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Education and Training Inspectorate

Report of a Follow-up Survey Inspection

of the

Provision for Pupils with Severe Learning Difficulties and Persistent and Challenging Behaviours in Special Schools in Northern Ireland

Inspected: May-June 2007

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1. INTRODUCTION

1.1 In 2004, the Department of Education published the ‘Report of a Survey of Provision for Pupils with Severe Learning Difficulties and Persistent and Challenging Behaviours in Special Schools in Northern Ireland’. This report found that some 269 pupils, aged five to 19 years, demonstrated severe learning difficulties (SLD) and persistent and challenging behaviours as defined by Emerson (1987)¹. The number of pupils represented approximately 14% of the SLD population.

1.2 The 2004 survey evaluated the arrangements that were in place in schools for pupils with severe learning difficulties to address the needs of pupils whose behaviour represented the single most significant barrier to their engagement with education.

1.3 The survey found that professionals providing education for this group of pupils should be skilled appropriately and resourced sufficiently to provide a quality service with access, where necessary, to appropriate alternative provision. The survey also indicated that schools should receive strategic guidance to help them plan more appropriately for these pupils.

1.4 The recommendations of the survey included also the need to promote consistent practice across the Education and Library Boards (ELBs), through the establishment of inter-agency support, early identification and intervention and relevant training for staff.

1.5 The focus of the follow-up inspection was on the progress made towards achieving the improvements needed to meet more effectively the needs of this pupil group.

2. THE FOLLOW-UP SURVEY

2.1 In May 2007 the 21 SLD schools were invited to complete a questionnaire detailing the numbers of pupils falling into the scope of the follow-up survey, the difficulties experienced and the strategies used in meeting their needs. The ELBs were invited also to complete a questionnaire regarding their responses to the 2004 survey. The Education and Training Inspectorate (Inspectorate) analysed and collated the questionnaire responses. In addition, the Inspectorate took account of relevant evidence from inspections of special schools during the 2006/2007 academic year to inform the current survey.

2.2 A team of five inspectors visited 13 SLD schools during May and June 2007 to discuss the findings emerging from the questionnaires with the school principals and relevant members of staff. Personnel from all the ELBs were also interviewed.

¹ ‘behaviour of such an intensity, frequency or duration that the physical safety of the person or others is placed in serious jeopardy or behaviour which is likely to seriously limit or deny access to ordinary facilities.’

3. THE MAIN FINDINGS

3.1 The findings of the questionnaires indicated that some 341 pupils, aged five to 19 years, demonstrated severe learning difficulties and persistent and challenging behaviours in SLD schools. This number represents approximately 19% of pupils in SLD schools. Boys outnumber girls by almost 4:1 and all age groups are represented. The number has risen by approximately 5% since the 2004 survey. The schools reported that such behaviour has a significant impact on both the staff and the other pupils.

3.2 The majority of SLD schools pointed out that members of staff have been injured, in some instances, seriously, while working with pupils with persistent and challenging behaviour or whilst trying to prevent such pupils from injuring themselves or others. These incidents have resulted in subsequent staff absenteeism. The schools also reported significant stress and anxiety amongst staff and parents as a result of this behaviour. Often, the unpredictable nature of the behavioural difficulties of some of the pupils, prevents teachers from completing planned lessons.

3.3 Some pupils interviewed during the inspections in SLD schools reported being afraid of their peers whose behaviour is aggressive and frightening. Other pupils reported being hit on occasion and feeling anxious and afraid. Interviews with SLD school principals revealed that there is a significant impact on the pupils' capacity to concentrate and learn when incidents of challenging behaviour is persistent.

3.4 The majority of the school principals interviewed reported that the organisation of their schools was severely disrupted by the over-riding need to keep the pupils and members of staff safe. Most SLD schools do not have spare rooms to accommodate pupils who need to calm in a non-stimulating and safe environment. The principals indicated that they spend lengthy amounts of time on organisation, meetings and referral procedures attempting to secure appropriate resources for pupils with persistent and challenging behaviour.

3.5 The resources available to meet the needs of the pupils with severe and persistent and challenging behaviour vary considerably across the schools. All schools reported that the educational psychology services are, in most cases, unable to provide the specialist advisory and practical support required to address effectively the needs of these pupils. Health and Social Services Trusts (HSSTs) provide clinical psychology, child psychiatry and behaviour nurse therapy although not all of these services are available to all schools, or at the point of need.

IN-SCHOOL SUPPORT

3.6 In the most effective in-school provision, schools employ a range of strategies that require little or no additional cost. These include behaviour risk analysis, sensory integration programmes, positive behaviour management and reward systems, relaxation therapy, specialist behaviour management strategies disseminated to the whole school staff and 'chill out' spaces or rooms. Some schools modify the curriculum to provide shorter lessons and more practical activities involving other disciplines.

3.7 Additional members of staff, usually classroom or general assistants, have been appointed in some schools through agreements with the ELB, to help meet the demands of these pupils. The additional members of staff are used to supplement the class team and to join rotations of staff working with pupils who require intense support. Additional teachers are appointed occasionally to work one-to-one with pupils, to disseminate effective strategies amongst school staff or to observe and provide programmes of work to guide the management of the pupils. In one school, for example, a temporary teacher and classroom assistant have been appointed to teach a small group of four year 1 pupils, all of whom have persistent and challenging behaviour. In another school, a teacher has been appointed to co-ordinate strategies and record-keeping, and to provide specific support to teachers for pupils with severe and challenging behaviour.

EXTERNAL SUPPORT

3.8 External support to schools varies considerably across and within HSSTs and the ELBs. All schools reported that they value and seek educational psychology support for pupils with severe and persistent and challenging behaviour, but find in practice the complexity of some challenging behaviour is usually beyond the experience and scope of the educational psychology services.

3.9 Clinical psychology is highly regarded by schools as having relevant and specialist knowledge of the range of difficulties experienced by the pupils with severe and persistent and challenging behaviour. In the most effective examples given by schools, clinical psychology services are available and are characterised by early intervention, fast response to concerns raised by the school and a commitment to the well-being of all children. In contrast, two schools have little or no access to this service. In addition, schools in one ELB have experienced considerable difficulties in the last year because of a lack of agreement between the ELB and the relevant HSST over the behavioural strategies to be used in schools. One school reported that no action was forthcoming for any referrals to clinical psychology services over eight months.

3.10 The schools also recognise the importance of the psychiatric services, including behaviour nurse therapy, in addressing the mental health of pupils with severe and persistent and challenging behaviour. However, one third of the schools reported having no access to this service and few schools commented that the service they received was adequate.

3.11 A significant minority of the schools reported that they access and value the external advice and support from other sources including speech and language therapists, occupational therapists, education welfare officers, the Curriculum Advisory and Support Service, ELB Autistic Spectrum Disorder support teams, transitions officers, Positive Futures (for out-of-school activities), the National Society for the Prevention of Cruelty to Children, Compass, Treehouse and Nexus.

3.12 A majority of the schools are satisfied that the referral procedures are satisfactory for pupils who need further support from non-educational sources; however, a majority of schools report that the process is slow. A significant minority of schools find that referral procedures are clear but ineffective and a small minority find that procedures are neither clear nor effective.

3.13 A majority of schools indicated that they are dissatisfied with the amount and appropriateness of the support available to them to address the difficulties and needs of the pupils with severe and persistent and challenging behaviour. The schools cited deficiencies including inadequate accommodation, limited clinical psychology input, lack of specific training for staff, poor ELB perception regarding the nature and the extent of the difficulties posed by the management of this group of pupils and the delays in accessing additional resources when needed. A number of schools expressed concern over the lack of support for pupils experiencing mental health difficulties. The recently established counselling service for post-primary schools does not extend to special schools.

3.14 A majority of schools reported that they have pupils whose behaviour they are unable to manage and who pose significant management difficulties and dangers to themselves, other pupils and staff in schools.

3.15 Schools reported a wide variety of parental reactions regarding the persistent and challenging behaviour of their children. A minority of schools commented that most parents engage well with schools whilst others do not. Schools offer a variety of reasons for this, including parental exhaustion in caring for the child at home and limited access to respite. All of the schools provide a number of supportive strategies for parents including structured meetings, workshops, parents' support programmes, drop-in mornings and training in behaviour management.

4. IMPROVEMENTS SINCE THE SURVEY OF 2004

4.1 A majority of the schools reported that there have been improvements in their provision for pupils with severe and persistent and challenging behaviour since the last survey. Amongst the improvements detailed are smaller classes and improved staff/pupil ratios, more differentiation of the curriculum and teaching approaches, increased skill and confidence of staff in managing challenging behaviour, sensory integration programmes, frequent and regular physical exercise, music therapy, risk assessments, behaviour management training, better inter-agency support and better accommodation.

4.2 Three ELBs provide regular training using the Team Teach methodology and techniques for all staff in the schools; two ELBs provide training on request. The majority of schools find Team Teach useful in addressing some of the needs of pupils with challenging behaviour but not in the management of those pupils with more severe and persistent and challenging behaviour.

4.3 A few schools indicated that the ELBs have been active in securing placements for some pupils with severe and persistent and challenging behaviour in appropriate alternative settings, which have been found to be successful.

4.4 The ELBs have provided a wide variety of additional interventions to help schools meet the needs of the pupils, including the allocation of extra members of staff, supplementary accommodation, separate classes for severe emotional and behavioural difficulties within the schools, accredited training courses for staff, liaison with health services and access to ELB behaviour support teams. Significant work has been undertaken by one ELB, in particular, in engaging well with the health service towards improving the quality of support to schools.

4.5 The ELBs future plans for this group of pupils include the establishment of an ELB inter-disciplinary, dual agency response team to respond to incidents of severe and challenging behaviour, the establishment of a school unit for pupils with severe and persistent and challenging behaviour, attention to dietary needs, training for staff in identifying and addressing sensory needs, parent training in managing behavioural difficulties within the home and addressing the dental care of pupils within schools.

5. RECURRING ISSUES

5.1 Notwithstanding the continued efforts of schools and ELBs to address the difficulties of managing the behaviour of pupils with severe, persistent and challenging behaviour, there remains a significant minority of pupils whose needs are so severe and complex that a majority of schools cannot manage them safely.

5.2 Practice in schools has improved and more pupils with challenging behaviour are being supported successfully. However the unpredictable and complex nature of some challenging behaviour requires that schools and ELBs improve their capacity to respond more quickly and appropriately.

5.3 The impact of the ELBs' staff training and support has not yet secured the capacity of the schools to meet adequately the needs of a small minority of these pupils with more complex needs, but generally, the members of staff are more confident and capable of managing challenging behaviour.

5.4 The support from the HSSTs and the educational psychology services are currently inadequate to support the needs of these pupils in schools.

5.5 The Bamford Review of Mental Health and Learning Disability, (Northern Ireland) 2005 highlighted the complexity of working with individuals with challenging behaviour and set out the action needed by the relevant services to address the many issues. The concerns raised by staff working in education reflect those of staff working in health. The Bamford Review found that assessing and treating mental illness in people with a learning disability is best evidenced where professionals work in an inter-disciplinary way. That finding is endorsed by this report.

6. CONCLUSION

6.1 The follow-up to the 2004 survey has identified areas of improvement across the schools and the ELBs but it is evident that consistent practice, both strategic and operational, has not yet been achieved. Examples of effective practice were identified in most schools but these are not shared across schools.

6.2 The follow-up survey found also that schools require further and ongoing access to specialist multi-agency advice and support for pupils with more severe and persistent and challenging behaviour.

6.3 Finally, the follow-up survey found that the ELBs should reach a more strategic agreement to ensure consistency of practice across the schools and to identify appropriate provision for the small but persistently challenging behaviours of a significant minority of pupils.

6.4 In summary, the follow-up inspection finds some evidence of improvement but some areas for improvement remain to be addressed more rigorously. The Inspectorate will follow-up the continuing areas for improvement.

7. RECOMMENDATIONS

7.1 This follow-up survey has found that the recommendations of the 2004 survey have not been realised fully. There is a need for greater priority to be given to the issue of pupils with more severe and persistent and challenging behaviour, at a senior strategic level, ensuring inter-agency co-operation and engagement. Schools require more effective guidance on practical strategies and when unable to cope, alternative provision should be available.

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