Report on the development and use of POET for children and young people with SEND

Spring 2015
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Using POET to measure the impact of education, health and care plans and personal budgets for children and young people with special educational needs and/or disabilities
By working in partnership with parents/carers, practitioners, children and young people the project designed, tried and tested a framework that describes both process experience and outcomes.

The surveys reached people with experience of personal budgets held in a variety of ways, not just direct payments as well as people with experience of education health and care plans. A detailed explanation of the development of the POET can be found in Appendix 1.

People chose to use their personal budget in different ways, traditional specialist services and equipment did feature but most people took the opportunity of shaping their support by spending their personal budget in their local community, on personal assistants, to get a break from caring, to take part in after school or holiday clubs, and to enjoy family time.

The EHC process is working, according to parents/carers, and leading to some good outcomes in some areas, parents/carers reported positive impact; Between 80% and 90% of respondents said that things had worked well all or most of the time in all of the nine areas we asked about.

The surveys reached people with experience of personal budgets held in a variety of ways, not just direct payments as well as people with experience of education health and care plans. A detailed explanation of the development of the POET can be found in Appendix 1.

A high proportion of responses came from education practitioners.

Summary

The work reached across 18 different local authority children’s services who participated in the design and testing of the tool; 355 parents/carers who have experience of them completed the questionnaires, 36 young people completed their questionnaire and 336 practitioners working to implement EHCPs or personal budgets, the survey reached most practitioner groups not just social workers.

A high proportion of responses came from education practitioners.

By working in partnership with parents/carers, practitioners, children and young people the project designed, tried and tested a framework that describes both process experience and outcomes.

The surveys reached people with experience of personal budgets held in a variety of ways, not just direct payments as well as people with experience of education health and care plans. A detailed explanation of the development of the POET can be found in Appendix 1.

People chose to use their personal budget in different ways, traditional specialist services and equipment did feature but most people took the opportunity of shaping their support by spending their personal budget in their local community, on personal assistants, to get a break from caring, to take part in after school or holiday clubs, and to enjoy family time.

The EHC process is working, according to parents/carers, and leading to some good outcomes in some areas, parents/carers reported positive impact; Between 80% and 90% of respondents said that things had worked well all or most of the time in all of the nine areas we asked about.

At least two thirds of Parents said EHCP or personal budgets had made things better or a lot better for their child - Support, Quality of life, Being happy and relaxed, Home, Being Fit & Healthy, Family Relationships.

Less than 2% of respondents said that things had got worse or a lot worse in any of the areas.

Parents/carers reported positive impact on their own life; At least two thirds of parents/carers said things had got better or a lot better in five of the six areas we asked about (Confidence future support, Life balance, Aspirations Feeling Supported, Being Valued).

Looking ahead; People were uncertain about the future with well over a third (40%) parents/carers saying they were unsure whether the support in their child’s EHC plan would meet their needs in the future.

– Practitioners were very positive about some aspects of process; Partnership with Family (88%), Child at centre of planning (81%), Understand Child’s Needs (81%)

– Practitioners were more conservative about impact than parents; 50-70% saying EHCP and PBs had helped children most or all of the time in the 10 areas we looked at.

– There were common views between parents/carers and practitioners looking at both the free text comments from practitioners and from parents/carers together three areas of common positive interest were identified; Improved parent/carer practitioner working, increased parental/carer control, improved choice and flexibility.

There were two areas of common concern between practitioners and parents; timeliness and paperwork.
The project was committed to working closely with disabled children and young people, their families and those working with them to design, develop and use the tool.

This report describes the work of In Control, Lancaster University and 18 local authority partners to develop a Personalisation Outcomes Evaluation Tool (POET) suitable for use by those implementing single education health and care plans (EHCP) and personal budgets.

Introduction

This report follows on from the initial report published in June 2014.

The aim of the work was to develop a measurement system that could be used nationally to investigate the process effectiveness of obtaining EHCPs and personal budgets and associated outcomes.

The project was committed to working closely with disabled children and young people, their families and those working with them to design, develop and use the tool, enabling them to make their own judgements on the impact of EHCPs and personal budgets.

The approach was heavily informed by our previous work in adult social care and health where the adult version of POET is increasingly being used to understand the impact of personal budgets.

Much of the first year of the project involved work with key stakeholders to develop and then test a version of the POET suitable for use with children and young people, parents and practitioners. The project went in its second year to use the POET in participating local authority areas, as they started to implement EHCPs for the first time.

This report describes the main findings of Survey 2 (2014-15) the POET tool, its purpose and development (appendix 1), and presents data gathered over the two year life of the project (appendix 2).

The numbers involved so far mean that the data can only provide an emerging, but nevertheless interesting and helpful analysis for those implementing EHCPs and personal budgets.

1 Links to The Children’s POET Survey 1
2 Links to previous Adult Social Care POET reports
Methodology – Overview

A full description of the methods and analysis is included in Appendix 1 & 2, the questionnaires for parents, practitioners and for young people (as used to complete Survey 2) are in Appendix 3.

Participants:
• The 18 participating local authorities were all self-selecting, half of those taking part were SEND Pathfinders. As self-selectors there is an uneven split of urban/rural and diversity and sites were all at different stages of implementing EHC Plans, personal budgets and taking forward the wider SEND Reforms.
• Each site was responsible for approaching parents, practitioners and young people to take part; a variety of approaches were taken to support this including running local workshops with different groups.

Questionnaires
• The questionnaires were either completed using a paper-copy which was then sent in to the office, or via a web resource
• The questionnaires used in Survey 2 (2014-15) were generated through workshops with parents, practitioners and young people held in year 1; feedback from participants was gathered at the end of year 1 and revisions were made. Further feedback has been gathered: a workshop was held in December 2014 which was attended by a number of the sites, NHS England and parent representatives, this input has been compiled with individual feedback to inform the current questionnaires in Appendix 3. Further work is planned, in particular on the questionnaires for young people in Year 3.

Analysis
• Explanatory notes covering the approach to analysis of the data generated by the questionnaires are part of Appendix 2.
• Free text data was grouped by theme against groupings from survey 1. Free text associations will form part of the SQW External Peer Review in Year 3.
• Feedback from work on the questionnaire was drawn together and redrafted led by a member of our team in consultation with key people, this was overseen by the National Steering Group.

Validation
• At the request of the Department for Education we have carried out an internal ‘validation and reliability’ piece of work using the Cabinet Offices ‘Quality in Qualitative Evaluation: A framework for assessing research evidence.’ report as a basis.
• In the coming year we have commissioned SQW to conduct a similar external ‘Peer Review’, the report on this exercise will be published alongside the report detailing ‘Survey 3’.

Oversight
• Over the past year we have worked with the analyst team and researchers at the Department for Education. The analyst and research team have had oversight of the draft report and their comments and feedback have included within this report. In Year 3 all analysis and method approaches are to be agreed with the DfE Research and Analysis team.

Methodology – Overview

A full description of the methods and analysis is included in Appendix 1 & 2, the questionnaires for parents, practitioners and for young people (as used to complete Survey 2) are in Appendix 3.
This section presents the responses to the survey. It looks at people’s experiences of processes and outcomes as described by parents/carers who took part in the survey, including an analysis of their free text responses.

The second part of this section presents the views and experiences of practitioners, including an analysis of their free text responses.

The report then goes on to look at the associations between people’s experiences of the EHCP process and the outcomes they report.
Why did children need additional support?

- The Department for Education 2015 Code of Practice uses four categories to describe the needs of children with SEND.
- Communication and interaction
- Cognition and learning
- Social, emotional and mental health difficulties
- Sensory &/or physical needs

Parents reported their children as having a wide range of needs against these categories, with most parents/carers reporting that the needs of their child were in more than one category.

Did children have individual support before?

Most children had previously had some kind of individual support.

Just under two thirds (62%) had statements of special educational needs. Over a third of children (38%) had support from a specialist health service. Only a small proportion (8%) of children were reported as having no previous support. Just over half (56%) of respondents said their child had a named keyworker.
How long had respondents had EHCPs and/or personal budgets?
The length of time EHCP plans and/or personal budgets had been in place varied considerably, ranging from one month to 12 years. The average time was just under two years (22 months), with half the group being under a year.

How was the personal budget held?
Most respondents (77%) said they did have a personal budget for the support their child needs. Of these, three quarters (74%) said they held this money themselves, receiving the money as a direct payment.

How much money was allocated in personal budgets?
166 respondents said how much money was in their personal budget, either as a weekly sum (80) or as a one-off payment (86). The highest weekly sum was £1,140, the lowest £13.50, with an average weekly budget of £160. The highest one-off payment was £30,500, the lowest £144, with an average one-off payment of £2,483.
Community Social  
Accessing local sports leisure facilities, clubs and youth groups

Personal assistant  
1-1 support from a paid carer

Break from caring  
Support that enables the family carer to have a rest or do other things than care.

Specialist service  
Accessing groups or services targeted to children with disabilities, in particular specialist respite.

After school, Holiday club  
Accessing after school clubs, holiday clubs and play schemes

Equipment  
Specialist sensory communication or clothing, aids and adaptations

Family time  
Support that enabled carers to focus on siblings or spend time together as a family

How was money in personal budgets used?

Most respondents (227) described how they had used the money allocated in their personal budget. People used the money in variety of ways, and most people said they spent the money on more than one thing. This was described in a free text response that was reviewed and a number of themes identified. The number of people using their budget in each way identified from the themes was then counted (see Figure 4).
Who was involved in planning?

Most people (83%) said who had helped them plan the support. Of those who said a practitioner was involved, just under half (45%) said that more than one practitioner had helped them plan. A range of different practitioners were reported to be involved in planning, the most common being a social worker (53%).

Most people had help to plan their support.

How did parents/carers experience the process?

Between 80% and 90% of respondents said that things had worked well all or most of the time in all of the nine aspects of process we asked about. In three of these domains, Partnership, Paperwork and Continuity, at least 87% of respondents said things had worked well all or most of the time. Less than 10% of people reported that things had never worked well or rarely worked well in any of the process domains we asked about.

Figure 5: Who was involved in planning

Figure 6: Parent/Carer experience of process
What outcomes did parents/carers report for their children?

At least two thirds of respondents said that the EHCP or personal budget had made things better or a lot better for their child in six of the nine areas we asked about (Support, Quality of life, Being happy and relaxed, Home, Being Fit & Healthy, Relationships with Family). In the other three areas (School/Learning, Relationships with Friends, Local Community) at least half of respondents said things had got better or a lot better. Less than 2% of respondents said that things had got worse or a lot worse in any of the child outcomes we asked about. In four child outcomes (Relationships with Family, School/Learning, Relationships with Friends, Local Community) at least a third of respondents said the EHCP or personal budget had made no difference.

What outcomes did parents/carers report for themselves?

At least two thirds of parents/carers said things had got better or a lot better in five of the six outcome domains we asked about (Confidence in future support, Life balance, Aspirations, Feeling Supported, Being Valued). Less than 3% of respondents said that things had got worse or a lot worse in any of the outcomes we asked about. Nearly half (43%) of parents/carers said that the EHCP or personal budget had made no difference in their access to community. A significant minority of parents/carers reported the EHCP or personal budget making no difference in relation to 3 of the 6 areas we asked about, Aspirations(22%), Feeling Supported(24%), Being Valued(30).
Do parents feel the EHCP and/or personal budget meets their child’s needs now and in future?

Parents/carers were asked if they thought the EHCP or personal budget met their child’s needs now and whether this would be the case in the future. More than two thirds (68%) felt their child’s needs were currently being met, while 11% felt they were not being met.

Looking ahead just over half (54%) of parents who responded said they felt their child’s needs would be met in the future, with well over a third (40%) unsure about the future.

More than two thirds (68%) felt their child’s needs were currently being met.
Free text responses

Parents

Respondents were asked if they wished to make any further comment about their experience of the EHCP and/or personal budget.

In order to ensure the views expressed provided a broad account, and to provide useful feedback on areas for improvement to participating local authorities, people were asked three focussed questions:

1. Thinking about your experience of the EHCP/personal budgets:
   What worked well for you as a parent?

2. Thinking about your experience of the EHCP/personal budgets:
   What did not work well for you as a parent?

3. Would you make any specific changes to the way EHCP/personal budgets work in your area?

These open questions offered families and practitioners an opportunity to raise issues that were not covered elsewhere in the questionnaire and to make specific recommendations for change.

The length of responses varied, with most being just a few sentences. The answers were reviewed and a number of themes emerged. Comments were then categorised by theme and the number of responses in each theme counted.

Themes were not mutually exclusive and some comments were counted in more than one theme. Some of the themes were talked about in response to both the negative and positive question and identified as areas for change.
<table>
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<tr>
<th>Support</th>
<th>Having support in place that reflected the individual needs, circumstances and preferences of the child and their family.</th>
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<tr>
<td>Professional support</td>
<td>The support, help and guidance that was, or was not available from a range of practitioners through the EHCP/personal budget process.</td>
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<tr>
<td>Partnership</td>
<td>All those involved in the process working together towards a shared outcome. In particular parents feeling their views had been valued or not.</td>
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<tr>
<td>Control</td>
<td>Leading and directing the development of a support plan and the subsequent support arrangements.</td>
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<td>Quality of life</td>
<td>The positive impact of better support on the life of the child and their family.</td>
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<tr>
<td>Flexibility</td>
<td>Having support available that was adaptable and could change quickly and conveniently, according to changing needs or wishes.</td>
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<tr>
<td>Choice</td>
<td>Having choices and a range of options available throughout the process.</td>
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<tr>
<td>Siblings</td>
<td>The positive impact on other children in the family of the EHCP/personal budget.</td>
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<td>Funding</td>
<td>The availability of or lack of money in the personal budget.</td>
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<tr>
<td>Carers</td>
<td>The impact of support described in the EHCP plan on the life of parents and carers.</td>
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<tr>
<td>Independence</td>
<td>Children and young people gaining new skills or confidence as a result of the support described in the EHC plan.</td>
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<tr>
<td>Short breaks</td>
<td>The support available for providing a break from demanding caring responsibilities.</td>
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<td>Inclusion</td>
<td>The child and their family being less isolated, being able to take part more in social interactions and make more use of local facilities.</td>
</tr>
<tr>
<td>Education</td>
<td>The child and their family being less isolated, being able to take part more in social interactions and make more use of local facilities.</td>
</tr>
<tr>
<td>Simplicity</td>
<td>A clear transparent process that is straightforward and uncomplicated.</td>
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<tr>
<td>Communication</td>
<td>Communication from professionals working with children and their parents, in particular information and advice about how the EHC plan process work.</td>
</tr>
<tr>
<td>Time</td>
<td>Slow decision-making and lengthy process.</td>
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<tr>
<td>Paperwork</td>
<td>Excessive, confusing or overly complex forms.</td>
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Open questions offered families and practitioners an opportunity to raise issues that were not covered elsewhere in the questionnaire.
Main findings: Practitioners

Who responded to the POET survey?

336 practitioners completed the survey from 18 local authority areas a range of practitioners took part from education (58%), social care (27%) and health (9%); a small number (6%) of learning/care assistants also completed the survey. Half of the practitioners who responded were involved mainly in the assessment and development of plans (50%). Others were either involved mainly in providing direct support to children (30%) or management (20%).

Common roles included; Team manager, Teacher, Support worker, Social worker, SENCO, Planning co-ordinator, Occupational therapist, Head teacher, Educational psychologist.

Practitioners were asked how many children they had supported to get an EHCP or personal budget. Under a third (29%) of respondents said that nearly all the children they worked with had an EHCP or personal budget, while approaching half (43%) of practitioners responding said less than half of the children they worked with had an EHCP or personal budget. A small number (10%) said that none of the children yet had an EHCP or personal budget in place.

Practitioners’ experience of process

Practitioners were asked to say whether they felt EHCPs or personal budgets had helped them and their colleagues from other agencies or not. In four of the seven work domains we asked about (Partnership with family (88%), Child at centre of planning (81%), Understand child’s needs (81%), Individual tailored support (79%)), at least three quarters of practitioners said EHCPs/personal budgets had helped always or mostly. In the other three domains we asked about (Partnership with colleagues (66%), Timely response (58%), Information and advice (73%)) more than half the practitioners said EHCPs/personal budgets had helped always or mostly.

In five of the seven domains we asked about less than 5% of practitioners said EHCPs/personal budgets rarely or never helped. Two process domains were reported as rarely or never working well by more than 5% of practitioners; providing a timely response (11%) and working in partnership with other practitioners (7%).

Figure 11: Experience of process (Practitioners)
Practitioner reported outcomes

Practitioners were asked whether they thought EHCPs/personal budgets had helped children in 10 domains of life. In two of the 10 domains we asked about (Enjoy life at home (70%), Take part in school and learning (69%)), at least two thirds of practitioners said EHCPs/personal budgets had helped always or mostly. In all the other domains at least half the respondents said EHCPs/personal budgets had helped always or mostly.

In seven of the 10 domains we asked about less than 10% of respondents said EHCPs/personal budgets had helped rarely or never. Around 10% of practitioners said EHCPs/personal budgets had helped rarely or never in three of the 10 domains we asked about; Transition from school to school (10%), Taking part in community (10%), Being fit and healthy (11%).
Free text responses
Practitioners

Respondents were asked if they wished to make any further comments about their experience of EHCPs and personal budgets.

As with parents/carers, in order to ensure the views expressed provided a broad account, and to provide useful feedback on areas for improvement to participating local authorities, practitioners were asked three focussed questions:

1. Thinking about your experience of EHCPs/personal budgets, what worked well?
2. Thinking about your experience of EHCPs/personal budgets what didn’t work well?
3. Would you make any specific changes to the way EHCPs/personal budgets work in your area?

These open questions offered practitioners an opportunity to raise issues that were not covered elsewhere in the questionnaire and to make specific recommendations for change. The length of responses varied, most were just a few sentences. The answers were reviewed and a number of themes emerged. Comments were then categorised by theme and the number of responses in each theme counted. Themes were not mutually exclusive and some comments were counted in more than one theme. Some of the themes were talked about in response to both the negative and positive question and identified as areas for change.
**Thinking about your experience of EHCPs or personal budgets what worked well?**

<table>
<thead>
<tr>
<th>Partnership with parents</th>
<th>Improved working relationships with parents. More involvement and stronger voice for parents. Greater transparency with parents around key decisions. The value of increased direct contact with and involvement of parents. Difficulty resulting from transparent decision-making around eligibility, and the amount or use of resources.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child-family centred</td>
<td>Seeing the needs of the child in the context of their family, recognising the needs of the family as well as those of the child. Seeing assets as well as needs.</td>
</tr>
<tr>
<td>Partnership with colleagues</td>
<td>Improved multi agency working, better communication and decision-making across a range of professions. Difficulty securing timely response from colleagues, and communicating and securing commitment to new process from colleagues not directly involved.</td>
</tr>
<tr>
<td>Planning</td>
<td>Improved, better coordinated and inclusive approaches to designing support arrangements to meet needs of the child and their family.</td>
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<tr>
<td>Choice</td>
<td>The opportunity to decide who and how support should be provided. The ability to increase choice for families, allow them greater control.</td>
</tr>
<tr>
<td>Flexibility</td>
<td>Being able to make changes to support arrangements and to tailor support more to each individual situation. New and innovative support options being put in place.</td>
</tr>
<tr>
<td>Support</td>
<td>The process led to better more personalised support arrangements being in place. Difficulty in ensuring support needed was put in place, and with recruitment. Dissatisfaction from families with the level of support or restrictions on flexibility.</td>
</tr>
<tr>
<td>Assessment</td>
<td>Better understanding and responding to the unique needs of each individual child. Placing the child at the heart of the process. Looking at assets and gifts rather than deficits. Difficulty caused by more transparent assessment and allocation decisions, ensuring objective eligibility and allocation decisions.</td>
</tr>
<tr>
<td>Outcomes</td>
<td>Increased focus on outcomes.</td>
</tr>
<tr>
<td>Procedures</td>
<td>Confusion and a lack of clarity around new process, uncertainty by professionals and parents about how aspects of the process should work.</td>
</tr>
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**Engagement of health**
- Difficulty with availability responsiveness of health professionals.

**New systems**
- Difficulty caused by the introduction of a new way of working, administration support and IT systems being geared to a different way of working. Difficulty resulting from operating both the existing and the new process simultaneously.

**Paperwork**
- The complexity amount of paperwork involved, unnecessary duplication.

**Workload**
- A marked increase in the time needed to work with any one child and family, both in relation to the intensity of work and the overall work from start to finish.

![Figure 14: Free text responses (practitioners)](image-url)
Areas identified as important by both families and practitioners

Looking at the free text comments from parents/carers and practitioners together three domains of common positive interest were identified; Professional support and partnership, Increased control for parents and being family centred, Choice and flexibility.

There were two areas of common concern between practitioners and parents; Timeliness and Paperwork.

There were two areas of common concern between practitioners and parents; Timeliness and Paperwork.

Figure 15: Free text responses: areas seen as significant by both practitioners and families.
Children and young people

In addition to the POET survey of carers and practitioners, the project also worked to develop a shorter and more accessible version of the POET suitable for and shaped by the views and interests of children and young people.

As with the other versions the areas asked about in the POET emerged from work with those groups who would be completing the questionnaire, in this case children and young people with special educational needs.

From this work we were able to produce one set of statements that described experiences of getting support and being supported and another set about the impact or outcomes of support.

**Statements about experience of getting support and being supported:**
- I get good information so I can make decisions
- My views were included when my support was planned
- I am supported with dignity and respect
- I get the right amount of support
- I can change my support if I need to
- The support I get meets my needs now
- The support I get will meet my needs in the future

**Statements about the impact of having support**
- Be as fit and healthy as you can be
- Do the best you can at school, college or work
- Enjoy time with friends
- Enjoy your home and family
- Feel safe - at home and out and about
- Be heard when you have something to say
- Be relaxed and happy
- Take part in activities you like
- Be part of your local community

Children and young people were asked to think about the support they get and to say how far they would agree that their support helped them in each outcome domain.

The children and young people’s questionnaire, again, explained how the information would be used, asked a number of questions about why support was needed, what support people received, and whether anyone had helped them complete the questionnaire.

The children and young people’s questions were tested by 7 of the local areas involved in the project between October 2014 and January 2015; in total 36 responses were received.

POET emerged from work with those groups who would be completing the questionnaire, in this case children and young people with special educational needs.
Children and young people’s experience of process

The POET asked children and young people to think about the support they get and to say how far they agreed with each of the statements about their experiences of getting support and being supported. In three of the seven domains we asked about (Being supported with dignity and respect (86%), Making changes to support (83%), Views included in plan (81%)) at least three quarters of children and young people said they agreed or agreed strongly. In a further three domains (Right amount of support (71%), Meets my needs now (70%), Meets my needs in the future (71%)) at least two thirds agreed or agreed strongly. In one area (Good information to make decisions (58%)) just over half agreed or agreed strongly.

A significant minority, around a fifth to a quarter of children and young people, disagreed or disagreed strongly in four of the seven domains we asked about (Right amount of support (18%), Meets my needs now (30%), Meets my needs in the future (24%), Good information to make decisions (19%)). In the other three domains (Being supported with dignity and respect (7%), Making changes to support (9%), Views included in plan (12%)) a smaller proportion of children and young people disagreed or disagreed strongly.

Outcomes reported by children and young people

Children and young people were asked how far they agreed that their support helped them in each outcome domain. In five of the nine domains we asked about (Take part in activities you like (85%), Do the best you can at school, college or work (78%), Be relaxed and happy (76%), Feel safe - at home and out and about (76%), Be heard when you have something to say (74%)) at least three quarters of children and young people agreed or agreed strongly. Nearly two thirds agreed or strongly agreed their support had helped them to enjoy home and family (65%) and enjoy time with friends (63%). In the other two domains we asked about (Be part of your local community (57%), Be as fit and healthy as you can be (66%)) just over half agreed or strongly agreed.

Around a fifth of children and young people disagreed or strongly disagreed that their support had helped them in six of the nine domains we asked about (Be part of your local community (22%), Do the best you can at school, college or work (19%), Be heard when you have something to say (19%), Enjoy your home and family (19%), Enjoy time with friends (19%), Be as fit and healthy as you can be (19%).
Next steps and further information

Next steps
This report is published at the end of a two-year Department for Education project, the project itself has delivered all its objectives and has provided a useful insight into the experiences of children, young people and their families and practitioners involved in introducing personal budgets and the new EHC Plans.

The findings in this second year of work, although broadly positive probably raise more questions than provide answers. As the number of children and young people with an EHC Plan grows the proportion of those with a social care personal budget will diminish; many of those who have a social care personal budget have had it for sometime and their experience of this, which in most areas is very flexible and creative may well differ once the bulk of respondents are speaking from the perspective of having a new EHC Plan.

The challenges identified by both parents and practitioners i.e. timeliness and paperwork will also be a useful measure of progress.

In Control and the University of Lancaster are setting out a programme of work for a year three of the work. With a much wider trawl of local authorities, linking up with work led by CCG’s and a larger number of children and young people with EHC Plans it should provide a much more expansive evidence base upon which to base conclusions about the implementation of the SEND Reforms.

A key part of the coming years work will be to re-work with a group of young people their questionnaire and to explore web based applications to support them in completing it as independently as possible.

Further information
If you would like to find out more about the Children’s POET then please email info@in-control.org.uk

Thanks to the authors.
John Waters, In Control
Chris Hatton, Centre for Disability Research at Lancaster University

And co-authors
Nic Crosby, In Control
Claire Lazarus, In Control
In September 2014 the Children and Families Act became law. The Act introduced the most wide-ranging policy and practice reforms for children and young people with SEND and their families for over 30 years.

The reforms are intended to address a number of limitations in the previous system, which were perceived by many as failing to address the needs and wishes of children and young people with SEND and their families. The system was criticised for being too segmented, with education, health and social care practitioners sometimes struggling to work together to form positive working relationships with each other and with children and young people with SEND and their families. Critics also argued that reform was necessary as approaches to working there is a need to understand how the process should feel.

POET therefore provides a key tool for local authorities and their partners to benchmark themselves against national reports, thus supporting local people's experiences of the process of EHCPs and personal budgets. POET provides a dataset that can identify the critical process conditions that local authorities and their partners need to establish if they are to maximise the effectiveness of EHCPs and personal budgets.

By consistently measuring both process conditions and outcomes achieved, POET produces a dataset that can identify the critical process conditions that local authorities and their partners need to establish if they are to maximise the effectiveness of EHCPs and personal budgets. POET provides the opportunity for local, regional and national reports, thus supporting local areas to quality assure and benchmark their own performance.

As services implement this new way of working there is a need to understand the conditions where all those involved can collaborate as active partners in the design and delivery of the support provided to children, young people and their families. These exercises produced a wealth of views and experiences from people across the country. Looking at the responses it was possible to identify common themes that described how the process should feel and good outcomes (what the process should lead to) from each of the group's perspectives.

POET has been designed to capture people's experiences of the process of obtaining an EHCP and in some cases a personal budget and what (if any) impact this has, as reported by children, young people, their parents/carers and practitioners.

It is hoped that this new way of working together with the introduction of EHCPs and personal budgets will lead to better outcomes for children and young people with SEND and their families. By more actively involving children, young people and their families in the design of their support arrangements it is intended that the support detailed in EHCPs will be more in tune with the needs and wishes of each person, improving quality, efficiency and outcomes.

Developing the Childrens POET

Purpose of POET

POET has been designed to capture people’s experiences of the process of obtaining an EHCP and in some cases a personal budget and what (if any) impact this has, as reported by children, young people, their parents/carers and practitioners.

By consistently measuring both process conditions and outcomes achieved, POET produces a dataset that can identify the critical process conditions that local authorities and their partners need to establish if they are to maximise the effectiveness of EHCPs and personal budgets. POET provides the opportunity for local, regional and national reports, thus supporting local areas to quality assure and benchmark their own performance.

In addition, POET enables the development of a shared understanding of the critical conditions needed for successful implementation of EHCPs. POET therefore provides a key tool for local areas to support reviewing and action planning.

Design and development of the POET

POET has been co-produced by a range of stakeholders over a period of 2 years. The design phase included:

- Working with young people with SEND and their parents/carers so that the domains developed would be based on their views and experiences
- Working with local authority practitioners committed to increasing their accountability to children, young people and families
- Producing an initial tool for testing that has been refined in the light of user experience and feedback
- The commitment to help local areas to benchmark themselves against others in order to inform and improve practice and associated outcomes and support action planning.

The design process considered both how the EHC process should feel and also what impact the plan and in some instances a personal budget should have for children, young people and their families. These two aspects were considered from the perspective of children and young people, their parents/carers, and practitioners.

In response to these criticisms the reforms introduced a new more joined-up statutory assessment and planning process and a single EHCP. This integrated assessment process and single EHCP replaced the statutory assessment and statement process. For the first time, children and young people up to the age of 25 are able to request a statutory assessment and EHCP whilst they are in further education and training. In addition young people and families with an EHCP have the right to ask for a personal budget, allowing them to direct the support detailed in their plan.

The introduction of EHCPs and personal budgets represents a significant shift in the way support available to children and young people with SEND and their families is organised.

The policy intention is to ensure a more personalised experience, to better coordinate responses across service areas and to create the conditions where all those involved can collaborate as active partners in the design and delivery of the support provided to children, young people and their families.


** SEN Personal Budgets and Direct Payments http://www.legislation.gov.uk/ukpga/2014/6/section/49/enacted


Appendix 1

Developing the Childrens POET

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The following themes emerged from parents/carers about what would count as good process experiences:

- Clear information: ensuring everyone can take part in support planning.
- Continuity: unnecessary changes are kept to a minimum, planning can be long term.
- Communication: everyone knows what they need to do.
- Partnership: decisions taken openly in the best interest of the child, ‘my’ views included.
- Timeliness: decisions and actions are taken when they need to be.
- Paperwork: records are clear and open to the people who need them.
- Clarity of role: the roles of everyone involved are clear.
- Feeling supported: parents feel supported and respected as a parent.
- Individual support: planning leads to the right support for the child involved.

**For the parent/carer:**

- Life balance: feeling able to meet both the parental role and other life roles.
- Being valued as a parent: the role as a parent is acknowledged and respected.
- Looking forwards positively: being confident about the support arrangements for their child as they grow up.
- Aspirations: feeling encouraged to expect the best for their child in their life.

**For the child/young person:**

- Being as fit and healthy as they can be.
- Being relaxed and happy.
- Taking part in school and learning.
- Having a part of their local community.
- Enjoying relationships with friends.
- Enjoying relationships with family.
- Life at home.
- Quality of life.
- Getting the support that is right.

These process and outcome areas were used to make up the bulk of the questions in POET for parents/carers and for practitioners. Parents/carers and practitioners are asked to rate their experiences of different aspects of the process on a frequency scale: Always, Mostly, Sometimes, Rarely, Never.

For the questions about outcomes respondents are asked to rate their experience of the EHCP/personal budget using an impact scale: Made things a lot worse, Made things worse, Not made any difference, Made things better, Made things a lot better.

Having identified the important process and outcome areas a number of additional questions were added to POET. These were included to help understand for whom, where and why ECHPs might be associated with good outcomes, and to ensure all the issues raised by people contributing to the design were included in POET.
Testing of the questionnaires

The POET questionnaires were designed for people to evaluate their experiences of an approach that was already being implemented, EHCPs and personal budgets. The surveys are therefore service evaluation rather than research, according to guidance from the National Research Ethics Service, and therefore do not require Research Ethics Committee approval.

The POET questionnaires were being designed as the new EHCPs were being developed and tested by 31 local authority SEND pathfinders. Most of the local authorities supporting the initial development and testing of the POET questionnaires were not Pathfinders and so had no experience of EHCPs, although most had experience of making personal budgets available to families of disabled children.

Given this situation it was agreed that for the first two periods of testing (December 2013 and October–December 2014) two slightly different versions of POET were to be used, one for areas with experience of EHCPs and personal budgets and one for areas with experience of personal budgets only. All the questions in the survey were the same, except that respondents were asked to comment on their experience of either EHCPs or personal budgets. People responding to the EHC version were asked to indicate if they also had a personal budget. Surveys were made available: online and a paper format.

A total of 134 responses were received in the first testing period and a first national children and young people’s POET report was published in July 2014. The report detailed key findings and includes respondents comments on their experience of EHCPs and personal budgets, process experience, outcomes, supplementary questions and an analysis of the free text responses.

The POET survey includes an explanation of how information collected will be used and a statement about anonymity. Respondents were informed that individual answers would be shared with participating local authorities and used to help service improvements. Before completing the survey respondents were asked to indicate if they agreed (or not) for their information to be used in reports such as this one before they completed the survey – only surveys where people gave their agreement were included in any analysis.

Respondents who completed the survey during the first testing period were also asked to give their views on the questions themselves. The responses indicated that those answering the questions understood them and that the scales provided a sensitive measure that people could report their experience against. The parent/carer and practitioner questionnaire was therefore unchanged for the second period of testing.

Following publication of the first report, expressions of interest in being involved in the second period of testing were invited from In Control members and via the Association of Director of Children’s Services to all local authorities. The condition of grant was that a further 10 sites would be involved in a second period of testing. 20 local areas in fact volunteered approximately 50% of whom were SEND Pathfinders (thus ensuring that more people had experience of the EHC process and plans). In addition at least 1 local authority from every region in England volunteered. It was therefore agreed that all 20 areas should be included.

This second period of testing coincided with the introduction of the Children and young People’s Act 2014 in September 2014 and it was acknowledged that for some local authorities circumstances might make engagement extremely difficult, this turned out to be the reality for 3 of the 20 sites.

The second round of testing was undertaken between October and end December 2014 including the testing of the children and young people’s questionnaire for the first time. A total of 691 responses were received; 336 from practitioners and 355 from parents/carers. As well as responding to the main survey questions, 566 respondents also wrote in narrative comments about their experience of EHCPs or personal budgets. 36 children and young people responded to the questionnaire.

A number of local areas shared their helpful learning about distribution of the tools and ways to encourage better response rates. Participating local areas were again asked for their comments/views on the questionnaires and the questions themselves. In addition to receiving a range of written comments, a face-to-face meeting was held with some of the local authority test areas and NHSE colleagues to review the questionnaires. As a result number of changes have been made to the parent/carer and practitioner questionnaires and a commitment has been made to do further work on the children and young people’s questionnaire.

A further appendix detailing validation and reliability testing will be published when the work is complete (May 2015).

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Appendix 2

This appendix shares the analysis tables and data providing further explanatory evidence underpinning the findings and learning shared in the main report.

Factors associated with different outcomes

Statistical analyses were conducted using the statistical software package SPSS 22. In terms of missing values, questions relating to equalities information (personal characteristics of respondents) were associated with higher rates of missing values and were not used for statistical analyses. No imputation of missing values was used, so all analyses were only with those respondents reporting the relevant data for the specific analysis.

Partly due to the distribution of the process and outcome variables (i.e. weighted towards positive perceptions), all these variables were collapsed into two categories: Always/ Mostly vs Sometimes/Rarely/ Never. Based on the distribution of responses to other variables (e.g. length of time with a personal budget and/ or EHC plan), these variables were also collapsed into two categories. This also allowed the calculation of Odds Ratios, using the Risk Estimate analysis in SPSS (a specific form of logistic regression), using 95% confidence intervals to determine statistical significance. As well as looking at the results from the surveys overall we also looked at whether some people were more likely than others to report positive outcomes. We checked whether there were associations between different aspects of the EHC process and better outcomes. We also looked to see whether other factors such as why the child needed support or the child’s age were associated with better outcomes.

To make interpretation easier, we have expressed any associations found as odds ratios, for example, if a parent/carer knew the amount of the personal budget, what the odds are of them reporting a positive impact of the EHC compared to if they did not. An odds ratio of 1 would mean that a positive impact was no more or less likely. An odds ratio significantly less than 1 would mean that a positive impact was less likely if the parent/carer knew the amount of the budget (so an odds ratio of 0.5 would mean that parent/carers were twice as likely to report a positive impact if they knew the amount of the personal budget). Odds ratios are a helpful way of showing how big an effect is, as well as whether it is statistically significant or not.

It is important to say that we can only report associations between factors and outcomes, and if there is an association we cannot say that the process factor caused the outcome (for example, it could be that a third factor we didn’t measure caused both the process factor and the outcome). It is also important to bear this in mind, the relatively small numbers of people who responded, and that the sample is self-selected, when interpreting the results we report below.

The following tables report the odds ratios for each factor against each outcome indicator.

If an odds ratio shows that a factor was twice as likely to be reported if a person knew the amount of the budget (so an odds ratio of 2 would mean that parent/carers were twice as likely to report a positive impact if they knew the amount of the personal budget). Odds ratios are a helpful way of showing how big an effect is, as well as whether it is statistically significant or not.

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The following tables report the odds ratios for each factor against each outcome indicator.

Table 1: Associations between child characteristics and whether the EHC process mostly or always worked well according to parents

<table>
<thead>
<tr>
<th>Child age</th>
<th>Main reason for needing support</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4 years</td>
<td>Learning disability</td>
</tr>
<tr>
<td>5-13 years</td>
<td>2.17</td>
</tr>
<tr>
<td>14+ years</td>
<td>1.02</td>
</tr>
<tr>
<td>Learning disability</td>
<td>1.72</td>
</tr>
<tr>
<td>Physical disability</td>
<td>1.03</td>
</tr>
<tr>
<td>Social mental emotional</td>
<td>1.56</td>
</tr>
<tr>
<td>Communication interaction</td>
<td>0.71</td>
</tr>
<tr>
<td>Supported as parent</td>
<td>1.14</td>
</tr>
<tr>
<td>Support for child</td>
<td>2.60</td>
</tr>
<tr>
<td>Supported for child</td>
<td>1.07</td>
</tr>
</tbody>
</table>

Child characteristics

First, we investigated associations between the age of the child (pre-school, school age up to 14, and the ‘transition’ years of 14 years or more), the main reason the child needs support according to the parent/carer completing the survey, and whether various aspects of the Education, Health and Care planning process worked well mostly or always.

As Table 1 below shows, all aspects of the EHC planning process worked equally well for children in different age groups, and for children with different reasons for needing support.
Next, we investigated associations between the age of the child (pre-school, school age up to 14, and the ‘transition’ years of 14 years or more), the main reason the child needs support according to the parent/carer completing the survey, and whether parents/carers reported the Education, Health and Care plan having a positive impact on various aspects of the child’s life and their life.

As Table 2 opposite shows, parents/carers of pre-school children were more likely to report the EHC plan having a positive impact on their child’s taking part in school and learning and the EHC plan meeting the child’s needs in the future, but were less likely to report the EHC plan having a positive impact on the child taking part in their local community. Parents/carers of children aged 5-13 years were more likely to report a positive impact of the EHC plan on their child’s relationships with family. Parents/carers of children with learning disability were more likely to report the EHC plan having a positive impact on their child’s fitness and health. Parents/carers of children with social, mental and emotional needs, however, were less likely to report the EHC plan having a positive impact on the child’s participation in their local community or on the EHC plan as a whole meeting their child’s needs now.

There were few associations between the main reason for the child needing support and outcomes for the child. Parents/carers of children with learning disability were more likely to report the EHC plan having a positive impact on their child taking part in school and learning and the EHC plan meeting the child’s needs in the future.

Table 2: Associations between child characteristics and whether the EHC plan was having a positive impact on various aspects of the child’s life

<table>
<thead>
<tr>
<th>Child age</th>
<th>Main reason for needing support</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0-4 years</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>-----------</td>
</tr>
<tr>
<td>Fit &amp; healthy</td>
<td>1.04</td>
</tr>
<tr>
<td>Relaxed &amp; happy</td>
<td>1.11</td>
</tr>
<tr>
<td>School &amp; learning</td>
<td>5.90*</td>
</tr>
<tr>
<td>Local community</td>
<td>0.37*</td>
</tr>
<tr>
<td>Rels with friends</td>
<td>0.68</td>
</tr>
<tr>
<td>Rels with family</td>
<td>1.75</td>
</tr>
<tr>
<td>Life at home</td>
<td>3.07</td>
</tr>
<tr>
<td>Quality of life</td>
<td>1.59</td>
</tr>
<tr>
<td>Right support</td>
<td>2.23</td>
</tr>
<tr>
<td>EHC meet needs now</td>
<td>2.21</td>
</tr>
<tr>
<td>EHC meet needs in future</td>
<td>5.90*</td>
</tr>
</tbody>
</table>
Regarding outcomes for parents/carers, Table 3 below shows very few associations between child characteristics and outcomes for parents/carers. Parents/carers of pre-school children were more likely to report the EHC plan having a positive impact on parents/carers feeling supported and parents/carers having aspirations for their child, but less likely to report a positive impact of the EHC plan on parental participation in their local communities.

Table 3: Associations between child characteristics and whether the EHC plan was having a positive impact on the parent’s life

<table>
<thead>
<tr>
<th>Main reason for needing support</th>
<th>Life balance</th>
<th>Local community</th>
<th>Feeling supported</th>
<th>Feeling valued as a parent</th>
<th>Look forward positively</th>
<th>Aspirations for child</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4 years</td>
<td>2.73</td>
<td>0.44*</td>
<td>3.74*</td>
<td>2.58</td>
<td>2.04</td>
<td>4.76*</td>
</tr>
<tr>
<td>5-13 years</td>
<td>1.02</td>
<td>1.52</td>
<td>0.82</td>
<td>0.96</td>
<td>0.97</td>
<td>0.72</td>
</tr>
<tr>
<td>14+ years</td>
<td>0.72</td>
<td>0.86</td>
<td>0.84</td>
<td>0.76</td>
<td>0.80</td>
<td>0.93</td>
</tr>
<tr>
<td>Learning disability</td>
<td>0.99</td>
<td>1.20</td>
<td>1.03</td>
<td>0.83</td>
<td>0.87</td>
<td>0.93</td>
</tr>
<tr>
<td>Physical disability</td>
<td>1.80</td>
<td>1.04</td>
<td>1.78</td>
<td>1.42</td>
<td>1.21</td>
<td>1.14</td>
</tr>
<tr>
<td>Social mental emotional</td>
<td>0.83</td>
<td>0.91</td>
<td>0.79</td>
<td>1.07</td>
<td>1.19</td>
<td>1.25</td>
</tr>
<tr>
<td>Communication interaction</td>
<td>0.99</td>
<td>0.84</td>
<td>1.36</td>
<td>1.24</td>
<td>0.76</td>
<td>0.83</td>
</tr>
</tbody>
</table>

Parents/carers of children with physical disability were more likely to report the EHC plan having a positive impact on their child’s fitness and health.
Support before the Education, Care and Health plan and keyworker now

We investigated whether there were any associations between what support the child had been getting before the EHC plan, whether the child had a named keyworker now, and whether various aspects of the Education, Health and Care planning process worked well mostly or always.

As Table 4 shows, there were few associations between support for the child before the EHC plan, the child having a named keyworker, and the EHC planning process working well. Parents/carers of children who were getting social care at home before their EHC plan were more likely to report the EHC plan working well in terms of timeliness. Parents/carers of children who were getting a social care service such as a short break service were less likely to report the EHC plan working well in terms of clarity of information. Parents/carers of children with a named keyworker were more likely to report the EHC plan working well in terms of support for the child.

As Table 5 shows, parents/carers of children receiving school support at school action/school action plus levels were more likely than other parents/carers to report a positive impact of their child’s EHC plan on their child’s participation in school and learning and on the EHC plan being likely to meet their child’s needs in the future. However, they were also less likely than other parents to report their child’s EHC plan having a positive impact on their child’s fitness and health, their child’s participation in their local community and their child’s life at home. However, they were also less likely to report a positive impact on their child’s EHC plan on their child’s fitness and health, their child’s participation in their local community and their child’s life at home.

We investigated whether there were any associations between what support the child had been getting before the EHC plan, whether the child had a named keyworker now, and whether parents/carers reported their child’s EHC plan having a positive impact on their child’s life.

In contrast, parents/carers of children with a statement of special educational needs before their EHC plan were more likely than other parents/carers to report a positive impact of their child’s EHC plan on their child’s fitness and health, their child being relaxed and happy, their child’s participation in their local community and their child’s life at home. However, they were also less likely to report a positive impact on their child’s EHC plan on their child’s fitness and health, their child being relaxed and happy, their child’s participation in their local community and their child’s life at home.

There were virtually no associations between the child previously receiving social or health care support and parental reports of child outcomes; parents of children previously using social care services were more likely to report a positive impact of their child’s EHC plan on their child being relaxed and happy. The child having a named keyworker was not associated with any child outcomes.
We investigated whether there were any associations between what support the child had been getting before the EHC plan, whether the child had a named keyworker now, and whether parents reported their child’s EHC plan having a positive impact on their own lives.

Table 5: Associations between support for the child before the EHC plan, whether the child now has a named keyworker, and whether parents reported the EHC plan having a positive impact on their own lives.

<table>
<thead>
<tr>
<th>Support before the EHC plan</th>
<th>School action/action plus</th>
<th>School statement</th>
<th>Social care at home</th>
<th>Social care service</th>
<th>Specialist health care</th>
<th>Named keyworker with EHC plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fit &amp; healthy</td>
<td>0.56*</td>
<td>2.41*</td>
<td>1.50</td>
<td>1.67</td>
<td>0.96</td>
<td>1.23</td>
</tr>
<tr>
<td>Relaxed &amp; happy</td>
<td>0.89</td>
<td>1.91*</td>
<td>1.53</td>
<td>3.14*</td>
<td>1.26</td>
<td>0.91</td>
</tr>
<tr>
<td>School &amp; learning</td>
<td>2.17*</td>
<td>0.34*</td>
<td>1.11</td>
<td>0.61</td>
<td>1.16</td>
<td>1.11</td>
</tr>
<tr>
<td>Local community</td>
<td>0.44*</td>
<td>2.30*</td>
<td>1.24</td>
<td>1.10</td>
<td>1.11</td>
<td>0.95</td>
</tr>
<tr>
<td>Rels with friends</td>
<td>0.85</td>
<td>1.16</td>
<td>1.74</td>
<td>1.05</td>
<td>1.02</td>
<td>1.38</td>
</tr>
<tr>
<td>Rels with family</td>
<td>0.70</td>
<td>1.54</td>
<td>1.68</td>
<td>1.43</td>
<td>0.83</td>
<td>0.95</td>
</tr>
<tr>
<td>Life at home</td>
<td>0.51*</td>
<td>2.66*</td>
<td>1.99</td>
<td>1.56</td>
<td>1.36</td>
<td>0.77</td>
</tr>
<tr>
<td>Quality of life</td>
<td>0.28*</td>
<td>1.54</td>
<td>1.39</td>
<td>1.59</td>
<td>1.36</td>
<td>1.45</td>
</tr>
<tr>
<td>Right support</td>
<td>0.76</td>
<td>0.72</td>
<td>0.97</td>
<td>0.82</td>
<td>1.11</td>
<td>1.55</td>
</tr>
<tr>
<td>EHC meet needs now</td>
<td>1.21</td>
<td>0.75</td>
<td>1.59</td>
<td>0.64</td>
<td>1.10</td>
<td>1.44</td>
</tr>
<tr>
<td>EHC meet needs in future</td>
<td>3.07*</td>
<td>0.97</td>
<td>1.20</td>
<td>1.02</td>
<td>1.09</td>
<td>1.22</td>
</tr>
</tbody>
</table>

Table 6 below shows mixed findings. Parents of children previously getting school action/school action plus levels of school support were less likely than other parents to report a positive impact of the EHC plan on their own life balance and on their own participation in their local community. Parents of children previously with a statement of educational need were more likely to report a positive impact of the EHC plan on their own participation in their local community, but less likely to report a positive impact on their aspirations for their child.

Parents of children getting social care at home before their EHC plan were more likely to report positive impacts of the EHC plan on parents feeling supported and parents feeling valued. Parents of children getting specialist health care before their EHC plan were less likely to report a positive impact of the EHC plan on their own participation in their local community. Finally, parents of children with a named keyworker as part of their EHC plan were more likely to report a positive impact of the EHC plan on them being valued as a parent.

Table 6: Associations between support for the child before the EHC plan, whether the child now has a named keyworker, and whether parents reported the EHC plan having a positive impact on their child.

<table>
<thead>
<tr>
<th>Support before the EHC plan</th>
<th>School action/action plus</th>
<th>School statement</th>
<th>Social care at home</th>
<th>Social care service</th>
<th>Specialist health care</th>
<th>Named keyworker with EHC plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life balance</td>
<td>0.57*</td>
<td>1.39</td>
<td>1.62</td>
<td>1.13</td>
<td>0.76</td>
<td>1.66</td>
</tr>
<tr>
<td>Local community</td>
<td>0.56*</td>
<td>2.51*</td>
<td>1.50</td>
<td>1.14</td>
<td>0.59*</td>
<td>1.04</td>
</tr>
<tr>
<td>Feeling supported</td>
<td>0.79</td>
<td>1.25</td>
<td>3.22*</td>
<td>1.04</td>
<td>1.10</td>
<td>1.69</td>
</tr>
<tr>
<td>Feeling valued as a parent</td>
<td>1.25</td>
<td>0.92</td>
<td>2.86*</td>
<td>1.23</td>
<td>1.02</td>
<td>1.76*</td>
</tr>
<tr>
<td>Look forward positively</td>
<td>1.25</td>
<td>0.55</td>
<td>1.51</td>
<td>1.18</td>
<td>1.11</td>
<td>1.54</td>
</tr>
<tr>
<td>Aspirations for child</td>
<td>1.21</td>
<td>0.48*</td>
<td>1.40</td>
<td>0.65</td>
<td>0.66</td>
<td>1.26</td>
</tr>
</tbody>
</table>
We investigated whether there were any associations between aspects of Education, Health and Care plans and Personal Budgets, and whether various aspects of the Education, Health and Care planning process worked well mostly or always. Table 7 shows that there were no associations between holding the EHC plan for more than a year, parents reporting their child not having a personal budget, parents not knowing if their child had a personal budget or not, and parents reporting that any aspect of their child’s Education, Health and Care plan was working well.

Generally, parents reporting holding the child’s personal budget as a direct payment were more likely to report the EHC mostly or always working well in the areas of clarity of information, communication, partnership between professionals and parents, paperwork, people’s roles being clear, and individualised support for the child. In contrast, parents where the personal budget was held by a service provider were less likely to report the EHC plan working well in the areas of clarity of information, communication, partnership between professionals and parents, paperwork, and people’s roles being clear.

Finally, parents who reported knowing the amount of the personal budget were more likely to report the EHC plan working well in terms of individualised support for their child.

Parents who had held an EHC plan for more than a year generally were more likely to report a positive impact of the EHC plan on their child’s life: being fit and healthy, being relaxed and happy, taking part in the child’s local community, the child’s relationships with family and the child’s life at home, although these parents were less likely to report the EHC plan being likely to meet their child’s needs in the future.

Parents with a personal budget held as a direct payment were more likely to report a positive impact of the EHC plan on 8 out of the 11 child outcomes we asked about. Parents where the personal budget was held by the service provider were less likely to report the EHC plan having a positive impact on their child getting the right support, and parents where the personal budget was held by the local authority were less likely to report the EHC plan having a positive impact on their child being fit and healthy.

Parents who didn’t have a personal budget were more likely to report a positive impact of the EHC plan on their child’s participation in school and learning, as were parents who didn’t know if they had a personal budget or not (these parents were also more likely to report the EHC plan being likely to meet their child’s needs in the future), though these parents were less likely to report positive impacts of the EHC plan on their child’s participation in the local community or their child’s life at home.

Parents who knew the amount of the personal budget were more likely to report positive impacts of the EHC plan on their child being fit and healthy, the child taking part in their local community and the child’s life at home, although they were also less likely to report that the EHC plan would meet their child’s needs in the future.

<table>
<thead>
<tr>
<th>Table 7: Associations between aspects of the Education, Health and Care plan, the Personal Budget, and whether the EHC process was mostly or always working well according to parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Held EHC plan for 1 yr+</td>
</tr>
<tr>
<td>PB held as DP</td>
</tr>
<tr>
<td>PB held by service provider</td>
</tr>
<tr>
<td>PB held by LA</td>
</tr>
<tr>
<td>Don’t have a PB</td>
</tr>
<tr>
<td>Don’t know if have PB</td>
</tr>
<tr>
<td>Know PB amount</td>
</tr>
<tr>
<td>Clarity of info</td>
</tr>
<tr>
<td>Continuity</td>
</tr>
<tr>
<td>Communication</td>
</tr>
<tr>
<td>Partnership</td>
</tr>
<tr>
<td>Timeliness</td>
</tr>
<tr>
<td>Paperwork</td>
</tr>
<tr>
<td>Clarity of role</td>
</tr>
<tr>
<td>Supported as parent</td>
</tr>
<tr>
<td>Support for child</td>
</tr>
</tbody>
</table>
We investigated whether there were any associations between aspects of Education, Health and Care plans and Personal Budgets, and whether parents reported a positive impact of the EHC plan on their own lives as parents – there were relatively few associations.

Parents who had held the EHC plan for more than a year were more likely to report the EHC plan having a positive impact on their own life balance, but less likely to report a positive impact on their aspirations for their child.

Parents with a personal budget held as a direct payment were more likely to report a positive impact of the EHC plan on their own life balance and on their participation in their local community. In contrast, parents where the personal budget was held by the service provider were less likely to report a positive impact of the EHC plan on their aspirations for their child. Parents who didn’t have a person budget were less likely to report positive impacts of the EHC plan on their own life balance, their participation in their local community and them feeling supported as parents.

Finally, parents who knew the amount of the personal budget were more likely to report a positive impact of the personal budget on their own life balance.
We investigated whether there were any associations between which people were involved in the Education, Care and Health planning process, and whether various aspects of the Education, Health and Care planning process worked well mostly or always. There were relatively few associations. Having a SENCO or a support worker/PA involved were not associated with any aspects of the EHC planning process working well (or not). Parents who reported the class teacher being involved were less likely to report the EHC plan working well in terms of clarity of information. Parents who reported an education specialist being involved were less likely to report the EHC plan working well in terms of people’s roles being clear. Parents who reported a health specialist being involved were less likely to report the EHC plan working well in terms of timeliness or individualised support for their child. Parents who reported a social worker involved were more likely to report the EHC plan working well in terms of clarity of information. However, parents who reported a planning co-ordinator being involved were less likely to report the EHC plan working well in terms of continuity. Parents with family involved were less likely to report the EHC plan working well in terms of people’s roles being clear.

Parents who reported a social worker involved were more likely to report the EHC plan working well in terms of clarity of information. However, parents who reported a planning co-ordinator being involved were less likely to report the EHC plan working well in terms of continuity. Parents with family involved were less likely to report the EHC plan working well in terms of people’s roles being clear.

We investigated whether there were any associations between which people were involved in the Education, Care and Health planning process, and whether parents reported positive impacts of the EHC plan on their child’s life. Generally, parents reporting education personnel being involved (class teacher, SENCO or education specialist) were more likely to report positive impacts of the EHC plan on the child’s participation in school and learning and on the prospects of the EHC plan meeting the child’s needs in the future, yet they were also less likely to report positive impacts of the EHC plan on the child being fit and healthy, the child’s participation in their local community, and the child’s relationships with family, life at home and quality of life generally. To a lesser extent, the pattern of a positive impact on the child’s school life with some less positive impacts on local community and home life were also found if a health specialist, support worker/PA or family member was involved in the EHC planning process.

Social workers were a complete contrast, however; parents reporting social worker involvement were more likely to report positive impacts of the EHC plan on the child being fit and healthy, relaxed and happy, the child taking part in their local community and in life at home, the child’s relationships with their family, the child’s quality of life and the child getting the right support. However, they were also less likely to report a positive impact of the EHC plan on the child’s participation in school and learning if a social worker was involved.
We investigated whether there were any associations between which people were involved in the Education, Health and Care planning process, and whether parents reported positive impacts of the EHC plan on their own lives. Generally, the involvement of education professionals, health specialists, support workers and family members was associated with parents being less likely to report positive impacts of the EHC plan on their own life balance and participation in their local communities. Social workers were the exception; parents where a social worker was involved were more likely to report positive impacts of the EHC plan on their own life balance, participation in their local communities and feeling supported as parents. However, the involvement of the school teacher and the SENCO was associated with parents being more likely to report positive impacts of the EHC plan on their aspirations for their child and (in the case of school teacher involvement) parents being able to look forward positively.

<table>
<thead>
<tr>
<th>Person involved in planning</th>
<th>Class teacher</th>
<th>SENCO</th>
<th>Education specialist</th>
<th>Health specialist</th>
<th>Social worker</th>
<th>Planning coordinator</th>
<th>Support worker/PA</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fit &amp; healthy</td>
<td>0.48*</td>
<td>0.37*</td>
<td>0.28*</td>
<td>0.57</td>
<td>2.72*</td>
<td>0.94</td>
<td>1.26</td>
<td>0.36*</td>
</tr>
<tr>
<td>Relaxed &amp; happy</td>
<td>0.84</td>
<td>0.67</td>
<td>0.57</td>
<td>0.71</td>
<td>2.70*</td>
<td>1.26</td>
<td>1.01</td>
<td>0.82</td>
</tr>
<tr>
<td>School &amp; learning</td>
<td>14.87*</td>
<td>4.03*</td>
<td>5.38*</td>
<td>5.07*</td>
<td>0.54*</td>
<td>1.51</td>
<td>2.97*</td>
<td>2.05*</td>
</tr>
<tr>
<td>Local community</td>
<td>0.54*</td>
<td>0.33*</td>
<td>0.32*</td>
<td>0.52*</td>
<td>2.54*</td>
<td>1.48</td>
<td>0.90</td>
<td>0.64</td>
</tr>
<tr>
<td>Rels with friends</td>
<td>1.05</td>
<td>0.69</td>
<td>0.69</td>
<td>0.87</td>
<td>1.48</td>
<td>1.36</td>
<td>1.06</td>
<td>0.98</td>
</tr>
<tr>
<td>Rels with family</td>
<td>0.80</td>
<td>0.56*</td>
<td>0.56*</td>
<td>0.96</td>
<td>2.35*</td>
<td>1.22</td>
<td>0.78</td>
<td>0.88</td>
</tr>
<tr>
<td>Life at home</td>
<td>0.57</td>
<td>0.33*</td>
<td>0.38*</td>
<td>0.69</td>
<td>3.93*</td>
<td>1.15</td>
<td>0.70</td>
<td>0.44*</td>
</tr>
<tr>
<td>Quality of life</td>
<td>0.37*</td>
<td>0.24*</td>
<td>0.44*</td>
<td>0.63</td>
<td>5.69*</td>
<td>0.99</td>
<td>0.65</td>
<td>0.65</td>
</tr>
<tr>
<td>Right support</td>
<td>0.68</td>
<td>0.88</td>
<td>1.20</td>
<td>1.09</td>
<td>4.69*</td>
<td>1.29</td>
<td>1.04</td>
<td>0.84</td>
</tr>
<tr>
<td>EHC meet needs now</td>
<td>1.37</td>
<td>2.03</td>
<td>2.11</td>
<td>1.23</td>
<td>1.15</td>
<td>1.23</td>
<td>2.65</td>
<td>1.02</td>
</tr>
<tr>
<td>EHC meet needs in future</td>
<td>8.87*</td>
<td>9.22*</td>
<td>10.73*</td>
<td>5.63*</td>
<td>1.15</td>
<td>2.72</td>
<td>4.35</td>
<td>2.72*</td>
</tr>
</tbody>
</table>

We investigated whether there were any associations between which people were involved in the EHC planning, and whether parents reported the EHC plan having a positive impact on their child's life.
Aspects of Education, Health and Care plan process

We investigated whether there were any associations between aspects of the Education, Health and Care planning process working well, and whether parents reported positive impacts of the EHC plan on their child’s life.

As Table 13 shows, there were consistent, robust associations between all aspects of the EHC plan working well and parent reporting positive impacts on all areas of the child’s life. Each aspect of the EHC planning process was associated with at least 9 out of 11 child outcomes.

Table 13: Associations between aspects of the EHC planning process working well, and whether parents reported the EHC plan having a positive impact on their child’s life

<table>
<thead>
<tr>
<th>Aspects of process</th>
<th>Clarity of info</th>
<th>Continuity</th>
<th>Communication</th>
<th>Partnership</th>
<th>Timeliness</th>
<th>Paperwork</th>
<th>Clarity of role</th>
<th>Supported as parent coordinator</th>
<th>Support for child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fit &amp; healthy</td>
<td>4.75*</td>
<td>3.83*</td>
<td>2.54*</td>
<td>4.97*</td>
<td>2.73*</td>
<td>4.13*</td>
<td>3.78*</td>
<td>3.52*</td>
<td>4.22*</td>
</tr>
<tr>
<td>Relaxed &amp; happy</td>
<td>4.31*</td>
<td>3.23*</td>
<td>3.11*</td>
<td>3.97*</td>
<td>2.94*</td>
<td>6.64*</td>
<td>3.03*</td>
<td>4.37*</td>
<td>3.97*</td>
</tr>
<tr>
<td>School &amp; learning</td>
<td>2.18*</td>
<td>2.93*</td>
<td>1.66</td>
<td>2.29*</td>
<td>1.64</td>
<td>1.43</td>
<td>2.19*</td>
<td>3.03*</td>
<td>1.50</td>
</tr>
<tr>
<td>Local community</td>
<td>3.72*</td>
<td>1.62</td>
<td>2.72*</td>
<td>2.17*</td>
<td>1.55</td>
<td>2.78*</td>
<td>1.78*</td>
<td>2.41*</td>
<td>4.07*</td>
</tr>
<tr>
<td>Rel. with friends</td>
<td>4.70*</td>
<td>2.88*</td>
<td>1.84*</td>
<td>3.96*</td>
<td>2.56*</td>
<td>4.83*</td>
<td>2.63*</td>
<td>4.06*</td>
<td>4.30*</td>
</tr>
<tr>
<td>Rel. with family</td>
<td>3.39*</td>
<td>1.48</td>
<td>2.73*</td>
<td>2.75*</td>
<td>2.16*</td>
<td>3.28*</td>
<td>2.22*</td>
<td>2.51*</td>
<td>2.28*</td>
</tr>
<tr>
<td>Life at home</td>
<td>2.48*</td>
<td>2.44*</td>
<td>2.57*</td>
<td>3.17*</td>
<td>1.73</td>
<td>2.79*</td>
<td>2.54*</td>
<td>2.41*</td>
<td>2.05*</td>
</tr>
<tr>
<td>Quality of life</td>
<td>6.27*</td>
<td>3.13*</td>
<td>5.38*</td>
<td>3.65*</td>
<td>3.17*</td>
<td>3.93*</td>
<td>2.10*</td>
<td>5.18*</td>
<td>4.58*</td>
</tr>
<tr>
<td>Right support</td>
<td>8.66*</td>
<td>4.84*</td>
<td>7.79*</td>
<td>9.48*</td>
<td>4.82*</td>
<td>6.00*</td>
<td>6.84*</td>
<td>8.01*</td>
<td>11.14*</td>
</tr>
<tr>
<td>EHC meet needs in future</td>
<td>3.88*</td>
<td>8.44*</td>
<td>2.10</td>
<td>11.14*</td>
<td>5.18*</td>
<td>5.49*</td>
<td>1.73</td>
<td>12.17*</td>
<td>6.16*</td>
</tr>
</tbody>
</table>

We investigated whether there were any associations between aspects of the Education, Care and Health planning process working well, and whether parents reported positive impacts of the EHC plan on their own lives.

As Table 14 shows, there were consistent, robust associations between all aspects of the EHC plan working well and parent reporting positive impacts on all areas of the child’s life.

Table 14: Associations between aspects of the EHC planning process working well, and whether parents reported the EHC plan having a positive impact on their own lives

<table>
<thead>
<tr>
<th>Aspects of process</th>
<th>Clarity of info</th>
<th>Continuity</th>
<th>Communication</th>
<th>Partnership</th>
<th>Timeliness</th>
<th>Paperwork</th>
<th>Clarity of role</th>
<th>Supported as parent coordinator</th>
<th>Support for child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life balance</td>
<td>4.89*</td>
<td>3.21*</td>
<td>5.73*</td>
<td>5.50*</td>
<td>3.46*</td>
<td>6.04*</td>
<td>4.49*</td>
<td>4.73*</td>
<td>5.84*</td>
</tr>
<tr>
<td>Local community</td>
<td>4.62*</td>
<td>2.67*</td>
<td>1.86*</td>
<td>4.84*</td>
<td>2.49*</td>
<td>2.43*</td>
<td>3.03*</td>
<td>2.87*</td>
<td>3.88*</td>
</tr>
<tr>
<td>Feeling supported</td>
<td>8.28*</td>
<td>3.80*</td>
<td>4.83*</td>
<td>6.26*</td>
<td>3.77*</td>
<td>5.12*</td>
<td>3.94*</td>
<td>7.34*</td>
<td>7.59*</td>
</tr>
<tr>
<td>Feeling valued as a parent</td>
<td>6.24*</td>
<td>7.42*</td>
<td>4.23*</td>
<td>8.71*</td>
<td>4.57*</td>
<td>4.39*</td>
<td>3.18*</td>
<td>8.53*</td>
<td>8.75*</td>
</tr>
<tr>
<td>Look forward positively</td>
<td>4.50*</td>
<td>4.95*</td>
<td>3.85*</td>
<td>10.05*</td>
<td>4.14*</td>
<td>3.60*</td>
<td>4.24*</td>
<td>9.43*</td>
<td>11.31*</td>
</tr>
</tbody>
</table>
We investigated whether there were any associations between the professional role/main involvement of the practitioner completing the survey and whether aspects of the EHC planning process were working well.

Table 15 below shows that social work professionals were more likely to report EHC planning processes working well in terms of supporting children. Health professionals were less likely to report EHC planning processes working well in terms of partnership between professionals, partnerships between professionals and families, having clear information and understanding the child in context. Practitioners in a mainly management role were not more or less likely to report any aspect of the EHC planning process working well.

In terms of practitioner involvement, practitioners mainly involved in assessment and the development of EHC plans were more likely to report processes working well in terms of partnership between professionals, collaboration between professionals and having clear information and understanding the child in context. In contrast, practitioners mainly involved in directly supporting children were less likely to report EHC planning processes working well in terms of partnership between professionals, partnerships between professionals and families, having clear information and understanding the child in context. Practitioners in a mainly management role were not more or less likely to report any aspect of the EHC planning process working well.

Table 16 shows that social work professionals were more likely to report EHC planning processes having a positive impact on children being relaxed and happy, children participating in their local communities, and the child’s life at home, although they were less likely to report positive impacts of EHC plans on children’s participation in school and learning, and children’s transitions from school to school. Health professionals were less likely to report positive impacts of EHC plans on children being relaxed and happy and a positive transition towards adulthood. Education professionals were more likely to report positive impacts of EHC plans on children’s participation in school and learning, and transition from school to school, but were less likely to report positive impact of EHC plans on children being fit and healthy, relaxed and happy, taking part in their local communities, children’s relationships with family and children’s lives at home.

Table 15: Associations between professional role/main involvement and aspects of the EHC planning process working well

<table>
<thead>
<tr>
<th>Professional role</th>
<th>Mainly involved in...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social work</td>
<td>Health professional</td>
</tr>
<tr>
<td>Professional</td>
<td>Assessment/development of EHC plans</td>
</tr>
<tr>
<td>Children at centre</td>
<td>1.21</td>
</tr>
<tr>
<td>Partnership between pros</td>
<td>1.27</td>
</tr>
<tr>
<td>Partnership with families/carers</td>
<td>0.81</td>
</tr>
<tr>
<td>Timeliness</td>
<td>0.79</td>
</tr>
<tr>
<td>Support for child</td>
<td>2.25*</td>
</tr>
<tr>
<td>Clear info</td>
<td>0.84</td>
</tr>
<tr>
<td>Understand child in context</td>
<td>1.43</td>
</tr>
</tbody>
</table>
We investigated whether there were any associations between the extent of the practitioners’ personal budgets work with children and whether aspects of the EHC planning process were working well.

Table 17 shows that there were no associations between the practitioner having previously worked with 20 or more children to get personal budgets and any aspects of the EHC planning process.

Practitioners who were currently working with 5 or more children to get personal budgets were more likely to report the EHC planning process working well in terms of partnerships between professionals.

Finally, practitioners where at least half of children were working towards personal budgets were more likely to report the EHC planning process working well in terms of children being at the centre of the process, having clear information, and understanding the child in context.
We investigated whether there were any associations between the extent of the practitioners’ personal budgets work with children and whether they rated EHC plans as having positive impacts on children’s lives.

Table 18 shows that there were very few associations. Practitioners who had previously worked with 20 or more children to get personal budgets were less likely to report a positive impact of EHC plans on transitions from school to school. Practitioners currently working on personal budgets with 5 or more children were more likely to report a positive impact of EHC plans on children being relaxed and happy.

<table>
<thead>
<tr>
<th>Number of children worked with to get personal budgets</th>
<th>Worked with 20+ children to get PB</th>
<th>Now working with 5+ children on PB</th>
<th>About half or more children working towards PB</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fit &amp; healthy</strong></td>
<td>1.31</td>
<td>1.42</td>
<td>1.23</td>
</tr>
<tr>
<td><strong>Relaxed &amp; happy</strong></td>
<td>1.28</td>
<td>2.25*</td>
<td>1.04</td>
</tr>
<tr>
<td><strong>Local community</strong></td>
<td>1.80</td>
<td>1.52</td>
<td>0.60</td>
</tr>
<tr>
<td><strong>School &amp; learning</strong></td>
<td>0.60</td>
<td>0.68</td>
<td>1.08</td>
</tr>
<tr>
<td><strong>Relis with friends</strong></td>
<td>1.03</td>
<td>1.14</td>
<td>0.84</td>
</tr>
<tr>
<td><strong>Relis with family</strong></td>
<td>1.04</td>
<td>1.34</td>
<td>1.01</td>
</tr>
<tr>
<td><strong>Relis with professionals</strong></td>
<td>0.61</td>
<td>0.93</td>
<td>1.08</td>
</tr>
<tr>
<td><strong>Life at home</strong></td>
<td>0.80</td>
<td>1.28</td>
<td>0.66</td>
</tr>
<tr>
<td><strong>Transition from school to school</strong></td>
<td>0.39*</td>
<td>0.74</td>
<td>1.16</td>
</tr>
<tr>
<td><strong>Transition towards adulthood</strong></td>
<td>0.83</td>
<td>1.13</td>
<td>0.92</td>
</tr>
</tbody>
</table>

Aspects of personal budget process

We investigated whether there were any associations between whether aspects of the EHC planning process were working well and practitioner ratings of the positive impacts of EHC plans on children’s lives.

Table 19 below shows that, with the exception of partnership between professionals and families/carers (still associated with 6 child outcomes), all aspects of EHC plans working well were associated with positive impacts of EHC plans on all aspects of children’s lives.

<table>
<thead>
<tr>
<th>Number of children worked with to get personal budgets</th>
<th>Children at centre</th>
<th>Partnership between pros</th>
<th>Partnership with families/carers</th>
<th>Timeliness</th>
<th>Support for child</th>
<th>Clear info</th>
<th>Understand child in context</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fit &amp; healthy</strong></td>
<td>8.41*</td>
<td>4.55*</td>
<td>11.44*</td>
<td>4.14*</td>
<td>10.63*</td>
<td>5.92*</td>
<td>14.29*</td>
</tr>
<tr>
<td><strong>Relaxed &amp; happy</strong></td>
<td>5.80*</td>
<td>5.76*</td>
<td>3.86*</td>
<td>3.46*</td>
<td>4.52*</td>
<td>2.73*</td>
<td>4.81*</td>
</tr>
<tr>
<td><strong>Local community</strong></td>
<td>2.51*</td>
<td>2.16*</td>
<td>2.44</td>
<td>2.30*</td>
<td>4.77*</td>
<td>2.77*</td>
<td>3.83*</td>
</tr>
<tr>
<td><strong>School &amp; learning</strong></td>
<td>2.76*</td>
<td>2.14*</td>
<td>1.91</td>
<td>3.30*</td>
<td>3.70*</td>
<td>2.12*</td>
<td>2.96*</td>
</tr>
<tr>
<td><strong>Relis with friends</strong></td>
<td>2.54*</td>
<td>1.94*</td>
<td>2.47</td>
<td>2.41*</td>
<td>3.05*</td>
<td>3.79*</td>
<td>7.43*</td>
</tr>
<tr>
<td><strong>Relis with family</strong></td>
<td>6.20*</td>
<td>3.95*</td>
<td>5.60*</td>
<td>2.70*</td>
<td>8.63*</td>
<td>4.99*</td>
<td>9.55*</td>
</tr>
<tr>
<td><strong>Relis with professionals</strong></td>
<td>4.55*</td>
<td>4.89*</td>
<td>3.46*</td>
<td>4.65*</td>
<td>4.45*</td>
<td>4.77*</td>
<td>12.36*</td>
</tr>
<tr>
<td><strong>Life at home</strong></td>
<td>3.35*</td>
<td>2.39*</td>
<td>4.13*</td>
<td>2.62*</td>
<td>6.78*</td>
<td>3.18*</td>
<td>5.08*</td>
</tr>
<tr>
<td><strong>Transition from school to school</strong></td>
<td>4.42*</td>
<td>3.31*</td>
<td>1.91</td>
<td>3.59*</td>
<td>3.07*</td>
<td>3.62*</td>
<td>5.52*</td>
</tr>
<tr>
<td><strong>Transition towards adulthood</strong></td>
<td>3.73*</td>
<td>4.03*</td>
<td>4.07*</td>
<td>2.23*</td>
<td>3.16*</td>
<td>5.18*</td>
<td>8.34*</td>
</tr>
</tbody>
</table>
Appendix 3

This appendix contains the questionnaires for parents, practitioners and for young people (as used to complete Survey 2)

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Survey for parents of children and young people who have an education health and care plan and / or have a personal budget.

Please tell us what you think.

**Survey 1.**

This survey is being done with In Control and Lancaster University with the support of the Department for Education.

Your answers will help us find out how education health and care plans and personal budgets (also called individual budgets) are working.

The questions are for parents of children living in England who have an education health and care plan and who may also have a personal budget.

An education health and care plan is a legal document describing a young person’s needs, the provision to meet those needs and the suitable educational placement.

A personal budget is money allocated to parents or young people because of their education, health or social care needs to achieve specific outcomes.

We will not ask for your name or personal information, but your local authority, school or health service may get a copy of your individual answers, these will be used locally and nationally to help them improve how education health and care plans and personal budgets work.

We will share all the anonymised responses with your local authorities.

Findings from the survey will be published but people should not be able to tell how you have answered the questions.

**Agreement**

I am happy to answer the questions and for my answers to be used in the way that has been explained.

- [ ] YES
- [ ] NO
Questions about your child.

1) Name of the local authority that has written the education health and care plan

2) Child’s age:

3) Name of the nursery, school, college your child attends

4) What is the main reason your child needs additional support? (Tick all that apply)
   - Learning disability
   - Social, mental and emotional health (including challenging behaviour)
   - Communication and interaction
   - Sensory (hearing, sight)
   - Physical disability

Which of the above has the main impact?

Questions about the education health and care plan and personal budget.

5) Did your child have any additional individual support before having their education health and care plan? (Please tick all that apply)
   - Yes, at school (e.g. school action or school action plus)
   - Yes, statement of special educational need
   - Yes, support at home from social care
   - Yes, service (e.g. short breaks)
   - Yes, specialist health care (e.g. community nurse, physiotherapy, occupational therapy)
   - No

6) How long has your child had an education health and care plan?

7) Does your child have a personal budget for their education health and care plan?
   - Yes
   - No
   - Don’t Know

If no please say why
8) How is the personal budget held / managed?
(Please tick all that apply)
- You as the parent hold the money (direct payment)
- A friend or family member holds the money (direct payment)
- A local family/parent-led organisation holds the money
- A service provider holds the money (Third Party Serviced Account)
- The local authority holds the money
- I do not have a personal budget
- I do not know

9) How much is the personal budget?
Per week £
One off payment £
Don’t know

10) How have you used the personal budget

Questions about your experience of developing the education health and care plan.

11) Does your child have a named key worker?
- Yes
- No
If yes what is their role:

12) Who else was involved in developing the education health and care plan?
(Please tick all that apply)
- Class teacher
- SENCO (Special education needs co-ordinator)
- Education specialist (e.g. education psychologist)
- Health specialist (e.g. nurse, occupation therapist, speech)
- Social worker
- Planning co-ordinator
- Voluntary organisation
- Learning assistant, personal assistant or support worker
- Family members
- Other (please describe)
13) **Thinking about your experience of the education health and care plan, have these things worked well for you?**

<table>
<thead>
<tr>
<th><strong>Clear information:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>You have clear information so you can take an active part in planning the support your child needs</td>
<td></td>
</tr>
<tr>
<td>Always</td>
<td>Mostly</td>
</tr>
<tr>
<td>Rarely</td>
<td>Never</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Clarity of role:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>You are clear about the roles of everyone involved</td>
<td></td>
</tr>
<tr>
<td>Always</td>
<td>Mostly</td>
</tr>
<tr>
<td>Rarely</td>
<td>Never</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Continuity:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Unnecessary changes are kept to a minimum, planning can be long term</td>
<td></td>
</tr>
<tr>
<td>Always</td>
<td>Mostly</td>
</tr>
<tr>
<td>Rarely</td>
<td>Never</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Communication:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Everyone knows what they need to do</td>
<td></td>
</tr>
<tr>
<td>Always</td>
<td>Mostly</td>
</tr>
<tr>
<td>Rarely</td>
<td>Never</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Partnership:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Decisions are taken openly in the best interest of your child, your views are fully included</td>
<td></td>
</tr>
<tr>
<td>Always</td>
<td>Mostly</td>
</tr>
<tr>
<td>Rarely</td>
<td>Never</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Timeliness:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Decisions and actions are taken when they need to be</td>
<td></td>
</tr>
<tr>
<td>Always</td>
<td>Mostly</td>
</tr>
<tr>
<td>Rarely</td>
<td>Never</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Paperwork:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Records are clear and open to the people who need them</td>
<td></td>
</tr>
<tr>
<td>Always</td>
<td>Mostly</td>
</tr>
<tr>
<td>Rarely</td>
<td>Never</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Clarity of role:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>You are clear about the roles of everyone involved</td>
<td></td>
</tr>
<tr>
<td>Always</td>
<td>Mostly</td>
</tr>
<tr>
<td>Rarely</td>
<td>Never</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Feeling supported</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>You feel supported and respected as a parent</td>
<td></td>
</tr>
<tr>
<td>Always</td>
<td>Mostly</td>
</tr>
<tr>
<td>Rarely</td>
<td>Never</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Individual support:</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Planning leads to the right support for your child</td>
<td></td>
</tr>
<tr>
<td>Always</td>
<td>Mostly</td>
</tr>
<tr>
<td>Rarely</td>
<td>Never</td>
</tr>
</tbody>
</table>

14) **Does the education health and care plan meet the needs of your child now?**

| Yes | No | Don’t know |

15) **Do you think the education health and care planning process will help meet the needs of your child in the future?**

| Yes | No | Don’t know |
### Outcomes for your child

16) Has the support described in your child's education health and care plan helped with these areas of your child's life?

<table>
<thead>
<tr>
<th>Area</th>
<th>Made things a lot worse</th>
<th>Made things worse</th>
<th>Made things a lot better</th>
<th>Made things better</th>
<th>Not made any difference</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Being as fit and healthy as they can be:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Being relaxed and happy:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Taking part in school and learning:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Be part of their local community:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Enjoying relationships with friends:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Enjoying relationships with family:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Life at home:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Quality of life:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Getting the support that is right for your child:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
17) Has the support described in your child's education health and care plan helped with these areas of your life as a parent?

**Life balance:**
Feeling able to meet both your parental role and other life roles

- Made things a lot worse  
- Made things a lot better  
- Made things worse  
- Made things better  
- Not made any difference  
- Don’t Know

**Taking part in their local community,**
such as local clubs or leisure facilities

- Made things a lot worse  
- Made things a lot better  
- Made things worse  
- Made things better  
- Not made any difference  
- Don’t Know

**Feeling supported:**
Feeling supported in your parental role

- Made things a lot worse  
- Made things a lot better  
- Made things worse  
- Made things better  
- Not made any difference  
- Don’t Know

**Being valued as a parent:**
Your role as a parent is acknowledged and respected

- Made things a lot worse  
- Made things a lot better  
- Made things worse  
- Made things better  
- Not made any difference  
- Don’t Know

**Looking forwards positively:**
Being confident about the support arrangements for your child as they grow up

- Made things a lot worse  
- Made things a lot better  
- Made things worse  
- Made things better  
- Not made any difference  
- Don’t Know

**Aspirations:**
Feeling encouraged to expect the best for your child in their life

- Made things a lot worse  
- Made things a lot better  
- Made things worse  
- Made things better  
- Not made any difference  
- Don’t Know
18) Thinking about your experience of the education health and care plan:

What worked well for you as a parent?

What didn't work well for you as a parent?

Would you make any specific changes to the way education health and care plans work in your area?

Thank you for answering these questions. Unfortunately we are unable to respond to individual issues, if you would like to raise an issue that requires action please do so with your local authority and/or the organisation providing your personal budget.
Equalities Monitoring

The next questions are to help us see if personal budgets are working for different groups of people. You can skip any of the questions you do not want to answer.

Are you?

A Man
A Woman

How old are you?

16 to 24 years old
25 to 34 years old
35 to 44 years old
45 to 54 years old
55 to 64 years old
Older than 65 years old

A law called the Disability Discrimination Act says that you are disabled if:
• It is very hard for you to do normal everyday things
• You have found these things hard for at least 1 year

Do you have a disability that affects you like this?

Yes
No

Please tell us about any disabilities you have.
If your disability is not in this list please choose ‘other’:

Physical disability
Sensory impairment
Mental health condition
Learning disability
Long standing illness or health condition
Other

Are you?

White:
• Any white background

Mixed:
• White and Black Caribbean
• White and Black African
• White and Asian

Asian or Asian British:
• Indian
• Pakistani
• Bangladeshi
• Any other Asian background

Black or Black British:
• Caribbean
• African
• Any other Black Background

Chinese or other ethnic group
• Chinese
• Other
• Do not want to say
What is your religion?
- No religion
- Christian
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion
- Do not want to say

Are you:
- Heterosexual/Straight
- Gay or Lesbian
- Bisexual
- Other
- Do not want to say
This survey is being done with In Control and Lancaster University with the support of the Department for Education. Your answers will help us find out how education health and care plans and personal budgets (also called individual budgets) are working. The questions are for anyone working in England who works with children with an education health and care plan.

An education health and care plan is a legal document describing a young person’s needs, the provision to meet those needs and the suitable educational placement. A personal budget is money allocated to parents or young people because of their education, health or social care needs to achieve specific outcomes.

We will not ask for your name or personal information, but your employer will get a copy of your individual answers, these will be used locally and nationally to help them improve how education health and care plans and personal budgets work. Findings from the survey will be published but people will not be able to tell how you have answered the questions.

Agreement
I am happy to answer the questions and for my answers to be used in the way that has been explained.

YES
NO

Survey for practitioners working with children and young people with an education health and care plan and / or a personal budget

Police tell us what you think.

1) Which local authority area you work within?

2) Which of the following best describes your role?
   - Social work professional
   - Health professional
   - Educational professional
   - Care or support worker /learning assistant/personal assistant
   - Independent broker/support planner
   - Other (please describe)

3) What is your job title / role: (please describe)

4) Are you mainly involved in:
   - Assessment and development of education healthcare plans
   - Providing direct support and assistance to children
   - Management
Planning support

These are questions about helping to plan the support for the children and families you work with using an education health and care plan.

5) How many children in total have you worked with to get an education health and care plan?

6) How many children who you work with currently have an education health and care plan in place?

7) How many children who you work with are in the process of getting an education healthcare plan?

8) In your experience have education health and care plans helped you and your colleagues from other agencies to:

Put children at the centre of your planning:
- Always
- Mostly
- Sometimes
- Never
- Don’t Know

Work in partnership with each other:
- Always
- Mostly
- Sometimes
- Never
- Don’t Know

Work in partnership with parents / carers:
- Always
- Mostly
- Sometimes
- Never
- Don’t Know

Provide a timely response to the needs of children:
- Always
- Mostly
- Sometimes
- Never
- Don’t Know

Provide individually tailored support to children:
- Always
- Mostly
- Sometimes
- Never
- Don’t Know

Provide clear information and advice to parents / carers:
- Always
- Mostly
- Sometimes
- Never
- Don’t Know

Understand the needs of children in the context of their home, family and school:
- Always
- Mostly
- Sometimes
- Never
- Don’t Know
9) In your experience of working with children who have education health and care plans, have they helped children to:

<table>
<thead>
<tr>
<th>Category</th>
<th>Always</th>
<th>Mostly</th>
<th>Sometimes</th>
<th>Rarely</th>
<th>Never</th>
<th>Don't Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Be as fit and healthy as they can be:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be relaxed and happy:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be part of their local community:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Take part in school and learning:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enjoy relationships with friends:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enjoy relationships with family:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benefit from relationships with professionals:</td>
<td></td>
<td></td>
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<tr>
<td>Enjoy life at home:</td>
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<tr>
<td>Have a positive transition from school to school:</td>
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<tr>
<td>Have a positive transition towards adulthood:</td>
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</tr>
</tbody>
</table>
10) Thinking about your experience of education health and care plans:

What worked well?

________________________________________

________________________________________

________________________________________

What didn’t work well?

________________________________________

________________________________________

________________________________________

Would you make any specific changes to the way education health and care plans work in your area?

________________________________________

________________________________________

________________________________________

Thank you for answering these questions

Equalities Monitoring

The next questions are to help us see if personal budgets are working for different groups of people.

You can skip any of the questions you do not want to answer. We do not need your name and will keep your information safe.

11) Are you:

- A Man
- A Woman

12) How old are you?

- 16 to 24 years old
- 25 to 34 years old
- 35 to 44 years old
- 45 to 54 years old
- 55 to 64 years old
- Older than 65 years old

A law called the Disability Discrimination Act says that you are disabled if:
- It is very hard for you to do normal everyday things
- You have found these things hard for at least 1 year

13) Do you have a disability that affects you like this?

- Yes
- No

14) Please tell us about any disabilities you have.
If your disability is not in this list please choose ‘other’:

- Physical disability
- Sensory impairment
- Mental health condition
- Learning disability
- Long standing illness or health condition
- Other (tell us if you want to):
15) Are you?

**White:**
- Any white background

**Mixed:**
- White and Black Caribbean
- White and Black African
- White and Asian

**Asian or Asian British:**
- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

**Black or Black British:**
- Caribbean
- African
- Any other Black Background

**Chinese or other ethnic group**
- Chinese
- Other

---

**What is your religion?**

- No religion
- Christian
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion
- Do not want to say

**Are you:**

- Heterosexual/Straight
- Gay or Lesbian
- Bisexual
- Other
- Do not want to say
Survey for Children and Young People who have an Education Health and Care Plan and may have a Personal Budget

What is the survey about?
This survey is asking children and young people about Personal Budgets and Education Health and Care Plans.

An Education Health and Care Plan is a legal document that describes a young person’s needs. It also explains what additional support is available to meet those needs.

A Personal Budget is money that is given to you or your parent to pay for your support and help you do the things you want to do.

Who is in charge of this survey?
The survey is being carried out by the charity In Control and Lancaster University. They are being supported by the Department for Education.

Why have I been asked to take part?
You have been asked because:
• You live in England
• You receive an Education Health and Care Plan
• You may receive a Personal Budget

If you do not want to take part then that is absolutely fine. If you want to stop taking part at any time during the survey then that is fine too.

What will I be asked to do if I take part?
You will be asked to answer questions about the support you get. People who read your answers will not know who wrote them. You can ask someone to help you complete the survey.

Who will read my answers?
Your Local Authority, school or health service may get a copy of your answers but they will not know who wrote them. We will also read your answers.

How will my answers be used?
The answers will be used to help improve the way EHC plans and personal budgets work where you live and across the country. The answers will also be used to write reports that will be made public.

Agreement
If you are happy with what you have read and want to take part, please read and answer by ticking a box:
Are you happy to answer the questions and for your answers to be used in the way that has been explained?

Yes  NO

Questions about you

1) How old are you?

2) Are you Male or Female?
○ Male
○ Female

3) Why do you need support? (please tick all that apply)
○ Communication and interaction
○ Cognition and Learning difficulties
○ Social, mental and emotional health difficulties
○ Sensory (hearing, sight)
○ Physical disability
○ Other
○ Don’t Know

Questions about your support

4) Do you have? (please tick all that apply)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paid support at home</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extra paid support at school</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paid support to go out and about</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>An Education Health and Care Plan</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A personal budget for your support</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Survey 3.
5) Thinking about the support you get, how far would you agree with the following (described in your EHC plan)

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Neither</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>I get good information so I can make decisions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My views were included when my support was planned</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>I am supported with dignity and respect</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I get the right amount of support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I can change my support if I need to</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The support I get meets my needs now</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The support I get will meet my needs in the future</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6) How far would you agree that your support helps you to;

Questions about your life

Be as fit and healthy as you can be

<table>
<thead>
<tr>
<th>Strongly agree</th>
<th>Agree</th>
<th>Neither</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Do the best you can at school, college or work

Enjoy time with friends

Enjoy your home and family

Feel safe – at home and out and about

Be heard when you have something to say

Be relaxed and happy

Be as fit and healthy as you can be

Do the best you can at school, college or work

Enjoy time with friends

Enjoy your home and family

Feel safe – at home and out and about

Be heard when you have something to say

Be relaxed and happy

Be as fit and healthy as you can be

Do the best you can at school, college or work

Enjoy time with friends

Enjoy your home and family

Feel safe – at home and out and about

Be heard when you have something to say

Be relaxed and happy
6) How far would you agree that your support helps you to; cont...

**Take part in activities you like**
- Strongly agree
- Agree
- Neither
- Disagree
- Don't know

**Be part of your local community**
- Strongly agree
- Agree
- Neither
- Disagree
- Don't know

7) How did you answer these questions?
- On my own
- In a meeting, interview or visit
- With help from someone else
- Someone else answered most of the questions

Thank you for answering these questions

In Control Partnerships
Carillon House, Chapel Lane
Wythall, Birmingham,
B47 6JX
Tel: 01564 82 1650
www.in-control.org.uk
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This survey is being done with In Control and Lancaster University with the support of the Department for Education.

Your answers will help us find out how education health and care plans and personal budgets (also called individual budgets) are working.

The questions are for parents of children living in England who have an education health and care plan and who may also have a personal budget.

An education health and care plan is a legal document describing a young person’s needs, the provision to meet those needs and the suitable educational placement.

A personal budget is money allocated to parents or young people because of their education, health or social care needs to achieve specific outcomes.

We will not ask for your name or personal information, but your local authority, school or health service may get a copy of your individual answers, these will be used locally and nationally to help them improve how education health and care plans and personal budgets work. We will share all the anonymised responses with your local authorities.

Findings from the survey will be published but people should not be able to tell how you have answered the questions.

Agreement
I am happy to answer the questions and for my answers to be used in the way that has been explained.

YES
NO

Survey for parents of children and young people who have a personal budget

Please tell us what you think.

Questions about your child.

1) Name of the local authority that has provided the personal budget

2) Child’s age:

3) Name of the nursery, school, college your child attends

4) What is the main reason your child needs additional support? (Tick one main reason)
- Learning disability
- Social, mental and emotional health (including challenging behaviour)
- Communication and interaction
- Sensory (hearing, sight)
- Physical disability

Which of the above has the main impact?
**Questions about the personal budget**

5) Did your child have any additional individual support before having a personal budget? (Please tick all that apply)
- Yes, at school (e.g. school action or school action plus)
- Yes, statement of special educational need
- Yes, support at home from social care
- Yes, service (e.g. short breaks)
- Yes, specialist health care (e.g. community nurse, physiotherapy, occupational therapy)
- No

6) How long has your child had a personal budget?

7) How is the personal budget held / managed? (please tick all that apply)
- You as the parent hold the money (direct payment)
- A friend or family member holds the money (direct payment)
- A local family / parent-led organisation holds the money
- A service provider holds the money (Third Party Serviced Account)
- The local authority holds the money
- I do not have a personal budget
- I do not know

8) How much is the personal budget?
Per week £

Or if a one off payment £

- Don’t know

9) How have you used the personal budget?
Please describe

10) Does your child have a named key worker?
- Male
- Female

If ‘no’ what is their role?

Who was involved in helping you plan how to use the personal budget? (Please tick all that apply)
- Class teacher
- SENCO (Special education needs co-ordinator)
- Education specialist (e.g. education psychologist)
- Health specialist (e.g. nurse, occupation therapist, speech)
- Social worker
- Planning co-ordinator
- Voluntary organisation
- Learning assistant, personal assistant or support worker
- Family members
- Other (please describe)
12) Thinking about your experience of personal budgets, have these things worked well for you?

<table>
<thead>
<tr>
<th>Clear information:</th>
<th>Clarity of role:</th>
</tr>
</thead>
<tbody>
<tr>
<td>You have clear information so you can take an active part in planning the support your child needs</td>
<td>You are clear about the roles of everyone involved</td>
</tr>
<tr>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Continuity:</th>
<th>Feeling supported</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unnecessary changes are kept to a minimum, planning can be long term</td>
<td>You feel supported and respected as a parent</td>
</tr>
<tr>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Communication:</th>
<th>Individual support:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Everyone knows what they need to do</td>
<td>Planning leads to the right support for your child</td>
</tr>
<tr>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Partnership:</th>
<th>Timeliness:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decisions are taken openly in the best interest of your child, your views are fully included</td>
<td>Decisions and actions are taken when they need to be</td>
</tr>
<tr>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Paperwork:</th>
<th>13) Does the education health and care plan meet the needs of your child now?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Records are clear and open to the people who need them</td>
<td>Yes</td>
</tr>
<tr>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>14) Do you think the education health and care planning process will help meet the needs of your child in the future?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>![Radio buttons for Always, Mostly, Sometimes, Rarely, Never, Don't know]</td>
</tr>
</tbody>
</table>
### Outcomes for your child

**15) Has the personal budget helped with these areas of your child's life?**

<table>
<thead>
<tr>
<th>Area</th>
<th>Made things a lot worse</th>
<th>Made things worse</th>
<th>Made things better</th>
<th>Not made any difference</th>
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</thead>
<tbody>
<tr>
<td><strong>Being as fit and healthy as they can be:</strong></td>
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<tr>
<td><strong>Being relaxed and happy:</strong></td>
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<tr>
<td><strong>Taking part in school and learning:</strong></td>
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<tr>
<td><strong>Be part of their local community:</strong></td>
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<tr>
<td><strong>Enjoying relationships with friends:</strong></td>
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<tr>
<td><strong>Enjoying relationships with family:</strong></td>
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<tr>
<td><strong>Life at home:</strong></td>
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<tr>
<td><strong>Quality of life:</strong></td>
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<tr>
<td><strong>Getting the support that is right for your child:</strong></td>
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</tbody>
</table>

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*Note: The table above lists various outcomes for your child's life, each with options for how the personal budget has affected them.*
16) Has the personal budget helped with these areas of your life as a parent?

**Life balance:**
Feeling able to meet both your parental role and other life roles

- Made things a lot worse
- Made things a lot better
- Made things worse
- Made things better
- Not made any difference
- Don’t Know

**Taking part in their local community,**
such as local clubs or leisure facilities

- Made things a lot worse
- Made things worse
- Made things better
- Not made any difference
- Don’t Know

**Feeling supported:**
Feeling supported in your parental role

- Made things a lot worse
- Made things worse
- Made things better
- Not made any difference
- Don’t Know

**Being valued as a parent:**
Your role as a parent is acknowledged and respected

- Made things a lot worse
- Made things worse
- Made things better
- Not made any difference
- Don’t Know

**Looking forwards positively:**
Being confident about the support arrangements for your child as they grow up

- Made things a lot worse
- Made things worse
- Made things better
- Not made any difference
- Don’t Know

**Aspirations:**
Feeling encouraged to expect the best for your child in their life

- Made things a lot worse
- Made things worse
- Made things better
- Not made any difference
- Don’t Know

17) Thinking about your experience of personal budgets:

**What worked well for you as a parent?**

- 
- 
- 
- 
- 

**What didn’t work well for you as a parent?**

- 
- 
- 
- 
- 

**Would you make any specific changes to the way education health and care plans work in your area?**

- 
- 
- 
- 
- 

Thank you for answering these questions. Unfortunately we are unable to respond to individual issues, if you would like to raise an issue that requires action please do so with your local authority and/or the organisation providing your personal budget.

In Control Partnerships
Carillon House, Chapel Lane
Wythall, Birmingham,
B47 6JX
Tel: 01564 82 1650
www.in-control.org.uk
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Equalities Monitoring

The next questions are to help us see if personal budgets are working for different groups of people. You can skip any of the questions you do not want to answer.

Are you?
- A Man
- A Woman

How old are you?
- 16 to 24 years old
- 25 to 34 years old
- 35 to 44 years old
- 45 to 54 years old
- 55 to 64 years old
- Older than 65 years old

A law called the Disability Discrimination Act says that you are disabled if:
- It is very hard for you to do normal everyday things
- You have found these things hard for at least 1 year

Do you have a disability that affects you like this?
- Yes
- No

Please tell us about any disabilities you have.
If your disability is not in this list please choose ‘other’:
- Physical disability
- Sensory impairment
- Mental health condition
- Learning disability
- Long standing illness or health condition
- Other

Are you?

White:
- Any white background

Mixed:
- White and Black Caribbean
- White and Black African
- White and Asian

Asian or Asian British:
- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

Black or Black British:
- Caribbean
- African
- Any other Black Background

Chinese or other ethnic group
- Chinese
- Other
- Do not want to say
This survey is being done with In Control and Lancaster University. Your answers will help us find out how personal budgets (also called individual budgets) are working. The questions are for anyone working in England who works with children with a personal budget. A personal budget is money allocated to parents or young people because of their education, health or social care needs to achieve particular outcomes.

We will not ask for your name or personal information, but your employer will get a copy of your individual answers. Findings from the survey will be published but people will not be able to tell how you have answered the questions.

Agreement
I am happy to answer the questions and for my answers to be used in the way that has been explained.

YES
NO

1) Which local authority area you work within?

2) Which of the following best describes your role?
   - Social work professional
   - Health professional
   - Educational professional
   - Care or support worker/learning assistant/personal assistant
   - Independent broker/support planner
   - Other (please describe)

3) What is your job title/role: (please describe)

4) Are you mainly involved in:
   - Assessment and development of education healthcare plans
   - Providing direct support and assistance to children
   - Management
Planning support

These are questions about helping to plan the support for the children and families you work with using a personal budget.

5) How many children in total have you worked with to get a personal budget?

8) In your experience have personal budgets helped you and your colleagues from other agencies to:

<table>
<thead>
<tr>
<th>Put children at the centre of your planning:</th>
<th>Always</th>
<th>Mostly</th>
<th>Sometimes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rarely</td>
<td>Never</td>
<td>Don't Know</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Work in partnership with each other:</th>
<th>Always</th>
<th>Mostly</th>
<th>Sometimes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rarely</td>
<td>Never</td>
<td>Don't Know</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Work in partnership with parents / carers:</th>
<th>Always</th>
<th>Mostly</th>
<th>Sometimes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rarely</td>
<td>Never</td>
<td>Don't Know</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provide a timely response to the needs of children:</th>
<th>Always</th>
<th>Mostly</th>
<th>Sometimes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rarely</td>
<td>Never</td>
<td>Don't Know</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provide individually tailored support to children:</th>
<th>Always</th>
<th>Mostly</th>
<th>Sometimes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rarely</td>
<td>Never</td>
<td>Don't Know</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provide clear information and advice to parents / carers:</th>
<th>Always</th>
<th>Mostly</th>
<th>Sometimes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rarely</td>
<td>Never</td>
<td>Don't Know</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Understand the needs of children in the context of their home, family and school:</th>
<th>Always</th>
<th>Mostly</th>
<th>Sometimes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rarely</td>
<td>Never</td>
<td>Don't Know</td>
<td></td>
</tr>
</tbody>
</table>

6) How many children who you work with currently have a personal budget in place?

7) How many children who you work with are in the process of getting a personal budget?

- Nearly all
- More than half
- About half
- Less than half
- None
- Don’t Know
9) In your experience of working with children who have a personal budget, have they helped children to:

<table>
<thead>
<tr>
<th>Be as fit and healthy as they can be:</th>
<th>Enjoy life at home:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
<td>Always</td>
</tr>
<tr>
<td>Mostly</td>
<td>Mostly</td>
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<tr>
<td>Sometimes</td>
<td>Sometimes</td>
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<tr>
<td>Rarely</td>
<td>Rarely</td>
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<tr>
<td>Never</td>
<td>Never</td>
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<tr>
<td>Don’t Know</td>
<td>Don’t Know</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Be relaxed and happy:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
</tr>
<tr>
<td>Mostly</td>
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<tr>
<td>Sometimes</td>
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<tr>
<td>Rarely</td>
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<tr>
<td>Never</td>
</tr>
<tr>
<td>Don’t Know</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Be part of their local community:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
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<tr>
<td>Mostly</td>
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<tr>
<td>Sometimes</td>
</tr>
<tr>
<td>Rarely</td>
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<tr>
<td>Never</td>
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<tr>
<td>Don’t Know</td>
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<table>
<thead>
<tr>
<th>Take part in school and learning:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
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<tr>
<td>Mostly</td>
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<tr>
<td>Sometimes</td>
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<tr>
<td>Rarely</td>
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<tr>
<td>Never</td>
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<tr>
<td>Don’t Know</td>
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<table>
<thead>
<tr>
<th>Enjoy relationships with friends:</th>
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</thead>
<tbody>
<tr>
<td>Always</td>
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<tr>
<td>Mostly</td>
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<tr>
<td>Sometimes</td>
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<tr>
<td>Rarely</td>
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<tr>
<td>Never</td>
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<tr>
<td>Don’t Know</td>
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<table>
<thead>
<tr>
<th>Enjoy relationships with family:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
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<tr>
<td>Mostly</td>
</tr>
<tr>
<td>Sometimes</td>
</tr>
<tr>
<td>Rarely</td>
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<tr>
<td>Never</td>
</tr>
<tr>
<td>Don’t Know</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Benefit from relationships with professionals:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Always</td>
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<tr>
<td>Mostly</td>
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<tr>
<td>Sometimes</td>
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<tr>
<td>Rarely</td>
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<tr>
<td>Never</td>
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<tr>
<td>Don’t Know</td>
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</tbody>
</table>
10) Thinking about your experience of personal budgets:

What worked well?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

What didn’t work well?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Would you make any specific changes to the way education health and care plans work in your area?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Thank you for answering these questions

In Control Partnerships
Carillon House, Chapel Lane
Wythall, Birmingham,
B47 6JX
Tel: 01564 82 1650
www.in-control.org.uk
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11) Are you:

- A Man
- A Woman

12) How old are you?

- 16 to 24 years old
- 25 to 34 years old
- 35 to 44 years old
- 45 to 54 years old
- 55 to 64 years old
- Older than 65 years old

A law called the Disability Discrimination Act says that you are disabled if:

- It is very hard for you to do normal everyday things
- You have found these things hard for at least 1 year

13) Do you have a disability that affects you like this?

- Yes
- No

14) Please tell us about any disabilities you have.

If your disability is not in this list please choose ‘other’:

- Physical disability
- Sensory impairment
- Mental health condition
- Learning disability
- Long standing illness or health condition
- Other (tell us if you want to):
15) Are you?

**White:**
- Any white background

**Mixed:**
- White and Black Caribbean
- White and Black African
- White and Asian

**Asian or Asian British:**
- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

**Black or Black British:**
- Caribbean
- African
- Any other Black Background

**Chinese or other ethnic group**
- Chinese
- Other

**What is your religion?**
- No religion
- Christian
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion
- Do not want to say

**Are you:**
- Heterosexual/Straight
- Gay or Lesbian
- Bisexual
- Other
- Do not want to say