

SEND Reform Consultation Responses – SEND Voices Wokingham (SVW)

Thank you to everyone who attended our engagement sessions or shared feedback at our coffee mornings. We have reviewed all responses and submitted a summary of the key themes raised in response to the SEND Reform Consultation questions.

Q1. How can we make sure children, young people and their families have a genuine say in these decisions?

Families, children and young people must be involved in decision-making at every level, from individual support planning through to strategic local area planning. Co-production should be a legal expectation rather than optional guidance, supported by a nationally agreed definition and quality assurance framework explaining what meaningful co-production looks and feels like in practice. Schools, local authorities and health partners should evidence how feedback has influenced decisions through transparent “you said, we did” reporting. Children and young people should have accessible opportunities to contribute in ways that meet their communication, sensory and emotional needs. Local SEND strategic plans, inclusion strategies and Individual Support Plans (ISPs) should demonstrate how family voice has informed them. Parent Carer Forums (PCFs) should be sustainably funded beyond the current DfE grant model to enable wider representation, independent engagement activity and meaningful participation. Independent advocacy and SENDIASS services must also be strengthened to support families to participate confidently and challenge decisions where necessary.

Q2. How can we make sure that high-quality evidence and best practice inform decisions about SEND?

National Inclusion Standards should be based on evidence-informed practice and co-produced with practitioners, families and young people. Training must move beyond theory and include practical implementation strategies for teachers, teaching assistants, leadership teams and wider school staff. Good practice should be shared nationally and locally through peer networks, specialist outreach and Experts at Hand teams. Schools should have access to consistent guidance and evidence-based interventions while

retaining flexibility to individualise support. Best practice must include neurodiversity-affirming and trauma-informed approaches, including understanding of masking and profiles such as PDA. Ofsted should evaluate not only written policies but also the lived experience and outcomes of children with SEND. Data collection should focus on inclusion, attendance, exclusions, progress, wellbeing and whether children and families feel genuinely welcomed and supported within their school community.

Q3. How can we ensure that children are best supported by the Universal offer?

The Universal offer must have a clear legal framework and nationally consistent expectations, including a co-produced definition of SEND and inclusive practice. Current “ordinarily available provision” varies significantly between schools and areas, creating a postcode lottery. Schools should be required to identify and support SEND early, including children who mask needs or are academically able. Universal support must include staff training, reasonable adjustments, sensory-friendly environments, adaptive teaching and inclusive curriculum delivery. Training should include all staff, including leadership teams, governors, lunchtime staff and teaching assistants. Families need clear and independent routes to challenge where support is not delivered, such as access to Area SENCOs, SENDIASS or ombudsman-style processes. Accountability must focus on measurable outcomes and lived experiences, not simply written policies. Education about inclusion should also form part of the wider school culture for pupils and families.

Q4. How can we ensure that children in the Targeted layer are best supported?

Children in the Targeted layer should receive timely interventions without unnecessary delay or escalation. ISPs should clearly outline identified needs, provision, responsibilities, review dates and SMART outcomes. Plans should be reviewed termly, rather than annually, so support can adapt quickly if needs change. Schools should have access to specialist advice and practical implementation support through Experts at Hand teams. Families should be equal partners in decisions, with clear escalation routes where provision is not working. Support must remain needs-led rather than diagnosis-led. National standards and quality assurance processes are needed so Targeted support is delivered consistently across all schools. Outcomes must be regularly monitored to ensure provision is effective and leading to meaningful improvements for the child or young person.

Q5. How can we ensure that children in the Targeted Plus layer are best supported?

Targeted Plus support should provide rapid access to specialist expertise without families needing to reach crisis point. Experts at Hand teams should include educational psychologists, speech and language therapists, occupational therapists, mental health practitioners and specialist teachers. Support must include both direct work with children and practical support for schools to adapt environments and teaching approaches. Inclusion Bases should complement, not replace, mainstream inclusion and should never become spaces of exclusion. Staffing levels, specialist training and oversight will be critical. National standards and quality assurance measures are needed to ensure consistency across all schools. Schools must not use Targeted Plus as a way to avoid requesting an EHCP where one is needed. Outcomes should be regularly monitored so support can be adapted quickly if progress is not being achieved.

Q6. How can we ensure that children in the Specialist layer are best supported?

Children with the most complex needs require timely access to specialist placements, therapies and provision packages. The definition of “complex needs” must be transparent, consistent and nationally agreed. Families must retain meaningful legal rights to request and challenge placements and provision. Specialist provision should remain genuinely specialist, with trained staff, appropriate staffing ratios and therapeutic support. EHCPs must continue to be legally enforceable and include clear accountability across education, health and social care. Specialist placements should be based on individual need rather than local availability or cost. Families should be fully involved in decision-making and have access to independent advice and advocacy where disagreements arise.

Q7. How do you think early years settings, schools, and college can best support the mental health and wellbeing of children and young people?

Mental health and wellbeing should be embedded across the whole setting culture, not treated separately from SEND support. Staff need training in trauma-informed and neurodiversity-affirming practice, including understanding masking, PDA profiles and anxiety-based school avoidance. Children and young people should have access to safe spaces, trusted adults, flexible approaches and sensory support. Mental health

education should be included within the curriculum in ways that are accessible to different learning styles and communication needs. Long waiting lists for CAMHS and therapy services must be addressed. Schools, colleges and early years settings should work collaboratively with families and health services to identify concerns early and adapt provision to individual needs.

Q8. Do you agree that the refreshed ‘areas of development’ will support educators to understand and address barriers to learning and participation?

The refreshed areas of development may improve consistency, but only if they remain flexible and allow for individualised understanding of need. Children and young people do not fit neatly into categories and many have overlapping or fluctuating needs. The system must avoid becoming overly standardised or diagnosis-focused. Educators need practical examples, implementation guidance and specialist support to understand how needs may present differently in different children, including masking, anxiety and demand avoidance profiles.

Q9. What arrangements would best support effective joint working between early years providers, Best Start Family Hubs, health, local authorities, and parents for children with SEND in the early years?

Joint working should be coordinated around the child and family, with clear communication pathways and shared accountability. Families should not have to repeat their story multiple times to different services. Best Start Family Hubs could provide a valuable access point if adequately funded and linked closely with health, early years and SEND services. Multi-agency meetings should happen early and regularly, with families treated as equal partners. Information sharing systems should be secure, accessible and consistent across services.

Q10. How can the EYFS two-year-old progress check and the Healthy Child Programme development review be improved?

These reviews should focus on early identification and practical support rather than simply recording concerns. Professionals carrying out reviews need SEND training and confidence to identify neurodivergent presentations, communication needs, sensory differences and social-emotional difficulties. Families should receive clear advice, signposting and timely referrals where concerns are identified. Waiting lists for assessment and therapy must be reduced so early identification leads to meaningful intervention and support.

Q11. What should the top three priority areas be for building and sharing evidence within the National Inclusion Standards?

1. Early identification, inclusive ethos and culture.
2. Neurodiversity-affirming and trauma-informed approaches that remain flexible to individual needs.
3. Effective implementation of reasonable adjustments and adaptive teaching.

Evidence should include family experience, wellbeing and long-term outcomes, not solely academic attainment. Families, children and young people must also be involved in co-producing the National Inclusion Standards.

Q12. What are the most important issues for national training to cover?

Training should cover neurodiversity, communication needs, mental health, sensory differences, adaptive teaching, behaviour as communication, PDA profiles, trauma-informed practice, masking and inclusive curriculum delivery. It must include practical implementation strategies rather than remaining theoretical. Training should involve all staff, including leadership teams, governors, teaching assistants and lunchtime staff. Training should also be co-produced with families and people with lived SEND experience.

Q13. What practical actions can help teachers, educators and leaders manage workload whilst implementing these changes?

Clear national standards, consistent templates and high-quality shared resources would reduce duplication and workload. Sample lesson plans and practical implementation examples would support consistency. Digital systems should be streamlined and interoperable across services. Time and funding for training, collaboration and co-production must be built into workloads. Schools need adequate staffing and funding to implement reforms effectively. Bureaucracy should be reduced so the focus remains on meaningful support and outcomes.

Q14. How should the SENCO role evolve?

The SENCO role should become more strategic, influential and adequately resourced. SENCOs require protected time, leadership status and access to specialist supervision and training. They should focus on driving inclusive practice across the whole setting rather than being overwhelmed by administration. SENCOs also need authority to challenge poor practice and influence curriculum, staffing and environmental adaptations. Academy trusts and school leaders should be held accountable where SENCOs are not appropriately supported.

Q15. What would provide assurance for families that an ISP is high-quality?

ISPs should include clearly identified needs, provision, responsibilities, review dates and SMART outcomes. Plans must be co-produced with families and young people and written in accessible language. National templates and quality standards would improve consistency. There must be robust accountability and oversight to ensure provision is delivered. Families need access to independent escalation routes where schools refuse support or fail to implement provision, including SENDIASS, Area SENCOs or independent review processes. ISPs should include education, health and social care elements where appropriate.

Q16. How can we ensure ISPs are clear, concise and practical?

ISPs should focus on needs, provision, outcomes and expected impact rather than lengthy narrative. National templates and guidance would support consistency. Digital systems should allow updates across services and transitions between settings. Reviews should happen regularly and involve families and relevant professionals. Outcomes must be monitored carefully, with flexibility to adapt provision quickly if support is not effective. School leadership teams should review patterns and outcomes strategically to ensure provision is meeting pupil needs.

Q17. How can we best support transition for young people with SEND?

Transition planning should start early and involve education, health, social care, families and young people. Information should transfer smoothly between settings. Young people need support preparing for adulthood, employment, independence and further education. National transition days and additional visits for pupils with SEND should be built into school calendars. Pupils should have opportunities to visit schools in quieter environments, meet staff early and receive timetables before the start of term to reduce anxiety.

Q18. How can we make sure every area can meet the full range of needs through Inclusion Bases?

Inclusion Bases require clear national guidance, specialist staffing, appropriate funding and strong accountability. Provision must reflect local need and should not become a substitute for specialist placements where these are required. Families and young people should help shape how Inclusion Bases operate. There is concern that these could become exclusionary spaces rather than inclusive support. Lessons and curriculum access must remain inclusive and accessible for all pupils.

Q19. How can we make sure Inclusion Bases help children succeed in mainstream settings?

Inclusion Bases should support access to mainstream education rather than isolate children from peers and learning opportunities. Children should remain included in

school life wherever possible. Staff need specialist training and sufficient capacity. Success should be measured through wellbeing, engagement, attendance and progress rather than simply physical placement in mainstream. Schools must ensure pupils are not “othered” through overuse of separate provision and that lessons remain accessible and meaningful.

Q20. What arrangements are needed to deliver Experts at Hand effectively?

Experts at Hand teams must be genuinely multi-agency, adequately funded and accessible without lengthy referral processes. Roles and responsibilities should be clearly defined. Support should include coaching, modelling, environmental advice and direct intervention where needed. Families should be involved in decisions and there must be accountability where recommendations are not implemented. Teams must have sufficient capacity and authority to support and challenge schools where inclusion practice is weak.

Q21. What needs to be in place so that children with highly complex needs can access the right specialist placement?

There must be sufficient specialist capacity nationally and locally, including highly specialist placements. The definition of “complex needs” should be clearly defined and consistently applied. Decisions must be based on individual need rather than availability or cost. Fast-track pathways should exist for children with clearly identified complex needs. Families must retain legal rights to challenge decisions and should be fully involved in transparent placement processes.

Q22. How can Specialist Provision Packages be designed effectively?

Specialist Provision Packages must remain flexible, personalised and outcomes-focused, recognising that many children have overlapping needs. Provision should be regularly reviewed and adapted where outcomes are not being achieved. Health, education and social care input must be integrated rather than fragmented. There should be clear accountability where agreed provision is not delivered.

Q23. What is needed to make proposals around EHCPs and ISPs work effectively?

Clear accountability, legal clarity and robust oversight are essential. Families need confidence that provision written into ISPs and EHCPs will actually be delivered and enforceable. EHCPs must remain legally enforceable. Schools and services require sufficient funding, workforce capacity and training. Both EHCPs and ISPs must remain individualised and not force children into standardised “boxes”. There must also be a transparent process for reviewing existing EHCPs and clear rights of appeal where support is reduced or removed.

Q24. How can we make sure the under-5 fast-track route works in practice?

Eligibility criteria must be transparent and consistent nationally. Families should not face unnecessary bureaucracy or delays. Multi-agency assessments should happen quickly and include family voice throughout. Early intervention should begin immediately rather than waiting for formal processes to conclude. Workforce capacity and timely access to specialists will be essential.

Q25. What should be considered as part of the needs assessment?

Assessments should include family voice, child and young person voice, school information, health input, developmental history, strengths, sensory needs, communication, mental health and social care considerations. Evidence should focus on lived experience, functional impact and outcomes rather than diagnosis alone. Desired outcomes should reflect the child or young person’s individual abilities and aspirations.

Q26. What factors should LAs take into account when proposing settings?

The proposed setting must be suitable for the child or young person’s needs, not simply based on what is locally available. Local authorities should consider wellbeing, communication profile, sensory environment, travel impact, peer group and specialist expertise available. Family views and the child’s wishes must be central. Families also

need access to independent challenge routes where they disagree with proposed placements, including for AP and independent specialist settings.

Q27. What information and support do parents need to choose a setting?

Families need transparent information about provision, staffing, therapies, outcomes, inclusion approaches and available support. Independent advice and SENDIASS services should be strengthened. Parents should have opportunities to visit settings, speak with staff and connect with other families before naming a placement.

Q28. What is the right maximum length of time for a temporary placement in AP?

Alternative Provision should only be used for the shortest time necessary and must always include a clear reintegration or transition plan. Long-term use of AP can lead to exclusion from mainstream opportunities and poorer outcomes. Placements should be regularly reviewed with family involvement. Extended placements should trigger review of whether a different placement is required.

Q29. Do you agree that regulating Independent Special Schools will lead to suitable placements at a fair cost?

Greater regulation and transparency could improve consistency and accountability. However, regulation alone will not solve placement shortages. Local areas must improve strategic planning and develop sufficient specialist capacity. Mainstream inclusion also needs strengthening. Families must continue to have access to specialist independent provision where appropriate.

Q30. How should settings be held accountable for Inclusive Mainstream funding?

Schools should publish transparent information about how SEND funding is used and the impact on outcomes. Accountability should focus on inclusion, attendance, wellbeing and progress rather than solely academic attainment. Ofsted and local area SEND inspections should evaluate whether funding is leading to meaningful support and improvement. There must also be clear consequences and improvement processes where support is not effective.

Q31. Do you agree that more SEND funding should sit directly within mainstream budgets?

Additional ringfenced SEND funding in mainstream schools could improve early intervention and inclusive practice if accompanied by strong accountability and national standards. Schools should regularly review whether provision is genuinely meeting pupil needs rather than fitting children into existing structures. Without robust oversight, there is a risk that funding pressures could reduce specialist input and create inconsistent support.

Q32. Do you agree that every school should be part of a Local SEND group?

Collaboration between schools could improve consistency, shared expertise and local inclusion. However, Local SEND groups must remain transparent and accountable and avoid conflicts of interest around funding and placement decisions. Parent and family voice should also be represented within these groups.

Q33. How should disagreements about membership, provision, or funding be resolved?

Disagreements should be resolved through transparent and genuinely independent processes involving education, health, local authority and family representation. Families must have confidence that decisions are fair, evidence-based and not financially driven. Independent mediation and escalation routes should be available.

Q34. How can we ensure the most effective use of local partnership groups?

Local Partnership Groups should focus on strategic planning, improving inclusion, sharing expertise and identifying gaps in provision. Parent Carer Forums and young people must be equal partners. Groups should review local data, including exclusions, attendance, tribunal outcomes and family feedback, to inform improvement and place planning. “You said, we did” reporting should demonstrate how feedback has influenced change.

Q35. Which stakeholders are important for local partnership groups?

Schools, colleges, early years providers, specialist settings, health services, social care, local authorities, SENDIASS, Parent Carer Forums, voluntary sector organisations and children and young people themselves are all essential stakeholders. Effective reform depends on genuine multi-agency collaboration.

Q36. How can we build stronger collaboration and a culture of improvement?

Co-production, transparency and shared accountability are essential. There should be a nationally agreed definition and quality assurance framework for co-production. Local SEND strategic plans should include measurable actions, regular review and clear evidence of family involvement. Inspection and accountability frameworks should focus on continuous improvement rather than blame. Families should be able to clearly see progress through transparent “you said, we did” reporting.

Q37. What information, advice and guidance can best support families?

Families need clear, accessible and consistent information about rights, support pathways, provision and complaints processes. SENDIASS services, Parent Carer Forums, Family Hubs and independent advocacy services should be sustainably funded and appropriately regulated to support families during transitions, assessments and disputes. The Local Offer should be accurate, accessible and regularly updated.

Q38. Do you agree that a SEND specialist should sit on school complaint panels?

Yes, but the SEND specialist must be genuinely independent. Families need confidence that complaints are reviewed fairly, transparently and against the National Inclusion Standards. Panels should include SEND expertise and clear oversight processes. There must also be mechanisms for identifying patterns of complaints so schools can be supported and challenged to improve where concerns are repeated.

Q39. Is there anything further you would like to contribute?

SEND reform presents an important opportunity to improve inclusion and reduce crisis-driven support. However, reforms will only succeed if they are properly funded, genuinely co-produced and supported by sufficient workforce capacity. Families remain concerned about accountability, enforceability and the potential loss of rights or safeguards. There is also concern that schools may only provide support they already have available, rather than what children genuinely need. Success should not be measured solely through attendance and academic attainment. Success is children and young people feeling safe, included, emotionally well and able to reach their potential. Consideration must also be given to post-16 provision, EOTAS, EHE and adopted or fostered children.