

## **Public Services that work from the start**

### **3. How can education and children's care services support vulnerable children, and those who are disabled or have special educational needs (SEND), to thrive?**

#### **SEND review**

There are serious failings in the SEND/AP system and the way it integrates with statutory partners in Health and Social Care, and with mainstream education providers in schools and colleges.

The system is currently so focussed on attainment and accountability, that the needs of the child are not put front and centre. Not only that, but the health and social care system is not as integrated as is needed for some cases in some areas. Due to a lack of funding and other resources, waiting times have grown so that early intervention is simply not possible. Where provision is available, the bar is set so high, that only the most in need are able to access it, despite the positive impact it may have had, and in too many cases the education system has to pick up the pieces.

Whilst there is some agreement that mainstream provision is appropriate for many children, the simple fact is that academisation, together with a relentless focus on performance and attainment has driven children away. When a setting is so fearful of the impact a child with SEND will have on their performance data, it is our opinion that they are no longer providing a suitable education. Where children are temporarily off-rolled to inflate a setting's performance data at the expense of SEND children, the setting is failing to provide a suitable education.

A lack of skilled and experienced staff has left schools less able to manage the full spectrum of children and according to the Guardian "another issue is the fashion, actively promoted by ministers, for extremely tight discipline, such as penalties for pupils who touch each other or avoid eye contact" which actively discriminates against children with some types of complex need.

Schools need to be places where all children are welcomed and nurtured to succeed and achieve, and their achievements need to be recognised even if they are way below what spurious data points suggest they should be. We note Ofsted's recent moves to crack down on off-rolling, but the reality is that parents no longer see mainstream schools and academies as being places that welcome children with SEND and additional needs and feel they have no alternative but to employ the tribunal system to ensure their child's needs are met.

It is all about data and funding, and yet there is not enough funding to meet the needs of the pupils which is why LAs are in deficit. The aim for more children to be supported to be in mainstream provision is laudable but the "thrust of government policy has been in the opposite direction, with academic achievement emphasised at the expense of everything else"<sup>1</sup>

In order for this to be addressed we need to properly recognise the importance of early intervention, especially in mental health support. Current wait times for mental health support from CAMHS is around two years, by which time the needs of the child and the setting have dramatically escalated placing incredible burdens on the school system. Whilst we applaud the intent behind a mental health trained teacher in every school, the demands placed upon teaching staff mean that this training often cannot be exercised. This would be better provided by dedicated mental health practitioners and allowing teachers to teach.

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<sup>1</sup> [https://www.theguardian.com/commentisfree/2022/jul/21/the-guardian-view-on-tory-plans-for-send-cuts-the-wrong-move?CMP=twl\\_a-education\\_b-gdnedu](https://www.theguardian.com/commentisfree/2022/jul/21/the-guardian-view-on-tory-plans-for-send-cuts-the-wrong-move?CMP=twl_a-education_b-gdnedu)

Too many additional duties are being placed on all teachers and especially the SENCO, with nothing reduced or removed to help them to withstand the burden. Many are being crushed beneath the weight of the workload and too many teachers are leaving because of the workload.

Mental health issues are a current high-priority and demand is increasing both due to existing need and those derived from Covid-19. Vulnerable children are seeking belonging and attachment support, without which can lead to PREVENT issues. Ostracization from and within school can lead to insularity, anger, extremism and contribute to poor mental health, so good attendance is vital and yet the funding for LA education welfare officers has been significantly cut. SEND staff – not just the SENCO – have a critical role in addressing these needs but are often inadequately trained and insufficiently funded. SEND support staff have a critical role to play and yet they are scarcely mentioned in the body of the consultation. They need greater support, better and more frequent training, and additional pay to recognise their specialism.

Demand for mental health services has exploded both due to existing need and those derived from Covid. According to the NHS confederation, there was a significant increase in demand alongside an increase in the severity of cases – this was particularly the case in children and young people with eating disorders.

The waiting list to access mental health support was already one of the longest – especially for Child and Adolescent Mental Health Services (CAMHSS) with only around 40 per cent of those with a diagnosable disorder accessing support – and the additional demand since the pandemic has only made things worse.

The explosion in children and young people seeking help with eating disorders without a commensurate increase in specialist support services, means that children will face longer waits for their treatment. Evidence shows that early intervention is key to ensuring the chances of success in supporting individuals. Without this support health will be affected, and it becomes more likely that their eating disorder will remain with them into adulthood.

### **Funding for SEND**

The funding envelope for the current SEND system is insufficient. The demand is outstripping the supply, and this has raised the bar so that some of those desperately in need, no longer meet the threshold. Any SEND system must be funded to meet the needs of the children and provide the stability and consistency of staffing throughout the lean times and the harvest.

Mandatory inter-agency working is essential. Key staff need to be present at all key meetings as identified by the needs of the child. The pandemic has shown us the effectiveness of virtual meetings and this strategy should be maintained to enable participation. Furthermore, key meetings should be held at times which are convenient for all – including parents to ensure that communication with them and the child is placed at the centre of any decision making.

An EHCP has to identify the needs of the child in a holistic manner over the resources needed to support those needs. Only once those needs are identified can the necessary resources be made available. Children must not be being allocated resources because they are available, if they are not the correct resources to meet the need.

Community agrees that there is too much variation and inconsistency in the way that a child's needs are identified and met and that a standardised and digital format could play a significant role in addressing this. Forms are unwieldy, long and frequently meaningless to the parents and children that they pertain to. A standardised form will remove the need for time-consuming data entry,

negate the need for re-assessment, prevent children falling through the gaps and eliminate delays in them accessing support. Furthermore, a digital system would allow any data to be sent ahead of the child to ensure that provision is ready in anticipation of arrival.

#### **4. What should Labour include in a Women's Health and Wellbeing Strategy?**

Menopause is a workplace and societal issue which will affect more than half the population at some point. Indeed, women over 50 are the fastest growing group in the workplace. Consequently, much more work needs to be done to support women, transmasculine and non-binary people who are undergoing the menopause. In 2019, we surveyed 600 women members of Community about their experiences of menopause in the workplace. 73% of respondents said that menopause symptoms impacted their ability to function at work. Similarly, our 2020 education and early years section survey found that 53% of our members told us that the menopause had caused them problems and issues at work. 18% said their experiences had prevented them from applying for a promotion.

The extent of the discrimination that women face is illustrated by the fact that only 11% had sought support from their workplace, with many stating that by asking for help they would be perceived negatively, or that they believed no help would be available.

There is a serious risk that women who experience discrimination because they are undergoing the menopause transition leave the workforce altogether. The cost of recruiting new staff means there is a clear business case for supporting employees who experience the menopause.

It's clear that skilled workers are not being supported to live up to their full potential because of the lack of understanding of the menopause and lack of support for workers who go through it. Many women are being dismissed on competency grounds for issues that could have been resolved with adjustments to working conditions.<sup>2</sup>

In 2017 the Department for Education conducted a review of the evidence<sup>3</sup> into the effects of the menopause transition on women's economic participation in the UK. The research found evidence that women experiencing the menopause transition face difficulty looking for work, reduced hours, and feared redundancy, but also that menopausal symptoms were driving people out of the workforce altogether.

Existing legislation sets out that though the menopause is not an illness or a disability, the effects of the symptoms can be disabling for women. Consequently, a court could find that an employer who had not properly supported women undergoing the menopause is guilty of discrimination. Menopause discrimination can be, and has been classed as age, sex, or disability discrimination.

Despite the fact that the equality act protects workers against discrimination, when Community surveyed our members about their experiences of menopause in the workplace, in 2019, we found that 81% had had no support or adjustments. This indicates that workers are not being supported within the limits of current legislation.

An employer must also minimise, reduce or where possible remove workplace health and safety risks for workers, which includes making sure that menopausal symptoms are not made worse by the workplace or its work practices and making changes to help workers manage their symptoms when doing their job.

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<sup>2</sup> [https://www.tuc.org.uk/sites/default/files/Menopause%20survey%20report%20FINAL\\_0.pdf](https://www.tuc.org.uk/sites/default/files/Menopause%20survey%20report%20FINAL_0.pdf)

<sup>3</sup> <https://www.gov.uk/government/publications/menopause-transition-effects-on-womens-economic-participation>

Again, in theory this provision provides significant protection for women experiencing the menopausal transition, however, in practice existing legislation is not being used to its full effect.

There should be a preventative duty on employers to ensure discrimination does not occur in the first place.

To support women going through the menopause, the next Labour government should ensure that supplies of Hormone Replacement Therapy are available and in stock and ensure that women are not charged for accessing these.

We are proud of the work we have done to ensure that the workplaces we look after have implemented menopause policies and developed practices to support women.

The next Labour government should explore the benefits of including the menopause as a protected characteristic in the Equality Act. At the same time, it should explore how the Act can be augmented to take better account of intersectionality, to allow people who face discrimination or ill treatment to have the courts reflect their true experiences. For example, rather than bringing a separate claim for sex discrimination and race discrimination, an ethnic minority woman could bring a claim which reflects the reality of the misogynoir that she has faced.

**6. What are the specific implications of policy proposals in this area for (a) women, (b) Black, Asian and minority ethnic people (c) LGBT+ people, (d) disabled people and (e) all those with other protected characteristics under the Equality Act 2010?**

The next Labour government should ensure that women's health is one of its key priorities. We are particularly concerned that the levels of research and investment into conditions that primarily affect women are too low. For example, endometriosis, a devastating condition in which womb-like cells grow throughout the body, causing pain, which worsens during your period, and often fertility problems, currently has no cure. Our members tell us of the long waits they face to be diagnosed with endometriosis. We welcome recent developments which have led to a potential treatment, rather than pain management solution being trialled, but believe that more research into conditions of this nature is essential. We highlight systemic biases in healthcare research which have led to conditions affecting women facing less funding and less research focus.

**March 2023. Please contact [research@community-tu.org](mailto:research@community-tu.org) for further information.**