Challenges in planning transition to adulthood for young people who have special

educational needs and disabilities (SEND): professional and managerial perspectives

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Abstract

This study reviewed perceived changes to planning and management of transitions to adulthood for young people with special educational needs and disabilities in three local authorities in England, following implementation of the Children and Families Act (2014). Wenger's 'community of practice' theoretical framework was used to examine how groups of professionals and managers working in education, health and social care in three areas, set about implementing selected radical changes required by the legislation. Telephone interviews with sixteen participants were transcribed and subjected to thematic analysis. Themes identified related to professional activity, planning and organisation, implications for children, young people and parents and outcomes. There were indications of substantial shifts in professional conceptualisations and reported practices as a result of the Act. Participants described enhanced cross-service communication and co-ordinated working practices, achieved though service restructuring, co-location and changed lines of accountability. They are also reported to put an increased emphasis on long-term planning and a greater focus on involving the young person in planning and decision making with regard to defining outcomes, and living and working as an adult. The results are considered in relation to the extent that mandated change can influence attitudes and cultures within communities of practice, contributing to the contemporary theoretical debate to incorporate issues relating to power.

Introduction

Significant legislative and policy change in a public service is usually designed, at least ostensibly, to bring about improvement in the experience of service users. The interests and concerns of professionals who work to deliver frontline services are not prioritised, though the changes may have a profound impact on them. They may be forced to re-think and re-prioritise their previously understood everyday working practices (Kothari et al, 2015), develop new knowledge, meanings and goals relating to their work, and work across new inter-professional and multi-agency teams (Rose & Norwich, 2014; Leadbetter et al. 2007). Such developments can in turn, challenge their own professional knowledge and identity. The initial general aim of this research was to explore professionals' perceptions across those working in education, health and social care of the challenges of managing the transitions to adulthood for young people with special educational needs and disabilities, following the introduction in England of the *Children and Families Act* (2014) and its related *Special Educational Needs and Disability Code of Practice: 0 to 25 years* (DfE/DH, 2014).. A further specific aim in this paper is to examine the utility of Wenger's (1998) communities of practice framework for understanding the processes of change at the local level as a consequence of legislative change.

The Children and Families Act (2014) and the related Special Educational Needs and Disability Code of Practice: 0 to 25 years (DfE/DH, 2014) in England reflected a range of significant shifts in public attitudes towards Special Educational Needs provision and the different practices that framed that provision. Foremost, staff are required to give more attention to the views, wishes and feelings of the children and young people and their parents. Staff in the key public agencies must facilitate these stakeholders' participation in

decision making by making full information and support available (DfE/DH, 2014). There was to be "a stronger focus on high aspirations and on improving outcomes for children and young people" (DfE/DH, 2014, p. 14). In a significant development of earlier legislation, those who need a formal plan for their education, health and care must have provision up to the age of 25 (extended from the previous upper age limit of 19) that allows them to "follow a coherent study programme which provides stretch and progression and enables them to achieve the best possible outcomes in adult life" (DfE/DH, 2014, p.113). Arrangements for making this provision were to be developed on the basis of close cooperation between education, health and social care with firm requirements for transparency and openness.

The legislation was, in part, a response to serious criticisms of the previous regulatory framework (Lamb, 2009) and, in part, a reflection of a shift to accommodate consumerist principles in other areas of public service (Fotaki, 2014). The legislation therefore required developments to practice that challenged some of the existing assumptions held by the professional and managerial communities involved in assessment and decision making in relation to children and young people with SEND. The emphasis on improving outcomes required practitioners to design arrangements to raise aspirations for children with SEND in their journey towards adulthood, through identifying "…provision to assist in preparing children and young people for adulthood and independent living" (p. 26), including obtaining employment, finding suitable accommodation and social participation. The need to identify challenging outcomes linked to life beyond education represented a clear shift in emphasis with a direct impact on professional practice. The legislation was also designed to

strengthen parental confidence in SEND systems, through encouraging their participation (and that of their children) in decision-making processes.

In this paper, we are concerned particularly to examine how professional stakeholders reported the impact for them of the extension of formal individual education plans to the age of 25. Internationally, the concern that transition to adulthood for young people with SEND is poorly managed is widely shared, and it is common to emphasise problems created by discontinuities of support during transition (Myklebust, 2012; Osgood, Foster & Courtney, 2010). Examples include Australia, where Winn and Hay (2007) argued that the provision of employment for school leavers "is complicated by a disparate and fragmented group of service agencies " (p. 103) and Spain, where Pallisera, Fullana, Puyaltó and Vilà (2016) identified, among other challenges, "the incoherent approaches existing between the different centres offering services to young people and adults with learning disabilities" (p. 505). However, these countries have not attempted to tackle those problems by changing the scope of education planning at the individual level. The introduction of Education, Health and Care (EHC) Plans in England extending to the age range of transition (up to 25 years) was introduced to support the resolution of the problem. Success will depend on attitudinal and cultural changes across all services. There is evidence that attitudes are very difficult to change once established (Carnall, 1990), but that organisational culture plays an important part in clarifying and challenging an individual's values, beliefs, assumptions and practices, and therefore is a key lever in implementing sustainable change processes (Schneider & Brief, 1996; Silvester & Anderson, 1999). Can a change in statute engender organisational changes, associated with cultural and attitudinal changes? Our intention in

this paper is to examine the impact of the new UK legislation as a case study of that question, using the Communities of Practice framework as a reference point. Communities of Practice provides a useful theoretical lens for examining change in institutional cultures because of the focus on how knowledge is actively produced, shared and enacted through social relationships, practices and meaning-making (Wenger, 1998; Lave & Wenger, 1991). Under the communities of practice framework, practices are the everyday activities that make up what we do, a process through which we decide what is meaningful and that in turn, is influenced by our participation in communities (Wenger, 1998). In addition, individuals within communities of practice bring their own goals, knowledge preferences and resources, which interact with the needs of the community (Billet, 2008). Significant systemic change, especially that which leads to new inter-professional working across different boundaries and settings, makes for potential sites of conflict and tension (Rose & Norwich, 2014). Taking a multiple level analysis for understanding how the policy context influences individuals working in the local context, they suggest two levels of analysis, 1) a social level of analysis and 2) a social-psychological level of analysis. In the former, the policy context establishes frameworks which must then be worked out in the local context, posing problems for the "real, 'messier' contacts of practice' (p. 64). In the latter, collective preferences for joint goals and shared meanings are established.

This is not a simple process. Professionals working across different sectors, like education, health and social care may associate different meanings with particular SEND terminology (Frost & Robinson, 2007). Occupational boundaries in inter-professional working may be actively reinforced (Nicolini, Scarbrough & Gracheva, 2016) and also be linked with power

and inequalities in the relationships of the interested parties. The development of trust is inhibited by professional fragmentation, which in turn hinders their ability to develop shared meanings or a joint working identity (Nicolini, Scarbrough & Gracheva, 2016). It is useful to note that a distinction may be made between 'designed' institutional structures in organisations (such as departments, policies and strategies) and 'emergent' structures (such as actual practices and social interactions) (Henry & Mackenzie, 2012). 'Designed' structural systems can hamper the ability for people to work jointly, such as making it difficult for inter-professional meetings to take place (Nicolini, Scarbrough & Gracheva, 2016). Wenger made a distinction between communities of practice developed through informal networks of people coming together within an organisation with a passion for further development and formal groups forced into a joint endeavour from above (Wenger & Snyder, 2000). The professional groups involved in implementing the recent SEND legislation at local level had worked for many years within formalised institutional structures. How far could Wenger's ideas account for the response of formal inter-professional groups when forced to implement radical changes in their practices? The change in legislation was intended to:

1. Require professionals to adopt new goals and work within new frameworks of knowledge, which required significant shifts in their everyday working practices (i.e. what they do)

2. Present them with new meanings for their work (i.e. how they make sense of the legislation and apply that to their practice)

3. Impose new, closer forms of inter-professional working (across education, health and social care) which could be expected to raise their own set of challenges, conflicts and tensions.

The aim of this research, therefore, was to carry out a scoping study of professional and managerial perspectives on practice in relation to transitions for young people aged 16-25 with SEND. Their views were sought on the following aspects of the reforms:

1. differences in outcomes for young people aged 16-25 years with SEND

2. changes to professional working practices.

A further aim was to examine how far recent theoretical accounts of 'communal' collaboration at work could adequately describe the developments in the field that have occurred since this legislation was introduced.

Method

Design

To investigate professional and management perspectives with those aims in mind, a questionnaire approach would not have facilitated the articulation of the complex and nuanced views that we anticipated (Fife-Schaw, 2012). As the participants were geographically dispersed, telephone interviews were considered the most appropriate method of data collection, offering anonymity, territorial neutrality and the option of privacy (Novick, 2008). The interviews were arranged, conducted and recorded by a member of the research team in 2016, two years after the Children and Families Act (2014) became law.

Participants

The interviewees were sixteen professionals and managers from three local authorities that have responsibility for education and social services in their areas. Each of the participants was involved in planning and managing transitions for young people aged 16-25 with special educational needs and disabilities, working in a range of roles in education, social care and health (see Table 1).

INSERT TABLE 1 ABOUT HERE

The three local authorities were diverse in character, comprising a suburban metropolitan borough, a large rural county council and an urban unitary local authority within a non-metropolitan county.

Procedure

An educational psychology service manager from each of three local authorities identified a range of professionals and managers (education, social care and health) within their authority involved in transitions for young people aged 16-25 with SEND. Participants were emailed an information sheet about the aims of the project and their written consent was sought prior to the telephone interviews taking place. Following transcription, the audio files were deleted. Participation was in strict confidence: participants were allocated an identification number and any reference to identifiable data (names or local authorities) was removed. The interview covered changes to working practices, differences in transition outcomes, tensions arising since the change in legislation and effects of greater entitlement on young people. A copy of the interview schedule can be seen in Appendix 1.

The interview data was thematically analysed using Braun & Clarke's (2013) approach. The authors held regular review meetings to ensure consistency of coding and to review the conceptual structure of the data.

Findings

Four main themes were identified as shown in Table 2, along with the associated subthemes. We will now provide an overview of these, highlighting selected quotations that illustrate the key issues identified.

INSERT TABLE 2 ABOUT HERE

1. Views on the implications for professional activity

The first major theme captured statements made by participants relating to 'professional activity' that had occurred in response to the legislative changes. This included comments about 'Co-ordination across settings' and the integrated systems and services that had been developed following implementation of the Act. Participants described improvements in integrated working with other agencies, particularly social care, health and education. Consequently, they described their endeavours in finding more 'joined up' ways of working that had occurred as a result of service level reorganisations in response to the Act. For example:

"...geographically, teams were moved to be more closely located within the service. We were working under a broader umbrella of 0-25 SEND [and] went through a re-structure

so some teams were no longer separated between adult services and pre-16 or pre-18, they were collected under one service…. We had networks where virtual teams were aligned with certain professionals who were working in the same locality within the authority to try and ensure more seamless working between teams." (15 Education Manager)

The improved opportunities for interaction between professionals working in education, health and social care were commented upon by participants and examples were provided of different services, agencies, teams of professionals and other staff working together. However, there was also recognition of the need for further development. One participant described the newly established links between education and social care as 'fledgling' but improving. The tensions that had been exposed by interagency working were evident in the comments about different priorities, referral procedures and practices.

Participant statements categorised within the sub-theme 'Inter-professional working/relationships' captured the interpersonal dynamics involved when developing more aligned working practices with colleagues from different professional backgrounds. The requirement to attend joint meetings for the purpose of developing Education, Health and Care (EHC) Plans had improved access to colleagues working for other services and enabled individuals to begin to build relationships, considered by several participants to be essential to enhance multi-agency working. However, this had also exposed the fragmentation in the system, gaps in resourcing, differences in engagement as well as the challenges of working

with individuals who differ with regard to training, use of terminology, roles, responsibilities and expectations. For example:

"…one of the biggest things for me was trying to get to the point of having a shared language. We all have different names and definitions for disabilities and all sorts of things and it took a long time to actually understand each other - that sounds bizarre doesn't it? And people became quite heated in what a disability is and what it isn't and what it means in the education world and what it means in the adult social care world and how that differs from even children's social care world. … I think through lots of workshops and preparation for the Act and working, we've got transitions groups and county transitions groups, setting up a system for professionals to support together and really thrashing out some shared understanding of even the basic language and thinking about the legislative framework that we are all working to and understanding that has really meant that people just tend to get it now. They know where each other are coming from and they know it both in terms of how they are talking but the framework of the legislation they are working to. And don't forget it's all my health colleagues as well, because my service is integrated with health and social care, so they are all within that as well if the person needs it. But, yes it's that shared understanding and shared language that's the biggest payoff I think." (1 Social Care Professional)

Developing a common understanding of the priorities and constraints of working for different agencies was highlighted as important in the development of realistic expectations. For example, attendance at EHC planning meetings may be seen as a top priority by an individual in Education Management, but for a Speech and Language or

Occupational Therapist involved in direct delivery of an under-resourced service, this may not be the case.

Professional activity relating to report writing, documentation and paperwork was another sub-theme identified. Participants indicated that the requirements of EHC planning had contributed to improving collaborative professional working in that reviewing progress against agreed outcomes requires liaison, and involvement of families, leading to improved accountability. The inclusion of young people's views in EHC planning, a product of the legislative change, was welcomed and the inclusion of a new requirement, the appropriate reporting on mental capacity, was considered to be essential. Several professionals from different services emphasised the scale of the change experienced through the transfer from Statements of Special Educational Need that were required under previous legislation to the EHC plans that are now required.

In addition, difficulties with the EHC planning process were identified by participants who reported challenges with alignment of different recording systems adopted by services:

> *"… rather than the processes being synchronised across (area) we all have a different process. So there are slightly different forms and different approaches to reviews and EHC plans. There are a lot of similarities but there are slight differences that create another administrative demand."* (8 Education Manager)

In summary, efforts had been made to improve co-working across previous boundaries by combining and co-locating teams within local authority departments. Equally, and perhaps more important, there have been efforts to overcome conceptual and intellectual barriers

across sectors, e.g. seeking to develop a shared language for every aspect of professional activity. These trends have been accompanied by more radical organisational initiatives involving new processes and structures. This is the focus of the next theme which we will now discuss in more detail.

2. Views on the implications for planning and organisation

The second major theme concerned the changes in planning and organisation that were seen to be likely or necessary in the light of the reforms. Could existing routines and structures deliver what was now required under the new legislation? Some expressed cynical views on what was happening. Pressure for surface compliance with the new requirements was seen as undermining the need to uphold the new set of principles which were generally respected.

The first challenge arose from the resource demands of the new system. Initially this concerned tight deadlines for having Education, Health and Care (EHC) Plans in place. In a situation where resources had not changed this requirement was seen as incompatible with the introduction of a time-consuming process such as person-centred planning. An Education Manager described the pressures vividly:

So it was me and another officer and we were dealing with the whole of (authority) at the time and it was just impossible - we ended up with a stack of year 11 plans that had been converted and we just hadn't been able to type them up and issue them. They were left in a pile and they kept gathering dust and every now and again we would manage to type some up and get them out - actually at the end of the academic year

there were a significant number, and this was completely illegal and we knew it was

wrong, we hold our hands up. We knew we had failed to do what we were supposed to

do, we had completely blown all the legal deadlines out of the water, but we were just

with 1200 kids and two people it just wasn't happening. (12 Education Manager)

Other participants accepted that the short-term challenge of transferring between systems

would end eventually, but asserted that there would still be tensions around resourcing

after that. The new requirements were seen as "hugely positive" and "a fantastic

opportunity", but, in addition:

there's a lot of work to be done in a shrinking provision and in a shrinking service in

terms of the cuts that have been described over the next five years, so at a time when

our capacity is decreasing what we need to achieve is increasing so that is a big

difficulty. (14 Education Professional)

The fundamental changes in how staff were required to work involved a further initial cost -

releasing groups and individuals to train for the new system. In the Education Service this

included staff development for working with the 19-25 age group. Inequity of resource

allocation was raised by one social care professional who observed that there are stronger

services and support for some types of SEND (e.g. learning difficulties) than for others (e.g.

disengagement and low literacy levels).

The second major challenge in the area of planning and organisation arose from the need to

develop new organisational structures and practices to meet the requirements of the Act. In

some authorities this involved internal reorganisation of structures within Departments. For

example, in one Social Care division the disruptive transition from Children's Services to Adult Services was being smoothed by creating a single 0-25 Service that was designed to create:

A "new lifespan pathway… that is a lot more tailored around the ages and the life experiences of people and so the 0-25 will enable us to get rid of that cliff edge and enable people to continue with a level of stability and progression through and there won't be that dramatic change. (3 Social Care Manager)

Within departments such restructuring appeared to be less common than an allocation of new roles and duties to existing staff teams. When commenting on organisational structures, informants gave more attention to the stimulus the reforms had given to Inter-departmental collaboration:

What the Children and Families Act has meant is that we are much more joined up with education and there is that much more shared awareness and looking at shared outcomes and the Act has certainly done that… We've never worked as close together as we do now with education right the way through to 25. (1 Social Care Professional)

Such close working was not free of tension; disagreements continued about the allocation of resources, about cost shunting between organisations and about making time for the extensive discussions that were required to implement new ways of working. The progress that had been made still seemed a long way from "becoming a lot more integrated in our commissioning approaches", an aspiration of one Health Manager (9), but the development of shared understanding and shared language was no doubt a necessary, if not sufficient, condition for progress in that direction.

3. **Views on the implications of policy change for young people and their parents/carers**

The third major theme concerned the implications of policy change for young people and their parents/carers. Participants talked about the direct 'policy implications' that legislative change meant for the young people themselves. This was most evident in the move towards person-centered working, which involves attending more closely to the needs and wishes of the children and young people. The move away from 'professional-led working' to 'person-centered' working meant actively engaging young people in the process, inviting them to meetings and seeking their views on future decision-making:

> *There is also a lot more emphasis on the child and more within the process of particularly the EHC plans and the work we are doing around a SEND project in (authority), so I think in recent years there's been a noticeable shift in that. Prior to that I would probably have said that it was very much a professionals-led process and now I think there's a lot more emphasis on the child being at the centre or if the child has got complex needs or communication issues then we look at things in a very different way, or are a lot more creative in the way we work with children, trying to get other people's views and opinions.* (3 Social Care Manager)

For two of the respondents working as Social Care professionals, a person-centered approach could potentially improve the timeliness with which young people receive support and reduce the "uncertainty" that families feel when they are waiting for decisions.

Education managers who had been working with post-16 young people felt that the 'student voice' had been a central part of their practice for some time. However, they described actively promoting 'student voice' to wider staff in the authority, particularly in schools and colleges, by ensuring young people attended planning meetings. Actively engaging young people in the decision-making process was noted to be quite challenging in many instances. Young people with behavioural problems like ADHD were described as sometimes struggling with the meetings, and some young people did not want to attend. An education professional described situations where young people did not put forward their opinions, but others provided examples of young people taking an active role and working alongside them in choosing their own educational pathway. However, there were some concerns from professionals about whether the necessary resources would be available once a particular pathway had been identified.

Putting the young person's wishes at the centre of planning had implications for the parents/carers own 'voice'. The professionals and managers who were interviewed for this study reported only a few examples of tensions between the young person's wishes and the parents' viewpoints. When tensions among the key stakeholders did arise, respondents suggested this was borne out of parents' desires for what they saw as the right outcomes for their children and the anxieties around achieving that. By the age of 16, one Education Manager described parents as "*battle hardened"*, which raised challenges for building strong relationships to develop partnership working.

Education managers were particularly mindful of managing the complexities around 'developmental needs/mental capacity'. They discussed either providing an extended

provision or managing the educational pathways of young people with complex learning needs, particularly those who might not have traditionally remained in education. For one manager this meant developing services to target these students:

Also I need to ensure that the senior staff are informed of our statutory expectations, which would include our executives and governors and what I am much more involved in is developing services for students with much more complex needs who previously would probably have gone to other establishments, independent specialist colleges or schools, to look at how we can develop the service and provision within our local general FE college. (6 Education Manager)

One Social Care Professional was particularly worried that young people were making decisions about their lives which practitioners thought "unwise", something they would not have been able to do under the old legislation. Whilst this professional recognised that making mistakes was a part of how young people learn, for those who lacked the mental capacity to make decisions this could have "*frightening*" consequences. They went on to say that the Mental Capacity Act provided a clear framework around which they could work. Moreover, some young people with special educational needs had additional mental health issues, which could impact on the transition process at any point. This meant that education managers found themselves advocating on behalf of young people with, for example , employability teams in colleges. They were also encouraging sixth forms and colleges to think beyond chronological age to account for different developmental/mental capacity needs, particularly at the point when most pupils would leave establishments at 18 years of age.

4. The introduction of an emphasis on "outcomes" rather than "needs"

A guiding assumption behind the SEND reforms was that it was necessary to raise aspirations and improve support for young people in order to improve longer-term outcomes in adult life. Indeed, a greater emphasis on long term planning as a result of the legislation was commented on by the respondents in this study. For example, an education professional in a metropolitan borough said:

> *I think the focus in the past was what's next, not where are we aiming for… so I ask the question where do you see the youngster when they are 25 and then the question how do we get there?* (13 Education Professional)

Thus there was thought to be a much earlier commitment among those working with a child to plan for the achievement of long term outcomes in adult life and on effective transition in the 16-25 phase of life.

The participants in this study discussed the impact of the new focus on outcomes in two ways: its effect on the *content* of the plans and targets set for the future and its effect on the *processes* through which decisions were made about those plans. Because of the focus of the interviews on work with the 16-25 age group the content of outcomes was defined in terms of indicators of successful outcomes, for example with regard to key aspects of adult life. For these respondents in professional and managerial roles that meant first and foremost:

> *… gaining the functional skills that they need to be able to live an independent life once they do go out of an education system, whether that's at 25 or before that and that they have learned what they need to learn to be able to manage socially and as*

independently as they can. I mean one case, he's got quite a lot of medical needs so also that he is able to manage those medical needs, again independently as far as he can or with another young person supporting him. Because at the moment his mum supports him and that doesn't feel appropriate. I feel it would be good if he had a younger mentor who could then support him. And then that he was able to have some employment. (2 Educational Professional)

Three aspects of outcomes that would underpin an independent adult life style were highlighted in the accounts given to us – employment, residential arrangements and travel. For example, a social care professional in a metropolitan borough described her contribution to a recent discussion of the plans for work experience placements in a further education college:

…so you are offering work experience placements to people, please don't take them in your mini bus, please can you work with them to teach them how to get there and back independently or at least to be exposed to crossing the road, using a bicycle or using a bus. (7 Social Care Professional)

We noted that these lead professionals and managers did not generally mention some outcomes that many would consider important, e.g. "support in developing and maintaining friendships and relationships" (CoP, 2014, para 8.12). A notable exception was an education professional in a London borough who described a systematic approach:

So now, for successful outcomes, I am really thinking about the approaches to adulthood work, with the pathways work. So those four outcomes of friendship and

community links, of employment, of independence etc, I think that those four outcomes are critical to us. So, for example, now our educational, health and care plans 16+ - the outcomes we would base on those four outcomes and that's how we structure our thinking and our reports and our meetings and we're spreading that to other teams as well. The SEN team are liking that and using it more as a model. (14 Educational Professional)

Some accounts of what might constitute a successful outcome for a young person lacked that clear focus. This might occur, for example, because a respondent wished to record the high value they and their colleagues placed on a person's positive feelings about their situation. An education manager explained:

That the young person is happy and fulfilled and is able to achieve the things that they or we have determined that they should be achieving, whether that is because they are going off to a really lovely social care setting, or because they are going into a college or because they are going to have a bespoke package of learning, because we do those as well. (12 Education Management)

Much discussion of outcomes during these interviews concerned the processes and procedures for making decisions about the future. The introduction of a focus on outcomes was seen to require changes in how agencies and individual professionals worked with families. The pathway to an agreed arrangement should be seamless; the projected outcomes should be tightly defined with a set deadline for achievement; the family and the young person should not be left in suspense while decisions are made far away from them;

parents and professionals should place the young person at the centre of the process of identifying outcomes that they value (which may differ from parent or professional opinion). A social care professional in a county authority argued that:

…it is about saying to people it's your life, so what would you like to do about this? It's not your mum's life, it's not my life, it's yours. So I think our outcomes are becoming much clearer. (7 Social Care Professional)

However, merely inviting young people to express their wishes was not seen as sufficient. To articulate outcomes clearly appeared to be very difficult for many staff who had worked within a quite different framework. An education manager said:

It ('outcome') isn't a difficult concept but it's very, very different to what they have been doing. So that is hard… people need to think about that and how outcomes need to link. There needs to be that thread between the aspirations and the needs and the outcomes. People don't get that. People can be quite dismissive of aspirations and don't think about how they should be linking into the outcomes. (10 Education Management)

At the same time stakeholders acknowledged a serious tension between the ethical imperative to have a work outcome projected for everyone and the "realistic" recognition that supported employment opportunities are not universally available and that much of the community is not responsive to the needs of young adults with severe SEND.

Discussion

We will now review what the participants' accounts indicated about the processes involved in their local implementation of the national reforms. With regard to professional activity, participants voiced a commitment to the principles of the legislation and described local authority efforts to enhance cross-service communication and co-ordinated working practices. These included improving the physical proximity of services through co-location into the same premises, restructuring services and changing lines of accountability. Inevitably these adaptations, although associated with some positive changes, also led to some unintended consequences and tensions. Competing priorities, different referral procedures and practices had all become more exposed with increased contact between professional groups, as had awareness of differences in training, conceptualisations (and use of terminology), roles and responsibilities. These issues are not new. Twenty years earlier, Dessent (1996) described the inter-professional rivalries and the 'border disputes' that can hamper professional collaboration, along with administrative variations and differences in career structure, salary and professional priorities. In addition, Dessent highlighted how inadequate resources (finance, staffing and time) can add pressure and create barriers. The 2014 reforms were implemented at a time when there was a national programme of financial cuts to local authorities. This affected not only the resourcing of the direct services involved but also the commitment of time to planning the required changes. At best the formal cross-agency discussions created a momentum for empowering groups to develop a shared understanding of the different language that was used across the network to describe SEND. At worst, individuals worked in isolation within their historical settings to address new administrative requirements such as the conversion of old "SEN Statement" to new "EHC Plans", losing any sense of commitment to the principles underlying the legislation.

A guiding assumption behind the SEND reforms was that "with high aspirations, and the right support, the vast majority of children and young people can go on to achieve successful long-term outcomes in adult life" (CoP para 1.39). In public debate this contrasts with what was seen as a previous preoccupation with needs-related targets (Gorard, Rees & Selwyn, 2002). Participants indicated that a greater emphasis on long-term planning had occurred as a result of the legislation.

The obligation to see young people with SEND through a long transition to the age of 25 had implications at all levels of professional practice for our respondents. Teams that had previously only worked with YP to 19 years of age were now restructured to new teams whose responsibilities extended to age 25. The change required not only a re-thinking of what language should be shared to redefine these boundaries, but also a refocussing on defining developmental needs in ways that were not so age-boundaried. The shift to a wider age range for transition to adulthood did appear to have encouraged some participants to discard past normative assumptions about young people's transition to adulthood (Crafter & Maunder, 2012).

Our study does not provide evidence on the actual practice in the three local authorities studied, but there are indications that some of the key aspirations of the legislation are being realised as respondents talked extensively about placing the young person at the centre of decisions on the transition. There were challenges to this – issues with resources, negotiating young people's wishes or knowing what to do if they do not want to be involved. It was mentioned that respondents were keen for young people to express their wishes but were unsure what to do if they thought their views might lead to problems in

the future in a way that they themselves might not understand. When participants talked

about parents it was mostly to highlight tensions that had appeared between the young

person and the parent such as differing opinions about educational and living

arrangements.

This study has indicated that there have been shifts in professional conceptualisations and

reported practices with the implementation of the Children and Families Act (2014).

Although individual attitudes are highly resistant to change (Carnall, 1990), the challenges

brought about by mandated organisational change were associated with reappraisal of

beliefs, assumptions and practices and the possibility of longer-term cultural change, in line

with other studies (Schneider & Brief, 1996; Silvester & Anderson, 1999). Changes that

were reported by participants related to three areas. Firstly, a greater focus on planning for

longer-term outcomes (such as independent living and employment) rather than short-term

initiatives. Secondly, by extending the scope of the legislation to age 25, the professionals

we interviewed had started to move on from considering their clients as children, to viewing

them as adults and planning accordingly. Thirdly, the person-centred focus has meant that

professional expectations have started to change. It is no longer sufficient to take on the

mantle of the 'expert' who makes judgements – person-centred planning means that an

effective professional is increasingly seen an individual who can stimulate and interpret

what a young person with SEND tells them, then uses this information to focus and plan for

their longer-term future. This is reflected in the Communities of Practice framework which

recognises that certain views may be privileged over others. Rather than seeing an

organisation as an overarching structure with power at the top, it is better to conceptualise

the relationships and administration as a constellation connecting across boundaries. In this

instance, the SEND legislation had foreground the voice of the young people but in practice, this meant that the status of professional and parental knowledge could be side-lined, with what some of the participants saw as potential problematic consequences.

The SEND legislation thus required radical shifts in professionals' communities of practice as they engaged in new configurations of inter-professional working teams incorporating new knowledge, practices, skills, language and meanings (Rose & Norwich, 2014; Wenger, 1998). This extended to their sense of professional identity. In the past they might have been seen by others and have seen themselves as providing an authoritative source of informed guidance for clients and their families who were less familiar with the complex world of special needs and special provision than they were. Their professionalism then was, in part, defined by their skill in understanding in depth and in detail the nature of a child's special needs and the most effective way within local resources of meeting them. Following legislative change that resulted in significant change to everyday working practice, a key aspect of their professional skills was to become their ability to learn how their clients saw the situation. In addition, professionals were confronted with a new set of uncertainties because they were required to develop knowledge and skills to work with older young people and emerging adults (or to shift from focusing only on adults to encompassing youth as well). It was necessary to evolve new understandings of how young people with different forms of SEND experience transition to adulthood, whilst simultaneously negotiating the shared tensions and conflicts associated with engaging in inter-professional knowledge exchange (Frost & Robinson, 2007).

The accounts that some of our informants gave of the work of groups in their area indicated that what had begun as a project team with the role of agreeing local procedures developed some of the characteristics of a 'mandated' community of practice as they moved into the implementation stage (Nicolini et al., 2016). Their continuing operation included, as Wenger (1998) envisaged:

- *engagement* (where there is active involvement in meaning making with a degree of mutual confidence, competence, and continuity)

- *imagination* (where individuals develop new insights through reflecting on their and others' experiences of new systems)

- a*lignment* (where there is convergence, a shared vision of aims and methods, and a commitment to common procedures and structures).

However, the local planning and implementation groups were only part of the story. Some informants' accounts of the themes and subthemes in Table 2 focused outside the social learning that took place within their local community of practice. They highlighted aspects of implementation that they saw as the responsibility of central government. Examples included bureaucratic requirements for creating EHC Plans to replace existing SEN Statements and resource constraints that made it impossible for everyone to attend team meetings who needed to be there or to cover the additional work placed upon people as a result of the reconfiguration of services. The inter-professional teams that were established as a consequence of legislative change did not select themselves but were developed out of necessity (Wenger & Snyder, 2000). Therefore, healthcare professionals and managers in our study met with the kinds of resistances to change of cultural norms and structures seen

in other studies (see Kothari et al., 2015). Equally though, our respondents talked about how the new legislation opened up new possibilities such as changes to the focus on outcomes that addressed young people's needs to live their adult life and new ways of working with young people and their families.

At the time of this study, our respondents were still in the middle of attempting to undertake the changes necessary to fulfil the new legislation requirements. Nonetheless, we were provided with a tentative indication that the changes mandated by government stimulated the establishment of new normative processes and ways of conceptualising client services within communities of practice. In the short-term, some of the activities imposed a bureaucratic burden which participants found to undermine the implementation of the principles behind the legislation of which they approved. A follow-up study would provide insights into how the issues raised here were finally negotiated.

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Table 1. Participants

Participants	Example of Professional Role	No.
Education Professional	Educational Psychologist	4
	Deputy Head teacher of Special School	
Education Manager	Head of Learning Support (College)	5
	SEND Team Manager	
Social Care Professional	Social worker in Adult Social Care	3
	Social worker leading Transitions Team	
Social Care Manager	Assistant Director for Disabled Children	2
	Team Manager 16-25s with SEND	
Health Manager	Health Commissioner	2
Total Participants		**16**

Table 2. Transition Themes and Subthemes

1.Professional Activity What professionals do	2.Planning and Organisation Supporting the context that enables practice/delivery of service	3.Young People and Parents Implications of the Act for children, young people and parents	4.Outcomes Plans for the future
Co-ordination across settings: context, systems, services and authorities, integrated commissioning	**Resource demands:** getting over initial challenges, resource implications for different departments, staff training, the principle of equity	**Young people:** policy implications for young people with SEND	**Indicators of successful outcomes:** in relation to key aspects of adult life, young peoples' reported positive feelings about their situation, individualised, responsive transition experiences
Inter-professional working/relationships: between and about people and relationships within and across local teams	**Developing organisational structures and practices to meet requirements of the Act:** reorganisation within departments/agencies, developing new provision, inter-departmental collaboration – who pays for what, meetings, developing shared language	**Parental voice:** professionals managing tensions between the young person and the parent(s)	**Practical factors relating to outcomes:** processes and procedures, provider location, difficulties of implementation
Report writing, documentation and paperwork: creating EHC plans		**Developmental needs/mental capacity:** managing complexity	

Appendix 1

Transitions for young people aged 16-25 with special educational needs and disabilities (SEND) -
Telephone Interview Questions

1.   Please can you briefly describe your job in relation to transitions for 16-25 year olds with special educational needs and disabilities?

2.   Since the implementation of the Children and Families Act is the nature of your job different and in what way?

3.   How do you think your job will change in the future?

4.   What differences have you noticed in transitions outcomes for 16-25s as a result of the Children and Families Act?
   Prompt:
   - Have you noticed that you or those you work with think about things differently since implementation of the Children and Families Act?

4.   What do you perceive to be a successful outcome of transition post-16?
   Prompt:
   - Summarise the successful outcomes presented and probe about any aspects that are unclear/need development

6.   Legislation changes mean that children are given greater entitlement from 16 onwards to make decisions about their education. Has that led to any changes in your working practices generally?
   Prompt:
   - What have been the effects of this entitlement on young people and their families?

7.   Have you been in a situation where you have experienced tensions? Please give an example.

8.   Please give an example where a young person has had a successful transition that you or your team have worked with recently?

9.   Please describe a case where a transition has not worked well?

10.   Three key themes of the act are:
   i.   Outcomes focus
   ii.   Use of person centred planning
   iii.   Integrated professional working
Can you comment on these from your experience?
   Prompt:
   - Reiterate these themes to ensure that the interviewee has addressed all three sufficiently.

11.   How could transitions for young people (16-25) be made better in the future?