secondary school admissions date, will parents get to change the school that their child goes to, even if they have initially accepted an offer from a different school? You would need to discuss this with your SEN officer.
The service normally consults with the EHCP. If you are asking about a change in placement then again, we would as a service facilitate this discussion.
28. My child is in a mainstream school and has extreme behavioural difficulties, which at times makes learning difficult and ensuring himself and others are safe. Services like SWERRL have been insufficient to help but there is no specialist provision for SEMH KS1 and below. What happens to my child until KS2, particularly when he's at risk of exclusion despite having services like SWERRL involved?
All schools have access to an Educational Psychology service who can support with behavioural challenges as can the Early Help Service
29. Our son is 4 years old and will be starting school in September. He has eating issues and potty training still. Will his needs be met at school in Enfield? Been told he wants to learn by an educational therapist so looking at mainstream. still waiting for EHCP to be completed,
Parents should work towards potty training their children, and there are support mechanisms through Children's Centres if this is a challenge. In terms of eating, again this can be picked up with the Children's Centres or through the GP who can make a referral to the Dietician. Once in school, the school will support. The EHCP process is a 20-week process.

Educational Psychology Service (EPS)

1. Are there any special programmes in schools to support children who struggle to settle and engage in class activities? If so, how can we assess them?

Where children are struggling to settle, it's important for us to be curious about what might be going on for them; are they finding learning difficult, for example, or do they have worries which are playing on their mind? We also know that the pandemic has been extremely disruptive to many children's educational experiences and is making it harder to settle. How we make sense of your child's particular difficulties will shape the support which the school offers to the child. Every school has a range of support and interventions for children with a whole range of needs. The SENCO (Special Educational Needs Coordinator) at your child's school is the best person to talk to about understanding and supporting your child's needs. The support plan for your child is usually recorded and reviewed with you through an individual education plan (IEP) or learning support plan (LSP).

2. My daughter has been very anxious since she went back to school after the lockdowns, and I am struggling hugely to get her to attend. What support is available to help us address this?

We are hearing from many parents and schools that emotionally based school non-attendance (EBSA) is a growing area of need. For some children who were already finding it difficult to manage their worries and attend school, the disruption of the pandemic has made it even harder. Other children might have been managing well prior to the pandemic but are now experiencing a high level of anxiety. Working with the school will be really key, so that together you can identify what is causing and maintaining your daughter's anxiety. We know from research that EBSA can have lots of different factors causing and contributing, as well as different protective factors in the mix, so it's important to understand the particular factors for your child and then work together to make a careful plan about supporting your child to gradually face her anxieties and get back to school, step by step, with the right support in place.

As a borough, our strategic planning is focusing on trauma-informed practice and many of our schools are working with us to develop their trauma-informed support. The Educational Psychology Service is funded by the Admissions & Attendance Service to provide termly workshops for schools who want to learn more about assessing and supporting the needs of children experiencing EBSA, and these sessions are advertised to all schools. Working in partnership with parents is a key focus of these workshops. Your child's school may also have access to the Mental Health Support Team (My Young Mind Enfield), which can offer early intervention for young people with anxiety. If your daughter would like to explore strategies to manage her anxiety, she could look at The Good Thinking Guide (freely available online) or access Kooth (an online counselling and support service, commissioned to support young people aged 11+ in Enfield).

3. How does the EP service support those children on SEN support in schools and other settings?

Children on SEN support will be supported by their schools and settings, using a graduated response. Schools and settings will carry out the assess, plan, do, review cycle to identify children's needs, and to put in place targeted intervention and support. For some children, schools and parents identify that they need more help to identify children's needs, and to understand how best to support them. At this point, the school may ask the EP Service to become involved. The EP joins the school in their graduated response. We will hold an initial consultation with you and the school, to understand more about your child's strengths and needs. We will think together about what support the school has already provided, and the impact this has had. We may then agree together that we have enough information to identify your child's targets and support, and the school will formalise this in your child's IEP. Or we may agree that there are questions about your child's strengths and needs which could be answered by the EP observing your child at school or carrying out some direct assessment with your child. If we undertake this further work, we will then meet with you and the school afterwards to feed back to you about our assessment, and to agree an action plan for your child. If we observe or assess your child, we will produce a written record which summarises the work we have done.

EPs are not involved with every child at SEN support, but everything we do is focused on building the capacity of the school, so school is more able to support a whole range of children; for example, a piece of work focusing on a child with autism will mean that the school has more knowledge and confidence in supporting other children with autism.

4. Why is it so difficult to get a child assessed by an educational psychologist?

The Code of Practice expects all schools and settings to implement a graduated response to meeting the needs of children with SEN. Schools and settings will use the assess, plan, do, review cycle to identify and meet your child's needs. Where the school identify that they need additional support to identify your child's needs, and how to meet them, it is their responsibility to buy in this support. Enfield EPS is a traded service, and most but not all schools buy us in. For the upcoming year, schools have purchased more days from our service, recognising the increased need. However, EP time remains a finite resource, so we work with schools to plan and prioritise for the EP time that they have.

To give a sense of the support across the borough, Enfield schools purchase the equivalent of five full time equivalent EPs. We have a further nine full time equivalent EPs involved at statutory level, providing involvement for every child going through an education, health and care needs assessment. The EP Service is also commissioned by other LA services to work within their teams, ensuring that EPs work in a joined-up way to reach the most vulnerable children in our borough. We currently have five full time equivalent EPs working as part of the Youth Offending Team, HEART (the virtual school for looked after children), the Primary and Secondary Behaviour Support Services, the Mental Health Support Teams, Enfield Advisory Service for Autism, Enfield Communication Advice and Support Service, and the Admissions & Attendance Service (reaching children who are not at school).

5. Why is the EP service no longer accepting referrals from Early Years settings? How does this align with the benefits and cost savings of Early Intervention? Surely it would be more effective to work with children from as early as possible rather than allowing problems to escalate?

After many years of Early Years work as a service, the decision to end the EPS Early Years offer was not taken without careful consideration and was thought through with our partners. The change is due to decisions made relating to funding arrangements. We are keeping it under review and there are potential developments which may enable us to expand our Early Years offer, in line with what children, parents and our EY settings need.

In the meantime, the EPS continues to be involved with children at a statutory level (i.e. where the local authority agrees to carry out an education, health and care needs assessment for a child). At a pre-statutory stage, EY settings can continue to access support from the Area SENCO team; the Speech & Language Therapy Service; Enfield Advisory Service for Autism; Early Intervention Support Service; Early Years Inclusion Funding.

6. Please could you advise me on strategies to help my son to learn at home, as it has proven very difficult to get him to stay calm to do work and he has sometimes refused to do his homework? This will depend very much on your child's age and developmental stage. It would be helpful to speak to the school to check that the homework is a good match to his knowledge and skills; sometimes children understandably resist trying to do work which is too difficult for them. A good tip is to limit the time spent, rather than expecting children to finish the piece of work regardless of how long it takes. Some parents can feel pressurised to finish the work (even finishing it ourselves, at a push!) but it's helpful for the school to see what children are able to do by themselves at home.

It might also help to talk through the difficulties with the school so that they can help you to prioritise (pick your battles!) e.g. they might advise that reading every day is the top priority, whereas it might be ok to leave some project work if it's too stressful for you as a family. The school might also have ideas for more engaging ways to present the same homework e.g. using apps for literacy and numeracy. Set out clear expectations for your son, with clear breaks for things he enjoys, and make sure that what you're asking of him is consistent with his attention span e.g. 10 minutes of Maths, followed by a 5-minute bounce on the trampoline; you could draw out this mini 'visual timetable' so you child can see what's expected.

Find what works best for your family. Your child might be hungry and tired after school, and need a snack and some time to unwind, or they might want to get their homework done and put away; as a family you might be at your best in the morning, and be able to do some reading over breakfast, or this time of day might be your most rushed time.

Finally, there are many ways to learn other than homework. Follow your child's interests and do what you love as a family. There is Maths in baking, there is history in a walk down the high street, and there is science in a trip to the park or a glance out of the window at the weather.



7. Where is the best place to get coping strategies for both us and our son with regards to his behaviour at home?

Speak to your child's teacher, and the Special Educational Needs Coordinator (SENCO) as it's helpful to understand your child's behaviour both at home and at school. Schools can also be really helpful with suggesting strategies and providing supportive resources. Some schools have family support workers who could work more closely with you.

Working together with your child's school is also really important because all behaviours make sense- however challenging for us as parents, our children's behaviour makes sense given their experiences, their needs, and what they are trying to communicate e.g. a child whose behaviour deteriorates when out in busy environments might be overwhelmed by the sensory input, making them feel anxious and dysregulated. You know your child's experiences best, so you will know whether there are particularly difficult experiences which need to be taken into account when supporting your child e.g. if your child has experienced early trauma.

In Enfield, you can access parenting support via the Primary Incredible Years parenting programme which is provided by Enfield's Primary Behaviour Support Service/SWERRL. You can ask your child's school about this. You can also ask your child's school to refer you to Early Help, which supports families of children of all ages. If your child's school accesses the Mental Health Support Team (My Young Mind Enfield) you may be able to access parenting support for your primary aged child via that team. If your child has social communication difficulties (autism and similar needs), you may be able to get parenting help from EASA, the Enfield Advisory Service for Autism and you can request involvement directly via their website <https://www.enfieldasa.org.uk/>

There are websites that may be also helpful to support emotional wellbeing such as

Good Thinking Guide <https://www.good-thinking.uk/>

Young minds <https://www.youngminds.org.uk/parent/a-z-guide/challenging-behaviour/>

Children's 1st <https://www.children1st.org.uk/help-for-families/parentline-scotland/guidance-advice/cat/understanding-behaviour>

Depending on your child's age and developmental stage, you might find some helpful ideas in the following books:

How to talk so kids will listen, and listen so they'll talk (Adele Faber and Elaine Mazlish)

The explosive child (Ross Greene)

No drama discipline (Daniel Siegel and Tina Payne Bryson)

It's ok not to share (Heather Shumaker)

Enfield Advisory Service for Autism (EASA)

The Enfield Advisory Service for Autism (EASA) is the specialist outreach service for autism, based at Russet House School and funded by the local authority. It provides support for families and educational setting all over the borough. The website (www.enfieldasa.org.uk) has recently been updated to include all details of the work of the service and support that can be freely accessed. There is a parent self-referral form that parents can use to request support for themselves or their child or young person. Help and advice is available for the families and educational settings of children/young people from 0 – 25yrs who present or identify as autistic, whether or not they have a formal diagnosis.

- 1) How much training do school teachers and TAs in mainstream schools receive on autism?

This varies from school to school. The borough has a good autism training offer, much of which is free for staff to access provided by EASA and the local Speech and Language Team. However, it is not compulsory for staff to be trained, so take-up varies. EASA is now gathering information about levels of training across schools and strongly advising staff to book and attend training. **See also response from the SEN Team Q18**

- 2) Are SENCOs fully trained and do they hold recognized qualifications or certifications on SEND/Autism?

SENCOs usually undertake additional post-graduate training such as the National Award for Special Educational Needs Coordinator (NASENCo). This covers all aspects of the role and different special educational needs, including autism. These courses usually require trainees to choose an area of interest to specialise in, so not all SENCOs would necessarily know autism in depth but they should have a good general knowledge. In Enfield, course leaders encourage all trainee SENCOs to learn about local needs and services and I gave a presentation to the current cohort recently about the work of EASA, our role in supporting schools and resources available for learning more about autism e.g. the Autism Education Trust's suite of resources for School Leaders. **See also response from the SEN Team Q18.**

- 3) My son has autism. He is 5 years' old. Originally from September until January he went to the school only 2 hours daily, but since he has had his EHCP in place in January he has been attending full time and needs a person to support him there. Can this person be a specialized one, who can understand autism or at least to have experience of working with children? Otherwise, I don't think the EHCP will be properly implemented. Who is responsible for checking that it is implemented effectively?

Schools employ Teaching Assistants and Learning Support Assistants to work with pupils with additional needs. There is no guarantee that the person employed will have previous experience or understanding of autism, but they should be willing to learn. Enfield has training available for them, and schools should encourage and support their staff to access this training. **See also response from the SEN Team Q19.**

- 4) What is being done to support to the monitoring and provision of high functioning autistic girls in the mainstream system? They often have needs that are above and beyond ordinarily available provision, but because of masking they're not flagged as concerns, they still require SALT and yet they can't get this regularly without an EHCP (or access to the boroughs amazing experts in this area). One of the major barriers to learning is anxiety, something which is widespread amongst autistic girls, and yet

SEMH needs is not enough to guarantee them support, or the accountability that an EHCP provides, or a voice for the parents who advocate for their daughters.

It's either EHCPs or school provision. There is no spectrum of provision, and often we are told it's not an adjustment the school is prepared to do or not enough money or staff, or there are not enough girls to have a 'girls club' etc. There should be specific Autism champions working across schools, working to train staff, support staff in team teaching, arrange clubs with children from different schools, monitor and write the support plans with CT's because most of them are not fit for purpose. We can look to Cheshire East LA or Limpsfield Grange School for inspiration on the provision that could be provided to these children who fall with needs above SEN support and do not qualify or fit the special setting. We need to start thinking outside of the box, because if they can't get EHCPs to guarantee support, we need something more robust than school support. because what settings are advised to provide is not a reality and the children and their families suffer.

For the past two years EASA has had an online training workshop on Autism and Girls to raise awareness of the issues you mention, which many school staff have attended. There is definitely a lot of interest in supporting female pupils who may have unmet needs because of masking and presenting differently to male autistic pupils. I agree that this is an area where more needs to be done and I am working with my colleagues in the Educational Psychology Service and Speech and Language Team to plan some group interventions for these pupils/students.

- 5) Our adopted son who is on an EHCP has been waiting for an appointment to have a neurodevelopmental assessment for over 2 years, despite the best efforts of the school to chase this up. We and the school need a diagnosis to be able to know what the next steps are developmentally. Why should a child have to wait so long, and how will this backlog be dealt with efficiently?

If you believe that your son's needs are autism-related, you are welcome to access EASA support, as is his school/educational setting. A formal diagnosis is not necessary to request our help and advice. We encourage all schools to put appropriate teaching strategies in place to support children as soon as a learning difference or need becomes apparent. Good autism practice is usually good for all children, and we expect a certain level of intervention to be universally available in all schools ('ordinarily available provision'). If you feel your son's needs are not being met by his school, please encourage the school to contact us if you think that would be helpful. We recommend tools such as the Autism Education Trust's Progression Framework which is freely available to schools, to help them identify needs and areas of development they should focus on. [See also Health Q3.](#)

- 6) I feel that my child may have ASD or ADHD. AND would like to assess my child for ASD and ADHD. where do I start?

The diagnostic pathway is as follows:

For children under 6 years old, neurodevelopmental assessments for autism are carried out by the Child Development Team. As part of this process your child will be assessed by a paediatrician and may be seen either virtually or in person by other professionals such as speech and language therapists and clinical psychologists. Referrals must be sent to the General Development Service, St Michael's Site, Gater Drive, Enfield, EN2 0JB.

The most common referrers are:

- The child's GP
- The child's health visitor



- The child's speech and language therapist
- The Special Educational Needs Coordinator (SENCo) at the child's school or nursery

For children and young people over 6 years old, an autism diagnosis referral should be made to CAMHS via their referral form. The CYP will be assessed by a professional who is qualified in diagnosing autism, usually a clinical psychologist or educational psychologist. They will use information about the CYP, gathered from a range of sources including the CYP themselves, parents/carers, school staff and others who know the CYP well. See [Making a referral to CAMHS \(behcamhs.nhs.uk\)](http://behcamhs.nhs.uk). See also [Health Q4](#).

- 7) My autistic daughter has been pushed from CDT to CAHMS and no one able to see /assess her. What can I do as a parent?
This depends upon what her needs and your concerns are, and why she is not being seen. You are welcome to discuss the situation with someone on our EASA parent support team (make a self-referral via our website) and we will see how we can support you and your daughter.
- 8) My son is diagnosed with ASD, we have identified ourselves that he fits the profile of an ASD subgroup known as PDA. CAMHS do not recognise this, and other services do not seem to have much understanding or knowledge of this profile which means the support he gets is not always appropriate. There is much about this profile on the internet and there is a PDA society so why can this not be recognised when it is really important to ensure he gets the correct support?

EASA recently held an online training session about Autism and PDA for school staff which was very well attended. Although PDA is not currently a diagnosable condition in its own right, we do see lots of children and young people who present with PDA type differences and need appropriate strategies and support. EASA is able to help schools with this on request.

Joint Service for Disabled Children / Short Breaks

1. It seems that there is only one contact point for the financial side of short breaks, and he is very hard to get hold of meaning that there can be delays and it can be very hard to get clarification or a satisfactory response. What can be done to improve this?

There is only one Finance Manager in the JSDC, but support is available from other areas depending on the issue.

We have developed a frequently asked questions fact sheet for parents receiving a short break grant and for those receiving a direct payment to remind parents of where they can receive the advice they require more easily. This will be circulated to all parents in receipt of the short break grants.

2. Frequently funding is not automatically loaded onto e-cards and parents have to chase for it to happen. It is also very unclear when funding should be loaded on for the different grants so parents could easily miss out. Is there a process that could be communicated so parents are better informed and is anything being done to improve the processes, so they work automatically without parents having to chase?

The initial letter that parents receive details when short break grants will be paid and the period that they cover. Short break grant payments of £166.66/£333.33 will be made three times per year:

- End of March, for the period April to July - £166.66/£333.33
- End of July, for the period August to November - £166.66/£333.33
- End of November, for the period December to March - £166.66/£333.33.

If the grant is agreed part way through the financial year (1st April to 31st March), the relevant proportion of funding will be made to the E card.

This information will also be included in the fact sheet.

If you have not received the payments as outlined above, please email cheviots@enfield.gov.uk and a colleague will get back to you.

3. What support towards attending activities is available once children reach the age of 18? Currently my son benefits from funding for him to access activities – will he continue to receive this after the age of 18? (Note: We understand that the funding comes from a separate pot – could you address whether there is likely to be a gap or whether this is seamless? If not – how can activities be provided in the interim if parents aren't able to pay themselves).

Once the Early notification form has been completed, it will be presented to TOG - this is the Transition meeting where Managers from children's services, SEN and adult services agree which adults service will undertake the Moving On assessment.

This assessment will be undertaken with parents and the young person and will identify the needs of the young person.



Once the assessment has been completed a support plan will be developed which will detail how the identified needs will be met. An indicative budget is agreed at this point, so parents should be aware of what funding will be available to support their young person achieve the outcomes in their plan. The MyLife web pages provide details of lots of different activities for young people to access post 18.

There should not be a gap between children's services ending their support and adult services taking over. If there is a delay, adult services will ask children's services to continue to fund the support until the support from adult services is in place.

If you have any concerns or need to discuss the transition process, you can email cheviots@enfield.gov.uk or ILDS and a colleague will get back to you.

4. My child is about to reach the age of 18 and I am being asked about what activities she is doing now so that those can be replicated after she reaches 18. However due to the impact of the pandemic she hasn't been able to access many activities recently, and I don't want her activities going forward to be limited by that. Can the team not look afresh at what would suit her now, rather than looking back?

We understand that there has been a significant impact on the services and support young people have been able to access during the pandemic.

The Moving on assessment process will identify needs into adulthood and is not based on the services and support that have been accessed only.

The funding from children's services does cease when a young person is 18 years as do other services that they may receive.

As stated above, the transition support planning should be finalised by the time the young person is 18 yrs so there is no gap in provision.

5. It seems to be very difficult to get hold of anyone in Short Breaks and I seem to be getting passed around and sent round in circles e.g. being sent back to my social worker. There seem to be communication difficulties within the team so that even where an approach has been agreed with one person this is not communicated to the front line so that it doesn't happen in reality.
If you have any concerns about the information you have received or difficulties contacting the short breaks team, please ask to speak to the duty manager or email cheviots@enfield.gov.uk and ask that your email is passed to the manager.

6. I have heard that families can access 'Short Breaks' but I don't really understand what these are or how I can access them? Is there a simple explanation of how it works and who is eligible?

There is an explanation on the Short Breaks statement which you can access on the Local Offer [here](#).

What are Short breaks?

Short breaks are play and leisure opportunities which support disabled children and their families.



Short breaks could be in the family home, at an activity or in the community. They can last for one hour or a whole day.

Short breaks used to be known as 'respite' and have been renamed in recent years to reflect the positive opportunities short breaks offer to disabled children and young people.

Enfield offers a wide range of local short break opportunities which can meet the needs of disabled children and young people of different ages and different needs and interests.

- Children and young people with a disability have varying and changing needs.
- Therefore, there needs to be a range of short break opportunities that meets the individual needs of both children and carers.
- It is important that short breaks are shared out in a fair way and that there are fair and transparent policies and pathways to services and support.
- Some families need more support than others because of the needs of their child, their family circumstances and/or the support they have available from their network of family and friends.
- Because every child, young person and family is different, there are different levels of support available.
- In Enfield we want to ensure that there are short break opportunities so disabled children and young people are supported to be part of local and community activities wherever possible.
- We aim to offer choice so children, young people and their families can use their short breaks entitlement flexibly.
- We have tried to avoid the need for additional assessments or a complicated application process.

Universal services:

There are play and leisure opportunities that **ALL** children can attend, these are called INCLUSIVE services.

Most disabled children and young people access these services.

Universal short breaks can be accessed by anyone, at any time. Universal services include:

Targeted Services:

Some children and young people with disabilities, at different times and for different reasons, will have additional needs that cannot be met by universal services alone.

These additional needs usually occur because of individual, family, or environmental factors, or because their disabilities or needs are more complex that they cannot be met by universal services or family support alone.



Some disabled children and their parents will require more support than others to manage this level of need.

Families can apply directly to these services. Each service or activity may have specific eligibility criteria based on age, need, or other factors.

Targeted services Level 1:

Families can apply directly to these services. Each service or activity may have specific eligibility criteria based on age, need, or other factors.

These schemes have staff trained to support disabled children and young people; some will be inclusive.

The Joint Service has subsidised the cost of some of these services but there may be a charge for some services

Targeted Services Level 2:

If you feel that your child's needs cannot be met by universal or level 1 targeted Short Breaks, a referral can be made to the Joint Service for Disabled Children by a professional that knows your child well.

We will need to gather information about your child and family's needs and explore what additional support is needed so your child can access play and leisure opportunities that also support you to have a break from your caring responsibilities.

We will ask for a copy of your child's EHCP (Education, Health and Care plan) if they have one.

This information is presented to a Short breaks panel who consider the information provided and agree which short breaks could best meet your child and family's needs. The panel meets every two weeks.

One example of a Targeted Level 2 Short Breaks is the provision of a short break grant, which is a contribution to the cost of either activities or services for your child.

Specialist Services

Some children with disabilities with more complex needs may require specialist short breaks and /or significant additional support from another person to enable them to participate in enjoyable activities and stay safe. They may already be receiving support through universal and targeted services, but this may not be sufficient to meet their needs.



Access to specialist services may be determined through a social care assessment. This assessment will identify and address your child's needs as well as the needs of the wider family including the parent carer.

In determining the need for specialist services, the social care assessment will include consideration of the following:

The severity of your child's disability and how it impacts on both their life and yours

- If you have more than one disabled child
- The number of other children or caring responsibilities you may have
- If you or your partner has a disability
- How short breaks will improve the quality of your child's life
- The level of support within your social / family network
- Your child's wishes and feelings
- If there are concerns about a child or young person's safety
- Have complex health needs (In some cases it may be necessary for a Continuing Care assessment to be completed in order to determine how those needs should be met by the health)

We will always endeavour to work in partnership with you to ensure we gather the most accurate information about your child's and family's circumstances to complete the assessment. It is recognised that the needs of a disabled child and their family change from time to time. There will be times when you need more support and those when you need less. It is therefore important that the services you receive change accordingly.

There may be instances where an additional short break is agreed due to specific circumstances i.e. a change within your family or support network. If you receive additional specialist short break services, we will review them to ensure that the level of support is right for your child and family.

However, you can request a review at any time.

Any requests for specialist short breaks will need to be discussed by the short breaks panel. The short breaks panel meets on a fortnightly basis to discuss requests for short breaks and support.

This information and the eligibility criteria are available on the Local Offer for all to access.

7. What is the process of allocating social workers to a SEND child, please? At what point is this necessary?

The Social Work team at Cheviots consists of 3 Team Managers, 2 Advanced Social Work Practitioners and 8 full time Social Workers. The Social Workers are responsible for a wide variety of Social Work interventions that include long term work with looked after children, safeguarding work



with children and young people subject to child protection plans and child and family assessments of those in need. The Social Work team also operate a busy duty system where they respond to queries regarding children and young people where there may not be an allocated Social Worker or where the allocated Social Worker is unavailable.

We have also established our Short Breaks Hub which consists of 2 Specialist SEN and Disability Outreach Workers. The hub is responsible for setting up and reviewing short break packages to ensure that they continue to meet the needs of children, young people and their families. We are in the process of recruiting a third person to the hub in order to increase capacity.

Most children with disabilities known to the Joint Service for Disabled Children will not require an allocated Social Worker as we have designed streamlined processes where short breaks can be delivered to those who need them without the need for a Social Work assessment. There are some circumstances where a Social Work assessment might be required, and they include:

- there is more than one disabled child in the family
 - the child or young person shows behaviours that may put their ability to remain at home at risk a parent has ill health
 - there are exceptional and complex circumstances in the family
 - there are concerns about the child's safety at home
8. What is ENF (Early Notification) and whose responsibility is it? It seems that this important document/process is not well understood and is often missed because individuals aren't notified at age 16 and it doesn't feel as if anyone wants to take responsibility. There appears to be a particular problem when the young person is attending a school out of Borough and doesn't get picked up at all?

The transition process in Enfield is well established.

The early notification form (ENF) is completed by schools or another professional who knows your child. This is completed with you and details the young person's needs so that a decision can be made about how the young person can be supported into adulthood.

The Moving on booklet includes Information about the Moving on process in Enfield and events for parents which covers issues such as getting a job, getting a home, benefits,

The Moving on booklet and early notification process is sent to the SENCO in all schools - out of borough, mainstream and special schools that young people who live in Enfield attend.

Please take a few moments to review the information on the Local Offer: [Moving On - preparing for adulthood \(14+\) · Enfield Council](#)

We are currently reviewing the Moving on Information in partnership with Our Voice, Carer to Carer and professionals from schools.



If your child is 16 yrs ask your school to complete a ENF if you feel your child will require services and support from social care after they are 18yrs.

9. EHCP plans are in place up to the age of 25, but it there seems to be a lack of support for young people who don't meet the criteria for adult services. Can you advise there are viable, well thought through options available, with clear pathways for young people from 16-25? If there are, can the LA please make it clearer and proactively promote/signpost the options as opposed to parents having to try and find them, alone?

The transition/preparing for adulthood should be discussed at the EHCP reviews.

If a young person is not eligible for services and support from adult services there is information on the Local offer and My Life about community activities that young people can engage in. Your school should signpost you to this information.

Youth Services support young people up to 25 years. There is now a SEND Youth Club too.

Every Young person will have their own transition plan which could include progressing to college, a supported internship, employment, volunteering, vocational training.

The working group reviewing the transition information will endeavour to clarify the pathway information.

10. Does the LA have an appointed/dedicated team to transition young people from children services to adult services? Do young people have an appointed caseworker? If not, why not?

No - Enfield has an established pathway for transition.

<https://new.enfield.gov.uk/services/children-and-education/local-offer/moving-on-preparing-for-adulthood-14-local-offer>

Once the Early notification form is received, a transition lead will be allocated who will support the parent and young people through the transition assessment process.

11. We hear about Moving On events through Our Voice, but others don't know about them. How do they find out, especially if they are currently in a mainstream school?

The Moving On events are publicised on the Local offer, the Moving On booklet is distributed via all schools, ENAS, Our Voice and Community organisations.

Moving on booklet and processes are shared with mainstream schools via the school's improvement service so SENCO's can share with families.

Housing

Q: I've applied for a Council House more than a year ago because I feel the place where we are living is not safe or suitable for my disabled children's needs, but nothing happens, and I don't feel that my children are a priority for the Local Authority. Where can I get help?

A: There is a lack of Council properties in the Borough and unfortunately there are over 5000 applicants on the housing register. The Council lets approx. 400 properties per year which means only those with the highest points will be able to bid successfully.

If the parent is concerned about the safety and condition of the property, they should contact the landlord to ask that the issues are addressed.

If the landlord does not address the issues satisfactorily, the parent can contact the Councils Housing enforcement Team who can support with this.

For many families, private rented accommodation can meet their needs, and alternative accommodation in the private rented sector is often the most realistic solution

ILDS

- 1) What support towards attending activities is available once children reach the age of 18?
 Currently my son benefits from funding for him to access activities – will he continue to receive this after the age of 18?

We have a robust transition pathway in place to support parents/cares and young people through transition. We also have several Moving On Events throughout the year and a dedicated Care to Carer contact for those in transition Carers can discuss any queries, anxieties etc.

- If the young person is going to require on-going support from Adult Social Care when they reach 18 years of age, parental consent is sought by a professional, usually the SENCo at your child's school, to make a referral to Adult Social Care. Check with your young person's school that this has been done.
- Professionals will decide the best service to meet your young person's needs in adulthood. This could be:
 - ❖ Integrated Learning Disability Service (ILDS)
 - ❖ Single Point of Access (Physical, Sensory & Autism) (SPA)
 - ❖ Mental Health Services
 - ❖ Clinical Commissioning Group (CCG) for continuing health care (CHC)

If the young person is eligible for CHC their transition will be led by the CCG.

- A professional from Adult Social Care will make contact with the family to start the Preparing for Adulthood Assessment (used to be known as the Moving on Assessment). This usually happens once the young person becomes 17.
- The assessment will capture information around the young adult's needs and what their aspirations for the future are. The young person's needs are assessed according to the Care Act 2014 eligibility criteria.
- The assessment can take 3 – 6 months and will be carried out so the right support can be in place for their 18th birthday.
- If eligible under the Care Act 2014, when a young person reaches 18, the responsibility for providing health and social care support transfers from Children's Services to Adult Social Care.
- Following the Preparing for Adulthood assessment a Social Worker will be allocated to the young person to draw up their Care and Support Plan for when they reach adulthood.
- The resource Allocation System (RAS) will generate a personal budget that will be allocated to meet the young persons assessed needs. This Budget will be used to fund care and support/activities to meet the assessed needs.
- The support can either be commissioned by the Council or the young person can be given a Direct Payment to pay for support/services/activities themselves or with support from a carer.

Please see useful link on Mylife We have a comprehensive section in the Mylife website called Moving On – preparing for adulthood which explains the transition process in more detail:

<https://new.enfield.gov.uk/services/children-and-education/local-offer/moving-on-preparing-for-adulthood-14-local-offer/>

<https://new.enfield.gov.uk/services/children-and-education/local-offer/moving-on-information-booklet-local-offer.pdf>

- 2) My child is about to reach the age of 18 and I am being asked about what activities she is doing now so that those can be replicated after she reaches 18. However due to the impact of the pandemic she hasn't been able to access many activities recently, and I don't want her activities going forward to be limited by that. Can the team not look afresh at what would suit her now, rather than looking back?

We have a robust transition pathway in place to support parents/cares and young people through transition.

- Following the Preparing for Adulthood assessment a Social Worker will be allocated to the young person to draw up their Care and Support Plan for when they reach adulthood.
- The resource Allocation System (RAS) will generate a personal budget that will be allocated to meet the young persons assessed needs. This Budget will be used to fund care and support/activities to meet the assessed needs.
- The support can either be commissioned by the Council or the young person can be given a Direct Payment to pay for support/services/activities themselves or with support from a career.
- The allocated worker may ask what activities the young person is currently receiving to get an idea of the young person's interest.
- There are a range of activities we consider and provide services around the young person's current needs.

Please see useful link on Mylife. We have a comprehensive section in the Mylife website called Moving On an has a list of activities that can be accessed in the community.

<https://new.enfield.gov.uk/services/children-and-education/local-offer/short-breaks-and-activities/>

Health and therapies

1. When a child is diagnosed with autism why is there no follow up/reviews with a specialist paediatrician?

You will typically be invited to one feedback session, either in person or remotely, with a Paediatrician to discuss the outcome of any diagnostic assessments. In this meeting they will discuss with you the best services that may be able to provide further support if needed, to meet their individual needs. Further follow-up appointments are not usually needed with the Paediatrician, unless medication is being prescribed or there are other complex needs which require monitoring or further assessment (the Paediatrician will discuss with you if this is the case). In Enfield the main intervention pathways following Autism diagnosis involve other services and clinical teams, which support families with understanding Autism and supporting their child's social communication and development (e.g., Enfield Advisory Service for Autism/Enfield branch of the National Autistic Society, Speech & Language, Occupational Therapy Physiotherapy, Dietetics, Psychology, school support and so on). Some families may feel further support is not needed, for example because their child's Autism is not impacting in a way that feels unmanageable at home or school currently.

2. What actions are being taken to speed up the diagnoses of conditions such as Autism? It seems to take forever!

Integrating CYP community Health services has and will improve access and diagnoses. Past waiting lists of 1 year from referral to first appointment has now been reduced to 21 weeks and the service with commissioners continue to monitor at least on a monthly basis the referral flow. Assessments can take some time as we follow the National Institute of Clinical Excellence (NICE) guidelines in ensuring they are rigorous, including information gathered from school/nurseries, parents/carers and multi-agency professionals who are skilled in the assessment of Autism. Some young children's needs may not be clear (e.g. if they are on the spectrum but academically able) and can require longer periods of assessment to assess thoroughly for other conditions, for example to see how they develop or assess the impact of supportive autism informed interventions. Health services and joint pathways across the system are being improved to ease the journey of the child and family through the process and to avoid unnecessary waits. The workforce has also been increased to offer more appointments for children in Enfield. While awaiting diagnostic assessments, we are working hard to ensure children and families have early intervention for their specific needs to be addressed and access support when needed (e.g. Access to specialist services such as Speech & Language Therapy, Dietetics, Occupational Therapy or Physiotherapy based on need; Development of multi-agency led behaviour support groups; Sharing of key services and resource information, such as being able to access workshops by the Enfield Advisory Service for Autism pre-diagnostically).

3. Our son who has an EHCP has been waiting for an appointment to have a neurodevelopmental assessment for over 2 years, despite the best efforts of the school to chase this up. We and the school need a diagnosis to be able to know what his next steps are developmentally. Why should a child have to wait so long, and how will this backlog be dealt with efficiently?

Waiting for neurodevelopmental assessment has been a challenge for the last few years, due to a combination of staff shortages across the UK, increased referrals (more awareness), and the need for multidisciplinary assessments which take many months. However, any child can be given support on

the basis of the difficulties he/she experiences; in other words, the “wait for a diagnosis, then offer support” approach is not advocated so that interventions from early years support services including therapy teams take place while a child is waiting for formal diagnosis.

Neurodevelopmental conditions are usually obvious to specialised teachers (SENCOs) and many others before a formal diagnostic process is completed and the right evidence-based interventions are put in place at school and through health teams, so children and young people get the support that really works for them when they need it whilst waiting for a formal diagnosis. [See also response from EASA Q5.](#)

4. I feel that my child may have ASD or ADHD and would like an assessment to be made. Where do I start?

Professionals such as your GP, nursery/school or health visitor can make a referral to the Paediatric Service (also known as the Child Development Team – CDT) if your child is under 6. If they are 6 years old or more, they can be referred by the school to the local Child & Adolescent Mental Health Service (CAMHS) for a neurodevelopmental assessment. Once a referral is accepted, you should be advised where to get support while waiting for the assessment (e.g. self-referrals to workshops available pre-diagnostically by Enfield Advisory Service for Autism, or the Council Early Help Teams/ADDISS for ADHD). [See also response from EASA Q6.](#)

Speech and Language

5. What happens to speech and language therapy post 18? Often this is still needed at this point (and included in the young person’s EHCP) but doesn’t seem to happen – why is this the case and how are young people’s needs in this respect met? (e.g. are there options via colleges).

Currently the SALT Children Service sees children up to the age of 19 in their special school or 18-19 years if in a mainstream setting. We work flexibly and are not dictated by age cut off but ensure all young people with active input are appropriately transitioned to Adult Services working closely with the young person and parents/carers.

- If the young person plans to continue to study or train in a different context such as college, a recommendation about the SALT needs and provision will be made by the Speech and Language Therapist at the annual review prior to change of placement.
- The Annual review will alert the SEN department that provision needs to be secured for their continuing education or training placement.
- At the point the young person leaves the school setting they will be discharged from the Speech and Language Service.
- A number of colleges do employ their own SALT but if this is not the case, the named officer for that young person will commission a SALT to meet the provision outlined if they consider the EHCP should be maintained.
- If you are in the position that this has not happened, please contact your named officer who can discuss this further with you- If the young person is not accessing a study or training provision but continues to require support, they may be referred to adult speech and language services if they meet the criteria for those services.



Occupational Therapy (OT)

6. What is happening with OT provision in schools?

Each Enfield special school currently has an arrangement for OT based on historical need. There have been significant changes to the numbers and needs within special schools and the LBE commissioners have looked at this and are addressing how additional resources can be utilized to meet the needs. This work is on-going. In the interim OT needs are being met by the school OT, parents can also contact the school directly to discuss any concerns or queries so these can be addressed.

Children in mainstream schools may receive an OT school visit as part of their intervention. This will depend on the child's needs and OT goals and will be agreed in discussion with the parents and school.

We also provide training courses for schools as part of our service delivery
Fiona Kingsley; Clinical Lead for NHS OT. Telephone: 0208 702 5630

7. Why is Occupational Therapy not provided in mainstream schools?

NHS Occupational therapy works on a child-by-child basis and as part of the child's assessment and discussion with parents will determine if a School Visit is indicated. Many children get a school visit into their mainstream school as part of their period of OT intervention.

NHS OT service provides termly school staff training on "Early Writing Skills" and "Handwriting skills" which schools can opt into this training or will be specifically invited to attend if we are working with a child in their school and determine it would be of use to the class TA or LSA or school SENCO/Teacher to attend the training.

OT has also been commissioned by the Local Borough of Enfield to be part of the new Enfield Communication Advisory Service. This post will be focusing on providing universal and targeted OT support for school staff accessing the service.

Mainstream schools can also ask for universal and targeted OT advice via EYSI. EYSI is an LBE funded service for schools with an OT who also provides training for schools as part of their service.

Enfield Advisory Service for Autism has also recently commissioned an OT to work within their service as a support for school staff as well as parents.

Fiona Kingsley, Clinical Lead for NHS OT. Telephone: OT 0208 702 5630

CAMHS

1. What is being done to address the long waiting times for CAMHS, and how long are the wait times for a referral currently? Has the waiting time increased as a result of the impact of the pandemic?

Pandemic impact

Unfortunately, over the last 12 months, Enfield CAMHS has faced similar challenges to the rest of the NHS in the second year of the pandemic- with very high levels of need in our community, a large number of children and families waiting for support following successive lockdowns, and significant staff shortages. This has impacted waiting times in our service in some, but not all areas.

Current waiting times

Each of our specialist teams has a specific remit, and so the response times differ, depending on the needs of the group they serve.

Team	Pathway Stage	Waiting Time
<i>My Young Mind Enfield</i> (Mental Health Support Team in Schools)	Referral to assessment/intervention	0-6 weeks
<i>SAFE</i> (Crisis Support for Teens)	Referral to assessment/intervention	0-6 weeks (within a working day where urgent)
<i>HEART</i> (Enfield Looked After Children)	Referral to assessment/intervention	0-13 weeks
<i>SCAN</i> (Children with learning disabilities)	Referral to assessment/intervention	0-13 weeks
<i>Generic & Neurodevelopmental</i> (common mental health problems, highest number of referrals)	<i>Initial contact</i> for triage & prioritisation, advice, signposting	0-13 weeks
	<i>Secondary waits</i> for specialist assessment & intervention	Average wait is 18 months Range is 4 to 22 months, depending on prioritisation of needs Numbers waiting over 52 weeks is reducing month-on-month from Nov 21 following recovery plan

Recovery plan and progress to date

We are very sorry that we are not able to provide as responsive a service as we would wish to at the present time, but want to reassure you that we are doing everything we can to address these challenges and to build stronger services for the future. We have an extensive recovery plan in place to reduce waiting times over the coming months. This plan, and our progress is closely monitored by the Trust Executive and Commissioning. The measures we are putting in place include:



- Outsourcing some assessments and interventions to established external online providers where clinically appropriate
- Expanding our offer of group approaches
- Additional weekend and out of hours provision
- Welfare support checks to families on the waiting list
- Development of new workforce roles enabling more flexible service delivery, and to cover “difficult-to recruit” areas
- Trust wide strategy to recruit additional staff to CAMHS
- Quality Improvement, organisational development and project management expertise to support staff and to develop improved CAMHS service across Barnet, Enfield and Haringey
- Regional initiative across North Central London to assess children and young people waiting for neurodevelopmental assessments
- From January 2022 My Young Mind Enfield/Mental Health Support Team in Schools expansion will improve access to help in school communities

2. We know that the pandemic has taken a huge toll on many children’s mental Health, and that there will be more demand than ever for CAMHS’ services. What is being done to make sure that children get the help they need urgently, rather than waiting an extended period and getting worse all the time?

The recovery work described above is focussed on reducing waiting times and as a priority clearing the backlog of children referred during the pandemic.

In parallel to this, long term transformation of CAMHS is a strategic priority for BEH Mental Health Trust, and extensive work is taking place to implement a more responsive service, aligned across all three boroughs. In line with this we are reviewing all aspects of our service offer, and introducing changes such as:

- A more streamlined assessment and intake process (reducing the number of phone triage contacts and bringing assessment forward)
- A greater range of group support
- A greater range of digital services
- Where appropriate, a focused consultation offer to support systems around a family, as an alternative to direct treatment

The long-term trend nationally is showing an increase in demand for emotional wellbeing and mental health support among children and young people. It is important in our Borough-wide planning that we develop a whole range of support options across the system of child-focussed services (e.g. health, social care, education and voluntary sector) as all these services have a role to play in meeting this increasing need.



Over the course of the pandemic we have also taken many steps to ensure that children and young people with the most urgent needs can receive timely support. These include:

- Creation of a duty line for professionals to respond to urgent crisis concerns
- Creation of the trust-wide 24/7 crisis line for children, young people and families (0800 151 0023)
- Diversion from acute hospitals to community crisis hubs where appropriate
- New investment to strengthen the CAMHS crisis input at North Middlesex and Barnet Hospitals
- All teams will prioritise high-risk cases and respond urgently where necessary, within a working day for the most urgent crisis needs.

Nick Clarke
Consultant Clinical Psychologist & Enfield CAMHS Clinical Lead

Useful Resources:

Children and Young People's Crisis Line Tel. 0800 151 0023 If you require urgent mental health support Children, Young People and Families can call this number to get support or advice 24/7 through BEH Mental Health Trust CAMHS

Enfield Educational Psychology Service Telephone Support Line for Parents and Carers Tel. 0208 379 2000 or via online form:

https://forms.office.com/Pages/ResponsePage.aspx?id=HbkYzLIbm02sdnpER0iNSXu_LICxaVVBt6wk9bHMJDpUMERTMFZQMzBaMDIHRThTV1VCUTRCVv03RC4u

Kooth is a free, safe and anonymous online mental wellbeing community <https://www.kooth.com/>

Good Thinking- Digital Mental Wellbeing for London: <https://www.good-thinking.uk/>

Every Mind Matters- Mental health and self-care for young people <https://www.nhs.uk/every-mind-matters/mental-wellbeing-tips/youth-mental-health/>

Young Minds has a wealth of resources on their website, as well as providing dedicated crisis services <https://youngminds.org.uk/find-help/>

The Mix provides a free confidential telephone helpline and online service that aims to find young people the best help, whatever the problem <https://www.themix.org.uk/>

Anna Freud Centre On My Mind provides a range of resources co-produced with young people to help other young people <https://www.annafreud.org/on-my-mind/>

NHS directory help for children and young people <https://www.nhs.uk/mental-health/nhs-voluntary-charity-services/nhs-services/children-young-people-mental-health-services-cypmhs-children-information/>

Transport and Travel Brokers

- 1) I've heard that the LA budget for SEN Transport is being cut. Is this correct and how will it affect our children?

As the provision of Transport for SEN Children is a statutory service there are no intentions to cut the budget. The transport service will always endeavour to maximize the utilization of vehicles and optimize routes to keep the transport budgets within set parameters, but this will have no effect on service delivery and no impact on the transport provided for children. Also, we will continue to promote the use of personal travel budgets/independent travel training where appropriate to be able to achieve any savings required without negatively impacting on the services we provide.

- 2) How are escorts being trained to support the children on their routes, particularly those with behaviour that challenges? Have all staff now received Positive Behaviour Support training?

All LBE passenger assistants are trained by an accredited trainer to the national MIDAS standards and contractor staff are required to provide evidence of the same level of training to meet their contractual duty. In addition to this, LBE passenger assistants have undertaken Positive Behaviour Support training in January 2020.

- 3) Why do transport officials have discretion to decide whether or not to grant travel assistance to a child who has an EHCP and cerebral palsy?

The Travel Brokers will assess all Travel Assistance applications in accordance with the Council's Travel Assistance policy. We will work with parents, guardians and carers to identify the most appropriate form of travel assistance whether that be through a personal budget or via Council run transport.

Where appropriate, parents/guardians and carers will be asked if they can support their child to and from school, whether this be using public transport or a mini cab. There are occasions whereby there is no reason as to why parents/guardians and carers are not able to support their children to and from school and therefore no travel assistance will be awarded.

Where travel assistance is not awarded, parents/guardians and carers will be written to, to advise of reasons why and the appeal process. Should parents/guardians and carers not agree with the Council's decision, they have the right to appeal to Peter Nathan (Education Director) and failing this to the local ombudsman.

Early Years

- 1) Are staff at early years settings being properly trained on SEN issues so that they can pick these up to support families and make the right referrals at the right time?

In Enfield we have over 100 private pre-schools, playgroups, day care providers, along with all our school nurseries so it is a very active and important sector, serving our youngest children at an important stage in their learning. There is a range of training available for early years workforce with specific regard to SEND issues.

- Every setting has their own SENCO, who is a senior member of staff. There is a LA induction training course for newly appointed SENCOs, and an advanced accredited course for experienced SENCOs.
- There is SEND training package available to every setting through the LA Early Years Training Portal, which includes for example, SENCO induction, positive behaviour, Makaton, and motor skills development amongst other topics. The very well-respected ICAN speech, language and communication needs accredited programme has also been launched for phased delivery to all settings. As with any workforce, there is some element of movement of staff, so an ongoing rolling programme of training is offered to ensure staff of every level have professional development opportunities.
- All training delivered is reviewed by participants for quality assurance; it is tailored to local need and updated in response to requests from settings.
- Following the expansion of the Enfield Autism Advisory Service, EASA now offers a training package to EY settings, which comprises of three levels of training, commencing with an introduction to autism, moving onto best practice strategies for inclusion and also training for managers/leaders to support them to create settings/schools where autistic children feel included, supported with their wellbeing and able to succeed.
- There is a dedicated team within the LA supporting the early years sector with all aspects of their practice, including planning and delivery of the curriculum, regulatory issues and inclusion.
- There is also a specialist advisory team of Area SENCOs. Every setting has a named Area SENCO who is available to offer in-setting support to promote inclusion and inclusive practice and should be the first port of call for advice for all settings.
- The LA advisory team lead termly Early Years SENCO Forums which are held to update settings on SEND systems and available support, to share examples of good practice, to provide settings with information about referral processes, pathways and criteria, and training on any emerging local SEND priority topics.
- EISS staff offer advice, guidance and modelling of strategies when a child known to them is starting in a setting, as do other professionals if there is a specific need. Enfield also commissions specialist advisory teachers for children with visual and hearing impairment, who offer individualised advice and guidance to settings for children known to them.

- 2) Given how long waiting times for a diagnosis are, how can I make sure that my child gets support whilst we are waiting for the diagnosis. Who do I approach to get support in the meantime?

For most services in the early years, a diagnosis is not required to access services. Professionals involved with your child, for example your Health Visitor, Speech and Language Therapist or Early Years staff in your child's setting should be able to provide advice and guidance about what is available pre-diagnosis. The information is also available on the Local Offer.

If parents are awaiting autism assessment for their child and would like to access autism-specific support and advice, either pre or post diagnosis, they can contact Enfield Advisory Service for



Autism directly. This can be done without need for a professional referral or diagnosis. If your child is awaiting assessment, EASA are happy to advise, and they have a very easy self-referral form on their website. EASA have expanded their work this year with the increased funding from the LA, and there is lots of parent training and support available, for example,

If you want to meet other parents who have a child with autism, or are awaiting assessment,

- Cuppa and Chat. You are welcome to come along to meet other parents at these sessions hosted by the EASA Parent Support Advisors. Refreshments are provided.

Help with meeting your child individual needs;

- Drop-ins. Parents are welcome to come along to a Drop-in at Bell Lane and meet one of our EASA Parent Support Advisors. These sessions are held fortnightly and are often the quickest way to access advice and support. Dates of upcoming Drop-in sessions can be found on EASA website.
- Online Parent Presentations. These run regularly on a variety of themes such as toileting, behaviour, independence, sleep. Dates and topics are accessible on their calendar.
- Parent Workshops. Practical sessions led by their Parent Support Advisors at Bell Lane. Details can be found on their calendar.
- 1:1 appointment with a Parent Support Advisor. These can be arranged either in person at Bell Lane or on the telephone.

There is a wealth of information available on their website under the Parents and Carers tab and I would encourage parents of children and young people of all ages to have a look.

If you have a very young child aged 3 or under awaiting assessment, who is not yet attending an early years setting, you can ask your health visitor or other professional to refer to the Early Intervention Support Service, where you can access individual advice about how to support your child's development, your educational options and wider family support without a specific diagnosis. Speech therapy is not dependent on a diagnosis; they deliver a range of interventions pre and post diagnosis and your child will be assessed individually and offered therapy accordingly.