

# COVID-19 series: briefing on special educational needs and disabilities provision, November 2020

Evidence from education, health and social care leaders and practitioners between 1 September and 4 December 2020

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Ofsted has carried out a series of [interim visits](#) over the autumn term to gather information about how children's education and physical and emotional health have been supported during the pandemic. This briefing considers the experiences of children and young people with special educational needs and/or disabilities (SEND) gathered during Ofsted and Care Quality Commission (CQC)'s visits to education, health and social care providers. You can read more about the experience of pupils with SEND in mainstream primary and secondary schools in a [separate briefing](#).

## Data summary

We used data from:

- six interim local area SEND visits in October
- 659 phone calls with early years providers between October and November
- 13 visits to residential special schools in September and October
- 45 visits to further education and skills (FES) providers in September and October
- 270 visits to schools between 10 and 19 November, including mainstream schools, special schools and pupil referral units (PRUs)
- a focus group with four social care inspectors, and written submissions from two social care inspectors.

We also analysed written submissions from two social care inspectors who had completed visits to local areas and residential special schools.

For most of the visits, inspectors collected information from leaders within the providers. Practitioners and family members were only interviewed for interim area SEND visits. This briefing consequently mainly draws on the perspectives of leaders and practitioners, rather than of children and young people with SEND and their families.

## Main findings

- **Children and young people with SEND were less likely to be attending their schools and colleges than their peers this term.** This difference is not new. However, some children and young people with SEND have faced additional barriers to regular attendance as a result of the pandemic. These included:
  - anxieties about the pandemic felt by parents and carers, and the children and young people themselves
  - medical needs that required them to shield
  - problems accessing transport.
- **Some children and young people who experienced prolonged absence from education were exposed to increased levels of abuse and neglect while at home or in care.** When children are taken out of education, they are 'out of sight'. Some of these children have been living with domestic abuse, neglect and emotional abuse without practitioners being able to detect it.
- Even where children and young people with SEND are attending settings, most are not able to access the full curriculum. Barriers to a full curriculum include:
  - part-time timetables
  - a focus on core subjects
  - difficulties with following COVID-19 (coronavirus) guidance in some subjects.

These changes may mean that some children and young people with SEND are missing out on learning that is essential for their preparation for adult life.

- **Practitioners and leaders working with children and young people with SEND have found the pandemic personally and professionally difficult.** Many individual practitioners have 'gone the extra mile' to provide support, sometimes to the detriment of their own health. However, some leaders and practitioners reported 'pulling together' as they met the challenges of the pandemic, which could result in better multi-agency working.

## Overarching questions

This briefing examines the evidence about how the pandemic has affected children and young people with SEND in the following areas:

1. attendance
2. physical and emotional health
3. curriculum
4. practitioners and leaders' experiences

## Attendance

### Children and young people with SEND now face additional barriers to attending their education settings

Children and young people with education, health and care plans (EHCPs) had lower levels of attendance in schools than all pupils this autumn. Although some school leaders reported full attendance for pupils with SEND, national data published on 16 November 2020 stated that attendance in state schools was at 77% for pupils with EHCPs compared with 83% of all pupils.<sup>1</sup> In some cases, these children were only absent on certain days, but a small number of children had not returned to education. Levels of attendance have historically been lower for children and young people with EHCPs. However, they now face additional barriers that may be contributing to current levels of absence. One of the factors contributing to this was the acute anxiety of some parents and carers and, to a lesser degree, children and young people themselves. For example, one young person became afraid their residential setting had vanished during the first national lockdown. Their key worker used video calls from within the school to reassure them. The young person returned to the setting, but they were still very afraid of people entering the building from outside.

Children with respiratory conditions, profound and multiple learning difficulties or other long-term medical difficulties were also less likely to be attending. One special school leader reported that none of their pupils with these types of need had returned.

Some of these children and young people remained at home because they were shielding in accordance with government guidance or because their families were anxious about clinically vulnerable children needing to avoid COVID-19. Other barriers included government guidance continually changing and difficulties with specialist medical equipment being set up correctly at schools by health practitioners. For example, a special school leader shared their frustration about certain equipment having to be set up by a physiotherapist and the fact that practitioners were not available to complete this task meant some children could not attend.

Children attending special schools also faced difficulties with school transport. One special school leader said that taxis had not been easy to organise:

‘We’ve put in our transport applications at the usual time – and the Year 7 applications sat with [the local authority] and didn’t get passed to transport, so we didn’t have transport for new pupils.’

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<sup>1</sup> ‘Attendance in education and early years settings during the coronavirus (COVID-19) outbreak’, Department for Education, December 2020; <https://explore-education-statistics.service.gov.uk/find-statistics/attendance-in-education-and-early-years-settings-during-the-coronavirus-covid-19-outbreak>.

School leaders also found managing bubbles for taxi and bus services difficult for the children and young people who were attending. This included services being unavailable at short notice due to driver illness.

## **Good communication and frequent contact with families in the summer helped children and young people to return to education**

In order to ensure that children and young people resumed face-to-face learning, practitioners worked hard over the summer to build trusting relationships with families through regular contact. School leaders recognised the effectiveness of this in encouraging pupils to return to school at the start of the autumn term. For example, one mainstream school leader said it had led to a 'sea change' that resulted in a positive impact on attendance. School leaders also felt their knowledge of pupils' needs had improved due to these strong relationships. Better relationships between home and school had also gone some way towards mitigating families' anxiety about returning. One mainstream school leader commented that 'Parents were confident in us, so the pupils were as well'.

Schools and colleges took other steps to build children and young people's confidence about returning. Most colleges organised video tours of campus buildings that were sent to students with SEND in advance of the new term. One special school created personal transition documents for each pupil with information about their new classes and staff. Several mainstream schools anticipated that returning to education would be a particular challenge for children and young people with some types of SEND, such as autism or attention deficit hyperactivity disorder. They therefore invited children and young people and their families into school over the summer.

## **Some children and young people with SEND have found it difficult to return to their settings**

Although most children and young people with SEND had returned to education, some had found it difficult to return. For example, some residential special school headteachers said that children were struggling to adapt to changes in the school's expectations and environment. Some mainstream school leaders said that they could not use spaces that would normally be available for children and young people with SEND, such as nurture rooms, because of the risk of cross-bubble contamination. One school mentioned that it was compensating for this issue by taking children for walks if they were experiencing behavioural or other difficulties.

In a small number of cases, there was evidence that difficulties settling back into education had resulted in children and young people's places becoming less secure. For example, in one secondary school, three children and young people with EHCPs had undergone early annual reviews at the start of term because the school felt it could not make suitable provision. We also saw evidence that a small minority of children and young people with SEND were at risk of exclusion due to changes in their behaviour after returning to education.

A small minority of children and young people with SEND had left their schools permanently. Some school headteachers said elective home education had increased since September 2020. A recent survey of local authorities carried out by the Association of Directors of Children's Services supports this finding.<sup>2</sup> One special school headteacher challenged requests for elective home education from several parents and offered instead to refer families to the educational psychology service and to social care for help. In addition, a few mainstream school headteachers said some pupils with SEND had left them between the first national lockdown and the autumn term; some of these pupils had moved to special schools.

## **Attendance at short break provision has also been affected**

Short break provision has seen a similar pattern of reduced attendance from children with SEND. Even where short break services have reopened, not all children and young people are using them to the extent that they were before the pandemic. Barriers to attendance at short break provision included providers reducing capacity, as well as anxiety from parents, carers and children and young people. For example, attendance for one child at a short break setting depended on staff agreeing to the parent's request for staff to wear full body 'boiler suits' when providing any intimate or medical care.

Some children and young people with SEND may therefore not be accessing enrichment and support, as well as education. Families may be facing additional pressures due to the lack of respite.

## **Physical and emotional health**

### **Leaders took steps to increase monitoring of vulnerable children and young people, but some were exposed to increased levels of abuse and neglect while at home or in care**

To help keep children and young people safe, leaders had increased monitoring since March 2020. One residential special school leader had organised a dedicated safeguarding lead and action plan to monitor vulnerable children in relation to family stress. Several PRUs developed links with community policing teams for welfare visits. One special school had set up its own outreach team to visit families who staff had concerns about. A number of mainstream schools mentioned doing additional home visits for pupils with SEND.

However, a small number of children and young people who remained at home experienced harm. In some cases, this was emotional harm caused by national lockdown, such as not being able to see relatives. For example, some children and young people with SEND living in children's homes who were unable to see relatives

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<sup>2</sup> 'Summary analysis of the ADCS Elective Home Education Survey 2020', Association of Directors of Children's Services, November 2020; <https://adcs.org.uk/education/article/elective-home-education-survey-2020>.

in person found video calls distressing because they did not understand why they could see relatives and not touch them.

Other children with SEND were subjected to emotional abuse and neglect during the time when they did not attend education. For example, leaders believed that one child who had become suicidal had developed these feelings as a result of being 'rejected' by his parents while living at home.

Not all incidents occurred in family homes. In one children's home, staff told a child with SEND to self-isolate in their bedroom, with no access to the garden, on their return to the home after going missing. The child struggled to understand why they were not allowed outside and their behaviour escalated as a consequence, to the point at which staff were unable to manage it and contacted the police. This led to the child being taken to the police station.<sup>3</sup>

**In a small number of local areas, practitioners did not assess the risks for disabled children. Those children were therefore not included in discussions about what steps to take to keep them safe.**

Some services remained available to children and young people with social, emotional and mental health problems during national lockdown. However, the lack of contact with external services exacerbated problems for some children. One special school headteacher felt that health services had 'stepped away' during the first national lockdown, leading to some parents and carers feeling 'abandoned'. Social workers continued to support children face to face in some areas, but this was not the case in all areas. For example, one special school leader said they had tried to fill the gap left by social care services, commenting:

'It seems odd that it was fine for us to be open and working face to face with children every day while social workers were working from home'.

In other parts of the country, however, social workers were reported to be the only practitioners maintaining contact with families, providing help without input from other services.

## **Poverty has become a bigger problem for more families**

We found that children and young people with SEND faced 'adverse conditions' during the first national lockdown, according to many leaders from different types of provider. A few special school leaders described how they 'took away' some of the issues created by national lockdown by delivering food parcels to families themselves. Leaders from all types of providers that took part in the visits talked about helping families by signposting or making referrals to food banks and meal voucher schemes. One PRU had decided to provide free school meals for all of its students since reopening, commenting that 'some of our deprived families do not have money in the bank, so we've just fed them all'. A college leader said that they

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<sup>3</sup> Ofsted took appropriate action in response to this incident, which was identified during a regulatory inspection.

had built stronger links with their local authority and developed a rapid-response system so that the college could alert the relevant local authority teams when students were having problems with getting enough to eat.

## Curriculum

### Not all schools and colleges were delivering a full curriculum

Some children and young people with SEND were attending school on part-time timetables. In some cases, they were on part-time timetables before the pandemic, so this was a continuation of practice. In other cases, however, schools had introduced part-time timetables to support children and young people with more complex needs to transition back to schools and colleges. Although most leaders felt that part-time timetables were effective in helping children and young people with SEND to return, this could limit the children and young people's access to the full curriculum.

A loss of enrichment opportunities or difficulties providing a full and balanced curriculum was a concern for all age groups. One special school leader said:

'The things we think are most important are a little out of reach, such as visitors, work experience, community events and we know these make the biggest difference.'

Many leaders felt that the loss of work experience placements, visits by employers, enterprise days, trips and events like Christmas markets had affected children and young people's preparation for adulthood. For children in special schools, this included practical experiences like shopping and using public transport, which would ordinarily have formed part of their curriculum. One PRU leader commented that although they had tried to continue to provide work experience for students, as a result of lockdown, they were reliant on placements that involved family members.

Both mainstream and special schools also reported that not all external services and therapies had resumed operating, particularly face to face. One mainstream school said there had been a significant impact due to occupational health, physiotherapy and specialist support teachers not being able to work face to face with children. School leaders also said that some children and young people with SEND were being taught in small groups since returning and that they 'can't cope socially or cognitively'. Early years providers also discussed issues with only being able to access external support through phone calls with practitioners, such as speech and language therapists, saying that this was not always effective.

### Many education settings focused on English, mathematics and science

English was identified as a priority in response to concerns about regression in verbal communication, writing and reading ability. Some education leaders commented that, where children and young people were struggling before the pandemic, gaps in their learning were now larger, particularly for some with SEND. For example, one

PRU leader said that a pupil at their setting had stopped talking during the first national lockdown. Another pupil could not remember how to sequence numbers to five. Overall, almost all education providers had made adaptations to their autumn term curriculum, with a renewed focus on English, mathematics and science.

To pinpoint where learning had regressed the most, providers had used a range of assessment tools to inform which interventions they needed to make. They also used a variety of approaches to bridge gaps. For example, some mainstream schools described plans to increase the number of reading and mathematics interventions for children and young people with SEND. In some providers, the interventions meant that the pupils spent additional time away from main classroom activities. A number of leaders had provided phonics training for staff to try to improve the teaching of reading. One special school had carefully planned bubbles to make sure each group had access to a library. An early years provider discussed organising family workshops to help parents and carers learn how to tell stories to children.

## **More time had been built in for pastoral care**

Leaders in all types of provider felt that pastoral provision for children and learners with SEND was important because 'children needed additional support in terms of mental health'. Some examples of this provision included:

- one-to-one sessions
- additional personal, social, health and economic (PSHE) education
- COVID-19-themed lessons or bought-in pastoral support services.

A few special school leaders talked about building the entire autumn curriculum around the theme of PSHE education, but most providers had chosen to simply add more PSHE or mental health-based content to their existing curriculum. Alongside this, some providers used the government's catch-up funding to arrange support aligned to children and young people's needs, such as recruiting specialist mathematics and English teachers or buying in therapeutic support programmes and training. For example, one sixth-form college had organised for child and adolescent mental health services clinicians to run group sessions for students and offer some one-to-one therapy.

## **Practitioners and leaders' experience**

### **Practitioners and leaders found the pandemic very difficult to deal with personally and professionally, but some felt that teamworking had improved**

Staff working with children and young people with SEND in several different contexts have found dealing with the impact of the pandemic an extremely difficult experience. Many leaders said that rapid changes to working practice, having to learn to use new technologies and having to work at a faster pace and for longer hours had caused their teams stress. Some leaders and practitioners saw their workloads increase dramatically. For example, staff in some residential special

schools and homes showed 'huge commitment' by staying for longer shifts or moving into a setting to cover for staff absence, as well as forgoing seeing their own family to maintain bubbles with the children they cared for. One local authority family support worker said that more cases were kept open in their area so that help could be offered to families facing difficult circumstances while also accepting higher numbers of referrals. One further education college leader said that 'nobody has said they won't do anything'. This highlights the commitment by leaders and practitioners to assist children and young people.

Leaders in one area felt that health practitioners had faced particular challenges with so much change, including Nightingale hospitals being opened and staff being deployed to frontline work tackling COVID-19. These difficulties were also mentioned by staff working in social care and schools. For example, in one special school, an on-site occupational therapist had done additional training in order to support staff as well as children and young people. In another, the headteacher reported that a significant number of their team had mental health problems.

To support staff, school leaders used staff meetings to focus on 'golden moments'. They also delayed formal observations to reduce pressure on staff. Some practitioners working in teams supported each other by making sure they contacted each other regularly.

However, working collectively in a pressured environment had created a sense of team spirit that benefited some practitioners. Several staff members from different settings talked about everyone 'pulling together' to encourage one another and provide for the children and young people they assisted. This was particularly the case in teams that usually worked together, such as within schools, but also between different partners. Evidence from the six interim local area SEND visits shows that agencies had worked together more closely to support children and young people than they had previously. This is likely to have benefited children and young people with SEND but carries a risk of burnout for practitioners if the pace of work continues.



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