

Additional Support for Learning Independent Review

The National Parent Forum of Scotland (NPFS) are pleased to have the opportunity to submit this report to Angela Morgan's Independent Review on Additional Support for Learning (ASL) for the Scottish Government. The NPFS is committed to ensuring parents are engaged, involved, and empowered in their children's education, and have the opportunity to have their views represented and heard. Parents are the primary educators of their children, and we teach them, guide them, and support them. The Scottish Government commits to Getting it Right for Every Child, and parents want to see this for all of their children, including those with Additional Support Needs (ASN). Parents want to work in partnership with teachers, schools, and their local authorities to improve outcomes and opportunities for all children in Scotland. Throughout our work with parents, we have received feedback which demonstrates great examples of working together. However we have also received feedback from many parents, particularly parents of children with ASN, that their child is not having their needs met, is not able to thrive in their education, and that many parents feel they are alone, battling to get their child the support that they deserve.

In October 2019, the NPFS held a Q&A Session with Deputy First Minister John Swinney in Perth. Angela Morgan's Review into ASL had already been announced, however the vast amount of questions from parents relating to ASL and the personal and emotive stories we heard prompted us to approach Angela Morgan directly, and ask if we could submit a report for her review from the parent's perspective.

We held focus groups in Edinburgh, Glasgow, Aberdeen, Inverness, and Dumfries, to gather as many parent's views as possible from across Scotland. We have heard personal stories of frustration, struggles, and trauma, as well as examples of change, and hope of how ASL can work better. We've also received emails and phone calls which have fed into his report, to represent the reality of ASL for parents and their children to the best of our ability.

We do regret that we simply could not come and see you all, and although we feel this report is a good representation of parent's experiences, we acknowledge that it is not exhaustive. Despite this, we hope that parents reading this report will be able to identify with the experiences, as throughout our research we heard many individual and unique stories which often came back to the same common themes. Parents want support, understanding, working relationships, empathy, reasonable adjustments, and ultimately for their children to thrive.

This report reflects the feedback gathered from our focus groups and in conversations with parents. However, the NPFS recognise that ASL is an even bigger picture than this and can affect us all at different times in our life.

ASL is wide-ranging, and could refer to a range of disabilities, including physical, social, emotional, and cognitive. ASL may refer to a child or young person's mental health or trauma. ASL can be long-term or short-term, diagnosed or undiagnosed. A child may have a short-term need, whether this be due to a bereavement or physical injury. In contrast a child may have an ongoing need and require support throughout their education. Many children may experience ASL by being young carers, or indirectly through their siblings, families, and classmates. What we hope to capture in this report is that ASL is everyone's business, can benefit all children and young people, and it is essential to Getting it Right for Every Child.

This report represents the realities of ASL for parents. At all of our focus groups, there were examples of parents describing getting their child's needs met as a 'battle'. Parents are the experts when it comes to their children, however we also heard stories of parents being expected to be the experts in all aspects of ASL with little support. We heard many heart-breaking personal stories of frustration, struggle, and trauma, however our focus groups also showed hope for the future. Examples of creative and empathetic practitioners, stories of parents coming together to support each other through the challenges, and stories of children with ASN thriving in their education. This brings hope that the review can change the understanding of ASL and the implementation of policy to ensure that we are able to work together and get it right for children with ASN. Ultimately, improving the implementation of ASL improves education for all children, and is a vital step towards truly Getting it Right for Every Child.

The NPFS would like to thank all of the parents who attended our focus groups, who shared their views, and whose personal experiences are at the heart of this report. We appreciate that this is not easy and thank you for your honesty about all that is both good and bad about ASL in Scotland. It has been heartening to see the supportive networks that exist between parents and the hope that things can work better in the future through simple adjustments, building relationships, and having empathy for one another.



the National Parent
Forum of Scotland

Finally, the NPFS would like to thank Angela Morgan for including our report within the ASL Review, and for acknowledging the vital role parents play in their children's education.

Kind Regards,

Joanna Murphy.

Joanna Murphy

Chair, National Parent Forum of Scotland

6th February 2020



the National Parent
Forum of Scotland

Additional Support for Learning (ASL)

Feedback from focus groups

January 2020

Final report

Rocket Science UK Ltd

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Contents

Summary	1
1 The current situation	4
2 Issues raised by parents	6
3 Examples of what works	14
4 Where best to focus future efforts for positive change	20
Appendix	24



Summary

At a question and answer (QA) event in Perth (5th October 2019), hosted by the NPFS, a number of parents expressed their concerns about ASL. At this event, the NPFS mentioned Angela Morgan's Independent review to parents and it was agreed it would be valuable to host focus groups concentrating on this issue. It was decided that these focus groups would be open to any parent or carer with a child in school with any ASN. The intention was to gather examples of good practice, explore what parents wished to see more or less of, and where best to focus efforts for positive change. Six focus groups took place across the country: two in Aberdeen (one which was representing Aberdeenshire), Dumfries, Edinburgh, Glasgow and Inverness (see Appendix on page 25 for more details).

The focus groups were structured as an open discussion with common themes, but there were differences in what was discussed – partly because of geographical characteristics and partly because of their participant profile. Additionally, parents were also invited to give their feedback through email if they were unable to attend the focus groups. Email responses and the stories heard at the QA in Perth have been included throughout the report where relevant. Please note that where participants views have been recorded, not all these statements have been fact checked.

Rocket Science UK Ltd was commissioned by the National Parent Forum Scotland (NPFS) to report on the main points and perceptions raised at these focus groups. Names and local authority areas have been omitted to ensure the anonymity of participants. The term 'parent' in this document includes guardians and any person who is liable to maintain or has parental responsibilities within the meaning of section 1(3) of the Children (Scotland) Act (1995), or has care of a child or young person. The terms 'participant(s)' and 'parent(s)' have been used interchangeably throughout the document.

The most significant messages emerging from the analysis are set out overleaf.



Key messages	
Current situation for parents of children with ASL	<p>Many parents felt that they were struggling to get adequate ASL for their children.</p> <p>Participants felt that the <i>“burden of proof”</i> to prove their child’s needs was on them.</p> <p>Parents also felt they had to <i>“fight”</i> to have their child’s support.</p> <p>There was an overall feeling of frustration for parents at the current situation of ASL.</p>
Issues faced by parents	<p>Participants identified a number of areas where they faced issues when it came to ASL for their children. These issues were:</p> <ul style="list-style-type: none">• A lack of awareness of the legislation by professionals and local authorities• Inconsistent implementation of legislation across schools, partly as a result of differing values at each school• Children’s needs were being inconsistently met. There were differences between schools and between local authorities.• There were also inconsistencies in terms of how children were being assessed and the stage in their education when this took place• The ‘presumption to mainstream’ was a significant issue for many parents• Parents lacked information about the support that was available• Parents felt reluctant to fight aggressively for their children’s right to accessing ASL due to fears that they may be blamed for their child’s needs and/or that social work would become involved• The provision of support for children was inconsistent, especially in terms of reasonable adjustments for their children and the approach to transition phases in schools• School/parent communication was disjointed and inconsistent• Communication between specialist agencies was not working and parents felt that there was a lack of <i>“joining-up”</i> of agencies.
Examples of what works	<p>Many participants were able to identify examples where their child experienced appropriate ASL. Instances of good practice varied across the areas. Some parents felt that individual teachers made all the difference through creative and caring support, while others felt appropriate and supportive reasonable adjustments made a positive difference</p>



	for their child. Reasonable adjustments included flexible timetabling, increasing consistency over time and having special, purpose-built areas for children with additional support needs (ASN). One participant expressed successful ASL through getting private support.
Where best to focus future efforts	<p>Participants had many suggestions about where the Scottish Government and wider support services can focus their efforts for positive change for children with ASN. These suggestions included:</p> <ul style="list-style-type: none">• Promoting awareness of ASL. This included encouraging staff to be involved in specific ASL training.• Greater consistency in implementation. This included introducing long-term strategies such as having inspections looking into ASN provision in schools• Improving the identification of need• Improving access to support for things such as transition through school, by acknowledging needs and increasing the number of reasonable adjustments• Helping parents become more aware of the support available by helping parents in their role. This can be done by taking parents more seriously• Improving school/parent communication by working together, improving communication from schools to help parents feel more informed, and supported, and limiting the use of jargon.

Figure 1: Key messages from parents (Source: Rocket Science analysis of focus group data)



1 The current situation

Overall, parents who attended the focus groups were struggling to get adequate ASL for their children. With mainstream and ASN schools taking different approaches to ASL (with some schools not being fully aware of the requirements set out by the legislation), many parents felt abandoned by professionals. They felt that many teachers did not understand their situation and there was a “blanket shut down” on complaints and suggestions.

“Parental voice isn’t just dismissed, it is quashed.”

“Parents have no support and are piggy in the middle between the social worker, schools and health.”

It was felt that the “burden of proof to prove [a] child’s needs” lay with the parents. As a result, parents felt they were increasingly required to “fight” and “battle” to have their child’s needs identified and get the support they needed. This is something which parents in all focus groups as well as email respondents identified with.

“Teachers don’t believe my child’s needs. They don’t believe that my child can mask their anxiety.”

“It’s an exhausting fight. It does not feel right.”

“It’s a battle. It affects your family and your relationships with the school.”

Parents also felt that the responsibility to make informed decisions regarding their child’s education and support within school lay with them, where they would have to “become an expert” and:

“...become the world’s best researchers to get support in place. I know more about the legislation now as a parent than I ever did as a teacher.”

There was an overall feeling of frustration by parents at the current situation, and participants were keen to record their view that the government was at risk of “undermining the good PSAs, social workers,



teachers, siblings, parents” by leaving children and parents to reach crisis point before they received appropriate support. They were at risk of:

“Preventing children reaching their potential in helping them become contributing members of society”.



2 Issues raised by parents

Participants identified a number of issues which they faced when it came to ASL for their children. Many of these issues were presented across the focus groups and are described in the following section.

2.1 Lack of awareness of legislation

It was felt by participants in all focus groups, as well as email respondents, that educational professionals should have a better understanding of ASL legislation as professional knowledge of the legislation differed from area to area. This included knowledge about what constitutes a need, parents' rights, and the responsibilities of authorities in terms of ASN. Some parents felt that decisions had been made about their child's education without the relevant knowledge. It was felt that schools needed to be more proactive in learning this information.

"There's nobody leading from the top who knows the subject inside out."

2.2 Inconsistent implementation of legislation

There was a general feeling from participants in all focus groups that ASL legislation was being implemented poorly or sometimes not implemented at all. There was consensus amongst participants in one focus group that the ASL legislation put forward by the Scottish Government was a good idea, but that the government *"doesn't back it up"* in reality:

"We know what should be happening, but it's not happening. It's being implemented so differently in different schools."

"It is frustrating as a parent knowing what should be happening as a result of the legislation".

It was felt by participants that the inconsistency of implementation between schools was a result of variations of values and ethos at each school. Participants in several focus groups felt that the values of a school depended on head teachers. For example, head teachers had experience of having children with additional needs they were more aware of the support that needed to be provided in their school.



“If the head doesn’t agree, then you won’t get it. Individual head teachers can do the things that matter to them”.

“It’s the set up that makes it difficult – it’s no wonder you’re getting differences.... It’s about the ethos and values the school and head teacher have rather than a statutory agenda.”

“Councils are not concerned about making one school as good as the next. Each school has to do their own learning.”

Gaelic Medium Schools

The implementation of ASL in Gaelic medium schools was felt by one parent to be almost impossible as there were no resources in Gaelic to diagnose, identify or support children with additional needs. For example, there are no tests for dyslexia in Gaelic or educational psychologists who speak Gaelic. This would mean that diagnosis would occur when the child is older and has a better grasp of English to take the assessment. Another parent, through email, emphasised the importance of ASL in Gaelic classrooms. For example, having a PSA can allow small group work to occur where children can learn contextual language they would not necessarily get in a class.



2.3 Inconsistent assessment of needs

Email contributors and participants in all focus groups felt that the assessment of children's needs was inconsistent. In one local authority area, parents explained the different levels of needs assessment that they witnessed.

It was felt that physical needs were not assessed properly and children therefore received mixed levels of support. For example, one parent found diabetic children were not having insulin administered properly, while other parents found one school better at installing support such as handrails.

However, participants felt that schools were weaker on identifying educational, social and emotional needs than they were physical needs. In one local authority, it was felt that non-verbal children in mainstream schools were overlooked. One parent's child had no assessments made for adjustments; the child was bullied by peers and no action was taken. The child was then removed from school by parents and educational welfare had to become involved to resolve the situation.

There was a feeling that needs such as ADHD were overlooked. It was felt that these needs were seen as a behavioural problem and not included in the ASN census. It was felt that negative narratives surrounding ADHD in schools can mean teachers do not believe a child has ADHD unless they fulfil negative stereotypes. Moderate needs such as dyslexia were felt to be often overlooked when pupils only needed a relatively small amount of additional support.



Presumption of mainstream was an issue for parents

The presumption to mainstream is a duty of educational authorities in Scotland to provide all children and young people education in a mainstream setting, unless there are exceptions. Many participants discussed the presumption of mainstreaming with regards to mis-identifying children's needs. These parents felt that, if children can communicate and function at a basic level, authorities believe they will be able to cope in mainstream schools. One participant described this presumption to mainstream as the *"saddest thing about Scottish education"*. Parents also described having to seek adequate support for their child every term in mainstream schools, despite their child's needs not changing – that is, if a child is born with ASD their need for support for ASD is unlikely to change.

"I was told if your child spends enough time with normal children she would manage in mainstream school."

"In primary school my son flourished in Language and Communication Unit. There was a small class and nurturing with a specialist PSA. But the decision was made to move him to mainstream? Why?"

It was acknowledged by parents that placements in mainstream schools may work for some children and that integration of children is a good thing. However, parents felt that, no matter what the provision, it would be a battle to get their child to the right school:

"Parents have to fight if they want special school placement or mainstream placement. Both sides!"

Some parents felt that integration worked well in primary school but became more of a struggle in secondary schools. Ultimately, many parents felt it was individual teachers and practitioners who made the difference. However, sometimes, as a result of poor integration in mainstream schools, parents felt forced to home-school their children.



2.4 Parental awareness of support

Awareness of the types of support available for parents was an issue. Participants identified a lack of information available for them and they felt they had to become an “expert” to identify support services themselves. For example, parents in several focus groups described how they had needed to find out about Enquire (the Scottish advice service for additional support for learning) themselves.

“I trusted the professionals to know – but I found out I had to do it all myself.”

“There are unknown unknowns. You don’t even know what questions to ask.”

Additionally, parents in all of the focus groups were cautious about being antagonistic in terms of getting help for their children for two main reasons:

- It was felt that parents might be blamed for their child’s needs or behaviours before diagnosis if they did not go through parenting and attachment programmes
- There was a concern that social work would become involved and they would risk losing a chance of getting additional support.

“You don’t want to be antagonistic or you won’t get anything. You’ve got to be good to the system, but at the same time the system needs to be accessible to parents.”

“You’re afraid to be antagonistic because social work support depends on you being cheery.”

Parents felt scared that if they complained it would be taken out on their child. This resulted in a lack of trust between parents and support services.

“You don’t trust anybody in the end.”



2.5 Provision of support

Adequate provision of support for children with ASN was felt by participants to be inconsistent. The following describes the issues parents had with support provision:

Provision	Description
Reasonable adjustments	<p>There was felt to be insufficient reasonable adjustments made for children with ASN in schools. There was concern that even small changes were being turned down by teachers, for example:</p> <ul style="list-style-type: none">• Small changes to uniform (due to sensory needs)• Five-minute changes to timetables so children do not have to walk through busy school corridors (due to sensory issues and dyspraxia)• Pictures of teachers so children can learn to recognise them (due to memory problems).
Resources and funding	<p>Although many of the changes parents wanted to see would not cost any money (for example, arriving a few minutes late to class), parents felt that there was a lack of resources and funding for schools.</p> <p>There were reported inconsistencies in acquiring appropriate resources for schools and this responsibility was felt to lie with the head teacher. The responsibility of supporting children in classrooms would then fall on individual teachers to buy resources (for example, shopping themselves for books and supplies).</p>



Provision	Description
Transition	<p>Many parents across all focus groups felt that support through transition phases was not adequate. It was also noted that the kind of support that was often available in primary schools, such as ‘nurture’, is usually not available in secondary schools. Nurture is a type of teaching adopted by some schools, usually involving a specific member of staff who carry out small group or one-to-one sessions with children to give them additional support (eg emotional support). However, most parents noted that the transition process in junior years (during nursery and primary school) was better than transition periods in secondary school. This was particularly relevant during Senior Phase.</p> <p>There was a concern that schools were not realistic with families about transitions into adulthood.</p> <p>There were differences between transition for children with ASN in mainstream and ASN schools. Only parents with children in mainstream schools had experience of support for transition to secondary school (from as early as primary five). For children in ASN schools, parents expressed that this process was “non-existent”.</p> <p><i>“I didn’t find out until my son was in P7 that he needed to apply in P6 for an ASN secondary school.”</i></p>
Accountability	<p>Participants felt that there was a lack of accountability when it came to teachers not being trained on how best to handle children with ASN. For example, when major incidents happened in school (eg children having to be restrained), there were no paper recordings of the incidents. Some parents at one focus group reported schools calling the police when teachers could not cope with a child or locking children in cupboards. It was felt that this has become standard practice in managing children with ASN. One parent reported primary school children being handcuffed.</p>

Table 3: Issues that parents highlighted about the provision of support for their children (Source: ASL focus groups)

2.6 School/parent communications

Many participants across focus groups and email responses felt that communication between schools and parents was a major issue for them.



Communication was disjointed, and information was not being fed back to many participants in all the focus groups. This meant that many parents often found out about incidents through word of mouth and not the school:

“We’re still blind as to what happens [at school].”

Parents felt that communication with schools was also inconsistent. This was because communication depended on individual teachers being willing to communicate with parents. Although it was acknowledged that parents have some responsibility for letting teachers know what sort of support needs their children have, it was felt that there were not always enough opportunities to do this.

“Professionals who care and are empathetic are like good dust.”

There were a number of reasons suggested by parents as to why these communication issues existed. Some felt that schools are reluctant to listen to parents:

“It’s the parents’ voices that cause the resistance. Whatever parents say, the schools are reluctant to listen. It’s also because it’s likely to be the same parents over and over again”.

In one local authority, parents felt the main barrier to communication was a “bullying culture” both amongst professionals, as well as from professionals towards parents and children. One focus group identified the fact that many parents have additional needs themselves. It was felt that this affected parents’ confidence and their ability to support their child.

Additionally, there was a concern that there was a lack of communication between schools which meant that instances of good practice were not being shared between schools.

2.7 Communication between specialist agencies

Some participants highlighted the issue of inter-agency working. Many participants agreed that the system in place was “not multi-agency” because social work and education do not communicate. Communication was inconsistent especially when more than one agency was involved and that there was a “lack of joining-up” of agencies to provide appropriate support.



3 Examples of what works

Many participants had experienced instances of good provision of ASL. This section will cover the examples of good practice discussed by participants in each focus group as there were significant differences in what worked well in each area. While these focus groups have been labelled, these are not presented by geography or chronology to ensure the anonymity of participants.

Focus Group 1

Parents felt that early intervention worked well when done correctly. For example, an ASD diagnosis at the two-year check by a health visitor, meant that a child was allocated an educational visitor. Parents acknowledged that a formal diagnosis can be crucial in accessing some services. Further, reasonable adjustments for physical disabilities were reported as working well, for example:

- Speech and language therapy
- Occupational therapy
- Physiotherapy.

In addition, giving teachers space to be creative and invested worked well for some children: *“it really depends on the personality of the teacher”*. One parent shared a positive experience of a playgroup where, although there was no specialist training among staff, members of staff bought lights and sensory toys to help the children. It was suggested that there would be value in children having a consistent key person (eg keyworker or befriender) to speak to outside the classroom.



Focus Group 2

There was a consensus amongst participants that their children could receive effective additional support by going private. Only one participant in this group got private support for their child. This participant felt that a combination of private physiotherapy, speech and language therapy and being in the right environment worked for their child. After having to fight to go to a school outside their catchment area, their secondary school has ended up working perfectly as it had:

- An autism base
- Special lunch time
- The use of Chromebook for exams.

Another participant reported that their child's teacher (in an ASN school) started using techniques like smiley faces to show how they feel (eg 😊 for happy or 😞 for sad) when they got home to their parents. This meant that the parent was able to see how the child was doing at school when other types of communication had not worked.

Focus Group 3

A nursery was identified by participants which had excellent multi-agency professionals with good knowledge about ASN and effective early intervention. However, this provision was no longer available.

Enquire was recommended as being helpful to parents, but some participants did not know about it.



Focus Group 4

Parents reported that what worked well for them were good adjustments, additional support, smaller school size and head teachers whose schools had an ethos of providing good ASL support.

“It’s down to values and head teachers having the values. The head teacher is head of education and it’s down to them – it’s not about money”.

What worked well for a number of participants who had good experiences of ASL included support not being one sided - for example, when schools asked parents what works or has worked in the past for their child. This meant parents could *work with* management and were able to adjust until a good solution could be made. For them, getting the right ASL was a *“partnership”*.

It was felt by a number of participants that their child attending small schools meant that the schools were more able to adapt to the needs of their children.

Additional good practice was identified by some parents in terms of transition phases. Consistency was key to this. For example, one parent described their child being able to keep the same classroom, teacher and support teacher through transition. This child was also able to decide when they would go up to see and explore the high school. This was a result of the head teacher having a child with ASN and who therefore had knowledge and understanding of the additional support needed for transition.



Focus Group 5

Parents felt that reasonable adjustments such as mentoring and buddying up can be brilliant for children with ASN as it creates a cultural change in attitudes towards ASN. For example, one parent described a child who travels around schools giving talks on ASN and sharing lessons learnt as well as helping to reduce the stigma that can be associated with ASN. Additional adjustments could be made to improve communication between children, parents and teachers, for example, having a communication diary or passport as a way of working together.

In terms of resources, it was felt that small creative ideas can make a difference. For example, where advocacy services had been cut in one local authority, coffee mornings were implemented where parents could get support from teaching staff and other parents.

Focus Group 6

Parents identified that a committed and consistent small group of professionals can support young people through transitions. One parent identified that a small group of professionals during nursery who persevered through the challenges and made efforts to become trained in ASN made all the difference and gave their child the social confidence to transition into primary school.

Other participants identified that in the past higher standards for support for learning teachers meant that staff had the training and experience to work with children with a range of ASN. Parents reported that it worked well when support for learning teachers were required to have a number of years experience before starting in the role.



Examples of ASL adjustments which worked well

Adjustments	Description
Consistency in child's learning	Keeping the same classroom or teacher over a number of years.
Flexibility with timetables, subjects and schools	<p>One parent described the school allowing their child to attend all classes to see which worked and dropping the classes that didn't work.</p> <p>Another participant appreciated schools being willing to support flexibility (2 days in mainstream and 3 days in ASN).</p> <p>Another parent identified the situation where their child cannot go to assembly and instead helps with IT as they are interested in this. This helps them feel included.</p> <p>Flexibility can help avoid school refusal – eg children being able to access the learning base when they cannot cope with lessons.</p>
One-to-one support	<p>Pupil Support Assistant (PSA) - Matching up PSA to child's personal needs.</p> <p>One participant described school asking their child what sort of person they would like, for example, male or female, personal interests (nature, sports, science etc).</p> <p>Having a classroom-based educational psychologist.</p>
Child-led adjustments	Child can leave when they want, for example, when they're frustrated or can't concentrate. One participant reported that, when their child was not able to concentrate, they were encouraged to go play or learn in the nursery class as they sometimes operate at a younger/lower level. Other examples include children not standing in the school line or sitting on chair at side of stage during school play. This can create the feeling of a "true partnership".
Movement breaks	When the child or young person needs to move. These are not a reward and are necessary.



Adjustments	Description
Appropriate technology	This meant getting technology which would help support study and communication for children, for example, having a Chromebook on which to do schoolwork or exams.
Special, purpose-built areas	Having sensory areas in the classroom or having a quiet space away from classroom for relaxation. It was emphasised that this provision can be beneficial for all children and not just those with ASN. Any child can feel overwhelmed for different reasons at different times.
Teacher's knowledge of child's needs	One parent described that, for their child, the class teacher was attachment aware and had additional training to recognise needs and provide appropriate emotional and social support for the child. This worked much better than previous years when these skills and awareness were not present: previous teachers were unable to understand what trauma was and could not make adjustments in supporting their child. This was particularly the case for children who were looked after, for example in kinship placements.

Table 4: ASL adjustments which worked well for some participants' children (source Focus Group 4)



4 Where best to focus future efforts for positive change

Participants were asked to reflect on where the Scottish Government should best focus efforts for positive change.

4.1 Promoting awareness of and encouraging staff training on ASL

It was felt by some participants in all focus groups that ASN training for school staff should be compulsory with consistency across the board in terms of support, handling 'triggers' and being proactive, especially when it comes to meltdowns and restraining. Some parents felt that ASN training would give teachers and other school staff the confidence to raise their concerns, discuss support with parents, share good practice and give children adequate support.

"Honesty is good. One teacher has admitted that they don't understand, but that they would like to learn about it."

"You don't want to tell people how to do their job."

There was an overwhelming feeling among participants at one of the focus groups that those who teach children with specialist needs should be specialist teachers.

4.2 Greater consistency in implementation

Parents felt that improving the consistency of implementation of ASL legislation would be particularly beneficial for children with ASN. Putting ASL into effect would mean improving strategies around 'what works' for children. Parents suggested having an independent body to carry out inspections into schools looking specifically at ASN in order to improve standardisation at the implementation stage and at later stages. It was suggested that that schools should start setting SMART (specific, measurable, attainable, relevant and time-bound) goals in terms of achieving implementation aims.

Parents in one focus group offered some further suggestions about how this could be improved so that children do not experience trauma in their schools as a result of poor implementation of the legislation:

- Mandatory training for teachers in how best to support children with ASN
- Increase qualifications and expertise to help with decision making



- Increase the accountability of teachers
- Improve the language used around ASN
- Improve knowledge of needs in rural schools, for example, diagnoses were difficult for parents (some families having to travel for a diagnosis as nothing was available nearby)
- Improve knowledge of physical needs (eg child with diabetes getting appropriate care).

4.3 Improving the identification of need

Improving the identification of children's needs was felt by parents as an area to focus on in order to improve the future provision of ASL. Some parents were concerned that children with physical disability needs were more recognised than children with less visible needs. This recognition was particularly important for parents with non-verbal children. Additionally, parents felt it should not be difficult for parents whose child has a physical disability and diagnosis to express concerns to their school about a child's cognitive ability.

"We have to place the utmost trust in caregivers of our children. They have intimate care needs also they cannot tell anyone if they are being hurt or unhappy. It's hard to feel that trust when staff are so stressed and unsupported in the workplace."



4.4 Improving access to support

Improving access to support was another area for improvement. Parents expressed a desire for their children to receive more support when it came to schools registering and acknowledging missed school, school refusal, exclusion, or late arrival to class due to ASN. This was because children are often reported as late or absent and this does not represent them correctly or support their needs.

There was agreement that, while children needed improved access to support during transition through school, parents sympathised with guidance/pastoral care teachers who have too heavy a workload. However, it was felt that if parents were promised something by the Scottish Government, then it was important for it to be provided. Expectations should be managed early on about what is achievable for their child as well as having a flexible curriculum for different levels of additional support needs. One parent mentioned the good practice they had experienced in terms of their experience of consistency and tailored support which had been key in their child getting through transition.

Additionally, participants in one focus group reflected that reasonable adjustments made for ASN pupils can benefit all children, not just those they are aimed at. A further issue was identified by parents in rural areas, where it was hard to get diagnoses to get adequate support.

4.5 Parental awareness of support

Parents offered some suggestions about how they can be well supported in their role. Parents wanted to be taken seriously and were worried that they will be accused of ‘molly-coddling’ their children:

“People think you are molly-coddling your child or you’re just over-anxious parents. But there’s no knowledge there.”

“Training for head teachers makes all the differences, so that they understand I’m not just an overbearing parent.”

Information packs on multi-agency meetings and accessing independent advocacy would be helpful. In addition, many parents cannot afford private legal representation and only have one organisation to go



through. It was also identified that greater access to and awareness of advocacy services would be beneficial.

4.6 Improving school/parent communication

It was felt by participants in all focus groups and email responses that communication about ASL between children, parents, schools and other support services could be improved. Parents should receive timely and appropriate communications from schools to feel informed and supported, and the use of jargon should be limited to avoid excluding parents. One parent also identified how language can be a barrier, and it is important that information is available to parents who may have English as an additional language, or for parents who may have their own ASN.

It was felt that schools needed to develop long-term strategies and plans to support improved communication and cooperation. This would help parents not feel like they have to “battle” and “fight” to get ASL for their children.

“We can’t support teachers if they do not communicate. I had to have a whole meeting just to get a communication book.”

Parents in several focus groups suggested communication books or passports as a useful tool to enable professionals and parents to know a child’s needs. However, limitations were acknowledged, for example, they could lack detail, or parents might not relate to or understand the written language of education professionals.



Appendix

This report draws on the discussions at 6 focus groups held in January 2020: two in Aberdeen (one of which represented Aberdeenshire), Dumfries, Edinburgh, Glasgow and Inverness. The total number of participants in these focus groups was 60 Participants from the following local authority areas:

- Aberdeen City
- Aberdeenshire
- City of Edinburgh
- Dumfries and Galloway
- East Lothian
- Falkirk
- Glasgow City
- Highland
- Midlothian
- North Lanarkshire
- Perth and Kinross
- South Lanarkshire
- Stirling.

Also included in this report are the comments received by parents online, by email, and telephone calls.

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