

***Doctorate in Professional Educational,
Child and Adolescent Psychology***



Programme Director: Vivian Hill

'Once they've got it, it's very hard for them to let it go':

Exploring the experiences of professionals when a young person's
Education, Health and Care plan (EHCP) is ceased.

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Student Declaration

I hereby declare that, except where explicit attribution is made, the work presented in this thesis is entirely my own.

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Abstract

The introduction of Education, Health and Care (EHC) plans in the Children and Families Act (2014) has led to significant changes in Special Educational Needs (SEN) provision. Despite rapidly increasing numbers of EHC plans each year, there is limited research on these statutory documents, with the majority of current literature focussing on parent/carer experiences of the application and planning process. No research to date has explored the ceasing of children and young people's (CYP) EHC plans, or how the EHC plan comes to an end. The current study aimed to provide information about the lived experiences of key SEN professionals involved in the ceasing process, to explore how ceasing might be better monitored, reviewed and implemented. This research aimed to: understand the processes and experiences around ceasing a plan; the impact ceasing may have had on the education experiences of CYP; how statutory recommendations about the ceasing process related to practice; and explore the role of professionals (including perceptions around EPs) in involving CYP in decision-making. This mixed-methods study used a combination of questionnaires (n=40) and semi-structured interviews (n=18) with Special Educational Needs Coordinators (SENCOs) and SEN Officers. Quantitative data was analysed through descriptive statistics to explore trends, while qualitative data was analysed using thematic analysis. Thematic analysis from interviews elicited three key themes: perceptions around EHC plans ceasing; process and procedural challenges; and factors that support decision-making processes. Implications include the need for a graduated approach to ceasing, and clearer guidance and pathways, which could help increase the capacity of key professionals to carefully review and update EHC plans. It is hoped that this would lead to the promotion of independent skills in CYP with SEN and enable smoother transitions away from EHC plans during ceasing processes.

Impact Statement

This research aimed to explore the perspectives of professionals who have been involved in the process when a child or young person's (CYP's) EHC plan is ceased before the age of 25. Findings have provided insight and understanding of the ceasing process, contributing to the growing body of literature and filling a gap in the literature both nationally and internationally of ceasing individualised education plans. By exploring the experiences of a national sample of SEN Officers and SENCOs, this research investigated: the processes and experiences around ceasing a plan; the impact ceasing has had on the education experience of CYP; how statutory recommendations about the ceasing process related to practice; and explore the role of professionals (including EPs) in involving CYP in decision-making.

Findings have contributed to both the academic literature and professional practice both for those working with CYP with SEN, and policy makers working towards successful transitions away from statutory support. The research highlights key implications for stakeholders which cover the following areas:

- The need for clear guidance and pathways within legislation that support education systems to work towards independent skills and preparation for adulthood for CYP
- Greater standardisation across local authorities, both in practice and paperwork, supports shared understanding of the processes and provides increased capacity to keep paperwork accurate and a graduated approach to ceasing.
- It was important to increase understanding about the graduated approach to supporting CYP with SEN, during the assessment and application stages of EHC plans as well as during annual reviews and throughout ceasing processes. Participants in the study expressed that this could help to move away from

perceptions held by parents/carers and professionals that EHC plans were a *golden ticket* to accessing support.

- Bringing the CYP into discussions about their support in a meaningful way as early as possible can support their move towards independence and self-advocacy. Clearer guidance and emphasis is needed on how to facilitate these processes and the professionals that should be involved.
- Professionals around the family and education settings need to support with the promotion of independent skills and preparation for adulthood as early as possible, including SMART outcomes that are reviewed regularly.
- Transitions to adulthood need to be highlighted early, with links with adult services, such as social care, being developed through adolescence rather than waiting until cessation.
- Minimal research is available on the ceasing of individualised plans, highlighting this research's potential impact across other services that work with CYP with SEN (e.g. health and social care), but also internationally within Individualised Education Plans (or similar) supporting the successful transitions away from statutory educational support.

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List of Abbreviations

ASD	Autism Spectrum Disorder
BPS	British Psychological Society
CYP	Children and Young People
DfE	Department for Education
DfEE	Department for Education and Employment
DfES	Department for Education and Skills
DoH	Department of Health
EHC	Education, Health and Care
EHCP	Education, Health and Care Plan
EP	Educational Psychologist
LA	Local Authority
SEMH	Social, Emotional and Mental Health
SEN	Special Educational Needs
SENCO	Special Educational Needs Coordinator
SEND	Special Educational Needs and Disabilities
PfA	Preparing for Adulthood

Chapter 1: Introduction

The publication of the Warnock Committee Report (1978) initiated a turning point in the education system; the report established the term 'Special Educational Needs' (SEN) and suggested that the needs of all children and young people (CYP) could, and should, be met in mainstream schools with additional resources, unless there was clear evidence of the contrary. The term SEN is now well established and describes CYP with significantly greater difficulty in learning than the majority of their peers or has a disability which prevents or hinders them from making use of the facilities generally provided for their peers within mainstream schooling (Department for Education (DfE), 2015).

Prior to 2014, Local Authorities (LAs) in England were following the legislation laid out in the Education Act 1981, which introduced Statements of SEN. These Statements laid out the needs of children with SEN, and the additional support required to help them to make progress within school. However, numerous enquiries and reviews into this system found that many were critical of Statements; concerns included growing conflict with parents/carers, a lack of clarity around the identification and provision for SEN, and unimproved outcomes for CYP with SEN (Lamb, 2019). Numerous legislative changes have since been introduced to address these issues and to support these CYP. The most recent reform was the introduction of the Children and Families Act (2014), which categorised SEN into four broad areas of need and support: communication and interaction; cognition and learning; social, emotional and mental health; and sensory and physical needs. Currently, in England, there are over 1.3 million CYP aged 0-25 recorded as having an identified SEN (Department for Education, 2021); CYP often have needs that cut across all these areas, and their needs may change over time.

Most CYP with SEN will have their needs met at school through SEN Support (Code of Practice, 2015). This level of support combines the previous system of School Action and School Action Plus, with a greater focus on outcomes, and provides additional support for those CYP who need it. The Code of Practice (2015) outlines that schools must follow the cycle of 'assess, plan, do, review' to support CYP with SEN. This cycle emphasises a graduated approach to support for CYP, promoting independent skills where possible and reviewing progress regularly. This guidance stipulates that schools should provide the first £6,000 of additional support for those pupils.

For CYP with more complex needs, a school may seek advice, assessment and intervention from external agencies (e.g. Educational Psychologists (EPs), Speech and Language Therapists, Occupational Therapists) (DfE, 2001). Children and young people requiring provision above what the school can provide at a SEN Support level may be eligible for additional funding from their LA following a statutory assessment process.

1.1. The Special Educational Needs and Disabilities Reforms

Since September 2014, LAs within England have been working to implement significant reforms to law and policy governing SEN under the Children and Families Act (2014). To support the implementation of these reforms, the DfE published the Special Educational Needs and Disabilities (SEND) Code of Practice (2015) which explained the duties of LAs, health bodies, schools and colleges to provide for those with SEN. The SEND Code of Practice emphasised that practitioners across education, health and social care must work together to support CYP with SEN in gaining independence, self-advocacy and preparing for adult life. One major SEN

reform was the introduction of Education Health Care (EHC) plans in place of the Statements of SEN.

The purpose of introducing this new system was to: increase participation of CYP and parents/carers in decision-making at every level; provide a more explicit focus on aspirations, outcomes and successful transition to adulthood; ensure close co-operation between education, health and social care; and extend support up until the age of 25 (DfE, 2015). The key changes in legislation are laid out in Figure 1 (Sales & Vincent, 2018).

Figure 1

Key differences between former and current Codes of Practice (Sales & Vincent, 2018)

Code of Practice	Former (DfES, 2001)	Current (DfE, 2015)
The name of the formal plan for those with complex and on-going needs	Statement of special educational needs	Education, Health and Care plan
Age range to which the code was/is applicable	0–19	0–25
Maximum time for completion of the statutory assessment process	26 weeks	20 weeks
Collaboration between education, health and social services	Recommended	Required
The involvement of children, young people and their families	Recommended	Required
Ascertaining the views of children, young people and their families	Recommended	Required
Identification and recording of children and young people's aspirations	Recommended	Required
Identification and recording of defined outcomes for children and young people	Recommended	Required

1.2. Education, Health and Care Plans

An EHC plan is for CYP aged up to 25 with SEN who need more support than is available through the SEN support level of provision. A request can be made by anyone who thinks an assessment may be necessary, including teachers, parents/carers, doctors, professionals, and young people aged 16 – 25. To inform their decision about whether to issue an EHC plan, the LA must take into account a wide range of evidence, including academic attainment or developmental milestones; evidence of action already undertaken and progress; and information about the nature, extent and context of the SEN (DfE, 2015). The EHC plan must include sections outlining the CYP's education, health, and social care needs, as well as the outcomes and provisions required to meet those needs. Crucially the views, interests and aspirations of the CYP and their parents/carers form an integral part of the plan; outcomes should always enable CYP to move towards their long-term aspirations and independence. Once a LA has agreed to complete an EHC needs assessment, the final EHC plan must be issued within 20 weeks of the request, which is shorter than the 26-week timeframe under the previous system. Once agreed by the LA, an EHC plan allocates additional resources/funding to the school to support the CYP in their key areas of need. The plan must be reviewed at least every 12 months to evaluate the effectiveness of the support and its impact on the CYP's progress, ambitions and aspirations. This *annual review* process may lead to changes in the outcomes, provision or educational establishment. In some cases, where it is agreed that the CYP no longer requires the provision outlined, the EHC plan may be discontinued or ceased (The Special Educational Needs and Disability Regulations 2014, 2014).

1.3. Experiences of CYP and Families within the Process

The Pathfinder programme (Thom et al., 2015) and follow up research by Adams et al., (2017, 2018) demonstrated benefits to the EHC reforms, particularly around the initial application process and parental satisfaction with the content and support outlined in the plan. However, concerns remain about the inclusion of CYP in the EHC process and their move towards independence; Gaona, Castro, et al. (2019) emphasised that it was still common for the voices of CYP to be written in the third person and aspirations assumed. This suggests that further research is required to explore the voices of CYP within the process and the promotion of independence across education and future-life skills. Further research in this area could be used to explore how best to support CYP and families to feel ready when the EHC plan comes to an end.

1.4. Trends Since the Implementation of the Reforms and Increased Costs

Before the introduction of EHC plans (Children and Families Act, 2014), the number of Statements of SEN were relatively stable, ranging from 236,750 in 2006 (DfE, 2010) to 237,111 in 2014 (DfE, 2019).

Recent reports from the DfE (2021) indicate that numbers of EHC plans have increased year on year since their introduction to an estimated 430,697 at the end of 2020, an increase of 10% from 2019. Table 1 outlines the increase in percentage of pupils accessing EHC plans or SEN support. Perera (2019) suggested that a combination of factors may be contributing to these rising numbers, including population growth; increasing levels of poverty; the expanded cohort up to the ages of 25; increased diagnoses of learning disabilities or conditions; increased parental expectations on entitlement; and medical advances leading to more children surviving

disabilities and living longer. Additionally, Perera (2019) argued that the funding and workload capacity required to create, maintain, fund and monitor these plans may divert resources away from providing guidance and support for pupils at a SEN support level. This suggests that numbers of EHC plans could continue to rise unless clear pathways are developed to support independent skills over time and reduce the need for 'life-long' intensive support.

Table 1

Percentage of pupils, by SEN Provision, 2015 to 2020

	2015/16	2016/17	2017/18	2018/19	2019/20
EHC Plans / Statements of SEN	2.8%	2.8%	2.8%	3.1%	3.3%
SEN Support	11.6%	11.6%	11.7%	11.9%	12.1%

To explore trends in spending within Children's Services, Stanford et al. (2019) worked with nine LA's to map the number of children within different vulnerable categories and their associated spends. Within the SEN population, 74% were receiving SEN Support, with the remaining 26% receiving an EHC plan. The proportion of money spent on children receiving SEN support was 10%, while EHC plans made up the other 90%. Within these nine LAs, EHC plan costs ranged from £8,300 to £207,700. Additionally, the top 1% of the SEN population who were supported by specialist provision received support accounting for 17% of the total cost for SEN. This highlights the rising financial pressures on LAs to support children with SEN.

The rapidly increasing number of EHC plans are one of the key reasons that the majority of LAs continue to overspend on their high-needs budgets, with a net overspend of £232 million in 2018 (National Audit Office, 2019). The primary way LAs

have been funding this overspend is by using dedicated school grant reserves built up in previous years. However, this reserve has reportedly dropped by over 900 million – from £1,070 million at the start of 2014, to £144 million at the beginning of 2018 (National Audit Office, 2019). The House of Commons Education Committee (2019) completed a report which outlined their concerns with the 2014 reforms based on information submitted by LAs, charities, independent services, parents/carers, CYP and schools. They concluded that the DfE had failed in their responsibilities to provide clear legislation, guidance and funding to carry out the 2014 reforms. Difficulties around unclear legislation, coupled with financial deficit, has led to the number of SEND and disability tribunal hearings doubling in the past two years (Hunter et al., 2019), with concerns raised about the financial impact on both families and LAs. As a result, case law has developed over time through the Upper Tribunal or High Court to add specificity to the legislation. For example, following *East Sussex County Council v TW* (2016), the Upper Tribunal gave guidance on the degree of specificity necessary in EHC plans and outlined that some degree of flexibility may be necessary when the child is placed at a specialist provision.

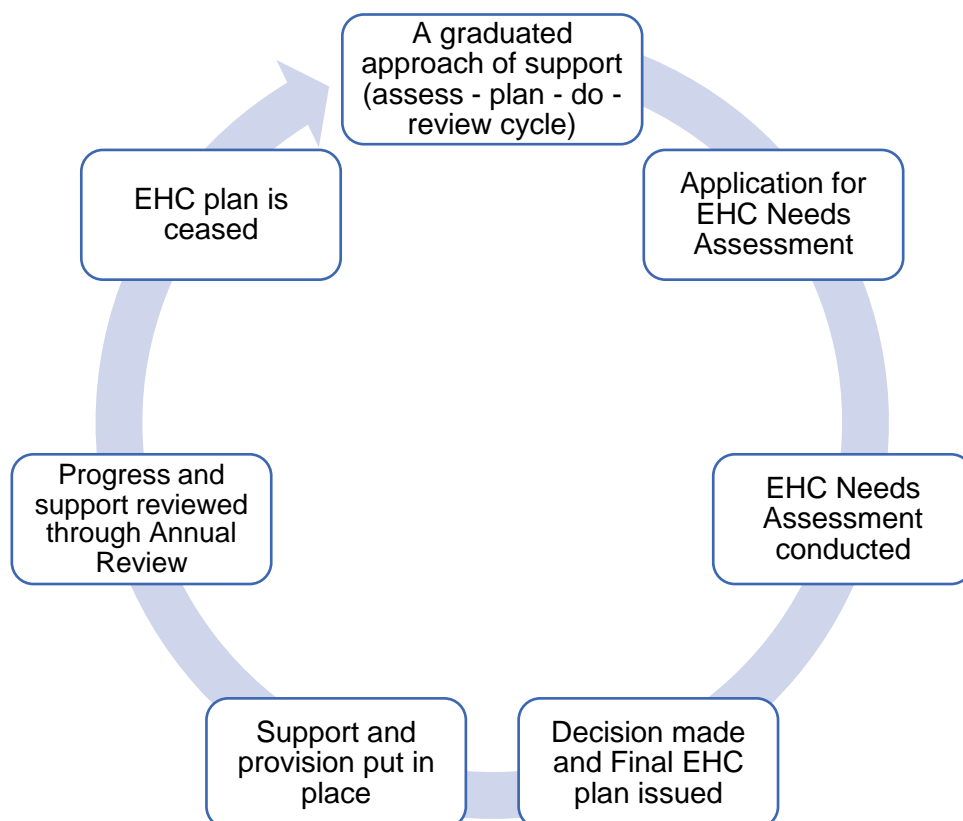
These reports demonstrate the unsustainability of the current system. Increasing numbers of EHC plans, coupled with the associated costs and timeframes, has meant that LAs have had to prioritise the application and assessment of CYP for EHC plans, or risk facing legal scrutiny and increased costs associated with tribunals. This leaves little opportunity or capacity for LAs to allocate time and resources on authentically monitoring and reviewing existing plans to ensure that children are making progress towards their outcomes and moving towards independence and adulthood.

1.5. Ceasing Plans

Although the Code of Practice (DfE, 2015) and SEND Regulations (Children and Families Act, 2014) provided advice on each part of the EHC plan cycle (see Figure 2), there is limited information on the criteria needed to cease a plan. The guidance outlines that a plan can be ceased when the LA decides that it is no longer necessary; for example, when the CYP no longer requires the special educational provision specified in their EHC plan, if their educational outcomes have been achieved, if the young person leaves education or enters higher education, or they have reached the age of 25.

Figure 2

Life-cycle of the Education, Health, and Care Plan



Despite considerable increases each year in CYP receiving EHC plans, the number of plans that are ceased remains relatively low, with the majority of EHC plans ceasing when the young person leaves education (see *Table 2*) (DfE, 2020). Table 2 also highlights that only a fraction of EHC plans were ceased because the CYP no longer required the additional support provided by the plan, suggesting that a smaller percentage of CYP have plans ceased because they have developed sufficient independent skills.

Table 2

Education, Health and Care Plans Ceased in England Between 2015 and 2019 from DfE (2020)

Reason for ceasing	2015	2016	2017	2018	2019
EHC plan discontinued as special needs were met without an EHC plan	36	577	641	1,344	899
EHC plan discontinued because pupils left school at the end of compulsory schooling or after	398	1,081	3,027	7,108	11,146
EHC plan discontinued for other reasons	145	184	253	617	653

The topic of ceasing plans appears to be particularly pertinent when CYP are reaching the end of their secondary education. In their recent report, the House of Commons Education Committee (2019) outlined concerns that EHC plans were being ceased against the wishes of the CYP and families, and that there were no clear transition plans after secondary education. In their report, parents/carers described how LAs had 'blanket policies' and were concerned that EHC plans were being ceased

based on the CYP's age and assumptions that they had met their outcomes (Education Committee, 2019, p.69). Parents/carers were concerned that young people with SEN were moving to post-16 provision without the support they had previously required and had not been included in the decision-making process. In contrast to parental views, LAs responded that it was challenging to cease plans because of the ambiguity within the SEND Reform legislation on the definitions of progress and outcomes (Education Committee, 2019). In their evidence to the Education Committee (2019), Telford and Wrekin Council argued that the Children and Families Act (2014) stated that CYP were entitled to an EHC plan up to the age of 25, until they had made sufficient progress towards their educational outcomes. However, councils argued that there was no legal definition of what constitutes progress, or clear criteria about when outcomes have been achieved. Moreover, Hampshire County Council explained that the outcomes within EHC plans are not legally contestable in a tribunal, which makes it difficult to make decisions or challenge whether outcomes have been achieved. This lack of clarity about when a plan can be ceased has led to tension between parents/carers and LAs, with an increasing number of appeals to the first-tier tribunal being made each year since 2014, solely around whether to cease or to maintain an EHC plan (DfE, 2019).

1.6. Rationale for the Current Study

The introduction of EHC plans in the Children and Families Act (2014) has led to significant changes in SEN and the way LAs work. Despite rapidly increasing numbers of EHC plans each year (DfE, 2019), there is limited research on EHC plans, with the majority of current literature focussing on parent/carer and family's experiences of the application and planning process (Adams et al., 2017, 2018; Palikara et al., 2018). National reports on EHC plans have highlighted increasing

numbers of parents/carers and LAs who report dissatisfaction with legislation surrounding EHC plans, and the Education Committee (2019) emphasised that the lack of clarity around when a CYP stops having SEN, or when an EHC plan can be ceased, needs to be urgently addressed. No research to date has explored the ceasing of CYP's EHC plans or how the EHC plan cycle comes to an end. This current study aimed to explore the perspectives of professionals (Special Educational Needs Coordinators (SENCOs) and SEN Officers) who have been involved in the process when a CYP's EHC plan is ceased before the age of 25. These professionals play an important role in the ceasing process, holding information about CYP, families, processes and procedures within school settings or local authorities. Additionally, they are key agents within the ceasing process, often providing legislative and procedural information to families, indicating their understanding of the legislation themselves. Although parent and CYP views warrant further research within the area of ceasing, this study focussed solely on the view of professionals to provide greater depth of understanding of the ceasing process and systemic factors impacting practice. Additionally, within the current of the coronavirus outbreak, accessing this niche sample of parents and CYP would have been particularly difficult.

The findings from this research will help to provide more information about the experiences of those involved in the ceasing process, in order to explore how ceasing might be better monitored, reviewed and implemented. By exploring the experiences of professionals, this research aims to: understand the processes and experiences around ceasing a plan; the impact ceasing has had on the education experience of CYP; how statutory recommendations about the ceasing process related to practice; and explore the role of professionals (including EPs) in involving CYP in decision-making.

Chapter 2: Literature Review

This systematic literature review aims to critically evaluate the current literature relating to the EHC plan lifecycle and the experiences of those involved (e.g., parents/carers, CYP, professionals). This review will first evaluate literature on the Code of Practice (2015) and the development of EHC plan processes. Then, literature on the key components of the EHC plan lifecycle will be evaluated, including application and assessment processes; developing outcomes; the maintenance of EHC plans and support or experiences throughout the process; annual review and transition process; and cessation.

Studies for this literature review were identified systematically from six academic databases including 'Education Resources Information Center (ERIC)', 'PsycINFO', and 'British Education Index (BEI)'. The search included articles from 2001 until 9th May 2020, using variations of terms for Education, Health and Care Plans relating to SEN. The search strategy for identifying key terminology and relevance of literature is presented in *Appendix A*, including the six relevance questions used to calculate relevance scores and inclusion criteria. Nine pieces of literature were inaccessible through online resources (see appendix A: Table 22), the absence of these was not deemed to impact on the current study or provide further insight into the EHC plan lifecycle. In total, 26 pieces of literature were reviewed.

2.1. Perceptions on the SEND Reform: The Code of Practice

In 2014, EHC plans were introduced following reforms within the Children and Families Act (2014); alongside these reforms, the SEND Code of Practice was published to provide guidance on the identification, assessment and support for SEN (DfE and Department of Health (DoH), 2015). This section explores literature related

to perceptions on the specificity and ideology behind SEND frameworks related to EHC plans, namely the Code of Practice (2015).

Specificity of the SEND reforms

Allan and Youdell (2017) approached the Code of Practice (2015) by 'reading the code as code' (p.73). They argued that the Code of Practice (2015) was full of dislocated policies, Statements and hidden omissions, and that there were aspects central to the previous Code of Practice (2001), which were now omitted without explanation. The authors described the new Code of Practice (2015) as 'empty architecture' (p.72), which left those who wanted to access or use the document (e.g. professionals, parents/carers and CYP) responsible for navigating, making meaning from or 'furnishing' it (p.76). Allan and Youdell (2017) argued that the Code of Practice (2015) lacked specificity and referenced different terminology (such as SEN, SEND, Special educational needs or disabilities etc.), without clearly outlining the nature of these terms. This lack of specificity may create difficulties for LAs when deciding who meets the criteria for an EHC plan, with LAs already facing an influx of tribunals related to their decisions (Education Committee, 2019).

Additionally, Allan and Youdell (2017) believed that the division of SEN categories into the four broad areas of need (communication and interaction; cognition and learning; social, emotional and mental health; and sensory and physical needs) has created a need to reduce CYP with SEN to data representation, to be categorised and addressed. Allan and Youdell (2017) stated that the Code of Practice (2015) also lacked specificity around pedagogic and curriculum practices, which made it difficult to identify what CYP could or should be entitled to. The authors argued that *evidence-based practice* is a term regularly used within the legislation, but the guidance offered little insight into what this meant, emphasising the reliance on professionals to dictate

provision and provide outcomes. Although Allan and Youdell (2017) provides a useful insight into the Code of Practice (2015) from a unique lens, it does not consider the legislation or other guidance which is still relevant and addresses some of their concerns, e.g., Children and Families Act (2014).

In contrast, Harwood and Allan (2014; p.75) believed that the lack of specificity around diagnostic labels (e.g. within the Code of Practice, 2015) could be a positive move away from the 'psychopathologization' of CYP with SEN. Their critical analysis of empirical studies highlights the need to move towards inclusion and equality within education, with a need for multi-agency working to support development.

Ideology Behind the SEND Reforms

Palikara et al. (2019) explored the views of 349 professionals (including EPs, SENCOs, and school staff) to understand their perspectives on changes within the new Code of Practice (2015). They conducted online surveys with scaling questions and follow-up qualitative questions to expand on participants' ratings. Overall, many professionals agreed with the ideology behind the introduction of EHC plans. However, qualitative data showed a discrepancy between these ideological views, and the practical implementation of the SEND reforms, which were seen as being constrained by tight timelines, budget cuts and difficulties collaborating between education, health and care.

The majority of professionals (67%) surveyed by Palikara et al. (2019) agreed with the intention of replacing Statements of SEN with EHC plans, acknowledging that they appeared more person-centred, holistic, and emphasised the importance of parental co-production. However, others communicated that it felt like 'just a change of format' (Palikara et al., 2019, p.13) and that the money and time spent changing the system was not worth the impact it could bring. Participants within Palikara et al.'s

(2019) study also appeared to reference elements of 'empty architecture' within the reforms (Allan & Youdell's, 2017), expressing their dismay at a lack of EHC-related example templates, which has led to each LA developing their own paperwork and procedure, and creating further work for schools and professionals when navigating systems. Palikara et al. (2019) highlighted that some SENCOs had up to 17 different types of EHC paperwork. Palikara et al.'s (2019) research provided insight into the experiences of professionals within the SEN reforms, however, although conclusions are drawn across professions the majority of participants were EPs or SENCOs (73%), highlighting that findings may not be generalised across other professions.

In contrast, Hunter et al. (2019) disagreed with how the ideology of the SEND reforms were laid out, arguing that the reforms have done little to challenge the deficit model of CYP with SEN. Hunter et al. (2019) outlined that one of the debates about the current SEND system was that EHC plans were fundamentally needs focussed and infer a 'within-child' view of children with additional needs. This 'within-child' view fits within a medical model of disability, which implies that people are disabled by their impairments. The alternative ideology is a social model of disability, which infers that disability is caused by the way society is organised, rather than by a person's impairment or difference (Shakespeare & Watson, 1997). This means that environmental factors (e.g., learning environment, family dynamics and adults' expectations) might be considered when examining barriers that make learning or independence difficult for CYP with SEN. However, Hunter et al. (2019) suggested that the current SEND systems focus too much on looking for the 'problem' within CYP rather than acknowledging wider systemic factors impacting their learning (p.2). Hunter et al. (2019) provides a critical review of EHC plans and the legislation,

however, a lack of evidenced systematic approach to the literature drawn on and the broad implications decided on indicate a lack of objectivity.

2.2. Application and Assessment Processes for EHC Plans

This section explores literature related to the application and assessment process for EHC plans. This includes research on SENCOs', wider professionals' and parents/carers' perceptions on EHC plans.

SENCOs' Perceptions on EHC Plans

Managing Parental Misconceptions. Boesley and Crane (2018) used qualitative semi-structured interviews to explore the experiences of 16 SENCOs from multiple LAs on initiating applications for EHC plans. One key theme raised by SENCOs was that parents/carers had little understanding of how the processes involved in an EHC plan worked, with SENCOs feeling pressured to be the experts in relieving parental anxiety. SENCOs emphasised that if CYP were making progress and they were 'fine' (p.40), then they did not need a plan, regardless of diagnosis. They felt that parents/carers still saw the EHC plan as a 'magic wand' (p.40), with increased levels of support equalling more progress. Boesley and Crane (2018) hypothesised that transparency around processes, coupled with increasing parents/carers' understanding of plans and processes, would help alleviate some of the misconceptions about EHC plans and unrealistic expectations placed on SENCOs. However, the use of voluntary sampling may have encouraged those who wanted to express grievances with EHC processes to participate, and this sample of SENCOs may not be representative of the wider population. Boesley and Crane (2018) highlighted that person-centred practice was a crucial improvement from the SEN reforms, allowing tailored outcomes and inclusion by involving CYP and listening to their hopes, dreams and aspirations. Not only does person-centred practice support

CYP's feelings of choice and control over their learning, but it could help alleviate parental anxiety – emphasising that their child is at the centre of EHC plans, and supporting the development of aspirational outcomes.

Managing Parental Expectations. Gore (2016) used semi-structured interviews with five SENCOs within one LA. SENCOs expressed that they had to take on many roles, not only leading as the SEN expert within schools and having to be knowledgeable about EHC plan processes, but also supporting CYP and families directly. This led to the whole process becoming 'emotionally draining' (p.112). This emotional impact led to the perceived need for reassurance from other professionals (such as EPs or other SENCOs) to maintain their self-confidence. Some SENCOs judged that being able to secure an EHC plan demonstrated their competency as a SENCO; this meant that denied applications were met with feelings of inadequacy. The SENCOs experienced feelings of empathy and attachment to families they worked with during EHC plan applications. These feelings seemed to provide the motivation to complete the EHC plan process; however, these emotions made it difficult to raise difficult questions or challenge parental expectations around the relevance or need for the additional support. The SENCO role is highlighted in the Code of Practice (2015) as being core to supporting the inclusion and progress of SEN children, monitoring their development and promoting their independent skills, not just applying for and giving advice on EHC plans. However, Gore's (2016) sample was limited to five SENCOs from one LA shortly after the reform implementation, with participants volunteering to take part – potentially with their own motives for doing so.

Wider Professionals' Perceptions on EHC Plans

Person-Centred Practice. Redwood (2015) conducted a study looking into professionals (SEN officers and EPs) perspectives of the EHC plan assessment

process. They found that the majority of professionals were happy with the new process, felt they had received information and support about how the new assessment process would work, and were satisfied that CYP and parent's views were represented more accurately than in Statements of SEN. However, Redwood (2015) highlighted that professionals found it challenging to complete their duties during the assessment within the stipulated timeframe – often working outside their hours or having to prioritise it over other work. Redwood (2015) found that more face-to-face involvement with parents/carers throughout the process ensured that they had a greater understanding of EHC plans and were able to play a larger role in advocating for their child's needs. However, Redwood (2015) also found that only 21% of professionals felt that CYP's preferred method of communication was used during the assessment process, which raises concerns about whether the process was truly as child-centred as planned. Redwood's (2015) study was completed only a year after the reforms were introduced with a relatively small, localised sample (n=31), therefore there was likely a degree of transition where professionals were adapting to this new statutory process.

Multiagency Working. Palikara et al. (2019) study also looked at professionals' (including EPs, SENCOs, and school staff) perspectives of the assessment process since the implementation of the reforms. Ninety-two percent of professionals agreed with the intention of the reforms to improve multiagency working; yet qualitative data indicated that these aims have not lined up with reality, with professionals stating that they had not seen an increase in involvement from any other agencies, and schools were still perceived as undertaking the majority of the work during EHC plan processes. Professionals within Palikara et al.'s (2019) study also expressed concerns that those in charge of writing EHC plans (e.g. EHC Coordinators)

had little knowledge or training on SEN, which created inconsistencies both within and between LAs and a lack of specificity into how to promote independent skills and progress for the CYP. This was concerning as EHC plans are reportedly only as good as the professional advice that is provided during the need's assessment process (Education Committee, 2019). While Palikara et al.'s (2019) study demonstrates the discrepancy between ideology and implementation within the SEN reforms, it is important to note that 72% of participants were from London and the South East, indicating that these findings may be different across the rest of the country.

Parental Perceptions on EHC Plans

Participation in Decision-Making Processes. Eccleston (2016) used semi-structured interviews to explore the experiences of six families related to EHC plan assessment processes. Findings within this study lined up with professionals' perspectives (Boesley & Crane, 2018; Gore, 2016; Redwood, 2015) whereby parents/carers reported that they found it challenging to understand the EHC plan assessment process. This was also the case with the CYP involved, who expressed that the assessment process felt as though it was happening *to them* rather than *with them*. Families reported that they often had to rely on professionals to inform them about the process, resulting in a sense of power hierarchy throughout the process, with professionals appearing to hold the 'dominant position' (p.123). However, when authentically supported to engage and understand the purpose of the process, parents/carers and CYP reported feeling empowered to participate. While Eccleston (2016) provides a useful insight into the experiences of parents/carers and CYP during the EHC plan assessment process it is important to acknowledge their small sample size from one LA. Eccleston's (2016) research was conducted shortly after the

introduction of the reforms and may not be representative of families' experiences now.

Bentley (2017) completed a similar study, interviewing eight parents/carers whose children had recently received an EHC plan. As with Eccleston's (2016) research, parents/carers in Bentley's (2017) study reported feeling reliant on others to inform them of EHC plan processes, and also felt frustrated at the amount of time it had taken for their children to be assessed and have their plan granted. Parents/carers thought that this was lost time and that their child was left unsupported; this feeling was heightened among parents/carers who had applied more than once. These findings highlight the lack of information or guidance for parents/carers around the graduated approach to SEN support, as specified in the Code of Practice (2015). Moreover, parents/carers in both studies (Bentley, 2017; Eccleston, 2016) expressed frustration at decision-making processes, which were seen to happen out of sight by unknown professionals. Parents/carers reported that criteria for decisions about whether to issue an EHC plan were not clear, and it seemed to be down to chance. This left parents/carers with feelings of uncertainty and isolation – sometimes feeling under pressure to perform or act as fierce advocates for their children. Bentley (2017) explained that these feelings were often met with high emotional stress and anxiety for some parents, with an impression that they had to 'fight' for their children's rights, which often continued after the plan was granted (p.68). This lack of clarity around decision-making processes highlights the importance of undertaking research that explores how key decisions, such as ceasing EHC plans, are made to enhance parent/carer and CYP participation. While Bentley's (2017) study provided an in-depth exploration of parent's perceptions of the EHC needs assessment process, the small sample size from one LA limits wider generalisability. Additionally, Bentley's

(2017) sample of participants had recently had EHC plans approved, potentially accessing a pool of parents/carers whose experiences were very raw.

EHC Plans as a Protective Factor. A key theme present in both Eccleston (2016) and Bentley's (2017) studies were that parents/carers felt anxious about their children's future and were concerned that their children would be left without any security of provision if they did not secure an EHC plan. Eccleston (2016) concluded that families perceived the EHC plan as a 'safety net' for their children's future, and future transitions to educational provisions until 25 years old (p.117). This reinforces the importance of information and support being available to aid professionals in managing parental expectations. It also indicates that parents/carers appear to lack confidence in the broader systems; that without the EHC plan, their child's needs may not be met. Again, while an interesting finding, the small sample size limits the wider generalisability of these perceptions.

Cochrane's (2016) study exploring the experiences of three families regarding EHC plan processes also highlighted perceptions around EHC plans as a protective factor. Although the small sample size limits transferability, findings echoed those from Eccleston (2016) and Bentley (2017). Families within Cochrane's (2016) study felt that schools would be unable to provide effective support without funding, concluding that EHC plans were the only way to access adequate support. Families often felt reliant on this process to access planning and provision for their children's SEN, and Cochrane (2016) raised the question about why effective planning appeared to be dependent on the EHC plan process. The SEND reforms intended to develop a more transparent process towards supporting children with SEN and keep CYP and parents/carers at the centre of the process. However, this perception held by parents/carers that EHC plans are the only way to access support suggests that EHC

processes are not always clear and families may not always experience a graduated approach to support for CYP. Findings from Cochrane's (2016) study suggest that EPs are well placed to support understanding and development of SEN provision within schools, both with staff and parents/carers, helping to develop this graduated approach to support while promoting CYP's independence (Cochrane, 2016). Educational psychologists have a role in promoting genuine child involvement in EHC plan processes, by upskilling SENCOs to facilitate CYP participation and working directly with students to elicit views; developing SMART outcomes which are ambitious and aspirational; and promoting independence and preparation for adulthood for CYP (DfE, 2015).

2.3 Developing Outcomes for EHC Plans

Outcomes represent a central feature in EHC Plans. The Code of Practice 2015 defines an outcome as: 'the benefit or difference made to an individual as a result of an intervention. It should be personal and not expressed from a service perspective; it should be something that those involved have control and influence over, and while it does not have to be formal or accredited it should be specific, measurable, achievable, realistic and time-bound (SMART)' (DfE, 2015. p.160). The provision outlined in EHC plans are required to meet those outcomes. Research demonstrates that the inclusion of CYP and parental views leads to better quality outcomes that are ambitious and work towards aspirations (Adams et al., 2018; Castro et al., 2019), helping to prepare CYP for adulthood and transition away from the support outlined in the plan (Gaona, Castro, et al., 2019). The completion of outcomes is one of the few stipulated reasons an EHC plan may be ceased.

Specificity of Outcomes. Sales and Vincent (2018) suggested that in reality, outcomes within EHC plans were not always SMART. In their small-scale study,

professionals and parents/carers alike were concerned about how measurable or realistic outcomes were. Parents/carers expressed little confidence that the provision outlined in EHC plans would be delivered, reinforcing Bentley's (2017) findings where parents/carers felt that outcomes and targets were not ambitious enough and did not address CYP's 'real issues' (p.87). Similarly, in the Education Committee (2018) report, school settings had raised concerns about outdated, inaccurate information and non-specific outcomes in EHC plans, which made it difficult for those involved to identify or develop pathways towards CYP independence. Professionals and parents/carers in Sales and Vincent's (2018) study emphasised that when outcomes and provision were not specific or quantifiable, this could compromise CYP's progress. Despite these challenges, participants did view the introduction of outcomes into EHC plans as an improvement on the previous Statementing system, however limitations around sample size may impact the generalisability of findings.

Quality of Outcomes. Castro et al. (2019) highlighted that the use of the term '*should*' within the legislation implies that outcomes do not necessarily '*have*' to be SMART (p.43). Castro et al. (2019) aimed to evaluate the quality of outcomes for 236 EHC plans across 11 LAs using the Goal Functionality Scale III (McWilliam, 2006). This scale was developed to evaluate outcomes written for CYP with SEN and has high levels of inter-rater agreement. Castro et al. (2019) provided evidence which suggested that a significantly high number of low-quality outcomes were evident in EHC plans, raising concerns about the quality of corresponding provision. The quality of outcomes seemed to be reliant on the LA, type of school, and to some extent, the CYP's need. Special schools were found to produce higher quality outcomes in some areas, e.g. specifying a routine, timeframes, targeting skills and the expected behaviour, and the researchers put this down to higher SEN expertise in special

schools. This is supported by Palikara et al. (2019) who found that professionals within mainstreams school did not feel they had the specialised training necessary to support CYP with SEN. Castro et al. (2019) concluded that there was a need for wider scale evaluation of EHC outcomes, and suggested the development of a tool for schools and professionals to aid outcome development. While this research presents valuable findings on the quality of EHC plan outcomes, it is important to note that the authors did not evaluate outcomes in relation to the SMART acronym which is the measure LA's should adhere to according to the legislation (DfE, 2015).

2.4. Support and Experiences Throughout the EHC Plan

This section explores the views, perceptions and experiences of CYP with SEN throughout the EHC plan process. Key themes presented in the literature include the meaningful participation and involvement of CYP in processes, and meaningful support, provision and inclusion.

Perceptions and Views of CYP with SEN

Meaningful Participation and Involvement in Processes. Sheffield and Morgan (2017) recruited nine CYP (aged 13-16) with Statements of SEN prior to the publication of the revised Code of Practice (2015), where Social, Emotional and Mental Health (SEMH) was the primary area of need. Semi-structured interviews revealed that the majority of CYP were unaware of their label or the Statement of SEN. They all rated the proposed SEMH label in the new Code of Practice (2015) as 'negative' (p.60). These CYP indicated that they would like to have known about their Statement and have had the opportunity to read it. The CYP perceived support as being one-to-one with a teaching assistant, however, some felt that this support highlighted the differences between them and their peers – acting as a form of segregation. Sheffield and Morgan (2017) found that this group of CYP often experienced negative teacher-

pupil relationships and felt that they were blamed unfairly for things that happened in the classroom. This research highlights the pupils' desire carefully planned provision, greater involvement in decisions, and a move towards independence. This study highlighted concerns that CYP had before the 2014 reforms, where meaningful inclusion with peers was a real concern for them. However, the reforms aimed to bring significant changes to SEND systems and the transferability of findings from this study were also limited by the small sample size from one LA. Allan and Youdell (2017) highlighted that the term 'inclusion' is used within in the most recent Code of Practice (2015) but continues to imply that CYP with SEN may be separated or segregated from their peers, indicating that the CYP's concerns in Sheffield and Morgan's (2017) study may still be relevant.

Following the introduction of the 2014 SEND reforms, Wilson (2017) used semi-structured interviews with pictorial cues to interview six children with EHC plans (aged 9-11 years) to look at how they were involved in decision-making processes. They found that children generally had a favourable view of school but experienced a range of difficulties; close teaching assistant support and appearing different from their peers could result in physical isolation, a lack of agency, and a higher risk of bullying. The children suggested various changes which could help them within school: having a quiet place to go or more breaks from learning; more opportunities to interact and learn with their peers; and a reduction in the amount of writing. Children within this study expressed clear preferences and ideas for supporting their education, but interviews highlighted that they were mostly left out of decision-making. When provided with appropriate tools and support, the children in this research were able to identify key provision to support the development of their independent skills, demonstrating the importance of student involvement in the development, monitoring and reviewing of

their EHC plans. Wilson's (2017) study indicates the importance of reviewing and updating EHC plans to reflect the needs of CYP over time, moving towards their independence and adulthood. Again, while a useful study emphasising the importance of pupil involvement and careful monitoring of support, this unpublished thesis was limited by its small sample-size within one LA which may not be representative of other pupils' views and experiences.

Using a larger sample size, Heasley (2017) aimed to explore the experiences of 21 CYP (aged 11-19 years) during EHC plan meetings using semi-structured interviews. Heasley (2017) found that CYP involvement relied on many different factors including: the CYP's own ability to communicate; whether they understood the process and the information given to them; and whether students felt that adults wanted to listen to them. Only a minority of CYP interviewed felt that their views were considered and that they could contribute to the meeting. This study highlighted the role that EPs can have in supporting meaningful participation for CYP during EHC processing, and in developing SENCOs' skills to involve CYP throughout decision-making processes. Heasley's (2017) research used a larger sample of CYP to explore their views and perceptions, however, the range of SEN of the sample was limited excluding those with more complex needs. Parents/carers who opted their CYP out of the study cited that they wouldn't be able to take part or engage in the research.

To explore the views of CYP with complex levels of need, Pearlman and Michaels (2019) conducted structured interviews using Augmentative and Alternative Communication (AAC) with 22 CYP (aged 7-14 years) who had moderate, severe, and profound and multiple learning disabilities (PMLD). They explained that this population of CYP with more complex communication needs did not often have their views expressed within their EHC plans, and their study found little concrete evidence of

CYP's communications within their plans. Pearlman and Michaels' (2019) study aimed to seek evidence as to whether the views, feelings and aspirations of CYP with complex communication needs could be elicited and used to inform their EHC plan and their day-to-day support. However, the use of AAC within their study was limited to preferences between given choices, which are not equivalent to CYP views. There were also inter-rater reliability issues with different interpretations of some communications. However, results demonstrated that AAC was a promising way of including the voice of these CYP into decision making and indicating their preferences.

Meaningful Support, Provision and Inclusion. Children and young people within Wilson's (2017) study suggested that they spent most of the time supported by a teaching assistant with little direct interaction with the class teacher. They also expressed that they wanted more opportunities to work with their peers, indicating that this close teaching assistant support was reducing these opportunities. This supports previous research by Webster and Blatchford (2015), who tracked the educational experiences of 48 CYP (aged 9-10 years) with Statements of SEN through interviews and observations. Findings suggested that CYP with Statements had considerably different everyday experiences than their peers. Webster and Blatchford (2015) indicated that the allocation of support within Statements was being marked in terms of 'teaching assistant hours' and had led to a reliance on teaching assistants to support CYP with Statements. This, in turn, had led to a high degree of separation from their teacher, peers and classroom. Webster and Blatchford (2015) concluded that teaching assistants were seen as being directly linked to CYP's provision, despite a third of teaching assistants raising concerns that they had received no specific training for SEN, and observation highlighted that their work often focussed on task-completion over learning.

Webster and Blatchford (2019) replicated their study within secondary schools to explore changes since the 2014 reforms. They tracked the experiences 49 CYP (aged 13-14 years) with EHC plans using observations and interviews with pupils and key staff over several days. They found similar themes to their 2015 study (Webster & Blatchford, 2015) and concluded that schools were still reliant on using one-to-one teaching assistant support for CYP with SEN. Some of the teacher interviewees rationalised that this was mainly to manage behaviour and that CYP would be unable to 'survive' otherwise (p.104). However, CYP had different perspectives, stating that they did not always need the help, and it lowered their confidence with the teaching assistant always being there. In the study, CYP reported that teaching assistants who adopted a little and often approach were more successful at promoting their independence. The authors also found that teachers sometimes relied on teaching assistants to set appropriate tasks for the CYP, demonstrating little confidence with their knowledge of the student's abilities.

Webster and Blatchford's studies (2015; 2019) demonstrated that for many CYP with EHC plans, the reality of support is often a one-to-one intervention with a teaching assistant. However, there is little evidence that teaching assistant support aids CYP's learning and independence and the approach can have a stigmatising effect on peer relationships (Webster & Blatchford, 2015) Despite the introduction of the EHC plans, which aimed to improve the specificity of outcomes and provision for CYP with SEN, Webster and Blatchford (2019) highlighted that there still appears to be an over-reliance on one-to-one support from teaching assistants within the system. This reliance is further exacerbated by the legal standing parents/carers have to hold schools and LAs to account when teaching assistant hours are broadly written into EHC plans without specificity about the provision.

2.5. Annual Review and Transition Processes

The following literature reviews the maintenance and review process of EHC plans, with a focus on annual reviews and transition processes.

Annual Reviews. Jones and Swain (2001) was the only study within the literature search that focused on the annual review process. However, the research was conducted before the 2014 SEND reforms and focused on the annual review process for the previous Statements of SEN. They used a combination of interview and group discussions with 12 parents/carers who had at least one child with a Statement. Parents/carers emphasised that a holistic approach needed to be taken with their children, but there was a lack of consistency across their experiences. The parents/carers in this study felt powerless – that they had no control or voice in the decisions made during annual review meetings. They concluded that they were valued in principle, devalued in practice. The implementation of the 2014 SEND reforms aimed to address many of these concerns, and subsequent research on parent/carer perceptions about their participation has found that parental views were more highly regarded (Eccleston, 2016). However, the lack of research within this area indicates a lack of understanding about the current annual review process and its role in reviewing and updating plans towards adulthood and independence.

Support during Transition Processes. Manning's (2016) research explored the perceptions of three CYP (aged 16) with EHC plans who were making the transition from mainstream secondary school to Further Education (FE) college. Pupils were interviewed twice: once before their transition, then several weeks after they had started college. The CYP spoke about how their confidence had grown over time and felt that some aspects of support at college were unnecessary. Although participants expressed that support during school was an important factor in their development,

one student raised the negativity of 'visible' support from teaching assistants, which made them look 'different' (p.70). During the transition phase, this student stated they did not want visible support at college. Other participants felt that support within college was more personalised; they were more able to develop personalised plans and explore their future goals than at school, indicating the need for student participation during decision-making, particularly around their support. The participants explained that their experiences of school were mostly negative, expressing fears of seeming different, feeling pressure to perform, and reporting that support was given to them, rather than developed with them. Conversely, college felt like a community, and participants were able to pursue their interests and meet similar people. These findings highlight the desire for independence and the role that gradually reducing support within an EHC plan may have on CYP and their confidence. Furthermore, the CYP felt their successful transitions were a result of preparation. Although apprehensive about the changes, they had the resources to seek answers to any questions they had. The three students interviewed all experienced successful transitions to college, and as such, demonstrated examples of good practice. However, the research did not explore instances when transitions might be less successful, such as CYP who have negative experiences at college or those who are not able to transition to FE colleges. Although all three participants had EHC plans, the outcomes and provision in were not discussed. This makes it difficult to conclude how the EHC plan supported their transition and the extent to which EHC plans were necessary during this process. Findings were also limited by using only three participants from the same college.

Preparing for Adulthood. Gaona, Castro, et al. (2019) examined how the views and aspirations of 12 CYP (aged 16-19) with a diagnosis of Autism Spectrum

Disorder (ASD) were presented within their EHC plans. The authors found considerable variation in how CYP's views and aspirations were gathered and documented within their plans, with most plans referencing that they were collected from consultation with parents/carers and teachers, suggesting that other's views were used as a proxy for CYP. By analysing the content of EHC plans, the authors found that their participants had a desire for higher levels of autonomy and participation at home, school and in their communities at the time of their transition to post-secondary provisions.

Gaona, Palikara, et al. (2019) expanded on the previous study, using the same sample of CYP, with a focus on their transition to post-16 education and employment. Participants expressed a mixture of feelings towards the future. Feeling both apprehensive about the prospect of change and excited at the idea of becoming more independent. Independence was a major theme raised by CYP (including independent living skills such as cooking a meal and traveling without assistance), highlighting the importance of a graduated approach to reducing support in EHC plans so that CYP feel ready for each new stage of their education. The aspirations of these CYP emphasise the importance of independent living skills outlined in the Preparing for Adulthood framework: Employment; Friends, Relationships and Community; Independent Living; and Good Health (DfE, 2015). It should be noted that the small sample size for these two studies were spread across five LA's, in which schools had expressed an interest to participate. Therefore, this was not a representative sample, and motivations for taking part in the study should be considered as schools who felt positive about CYP's EHC plans and their experiences within school may have been more motivated to participate.

A report by Hunter et al. (2019) on employment outcomes indicated that the number of young people aged 16-25 with EHC plans has risen from rising from 25,000 in 2015 to almost 85,000 in 2018. Hunter et al. (2019) also highlighted the significant year-on-year increase in numbers of CYP with EHC plans that are joining apprenticeships, traineeships and supported internships; however, this increase only represents 2.7% of CYP aged 16-25 with EHC plans. The Code of Practice (2015) outlines that annual reviews and transitions from age 16 should be focussed on preparing CYP for adulthood goals, yet the persistently low rates of employment for adults with learning disabilities (6% as outlined by NHS Digital, 2018) suggest that the current system is not working nor focussed on employment outcomes. Hunter et al. (2019) speculated that transition reviews were likely to focus on concerns such as: finding post-16 placements; school transport issues; transition towards adult health and social care services; and ensuring EHC plan were not ceased. Findings indicate that discussions about transitions and preparing for adulthood should be happening to ensure that CYP have the skills and confidence to access further education and employment. Hunter et al. (2019) suggested that CYP should retain their EHC plans for the first year of employment to prevent CYP from having to secure a new EHC plan if their employment breaks down. However, this could potentially put further financial strain on an already struggling system.

2.6. Ceasing Statutory SEN Support: The End of the EHC Plan Lifecycle

This final section explores the end of the EHC plan lifecycle: reducing or ceasing statutory SEN support. Few studies have explored this part of the process, highlighting the need for additional research into perceptions on ceasing EHC plans.

Reducing Reliance on Statutory Support for SEN. Although there has been little research on ceasing statutory support, Rix (2009) outlined the benefits and

drawbacks of reducing reliance on statutory support for SEN. One benefit included a more positive role for SENCOs by reducing the amount of paperwork and administration. Rix (2009) also suggested that resources could also be allocated across more children, creating a fairer distribution of SEN resources and moving towards more inclusive classrooms. However, drawbacks included the loss of assurance that the Statement or plan provided, and specific funding attached to CYP. Rix (2009) also noted that parents/carers and parent representative bodies held concerns that reducing reliance on statutory support for SEN could affect their ability and rights in making decisions for their children. Furthermore, Hunter et al.'s (2019) critical reflection of the SEND reforms and implementation of the EHC plans also explored elements of the ceasing process. The authors described how CYP were often treated as objects in need of fixing or correcting and hypothesised that removing or ceasing a plan might signal the success of interventions as those CYP no longer required that additional support. However, in practice, they indicated that ceasing seemed to occur when CYP left formal education or when LAs were pressured to reduce the number of plans due to restricted education budgets.

Ceasing Statutory SEN Support. Walker's (2008) study was the only research found through the literature search that focused on the concept of ceasing statutory SEN support. The study explored the views of six CYP (aged 13-16) who had a Statement of SEN ceased and their reflections upon the system. Walker (2008) referred to the concept of ceasing as completing the statutory assessment process. Walker (2008) found that annual reviews were generally when discussions about ceasing took place. All CYP were aware of annual reviews, although there was little evidence that they had been involved in any multi-agency meetings before the final transitional review, where the Statement was ceased. In these cases, Statements

were ceased because progress had been made and the students no longer met the *criteria* for additional support. However, there seemed to be little evidence to demonstrate the effectiveness of the support, nor its impact on CYP's outcomes or learning. When reflecting on what they would have liked to be different, CYP explained that they wanted their views heard and to be part of decision-making processes Walker (2008) reflected that for schools and parents, the cessation of Statements seemed to be perceived as a negative outcome. However, CYP in the study expressed that they felt positively about their Statement ceasing. For some, it was positive to have the support removed, and for others, it felt like a real accomplishment and a moment of pride.

Walker (2008) concluded that having clear outcomes that promote independence, including guidelines about how and when statutory support should cease could help prepare schools and families for reducing support and ceasing plans. This also indicates the need for clear pathways towards independence and adulthood when EHC plans are first agreed. It should be noted that CYP in Walker's (2008) research were able to share their views verbally and reflect on their experiences, however, the research did not explore how CYP with more complex needs experience SEND processes and the impact of cessation. The focus on CYPs voices, although important and raised many interesting points, did highlight their naivety with the Statement system. The CYP involved did not know about the Statement, their labels, how support was decided on, nor funded. The triangulation of views by involving school or parents/carers would have helped to understand more about decision-making processes around ceasing statutory support.

2.7. International Context

Across the world it is estimated that more than one billion people have sensory, physical, mental, and/or intellectual disabilities (World Health Organization, 2016). Each country has its own approach to supporting this vulnerable population, with different terminology and processes in place. Individualized Education Plans (IEPs) have become a universal practice that, much like EHC plans, direct schools' implementation of interventions and assessments to promote meaningful participation and inclusion of CYP within education (UNICEF, 2014). Mitchell et al., (2010) examined 319 studies looking into IEPs across numerous different countries highlighting a gap between intent and implementation. Specifically, a lack of research under

Within the United States, IEPs were first introduced in 1975, with more recent legislation e.g. Individuals with Disabilities Education Act 2006 (U.S. Department of Education, 2006), expanding on the responsibilities of the state and schools. This act also outlines rationale for 'terminating' an IEP; parent withdrawing CYP from the district, the IEP team determining that the CYP no longer requires the additional support, the CYP graduates from their schooling with a diploma (regular or special), and the CYP reaching an age that they are no longer eligible (although the exact age differs by state) (U.S. Department of Education, 2006). Although IEPs are a well-established practice there are still challenges present within the system similar to the above research around EHC plans (Sacks & Halder, 2017). Lawsuits between families and school districts has increased significantly over the past several decades (Greene, 2007), citing lack of accountability, disagreement over 'appropriateness' of intervention, and lack of communication amongst stakeholders (Reiman et al., 2010).

Another example is within India, IEPs were first introduced in 1996 (Government of India, 1996), however, discrepancy with resources and legislation highlight that there is no consistent assessment for, or implementation of, the IEP. Kalyanpur (2008) highlights that a lack of provision to refer, screen, or place these CYP leaves them without education. More recent research indicates that the majority of students with disabilities are not able to access any education (Antony, 2013).

Ceasing Individualised Education Plans. Further literature searches were conducted to understand how individualised education plans in other countries were ceased, providing insight that may support the EHC plan processes. This literature search is presented in Appendix A, which demonstrates that there is a lack of research internationally into the cessation of support for CYP with special educational needs. Wehmeyer (2015) was the only piece of literature found that discusses the concept of ceasing or ending special educational provision. This book chapter highlights that within the United States, special education ends at the end of high school or at the age of 21 (dependent on state). Wehmeyer (2015) goes on to emphasise the stigma associated with special education and the role of a label on CYP moving into adulthood, rather than addressing the removal of support or cessation of their 'Individualized Education Plan'.

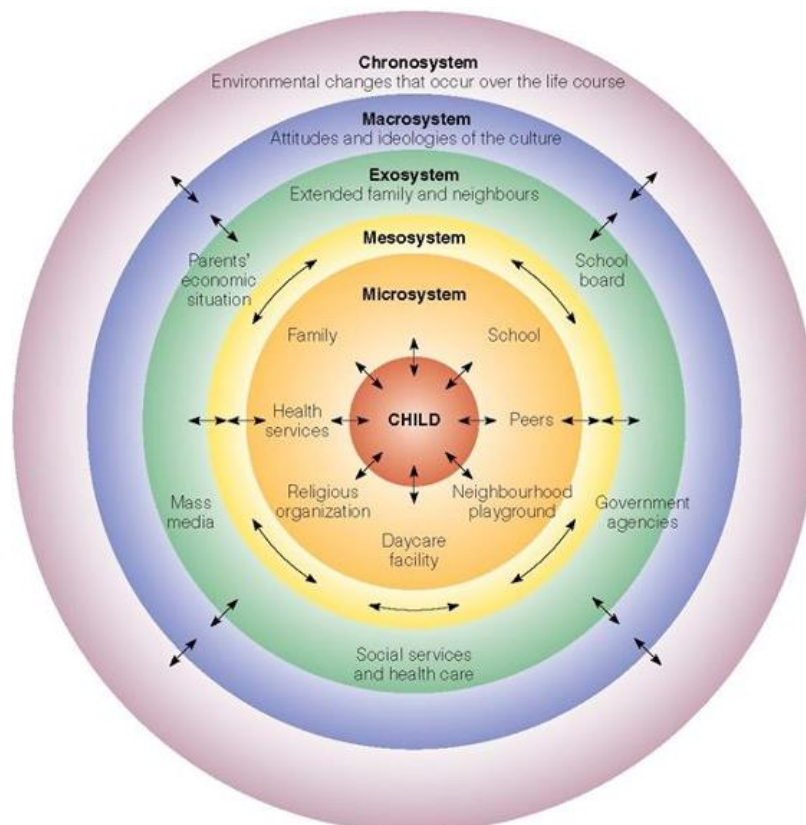
2.8. Theoretical Framework for Understanding Ceasing of EHC Plans.

The application of a theoretical framework will be used within this research to provide a clear understanding of how psychological theories can help to map out and understand the experiences of ceasing EHC plans. The Process-Person-Context-Time (PPCT) model (Bronfenbrenner & Morris, 2006) acts as a helpful framework to map out and conceptualise the influences of the multiple systems and contexts within which CYP with EHC plans exist. Highlighting the need to look beyond the individual

CYP and to the environments and systems with which they interact. The PPCT model is derived from Bronfenbrenner's (1979) ecological systems theory that described a CYP's development as occurring within four nested systems (microsystem, mesosystem, exosystem and macrosystem) that make up their environment. These nested systems (*Figure 3*) include those closest to the CYP, their community, and the cultural and political contexts which directly or indirectly influence that CYP's learning and development. However, researchers argued that this ecological systems theory assumes that all CYP will be affected by the same environment equally, regardless of individual difference, genetics, or biological characteristics (Tudge et al., 2009).

Figure 3

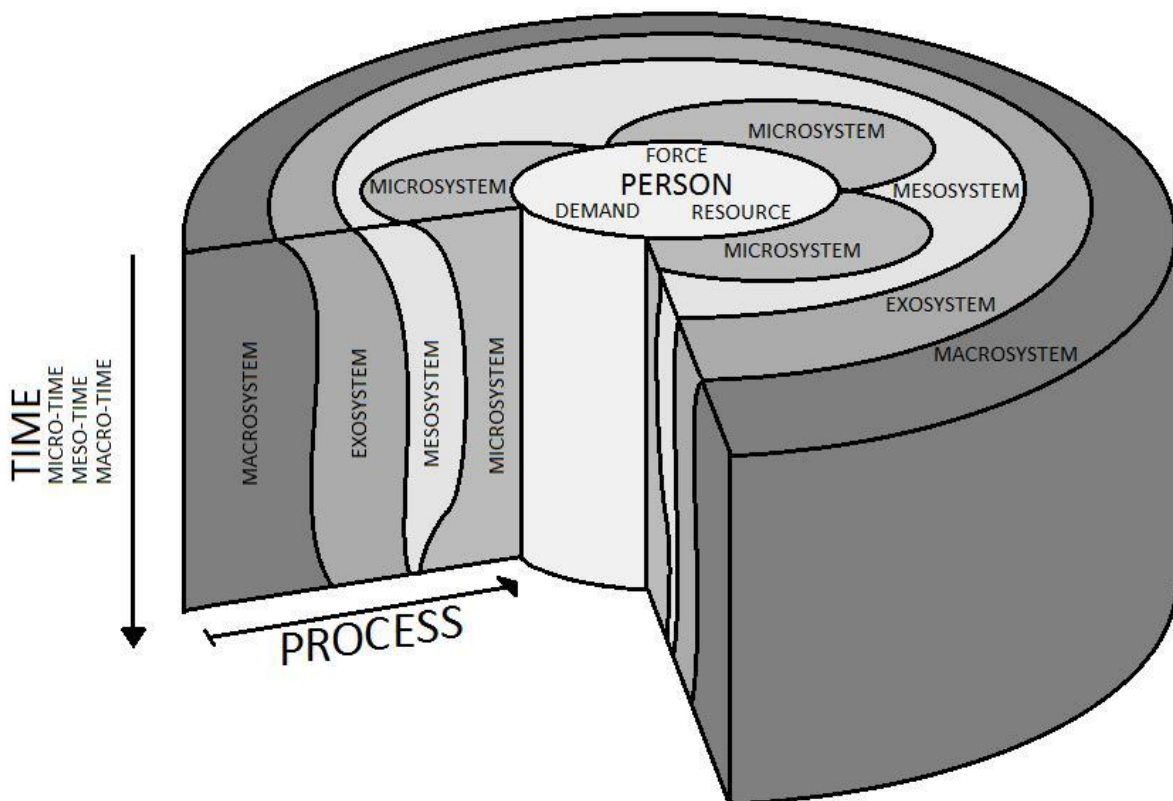
Bronfenbrenner's Ecological Systems Model (Bronfenbrenner, 1979)



This model was later revised to include dynamic aspects of each system, and the complexities of the interactions between them. This was called the PPCT model (Bronfenbrenner & Morris, 2006), which considers development as an outcome of complex reciprocal interactions or *processes* between the CYP and those within their immediate environment (microsystem). The model (See *Figure 4*) also emphasises the personal characteristics of the *persons* involved in the interactions, the *context* in which they take place, and the acknowledgement of these interactions in relation to *time* (e.g., over extended period, the duration, or timing of interactions).

Figure 4

Bronfenbrenner's Ecological Systems Model (Bronfenbrenner, 1977)



This model has been chosen for this research for the following reasons; firstly, this theory acknowledges that a CYP has the ability to engage in effective provision and transition planning; that the CYP's experiences and development are altered by their

environment and the processes in place; the importance of time (chronosystem) for a CYP with an EHC plan moving through phases of their education and the duration of their EHC plan; the wider systems (macrosystem) influences on both the perception of CYP with SEND and the legislative demands on professionals within the system. From the PPCT standpoint, the experiences of ceasing EHC plans is altered by the environments and proximal processes within those environments. Therefore, the successful cessation of EHC plans is reliant upon support from wider contexts within and beyond the education setting, such as SENCOs, SEN officers, and EPs. Through the lens of the PPCT and ecological systems theory, this thesis aims to explore how professionals within the micro- and exo-system understand the processes involved in ceasing an EHC plan, and the influence of wider systems. All of the key aspects of Bronfenbrenner's PPCT framework are describe within Table 3 below (Bronfenbrenner & Morris, 2006).

Table 3

Outline of Process-Person-Context-Time model (Bronfenbrenner & Morris, 2006; Tudge et al., 2009)

Area	Application to research
<p>Process</p> <p>The process refers to reciprocal interactions that take place over time between a CYP and their environment. These processes of development occur in settings most familiar to the CYP, e.g. home, school, college, and</p>	<p>Exploring the experiences of professionals within micro- and exosystems and how the EHC plan supports the independent skills of the CYP and transition from ceasing</p>

community, and with those who they are most familiar with, e.g. parents, teachers, mentors.

Person

Person refers to the biological and personal characteristics of the CYP and make up three types of characteristics: Demand (e.g., age, gender, ethnicity); Resource (e.g., personal skills, experience, and cognitive ability); Force (e.g., temperament, motivation, and task persistence).

Context

Context refers to the immediate systems the CYP is placed and influenced by. These are the four nested systems described within Bronfenbrenner's ecological systems theory (1979)

Time

Time refers to the interactions that happen over time between the CYP and their environments. This can be further broken into three successive levels: micro- (duration and

Understanding the CYP age, strengths, needs, and desired outcomes laid out in the EHC plan, and how the plan reflect the CYP. Further exploration of how the CYP was involved in discussions.

Research explored the nested systems, including the experiences of SENCOs (microsystem) and SEN Officers (Exosystem), the interaction between the systems (Mesosystem), the impact of the wider systems and legislation (Macrosystem) and the role of the CYP and their parents within ceasing.

The concept of time links with this research's focus on the experiences when an EHC plan is ceased, looking at how the EHC plan supported the CYP over time, their

consistency of interactions), meso- (the frequency of these interactions or activities over time), and macro- (the changing expectations of the environments).

transition away from the EHC plan, and the processes/interactions during this process. Additionally, the impact of the current legislation and expectations of CYP with EHC plans and how this affected their development and cessation

2.9. Summary

This literature review has highlighted variation and inconsistencies in how SEND legislation has been interpreted and applied, and how key stakeholders experience processes within the EHC plan life cycle. Much of the current research has focused on families whose children have *received* an EHC plan (Bentley, 2017; Eccleston, 2016; Redwood, 2015), and have conceptualised EHC plans as an inherently positive framework (Hunter et al., 2019). However, there has been little exploration into the views of those who were currently going through the application processes, who had been refused EHC plans, or who no longer had EHC plans. Further exploration of processes that occur towards the end of the EHC plan lifecycle and the outcomes for those CYP would help to understand whether the system is supporting CYP to make progress and move towards independent learning and adulthood. Additionally, the lack of research into individualised plans available internationally highlights the significance of this research beyond the EHC plan context.

Parental involvement, which was sometimes missing under the previous Code of Practice (2001), were a key focus within the 2014 SEND reforms. Since the reforms,

parents/carers reportedly felt more involved in decision-making processes and heard (Cochrane, 2016; Gore, 2016). However, concerns remained that parents/carers were not well informed about SEND legislation and processes, and could sometimes make decisions based on unrealistic expectations (Boesley & Crane, 2018). Research on parental perspectives seemed to indicate a lack of confidence in the broader systems available, leading to an over-reliance on statutory support and expectation that EHC plans were the 'golden ticket' to support for their child (Eccleston, 2016; Hunter et al., 2019; p.13). These expectations, coupled with an assumption that the EHC plan would stay with their child until they were 25 years old, can make accepting decisions to cease an EHC plan all the more unlikely (Bentley, 2017).

Professionals, although generally in agreement with the intention of the SEND reforms, raised concerns relating to the ability of SEN officers to inform, address and manage parental expectations (Boesley & Crane, 2018; Gore, 2016); shortened timelines coupled with parental desires for plans leading to unrealistic workloads (Redwood, 2015); and a lack of multi-agency working leading to greater onus on schools to fill in the gap (Palikara et al., 2019). Concerns from both parents/carers and professionals were raised around the transparency of the decision-making processes related to EHC plans. Critical decisions such as agreeing to assess, issue and cease an EHC plan were seen to be made behind closed doors (Boesley & Crane, 2018; Gore, 2016), which exacerbated parental anxiety and the need to 'fight' for the plan (Bentley, 2017; Sales & Vincent, 2018). Additionally, the literature review has highlighted a lack of research on the perspectives of SEN officers who play a key role in the interpretation and implementation of the SEND reforms, demonstrating a need to understand how these professionals experience the EHC plan and its lifecycle.

The literature that discussed ceasing EHC plans suggested that involving CYP in decision-making processes may promote more discussion around the ceasing of EHC plans (Walker, 2008). Although EHC outcomes were not always 'good quality' (Castro et al., 2019; p.43), SMART outcomes, coupled with a renewed emphasis on the annual review process, aim to provide a clear goal to work towards with the implicit hope that statutory SEN support for CYP may be reduced until it is no longer necessary. However, Walker (2008) suggested that early preparation and an 'exit strategy' (p.131) were imperative to ensuring a smooth transition away from statutory SEN support, and towards a celebration of CYP's progress. It is important to understand how EHC plans promote CYP's independence, and whether those with EHC plans that have been ceased can provide examples about how to support this transition away from EHC plans and towards greater independent and adulthood.

Chapter 3: Methodology

This chapter outlines the methodology used in this research, detailing the research design, epistemology, rationale, development, recruitment, procedure, analysis, ethical considerations and understanding of the current study. This section begins by outlining the research design and relevant background information relating to data collection. It will explain the methodology that was used to collect and analyse information in order to answer the below research questions.

3.1. Research Questions

The current research aims to convey a balanced perspective to the ceasing of EHC plans by exploring both the school and LA professionals' perspectives of the factors involved during decision-making processes.

RQ1) How are decisions made to cease an EHC plan?

- How do professionals view the ceasing process?
- How are CYP involved in these decisions?
- How do schools and LA -based professionals work together during these processes?

RQ2) How do SENCOs and SEN Officers describe the key factors that influence the ceasing process?

- What are some of the challenges faced?
- What supports decision-making during the ceasing process?

3.2. Philosophical Stance

All research is underpinned by the assumptions of the researchers that guide the way they conduct, collect and interpret data. It is important that researchers

understand these assumptions and how they may impact on the research (Creswell & Creswell, 2018). The philosophical stance is comprised of two components: *ontology*, or the researcher's perspective of the nature of reality; and *epistemology*, which defines the relationship between the researcher and the participants (Johnson and Christensen, 2016).

Historically, literature highlights two main approaches to research: the use of quantitative methods or qualitative methods. Quantitative methods assume a positive paradigm. This stipulates that the methods and principles of the natural sciences can be applied to human behaviour (Wellington, 2000). In contrast, qualitative researchers believe that social phenomena exist only as a construction of interpretation of social actions and interaction (Robson, 2000).

The philosophical stance taken within this study is pragmatism. Johnson and Christensen (2016) conceptualise pragmatism as being placed centrally between positivism and constructivism. Pragmatism focusses on developing solutions and focussing on the outcome of the research. This allows flexibility in researcher ontology and epistemology, adapting to the needs of the research. This approach allows the possibility of answering a broader range of research questions using multiple methods. Pragmatism advocates for adopting the research method that is best suited to answering the research questions (Robson & McCartan, 2016). Additionally, considering current COVID-19 circumstances, pragmatism allows a needs must approach, i.e., what is pragmatic or feasible in the current circumstances.

3.3. Rational for Research Design

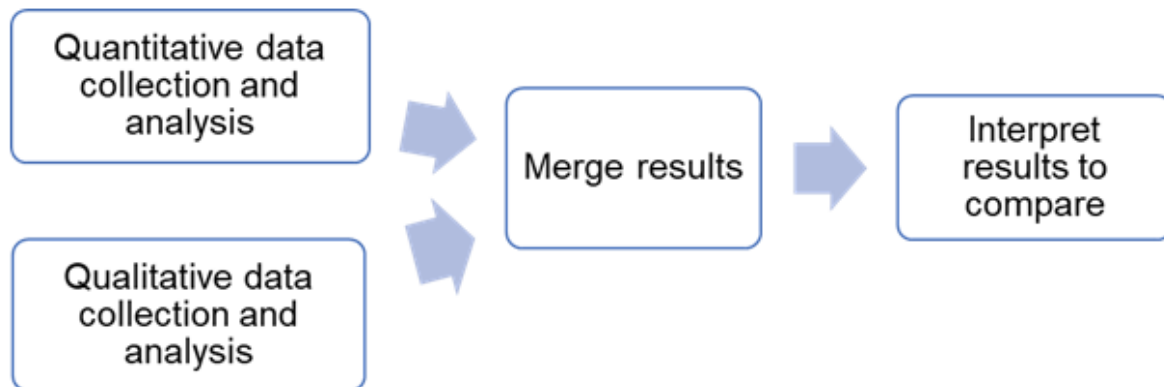
This study utilises a mixed methods approach, which adopts aspects of both quantitative and qualitative approaches (Creswell & Creswell, 2018) using a pragmatic perspective. It is important to acknowledge that there are many synonyms for a mixed

methods approach, such as multimethod, mixed research, integrating methods, or mixed methodology. However, recent publications such as SAGE's Journal of Mixed Methods Research, tend to use the term mixed methods (Creswell & Creswell, 2018). Bryman (2006) outlined a list of rationale for using mixed methods research, including: triangulation between methods; the enhancement/clarification of one method's data with the other; using one method to further develop or inform the other; comparing different perspectives drawn from each method; providing further credibility or integrity of findings; and improving the usefulness of the findings.

The current study uses a *convergent mixed methods* design (see *Figure 5*) in which qualitative and quantitative data were collected and analysed at a similar time. During data collection, an interactive approach was utilised where quantitative data collection and initial analysis drove changes in the focus of the qualitative data collected. This approach involved collecting both quantitative and qualitative data, analysing them separately, then merging them to see if they confirm or disconfirm one other (Creswell & Creswell, 2018). This approach assumes that both sets of data will provide different types of information, but together, the results should align. The use of mixed methods allows the use of both exploratory and confirmatory methods and the triangulation of these has the potential to increase both confidence and credibility (Johnson & Christensen, 2016; Robson & McCartan, 2016).

Figure 5

Convergent Design (Adapted from Creswell and Creswell, 2018)



Both qualitative and quantitative methods were used to gather data using open and closed survey questions. Quantitative methods using online questionnaires were chosen as a means of accessing and gathering data from a wider population than would be possible through other methods. This enabled the sampling of professionals across England to help determine differences between localities. Qualitative methods, using semi-structured interviews were chosen to broaden and deepen findings from the quantitative questionnaires. The flexibility of semi-structured interviews allows new themes to emerge from the participants experiences.

Rationale for Online Questionnaires

The use of online questionnaires had multiple advantages for this study. Firstly, with literature demonstrating the rarity of EHC plans being ceased, it was a cost and time efficient method for gathering information from a larger sample of participants across numerous LAs and schools (Robson & McCartan, 2016). Therefore, the use of online questionnaires helped to develop a broader understanding of ceasing across the country. Secondly, it was hypothesised that using a questionnaire design would help increase the likelihood of access and participation. This research was conducted

during the COVID-19 outbreak which meant that education settings and LAs were largely working in very different circumstances and having to adapt their work accordingly. Inviting SENCOs and SEN Officers to take part in an online questionnaire allowed professionals to participate when convenient, with the ability to return to partially completed questionnaires at a later date if necessary. Additionally, the anonymity of online questionnaires can encourage honesty when sensitive issues, such as ceasing EHC plans, are explored (Teddlie & Tashakkori, 2009).

Rationale for Semi-Structured Interviews

Semi-structured interviews were chosen to act as a flexible tool to broaden and deepen understanding about ceased EHC plans. The flexibility provided by semi-structured interviews created opportunities to explore specific topics, whilst adapting to topics or concepts raised by participants. This approach meant that the researcher could follow the flow of each participant, adjusting the questions, wording, and time spent on each topic as necessary (Robson, 2011). Cohen et al., (2017) note that interviews can cast further explanatory insight into questionnaire data, enabling the use of additional questions or probes to follow the flow of the interview – seeking clarification, encouraging elaboration, and exploring new areas (Bryman, 2006). Additionally, the use of semi-structured interviews provide opportunities for the researcher to build rapport, understanding and empathy with participants to reduce the likelihood of social desirability bias (Smith, 2015). This is particularly pertinent with the current research given the sensitive nature of the topic. Telephone and online interviews were used to enable the researcher to conduct interviews across the country and adapt to the timing needs of participants. This flexibility meant it was easier to arrange and conduct interviews, particularly given many participants were working from home during the COVID-19 outbreak.

Despite holding advantages in an exploratory study, it is important to consider the disadvantages of using semi-structured interviews. The interaction between the interviewer and participants introduces a range of strategic, ethical, and personal issues into the process (Creswell & Creswell, 2018). It is therefore important for the interviewer to identify their own biases, values and personal background that shape how they conduct and interpret interview data. The use of reflexive thinking and taking notes about initial hypotheses, themes, and thoughts can help address some of these concerns (Creswell & Plano Clark, 2018). During interviews, the purpose of the research was made clear to interviewees at the beginning of the interview, however any discussion about the researcher's role or views were left until the end of the interview. Additionally, participants were reminded that there were no right or wrong answers, that transcriptions would be anonymised/pseudonymised, and that they did not have to answer any question they felt uncomfortable with.

3.4. Sampling Strategy

This study employed a *volunteer sampling strategy* for pragmatic purposes. This is a form of purposive sampling where individuals opt to participate in the research. This study sought the views of SENCOs and SEN Officers (or those equivalent roles within schools i.e., inclusion manager, and LAs i.e. case worker, EHCP coordinator etc). Every school in England is required to employ a SENCO to oversee, advise, and coordinate SEN Support. The Code of Practice (2015) also outlined that every further education establishment should ensure there is a named person to take on the role, similar to a SENCO, within their settings. With over 32,000 schools and colleges in England, each with their own SEN coordinator (DfE, 2019), it was neither practical nor realistic to gather the views of every member of this population. The sample was aimed at Secondary and College level which was based

on findings from the literature review and current ceasing trends that EHC plans are more likely to be ceased at these stages (DfE, 2021; Walker, 2008).

3.5. Procedure

Questionnaire and interview procedure will be discussed separately below to provide details about the processes taken to conduct this mixed-methods study.

Questionnaire Procedure

Questionnaire recruitment was conducted by emailing 150 LAs (Heads of SEN) within England and inviting their LA to participate in the study by disseminating project information to SEN Officers and SENCOs (*Appendix C*). The email invited both SEN Officers and SENCOs to take part in the research with a link to the online questionnaire, including information sheets and consent forms (*Appendix C*). After completing the survey, participants were able to leave their email address to receive a summary of the research findings or for the opportunity to take part in a follow-up interview.

Forty-six of the LAs contacted explained that they were unable to take part due to the COVID-19 outbreak, citing high staff demands, staff vacancies, and more urgent priorities. Five LAs responded that they would be unable to take part due to concerns about the potential negative impact it could have on their service, e.g., concerns about staff wellbeing and the possibility of antagonising parents.

Semi-Structured Interview Procedure

Recruitment for semi-structured interviews were conducted through self-selection within the online questionnaire. All participants were asked whether they would be willing to take part in a follow-up telephone interview to explore their experiences in more detail. Participants were then able to leave their email address so that they could be contacted to arrange a time and date for the interview.

Additionally, a second phase of recruitment was conducted by contacting LAs that had not yet responded to the initial email and schools across England to help drive recruitment. Willig (2013) indicated that the time-cost impact of qualitative research allows for smaller sample sizes, emphasising that smaller interview samples enable a more in-depth exploration of the topic with participants.

Semi-structured interviews were conducted at a date and time convenient for participants, by telephone or Microsoft Teams (without the camera). Interviews were recorded using either a digital recorder or the recording function of Microsoft Teams. Before beginning the interview, all participants completed an online consent form (*Appendix C*) and gave verbal consent to the recording. Participants were assured that all information gathered would be anonymised prior to data analysis, including any identifiable information about the locality or children mentioned. Interviews began with an explanation of the research aims and proposed structure of the interview. Participants were given the opportunity to ask any questions about the interview, research or data before starting. This time also acted as an opportunity to build rapport with the participants and set the tone for the interview, which is an important part of the process (Cohen et al., 2017). Interviews followed the semi-structured interview schedule (*Appendix E*) using probes to elaborate and encourage deepened discussion. When the interview had finished, participants were debriefed and informed about the next steps of the research and given another opportunity to ask about the research or the researcher's role and previous experiences.

3.6. Participants

Participants comprised a sample of SENCOs and SEN Officers from across the country, including online questionnaire respondents (n=40) and semi-structured interview participants (n=18).

Questionnaire Participants

A total of 114 responses to the online questionnaire were recorded, however, of those, only 40 met the criteria for the research; five were neither a SENCO nor SEN Officer (or equivalent), and 69 questionnaires had not been fully completed. This low response and completion rate could be attributed to a number of factors, including those highlighted earlier e.g., the current pressures created by the COVID-19 pandemic or the ease in stopping or tiring of online questions (Cohen et al., 2017; Sapsford, 2006). A total of 40 professionals (SENCOs and SEN Officers) completed the online questionnaire and the approximate location of participants has been illustrated in Figure 6. Over half of the participants who completed the questionnaire were SENCOs (or the equivalent head of SEN) within their setting (n=23, 58%) and the remaining professionals were SEN Officers or those with an equivalent role (n=17, 42%).

Figure 6

Approximate Geographical Location of Questionnaire Respondents



Interview Participants

A total of 18 participants undertook an interview, including five SEN Officers (5 female, 0 male) from different LAs and 13 SENCOs (11 female, 2 male). All interview participants had not taken part in the online questionnaires and were recruited directly through emails to schools and LAs. Participants were dispersed across the country: North East (n=4; 22%); East Midlands (n=1; 5%); South West (n=3; 17%); South East (n=3; 17%); London (n=3; 17%); Anglia (n=1; 5%); East of England (n=3; 17%). All SENCOs worked in mainstream settings within secondary school (n=7; 47%) or college settings (n=8; 53%). SEN Officers held caseloads across all ages.

3.7. Materials and Measures

Within this mixed-method research, quantitative and qualitative methods were applied using surveys and semi-structured interviews.

Questionnaire Construction

Online questionnaires were developed through a review of the existing literature on EHC plans (Adams et al., 2017; Palikara et al., 2019; Pearlman & Michaels, 2019) and utilisation of Johnson and Christensen's (2016) key principles for questionnaire construction (See *Figure 7*). The online survey used a combination of closed questions with 5-point Likert scales and open-ended questions to expand on participants' ratings and allow meaningful answers (Appendix D). The range and wording of questions were considered carefully to include different parts of the ceasing process. Additionally, it was important to keep the questionnaire exploratory with broad open questions to allow participants to raise concepts they felt were relevant. The online questionnaire was developed using Qualtrics which provided multiple validation rules, such as forced responses, and enabled a smoother transition throughout the questionnaire.

Figure 7

Principles of Questionnaire Construction, from Johnson and Christensen (2016)

Principle 1	Make sure the questionnaire items match your research objectives
Principle 2	Understand your research participants
Principle 2	Use natural and familiar language
Principle 4	Write items that are clear, precise, and relatively short
Principle 5	Do not use "leading" or "loaded" questions
Principle 6	Avoid double-barrelled questions
Principle 7	Avoid double negatives
Principle 8	Determine whether an open-ended or a closed-ended question is needed
Principle 9	Use mutually exclusive and exhaustive response categories for closed-ended questions
Principle 10	Consider the different types of response categories available for closed-ended questionnaire items
Principle 11	Use multiple items to measure abstract concepts
Principle 12	Consider using multiple methods when measuring abstract concepts
Principle 13	Use caution if you reverse the word in some of the items to prevent response sets in multi-item scales
Principle 14	Develop a questionnaire that is properly organised and easy for the participant to use
Principle 15	Always pilot test your questionnaire

Questionnaire Piloting

Questionnaires were piloted before beginning data collection (Robson & McCartan 2016). The content of individual questions was informally piloted with other Trainee Educational Psychologists, who were asked to provide feedback on the questions to determine whether the questions followed Johnson and Christensen's (2016) key principles. Following this, the questionnaire was piloted with two SENCOs and two SEN Officers who completed a draft version of the online questionnaire. Pilot participants were asked to provide feedback on an individual basis, where they voiced

their thoughts on each question and reflected on what they expected or did not expect to be asked.

The piloting process allowed for a better understanding of how participants interpreted and understood the questions, whether the questions would elicit the information needed to answer the research questions, and gauge the time required to complete. Appendix D shows the final version of the questionnaire. Following piloting and peer supervision, minor revisions were made to the wording, grouping of questions and validation rules within Qualtrics. For example, participants felt that descriptions of terminology, such as ceasing, would help provide clarity, as well as identifying that some questions could be skipped that were particularly important. Anonymity was important to all the pilot participants due to the sensitivity of the topic and the implications ceasing has for schools, families and LAs.

Interview Schedule Construction

A systematic methodological review by Kallio et al. (2016) identified five inter-related phases to semi-structured interview development:

1. Identifying prerequisites for using semi-structured interviews
2. Retrieving and using previous knowledge and literature
3. Formulating the initial semi-structured interview
4. Pilot testing the semi-structured interview
5. Presenting the complete semi-structured interview

Each phase contributes to the preparation and success of the next. These phases were followed in the current research in order to develop a rigorous interview schedule. As with the questionnaire development, there is little research conducted around EHC plans, particularly those with accessible interview schedules. Therefore, it was

important to develop interview schedules specifically for this research through the review of the existing literature (Adams et al., 2017; Palikara et al., 2019; Pearlman & Michaels, 2019).

Key topics consisted of open-ended questions that aimed to encourage an exploration of participants' experiences. The schedule was a flexible tool used to guide discussion with probes and prompts to support in-depth answers (*Appendix E*). The range and wording of questions were considered carefully to include different parts of the ceasing process and explore topics in a logical order. Willig (2013) indicated that interviews should start with questions that are easy to answer to provide both the interviewer and interviewee a chance to settle into how the interview will proceed, and end on another more straightforward topic and closing question. For example, the final part of the interview schedule consisted of two questions around recommendations. This was deemed a logical position as the participant had the opportunity to speak about and explore the topic and raise any difficulties before identifying solutions. Key interview topics included: background information relating to their role; experiences around the ceasing process; specific examples of ceasing; experiences of working with families and professionals; any training opportunities participants had undertaken; and improvements to the ceasing process. The same interview schedule was used for both SEN Officers and SENCOs, with minor wording adjusting to ensure it made sense to their role.

Interview Schedule Piloting

The content of the interview schedule was piloted with three trainee Educational Psychologists to help provide an understanding of the coverage and relevance of the topics and questions. From this stage, initial changes were made to the introduction and probes, removing jargon and emphasising that each question was around the

cessation of EHC plans. Additionally, queries were made about multiple ceased EHC plans and which one to refer to, during the revised schedule this was presented as 'the most recent ceasing'. The revised interview schedule was also piloted with one SEN Officer who had experience ceasing EHC plans. This approach, or field testing, simulated the real interview situation and provided crucial information about the interview implementation (Willig, 2013). This acted as an opportunity to make the questions more relevant and to determine whether they elicited the participants experiences of ceasing. This also allowed a more accurate idea about how much time would be needed for each interview. The participant was asked to make note of any questions that they were not expecting, any that they expected to be asked, including anything that they had not had a chance to mention or the phrasing of questions. This feedback was used to improve and complete the semi-structured interview schedule, through adapting questions to make them more open, altering the order, and ensuring participants were aware of the themes that would be discussed. The final interview schedule can be found in Appendix E.

3.8. Data Analysis

Given the exploratory nature of the current research, the data gathered was predominantly qualitative. Qualitative data from questionnaires and interviews were analysed using thematic analysis (Braun & Clarke, 2006) to identify key themes (see below for a description of the process). Unlike other methods of qualitative data analysis (e.g. discourse analysis or interpretative phenomenological analysis) the theoretical flexibility of thematic analysis enables it to fit well within pragmatism and exploratory research (Clarke & Braun, 2013), providing a rich, detailed and complex account of the data. Braun and Clarke (2006) argue that thematic analysis is a useful

method for examining different perspectives of participants, highlighting similarities and the differences in their experiences.

While widely considered a suitable method of analysis for qualitative data, it is important to consider the disadvantages of thematic analysis. Firstly, there are concerns that there is a lack of clarity regarding what the process of thematic analysis entails (Braun & Clarke, 2006). Therefore, the process followed within this research will be described in detail below. Secondly, the flexibility provided by thematic analysis can also lead to inconsistency in coding and theme formation. Nowell et al. (2017) indicated that these concerns can be partially negated by demonstrating trustworthiness in the analysis. Lincoln and Guba (1985) outlined four aspects of trustworthiness: credibility, dependability, confirmability, and transferability. These four aspects will be explored further under the section titled *Trustworthiness and Research Quality*.

Questionnaire Data Analysis

Quantitative closed question data was analysed using a statistical computer programme (SPSS v21) with descriptive statistics to explore trends, patterns and relationships between characteristics (Mertens, 2015). Descriptive statistics can be used to present important aspects of the data through a single number, e.g., percentages, frequency, mean, or standard deviation (Robson & McCartan, 2016). Qualitative open question data was analysed using thematic analysis (Braun & Clarke, 2006). Each question was coded and analysed separately to form themes (See *Appendix F for an example of coded questionnaire data*). This gave thematic information to go alongside quantitative data, which helped form an interactive approach where initial themes and data could be used to inform further development of the semi-structured interview schedule (Creswell & Creswell, 2018).

Semi-Structured Interview data analysis

Once completed, all interviews were transcribed verbatim by the researcher (see Appendix G for an example interview transcript). All transcripts were anonymised, removing any identifiable information about participants, including their locality, school or services. Transcriptions were imported into NVivo (March 2020 release), which is a qualitative data analysis computer software package used to code, create themes and analyse qualitative data.

Thematic Analysis

Braun and Clarke's (2006) approach to thematic analysis was used to analyse qualitative data from both the questionnaires and interviews. This section briefly outlines the steps involved.

Step 1: Familiarisation with the Data. This first step involved becoming immersed in the data to the extent that the researcher was familiar with the breadth and depth of the content (Braun & Clarke, 2006). This process starts at the data collection stage, particularly for interviews, and continues during careful transcription and repeated reading of the data. Braun and Clarke (2006; p.16) emphasise reading in an 'active way', searching for meanings and patterns across the data. During transcription, notes were made about interesting quotes, points or patterns that started emerging.

Step 2: Generating the Initial Codes. The second step involved working through each transcript and creating a brief description or comment for the entire data set, known as codes. In this research a systematic coding system was used where every answer to a question or comment was coded. Coding was inductive to correspond with the exploratory approach to this research. Once initial coding was complete, the researcher went through the codes and grouped or amalgamated similar

codes. A *codebook* was produced, which outlined all of the codes in the research and their frequency, which was used to group similar codes together (see *Appendix H for the codebook*).

Step 3: Searching for Themes. The third step re-focused the analysis onto searching for broader potential themes. Relevant codes were collated to form overarching themes (Braun & Clarke, 2006). Initial themes and subthemes were formed from the codes as those most pertinent or interesting to the research. See Appendix I for an overview of themes and subthemes development.

Step 4: Reviewing Themes. Initial themes and subthemes were analysed and reviewed to refine coded extracts and determine whether they were mutually exclusive. Refining themes into a coherent thematic map was the next stage of the process, to accurately reflect the entire data set. During this stage, the researchers' initial notes about emerging codes and themes were revisited to identify whether they were adequately demonstrated in the final thematic map. This stage of reviewing themes involved a cycle of rearranging, reforming and refining themes and subthemes until completion. Furthermore, the use of a 'critical friend' was sought at this stage to support the validity of the study. This critical friend was an experienced qualitative researcher who had published research within the area of EHC plans who supported with double-coding part of the data set and reviewing the data, codes and themes. This allowed the opportunity for the researcher to describe codes and themes and justify their place within the thematic map. Feedback from the critical friend helped to finalise the thematic map before moving onto the final stage.

Step 5: Defining and Naming the Themes. The last stage of thematic analysis involved further definition and refining of the themes presented in the analysis. A key aspect of this stage was understanding and identifying the core of each theme; what

each theme described and what data the theme captured (Clarke & Braun, 2013). It was important that themes were not all encompassing, nor too diverse; these were tested by judging whether each theme's scope and content could be described in several sentences, as outlined in Braun and Clarke (2006). If not, further refinement was necessary. The evolution and refinement of themes have been demonstrated in the initial notes during transcription (*See Appendix J*), to the refined version, and finally the complete thematic map shown in Chapter 4.

3.9. Research Considerations

This research explores the complex area of SEND legislation and EHC plans, therefore it was important to carefully consider the vulnerable population who receive EHC plans, the aims of the thesis, and the implications these have on the methodology used. Both questionnaires and semi-structured interviews were developed to encompass the broad experiences of participants, taking into account the variance in how SEND legislation surrounding EHC plans is interpreted. Therefore, it was important to pilot both the questionnaires and interviews and develop a broad understanding of the relevant legislation. The convergent mixed methods design allowed for an interactive approach, where initial data collected from the online questionnaire were used to inform the semi-structured interviews and raise topics of interest.

Trustworthiness and Research Quality

The trustworthiness of research, particularly mixed methods research has long been under scrutiny (Clarke & Braun, 2013; Cohen et al., 2017; Creswell & Plano Clark, 2018). This section will follow Lincoln and Guba's (1985) four aspects of trustworthiness: credibility, dependability, confirmability, and transferability.

Credibility. In both quantitative and qualitative research, credibility refers to the degree to which the findings can be accepted as accurately measuring the concept being examined (Johnson & Christensen, 2016). This study aimed to improve construct and content credibility by piloting online questionnaires, which ensured that the questions provided a space for participants to explore the topic and add their 'truth' into the research (Mertens, 2015; p.85). Credibility in solely qualitative methods can prove challenging, in that, there are multiple *true* perspectives on reality (Mertens, 2015). The researcher's epistemological position can alter how participants' data are analysed, and conclusions are drawn (Smith, 2015). However, the use of summarising to check participants' perspectives during interviews helped to address this issue. Triangulation using multiple sources of data from a broad sample of participants from across the country helped to gain a comprehensive understanding of the research problem. Bryman (2012) suggested that bringing quantitative and qualitative findings together provides the opportunity to offer insights not available through one method alone. This triangulation of two sets of findings can help to highlight interesting differences or similarities in the data. The use of triangulation within this study brought both quantitative survey data and qualitative survey responses and interview together to improve the dependability and credibility of the research (Mertens, 2015).

Dependability. Dependability is concerned with the issue of consistency when measuring a concept, and whether results are replicable and stable over time (Johnson & Christensen, 2016). This study aimed to increase dependability by documenting detailed steps of the procedure adding to the replicability of the study (Creswell & Creswell, 2018). The reliability procedures that were employed in this study included transcribing interviews personally and checking transcriptions for

errors, and ensuring there was not a shift in code definition by continually comparing data with the codes (Flick, 2014).

Confirmability. Confirmability refers to the extent that the research reflects the participant views, rather than the views of the researcher, or researcher bias. The use of a critical friend during analysis helped to provide an independent perspective to ensure the codes and themes were independent of the researcher. Additionally, triangulation methods demonstrated above helped to establish the confirmability of the findings. Furthermore, it is important to consider this research under the researcher's epistemology and reflexivity statement.

Transferability. Transferability relates to the extent that the research findings may be applicable or generalisable in other settings or LAs which were not part of the current research. Robson and McCartan (2016) offered insight into *internal* and *external* generalisability. Internal generalisability refers to whether conclusions drawn from the research can be applied *within* the settings studied. External generalisability refers to whether these conclusions can be applied *outside* of these settings. Creswell and Clark (2018) highlighted that in qualitative research, it is not often the objective to create generalisable findings, but to provide rich descriptions and themes developed from a specific context. This research accessed a relatively niche sample of SEN professionals who had experience ceasing EHC plans, therefore external generalisability may be impacted. However, by exploring professionals' experiences in-depth, using both quantitative and qualitative methods, the current research aimed to provide rich information about this otherwise unresearched area. Key findings can also be used to inform research and provides implications for practice within both local and national contexts.

3.10. Ethical and Professional Issues

Ethical procedures required for this study were followed as per the approved ethical application granted by UCL (*Appendix B*) and in line with the Health and Care Professions Council (HCPC) and British Psychological Society (BPS) code of ethics (BPS, 2009; HCPC, 2016).

Informed Consent

Participants provided fully informed consent. The participant information sheet and consent form (*Appendix C*) provided details about participants' rights to withdraw consent and withdraw their data at any time, including information about omitting any interview or survey question that they did not wish to respond to. Before each interview, participants completed an online consent form and confirmed verbal consent for the interview to be recorded. Participants were informed that all unprocessed data would be destroyed if they chose to withdraw. Participants were informed about the length of the survey/interview and chose to participate at a time and date convenient to them. They were reminded that their participation was voluntary and that all data would be kept anonymously. At the end of the interviews, there was opportunity to debrief participants, answer questions, and reaffirm their rights.

Confidentiality and Anonymity

During surveys and interviews, participants used examples and information about children and young people. In order to safeguard all children mentioned in the study, data was anonymised and kept securely under the data protection measures outlined in the ethics application. Limited demographic information was taken from participants to ensure that reported data remained unidentifiable. No other participant had access to another person's data, and the overall results and findings were coded

and anonymised/pseudonymised to protect the identity of all participants and prevent any safeguarding or child protection issues from arising.

Safeguarding

During surveys and interviews, it is possible that participants will be using examples and information about the children and young people they are in contact with. In order to safeguard all children in the study, the data will be anonymised and kept securely under the data protection measures outlined below. No other participant will have access to another person's data and the overall results and findings will be coded and anonymised to protect the identity of all participants to prevent any safeguarding / child protection issues from arising.

Risks to participants

While there are no obvious risks of the research, participants may find it challenging to reflect on experiences that have not gone well or been difficult. To reduce this risk, participants will be informed about the length of the survey/interview and will choose to participate at a time and date convenient to them. They will be reminded that their participation is voluntary and that they have the choice to omit any questions or withdraw at any stage and that all content will be anonymous. They will be assured that the purpose of the research is to identify improvements to the system that may ultimately benefit themselves, other professionals, or other children and families. At the end of any interviews there will be the opportunity to debrief participants and, if necessary, have any follow up contact. Participants will receive a summary of results after the research is completed, if requested. Any interviews conducted will take place remotely using Microsoft teams or phone without the video function enabled.

Data storage

Data was stored in relation to UCL's data protection policy and in line with the study's approved ethical application. Questionnaire data was stored within Qualtrics' facilities, then collated and analysed using statistical software (e.g. SPSS). Interviews were recorded using Microsoft Teams or a voice recorder then stored securely on an encrypted, password protected drive. Once transcribed, all data was anonymised/pseudonymised and analysed using Nvivo 20. All interview files were deleted once transcribed; contact information will be deleted upon final dissemination of the research summary.

Dissemination

Following submission of this study, a summary of findings will be disseminated to all participants, in both questionnaires and interviews, who expressed interest. The research may be submitted for publication to contribute to the growing body of literature on ceasing EHC plans.

Chapter 4: Findings

This chapter explores and presents research findings from the questionnaires and semi-structured interviews. The quantitative closed information from the questionnaires will be presented alongside the corresponding open-text questions. Given the small sample size for the questionnaire, descriptive statistics were used to present this information, before the in-depth analysis of the qualitative data. The themes, subthemes and descriptive statistics have been broken down by each question.

The interview data will be presented through key themes and corresponding subthemes, shown in the final thematic map. Each theme and subtheme will be presented in more detail using key quotations.

4.1. Questionnaire Findings

Questionnaires asked SEN professionals (23 SENCOs; 17 SEN Officers) to reflect on their involvement when an EHC plan was recently ceased. This also included contextual information about the ceased plan such as the stage of education and setting; factors leading to the EHC plan being ceased; involvement of the CYP, parents/carers and professionals during the process; and the participants' overall experiences of the ceasing process.

Contextual Details About Ceased EHC Plans

The length of time CYP had receipt of their plans ranged from 3 to 15 years ($M = 7.64$ years, $SD = 3.64$). The type of education setting that CYP were in at the time of ceasing was also recorded; the majority attended mainstream education ($n=30$; 75%), followed by special schools ($n=6$; 15%), with a small amount of CYP attending either mainstream education with a specialist provision or unit ($n=2$; 5%), or educated

at home (n=2; 5%). Fifty five percent of CYP (n=22) were in secondary education at the time of ceasing, 32.5% in Further Education (n=13), and 12.5% at college level (n=5). No CYP were at primary level or younger.

Table 4 outlines the types of professionals who were recently involved with the CYP prior to the plan being ceased. Participants reported that the most common professionals were specialist school staff, with over half having recent involvement. Open-text for this question also demonstrated that SENCOs were sometimes included in this category.

Table 4

Professionals Who Had Recent Involvement With The CYP Prior to Ceasing

Role	Frequency	Percent
Specialist school staff (Teacher of the Deaf, Specialist teacher, etc.)	21	52.5%
Educational Psychologist	13	32.5%
Health professional (e.g. Speech and Language therapist, Occupational therapist, General Practitioner, etc.)	13	32.5%
Social care (e.g. family support worker, social worker, Virtual School)	10	25%

Factors Leading to the Ceasing of the CYP's EHC Plan

Questionnaires explored key factors leading to the decision to cease the EHC plan. Table 5 demonstrates when discussions and decisions about ceasing were made, with 72.5% (n=29) of decisions made during or following an annual review.

Table 5*When the Decision Was Made to Cease the CYP's EHC Plan*

Category	Frequency	Percentage
During or following an annual review	29	72.5%
During the transition to a new setting (e.g., moving from primary to secondary school, or leaving education)	9	22.5%
During the transfer from Statement of SEN to EHC plan	2	5.0%

Participants cited that it was most commonly the SEN Officer (n=16; 40%) or SENCO (n=15; 37.5%) who initiated the discussion to cease the CYP's EHC plan (see *Table 6*). In five cases, it was the CYP themselves who initiated the discussion (12.5%).

Table 6*Individuals Who Initiated the Discussion to Cease the EHC Plan*

Role	Frequency	Percentage
SEN Officer (within the Local Authority)	16	40%
SENCO	15	37.5%
CYP	5	12.5%
Parent/Carer	2	5.0%
School staff member (e.g., class teacher, head of year, headteacher)	2	5.0%

As outlined in Table 7, the key reasons for ceasing EHC plans were predominantly because the CYP had either achieved their educational outcomes in the plan (n=15; 37.5%) or because they no longer required the additional provision outlined in the plan (n=15; 37.5%). Seven participants cited that education was no longer the most significant priority but no further information was given – which highlights the ambiguity of this category within the Code of Practice (2015) guidance.

Table 7

Reason for Ceasing the EHC Plan

Reason for Ceasing	Frequency	Percent
Achieving the educational or training outcomes outlined in the plan	15	37.5%
No longer required the special educational provision outlined in the plan	15	37.5%
Education no longer the most significant priority	7	17.5%
Reached the age of 25	2	5.0%
Unsure of reason	1	2.5%

In a corresponding open question, professionals reported a range of additional factors that contributed to the ceasing, which have been outlined in Table 8. The most commonly referenced theme was that CYP's *Special Educational Needs were improving* and they no longer required that additional support. Additional themes included that there were key *decision makers* who had the final say in decisions, and *transitions* were identified as being a key time to cease.

The theme *decision makers* highlighted that both LAs (6%) and CYP or their parents/carers (17%) were seen as having the ability to solely make the decision to cease the EHC plan. One participant commented that, 'despite conversations to the benefits whilst he transitioned to sixth form, the young person insisted on ceasing the plan'; while another noted that '[the] LA ceased the plan without warning because it was likely the student would go to university'.

A large number of participants highlighted that the EHC plan was ceased because *Special Educational Needs were improving* and CYPs' needs were able to be met at a SEN Support level or through the setting's own provision (n=11; 31 %). Further comments highlighted that Social, Emotional and Mental Health (SEMH) (n=4; 11%) or medical needs (n=4; 11%) had improved, leading to plans being ceased. Participants also highlighted that the EHC plan outcomes being achieved (n=8, 23%) and the celebration of the CYP's needs improving (n=2, 6%) were factors contributing to the ceasing.

Within the theme *transitions*, ten participants spoke about different transition points being a key factor during the ceasing process – predominantly that the CYP was no longer engaging in education (n=5; 14%)

Table 8*Additional Factors Contributing to Ceasing: Themes and Subthemes*

Theme	Subthemes	Frequency	Percentage
Decision makers	CYP or parents/carers wanting to cease the plan	6	17%
	Local Authorities making decisions without consultation	2	6%
	CYP needs able to be met at SEN	11	31%
Special Educational Needs improving	Support level		
	Outcomes achieved	8	23%
	SEMH needs improved	4	11%
	Medical needs improved	4	11%
	Celebration of achievement	2	6%
	Speech, Language and Communication Needs improved	1	3%
Transitions	No longer engaging in education	5	14%
	Transition to adult social care	3	9%
	Before transition to new placement	1	3%
	Following transition to new placement	1	3%

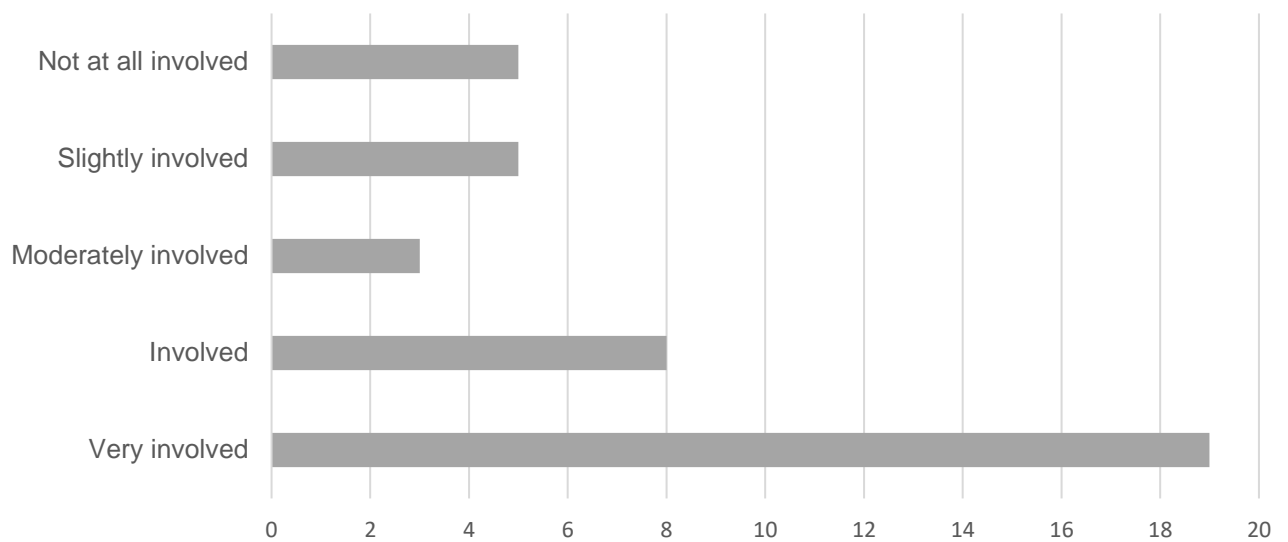
Note: Participants could provide multiple responses in free text.

Perceptions of Involvement

This section of the questionnaire explored professionals' perceptions of the CYP, parent/carer and their own professional involvement during the ceasing process. Figure 8 shows that the majority (n=21; 52.5%) of participants felt that CYP were *involved* or *very involved* during the process, with over a quarter (n=11; 27.5%) citing that there were *only slightly involved* or *not at all involved*.

Figure 8

Perceptions of How Involved CYP Were During the Ceasing Process



In a corresponding open-text question, participants' comments highlighted *variation in CYP involvement* and responses were grouped into subthemes, shown in Table 9. The majority of participants (n=22; 63%) commented that CYP were present and involved during discussions about ceasing the EHC plan. However, six participants indicated that CYPs' views were given by proxy, for example by the parent, and seven participants highlighted that CYP were not involved in discussions at all. Key reasons included a lack of engagement due to perceived stigma in some cultures around learning disabilities, or perceptions that the child did not have a say because it was a statutory decision.

Table 9

Additional Comments Related to CYP Involvement During the Ceasing Process

Theme	Subthemes	Frequency	Percentage
Variation in CYP involvement	CYP present and involved in the discussion	22	63%
	CYP not involved	7	20%
	CYP voice given by proxy	6	17%

Note: Participants could provide multiple responses in free text, and some opted not to include qualifying comments.

Figure 9 outlines the perceptions of parent/carer involvement during the ceasing process. Fifty-five percent (n=22) of participants felt that parents/carers were *involved* or *very involved*, however over a third (n=17; 42.5%) cited that there were only *slightly involved* or *not at all involved*.

Figure 9

Perceptions of How Involved Parents/Carers Were During the Ceasing Process

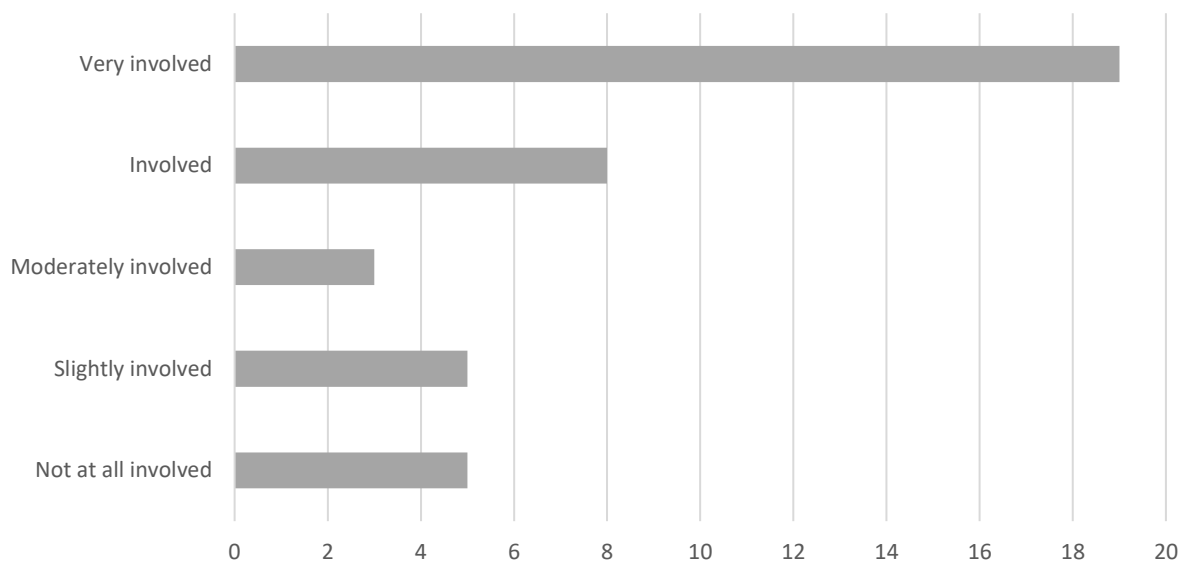
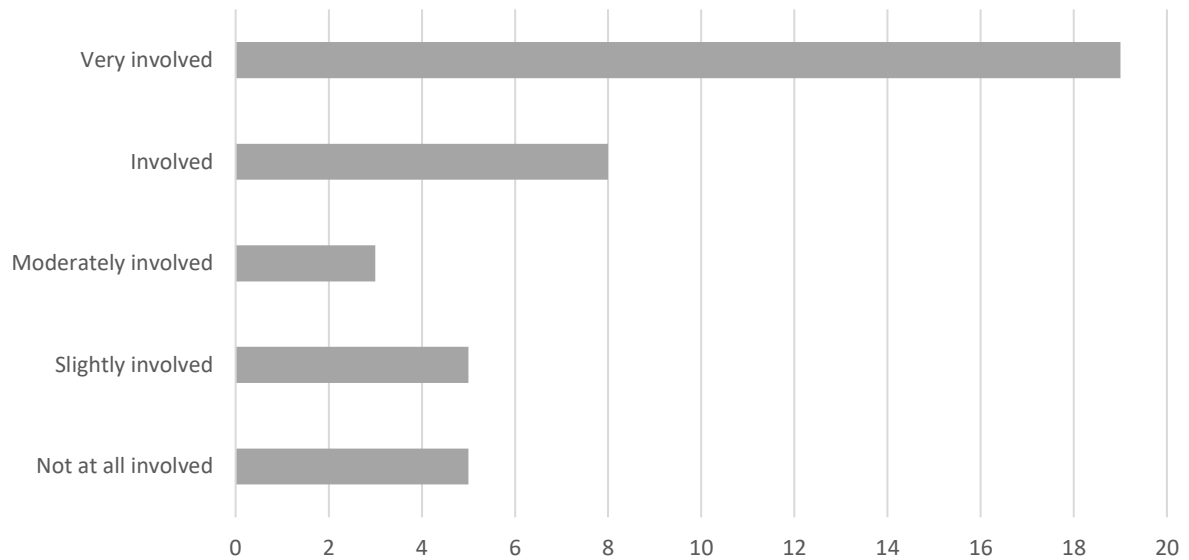


Figure 10 outlines professionals' perceptions about their own involvement during the ceasing process. Over two-thirds (n=27; 67.5%) of participants felt that they were *involved* or *very involved*; however, a quarter (n=10; 25%) cited that there were only *slightly involved* or *not at all involved*.

Figure 10*Professional Perceptions of Their Own Involvement During the Ceasing Process*

Subsequently, in the follow-up open question, the majority of professionals added that they had *reduced levels of contact* with the CYP and their families since the EHC plan was ceased (see *Table 10*). Over a third of professionals (40%) had *no further communication* with the CYP or their families since the EHC plan had ceased.

Table 10

Professionals Involvement with CYP and Their Families Since the EHC Plan Was Ceased

Theme	Subthemes	Frequency	Percentage
No direct contact	No further communication	15	40%
	Communication via other professionals still involved	2	5%
Reduced levels of contact	Ongoing contact within school at a reduced level	13	32%
	Updated for short period by new placement	6	16%
	Brief contact for advice and support	2	5%

Note: Participants could provide multiple responses in free text.

Experiences of Ceasing

The final section of the questionnaire explored professional perceptions about what works and what does not work for them during the ceasing process, including what could be done better or any additional factors to consider.

Open ended questions explored participant's perceptions of what works well for them in the ceasing process (*see Table 11 for themes and subthemes*). Participant's responses indicated that *relationships* were an important part of what works well, including having a good relationship with the family (n=5; 7%) and LA or education setting (n=6; 8%) so that informal and formal conversations around ceasing could be made. Respondents noted that trust was an important part of these relationships, e.g., 'having a trusting and positive relationship'.

Another key area was *communication and joined-up working*. Approximately one-fifth of participants noted that having multiple perspectives from everyone involved helped with the ceasing discussions and process (n=15; 20%). Another key area was that ongoing formal and informal discussions, before and after the plan was ceased, aided the process (n=7; 9%). Being able to see ceasing as a celebration that CYP no longer needed the additional support provided by the EHC plan was another facilitating factor (n=2; 3%). Other responses included that early intervention that worked towards preparation for adulthood and independence outcomes benefitted the process (n=7; 9%).

The theme *process and procedural clarity* was identified as a key facilitating factor. Participants reported that when CYP's needs, outcomes and provisions within their EHC plan were kept updated, it aided informed decisions and promoted trust in the EHC plan (n=7; 9%).

Table 11*Professionals' Perceptions of What Works Well During the Ceasing Process*

Theme	Subthemes	Frequency	Percentage
Relationships	Having good rapport with the LA/ Education Setting	6	8%
	Having good rapport with the family	5	7%
	Having multiple perspectives in a joined-up approach	15	20%
Communication and joined-up working	Ongoing discussions (outside of review meetings and flexibility with reinstating plans) before and after ceasing	7	9%
	Early interventions working towards independence and adulthood	7	9%
	Seeing ceasing as a celebration	2	3%
Process and procedural clarity	Up to date information about needs, outcomes and provisions	6	8%

Note: Participants could provide multiple responses in free text.

Open ended questions exploring what does *not* work well for professionals highlighted similar themes to their prior responses (see *Table 12*). Within the theme *communication and joined-up working*, concerns were raised that key stakeholders were not always kept informed before or after ceasing, leaving little understanding

about the process or next steps (n=8, 13%). Moreover, disagreements between parties or a lack of discussion hindered a joined-up approach (n=15; 25%), such as a lack of trust between parents/carers and the LA. Participants also raised concerns that other professionals often had a lack of capacity to attend meetings or make recommendations (n=7; 11%). This lack of capacity led to concerns that other professionals did not have an accurate picture of the CYPs' needs.

The theme *process and procedural clarity* highlighted concerns raised by participants that there were not clearly defined guidelines or criteria for ceasing, with the legislation lacking clarity (n=8; 13%). When EHC plans were not kept updated, it created an additional barrier to the ceasing process (n=4; 7%). Within this subtheme, participants raised concerns that EHC plans were inflexible documents, making it difficult to increase or decrease the level of provision outlined, which made it harder for plans to accurately reflect CYPs' needs.

Finally, *fear of losing the 'golden ticket'* was a theme defined by perceptions from both professionals and parents/carers that EHC plans were the only way to access additional or desirable resources and support (n=7; 11%). Educational settings were seen as reliant on EHC plan funding for the additional staff within their school or resources (n=6; 10%). A lack of understanding or knowledge of post-education possibilities for these CYP exacerbated this want to hold onto the plan until 25 (n=6; 10%).

Table 12*Professionals' Perceptions of What Does Not Work Well in The Ceasing Process*

Theme	Subthemes	Frequency	Percentage
Communication and joined-up working	Disagreements or disconnect between parties	15	25%
	No follow-up or not being informed before and after ceasing	8	13%
	Lack of capacity to attend meetings (or complete actions)	7	12%
Process and procedural clarity	Legislative barriers, unclearly defined guidelines, (lack of criteria for ceasing; criteria open to interpretation)	8	13%
	EHC plans not flexible, updated or appropriate	4	7%
Fear of losing 'golden ticket'	EHC plans seen as a 'safety net' to access resources and support	7	11%
	Not working towards independence post-plan	6	10%
	Reliance on funding for staff or not wanting to lose EHC funding	6	10%

Note: Participants could provide multiple responses in free text.

Professionals reported a range of changes that could be made to improve the ceasing process in the future (see *Table 13 for details*). These changes were divided into two broad themes: *before ceasing* and *after ceasing*.

Most frequent examples of improvements that could be made *before ceasing*, identified by over a third of participants, included creating standardised procedures, guidelines and criteria for ceasing EHC plans that all education settings, LAs and services could follow (n=14; 39%). Another subtheme, identified by over a third of responses, was that future support should be identified before transitioning away from the plan (n=13; 36%); particularly in relation to future transitions, such as moving to adult social care. Participants also expressed those discussions around preparing for adulthood and the possibility of ceasing EHC plans should be happening from inception and continue throughout the plan (n=7; 19%).

Key improvements identified *after ceasing* were coded into two subthemes. The first outlined that ongoing or additional meetings after EHC plans were ceased would be beneficial, to review CYPs' needs and provision (n=4; 11%). Respondents also highlighted that it would be useful if there was the option to reinstate EHC plans on occasion, in the event that CYP demonstrated an increase of need following their plan being ceased. Participants expressed that a 'holding' or 'pause' period after a plan had been ceased would help alleviate some of the professional and parent/carer anxiety around ceasing (n=6; 17%). Participants explained that ordinarily, once a plan has been ceased, if there was a change in the CYP's needs or they returned to education, they would be required to start the EHC plan process from the beginning.

Table 13*Professionals' Perceptions of Changes That Could Improve the Ceasing Process*

Theme	Subtheme	Frequency	Percentage
Before ceasing	Planning future support away from plan together (considering future transitions/adult social care)	13	36%
	Formal standardised procedures, guidelines and clear criteria (e.g. who should be involved, meeting format, etc.)	14	39%
	Ongoing discussions around ceasing (from inception) and preparing for adulthood before ceasing	7	19%
After ceasing	Possibility to reinstate the plan (on hold)	6	17%
	Ongoing or additional meetings to review CYP needs and provision (after ceasing)	4	11%

Note: Participants could provide multiple responses in free text.

The final open question of the questionnaire asked professionals to outline any further comments about the ceasing process; responses were organised into three broad themes: (1) *the need for joined-up working*; (1) *the impact of unclear legislation and information about ceasing*; and (3) *perceptions of ceasing*. See Table 14 for details.

The theme outlining *the need for joined up working* focussed on the variation between links with health and adult social care, particularly during transition points

with perceptions that these two services were not held to the same pressures as education. Some participants felt that there needed to be clearer communication links between education settings and the LA, with informal conversations being seen as beneficial for both sides.

The *impact of unclear legislation and information about ceasing* was identified as an important consideration, particularly in relation to EHC plans being seen as a 'safety net' and the only way to access resources, money and support. This included comments that without the EHC plan, the CYP would be left unsupported. Participants perceived that these concerns were felt by parents, school staff and in themselves as professionals. Additionally, concerns were raised by one participant that the expense of the appeals process meant that LAs were having to fund inequitable EHC plans. Unclear guidelines and criteria meant that professionals felt it was difficult to know when or how to cease a plan, with perceptions that EHC plans were left to 'age into irrelevance'. This ambiguity could be more challenging in post-16 establishments, with one participant citing a lack of understanding and information about how post-16 provision worked.

Finally, several participants highlighted their own *perceptions of ceasing*. This include that ceasing was something rarely considered, but that ceasing should be seen as a celebration of that CYP's progress and the positive impact of having an EHC plan.

Table 14*Professionals' Perceptions of Additional Considerations About the Ceasing Process*

Theme	Subtheme	Frequency	Percentage
The need for joined-up working	Clear communication links between settings/LA	2	13%
	Adult social care not held to the same time pressure/scrutiny as education	1	6%
	Disjointed health services (particularly during transition points)	1	6%
The impact of unclear legislation and information about ceasing	EHC plan as a 'safety net' – access to resource, money, and support	5	31%
	Unclear guidelines/criteria making it difficult to cease	4	25%
	Automatic transfer of Statements to EHC plan meant that some CYP had needless plans	1	6%
	Post-16 as new area that is slowly developing/improving	1	6%
	Appeals process too expensive for LAs, and families end up with inequitable packages of support	1	6%
	Perceptions of ceasing	Ceasing should be a celebration	3
	Ceasing as a rarity	2	13%

Note: Participants could provide multiple responses in free text, and some opted not to include qualifying comments.

Summary of Questionnaire Results

Key findings within the questionnaire analysis are highlighted below:

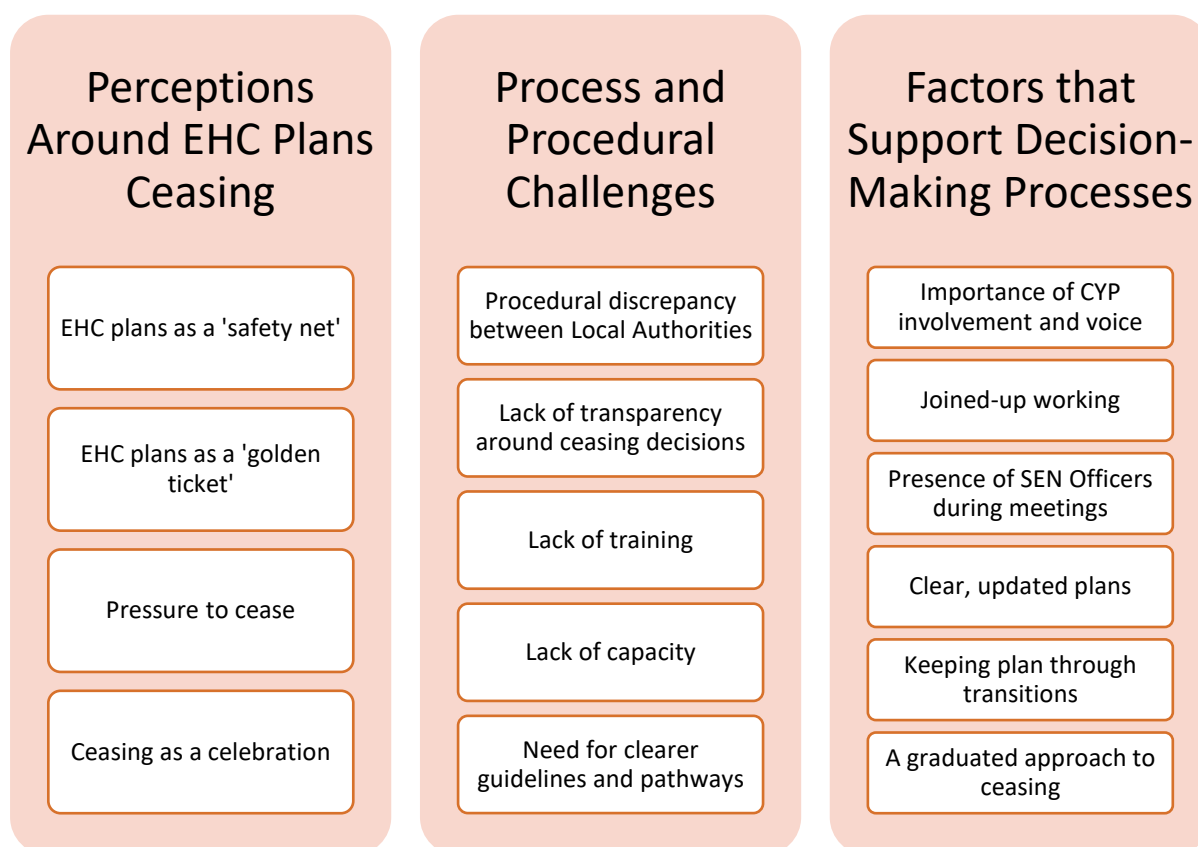
- Discussions around ceasing an EHC plan were predominantly initiated by the SENCO/SEN Officer.
- Most common reasons for ceasing EHC plans were because the outcomes had been achieved, or CYP no longer required the additional provision outlined within the plan.
- Building trusting relationships and having open, multi-agency discussions around the possibility of ceasing with clear updated plans helped to support the ceasing process.
- Participants reported that EHC plans were perceived as a 'golden ticket' to accessing resources and support, which could hinder work towards independence and preparing for adulthood.
- Possible improvements to the current system included clear, open discussions with clear criteria prior to ceasing, followed by review and follow-up discussions post-ceasing.
- Multi-agency or joined up discussions could be hindered by capacity issues, with professionals involved rarely attending meetings – including SEN Officers themselves.

4.2. Interview Findings

This section presents the findings from the semi-structured interviews (13 SENCOs; 5 SEN Officers). Interviews with SENCOs and SEN Officers were analysed together, due to the similarities in their experiences captured during the interviews. Thematic analysis of interviews yielded three key themes: (1) perceptions around EHC plans ceasing; (2) process and procedural challenges; and (3) factors that support decision-making processes (see *Figure 11*). Numbers preceded by a 'SO' indicate that the participant was a SEN Officer (or equivalent role within the LA), and numbers preceded by an 'S' indicate that the participant was a SENCO (or equivalent role within an education setting).

Figure 11

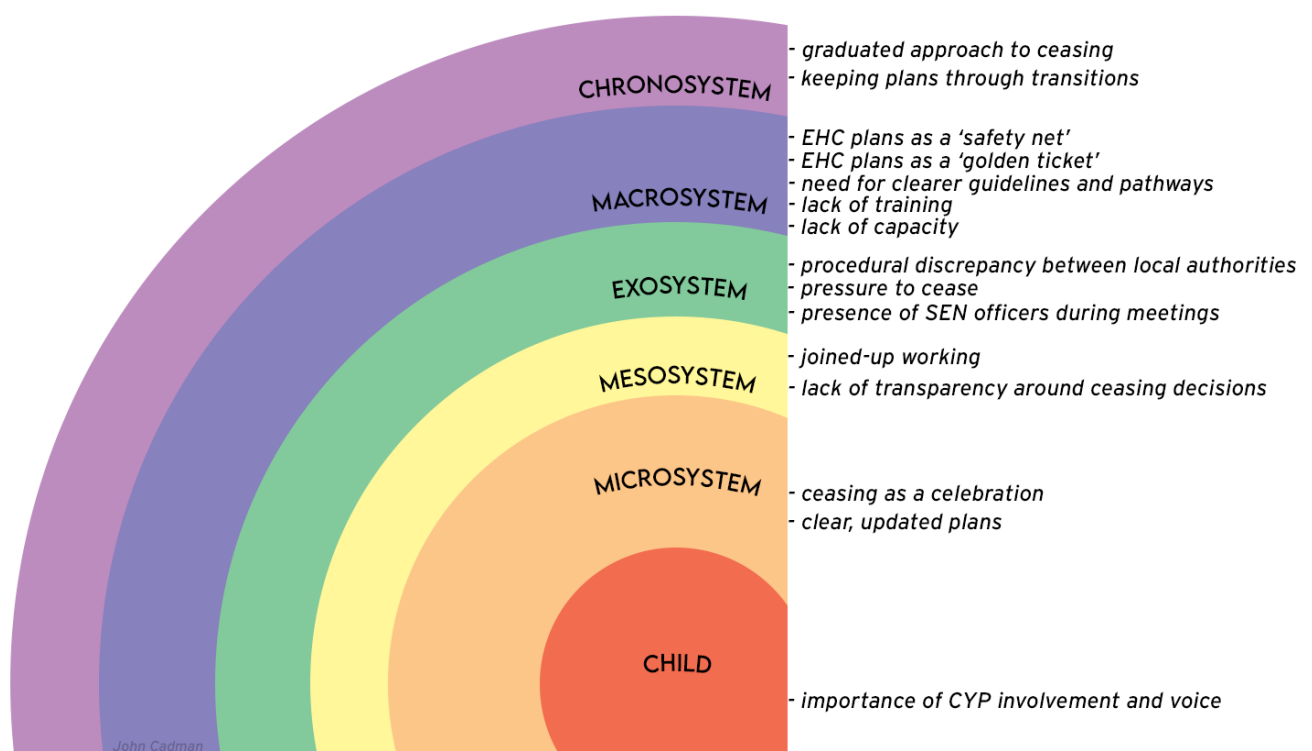
SEN Professionals' Perceptions of Ceasing: Themes and Subthemes



In order to understand these themes and subthemes through the lens of a theoretical framework, the subthemes were mapped onto Bronfenbrenner's (1979) ecological systems model to highlight how each system has its role within the research (see figure 12).

Figure 12

Themes and subthemes mapped onto Bronfenbrenner's ecological systems model (1979)



Theme 1: Perceptions Around EHC Plans Ceasing

EHC Plans as A 'Safety Net'. Fifteen participants expressed that a common perception held by professionals and parents/carers was that EHC plans were a protective factor for the child and that they would be unsupported otherwise: 'it's definitely a safety net' (S3). Professionals acknowledged that sometimes CYP did not need the support outlined in the EHC plan at that moment, but there were concerns they might need it in the future: 'we will try and dissuade them from ceasing it, saying

it is there as a backup, they don't have to have the support if they don't want it in class' (SO16).

Participants felt that this concept of the EHC plan as a protective factor was also perceived by external agencies who were concerned that ceasing might make the young person more vulnerable in the community: 'we have other agencies who work with young people – CAMHS, YOT teams and people like that – who say they might be involved in antisocial behaviour and they think that somehow, if they keep their EHC plan, that it's going to solve the problem' (SO12). Some participants felt that these concerns might be justified, with one SENCO reflecting about a child whose plan was ceased that they perceived as being no longer protected: 'he had no protection in a way because he had no diagnosis, so he wasn't protected by the Equality Act; he had no EHC plan' (S6). Participating SEN Officers also expressed an unwillingness from LAs to cease EHC plans as they were concerned about parental backlash: 'we work with ten local authorities who are reluctant to cease a plan midway through that placement, and I think it's partly because they know that it causes aggravation with the parents' (SO17).

Professionals highlighted that this concept of EHC plans as a 'safety net' could be around anxiety or uncertainty about what support might look like without it: 'it is that fear of the next step. I think some parents/carers see that piece of paper as something that you've got to keep hold off – and the piece of paper itself isn't doing anything, it's about what's actually happening practically' (S13). Participants expressed that many people believed that EHC plans were always maintained until the age of 25, regardless of the CYP's level of need or other ceasing criteria, which led to further hesitation around ceasing: 'the learner has met the outcomes of the EHC plan, or they've reached the end of their learner journey, but the parents/carers feel that they've got a

right to keep the plan until they're 25 – and they haven't' (S3). This led to professionals having to try and manage these expectations: 'I think people look at the practice and say, it's 0-25. And we're trying to say, it's up to 25 *if* appropriate and *if* necessary' (S3).

In comparison to the long statutory process involved when applying for and receiving an EHC plan, participants felt that the process involved in ceasing them was relatively quick and easy: 'it seems quite simple to just cease it, considering the massive process involved in getting one' (S18). Participants felt that this difficulty in acquiring an EHC plan made the idea of ceasing it even harder for families: 'once they've got it, it's very hard for them to let it go' (S5); with the length of time needed to obtain one exacerbating this: 'we have parents/carers where it has taken them years to get the EHC plan agreed ... having to fight for the plan... so the thought of giving it up is kind of ludicrous to them' (S11).

EHC Plans as a 'Golden Ticket'. The concept of EHC plans being perceived as a 'golden ticket' to access support and resources was mentioned by 15 participants: 'it's almost like a golden ticket, and it will help the young person to access services' (SO12). SENCOs explained that funding from EHC plans provided support for multiple students, and that the more EHC plans the school had, the more funding there was to support all the students there: 'there are economies of scale ... there are always ways of doubling up provision and timetabling students in the same class ... so I hold the EHC PLAN numbers up because it makes the job of supporting more students doable' (S2). SENCOs explained that even if CYP did not need the EHC plan anymore, it allowed access to future pathways: 'some of the lower level of students that would go on to do supported internships or apprenticeship are unable to do so without an EHC plan' (S17). This perception was echoed by other professionals, who reported that students had requested EHC plans despite a lack of need, in order to access more

support: 'we must have had 40 requests this year for students that are already at the college, and are getting along fine, and we'd say there wasn't a need – but they want an EHC plan, because why wouldn't you?' (S3). Additionally, professionals expressed that EHC plans could offer financial benefits and access to resources outside of education, particularly for the family: 'there is pressure to *not* cease a plan. It has quite an impact on family finances, as to whether someone's got an EHC plan or not, and their ability to access child benefits' (S3).

Several participants highlighted that, in reality, colleges and further education settings were not reliant on funding from EHC plans to support their students, indicating that the reduced hours within these settings meant that support could be funded from their notional budget: 'it's about 16 hours in college and therefore, depending on the needs of the of the young person, their needs can be met within their SEN element two funding¹' (SO12). Additionally, professionals in post-16 settings emphasised that additional funding could be applied for without the need for an EHC plan: 'we have a process, where they put in costs for any additional support and the additional funding they need from us' (SO13). Contrary to this 'golden ticket' perspective, one participant raised that EHC plans might be damaging to the student's career aspirations, in that some sectors might not accept a young person who had an EHC plan: 'we sometimes have students that want to go into the armed forces or into public services, but feel that if they have an EHC plan, that's going to be to the detriment and they request it cease because of that' (S3).

Pressure to Cease. Several participants expressed that SENCOs were sometimes under pressure from schools to reduce the number of EHC plans, due to

¹ Also referred to as SEN delegated budget, SEN support or notional budget

the expense involved in funding the notional SEN threshold: 'schools might want to fund inclusion, but it's expensive... we're expected to spend 30 times £6000. The pressure is on to try and reduce that money' (S2). SENCOs felt that there was pressure from the LA to cease EHC plans whenever possible: 'we've been told very clearly from the LA that the plan is cease, a) once the outcomes are completed, or b) once a level two qualification has been achieved at college' (S2). However, participants reflected that outcomes were rarely completed: 'hardly anyone would hit all of their outcomes' (SO14); and outcomes would be updated once met, rather than ceasing a plan: 'more often than not actually, we end up changing the outcomes and keeping the plans going' (S15). Participants perceived that LAs wanted to reduce the numbers of EHC plans to save money: 'there wouldn't be any argument... I think LAs are very keen on ceasing as it's cost' (S18). SENCOs also acknowledged this perception that LAs were seen as being process and cost driven: 'parents, carers, and young people feel that local authorities are not as emotionally invested or as caring sometimes as they ought to be' (S11).

Ceasing as a Celebration. Several participants highlighted that ceasing could be seen as a celebration and a demonstration of the impact of support: 'we see it as a success ceasing plans. If a child no longer requires support through an EHC plan then that's really positive, because it shows that they've made enough progress that they don't need that level of intensive support in order to learn. That's fantastic' (SO12). Professionals found that this approach had helped families see the positive aspects of ceasing: 'because it was presented as a celebration – you don't need this document anymore – they were very proud of themselves, and especially parents/carers were very proud of their son because he had come so far' (SO16). Participants reflected on how EHC plans had supported students to develop their independence and move

towards adulthood: 'we're all about working together to get these young people as independent as possible and get them the skills they need to gain employment or access community provision' (SO13). Moreover, participants emphasised that support was still available within the schools SEN budget once the plan had ceased: 'we've still got the £6000 towards that level of support – there are still in-class LSAs they can access if they need to. The piece of paper can disappear, but the support doesn't...' (S6).

Theme 2: Process and Procedural Challenges

Procedural Discrepancy Between Local Authorities. Several SENCOs experienced difficulties when working with numerous LAs with different processes and procedures: 'I've got EHC plans from four different LAs in the school. You're dealing all the time with different paperwork, people, teams – different ethos really' (S18). These discrepancies were also experienced during ceasing processes, with some LAs perceived as ceasing more EHC plans than others: 'Council X ceases them, Council Y don't, and the other LAs tend not to' (S9). Participants highlighted how they navigated these procedural discrepancies when working with multiple LAs by standardising their own paperwork: 'We took the best bits of all of the different paperwork and made it into our own and said to the LAs, "Look, this is what's going to work for us – we've got such a large volume of students, we need to be able to do this really efficiently" ... after they realised that we weren't doing it to be difficult, it was received quite well' (S11). This approach meant that staff only needed training on one procedure: 'Now we've just got one process, one set of paperwork, one system, and that's that' (S11).

Lack Of Transparency Around Ceasing Decisions. Some SENCOs there was a lack of transparency around how ceasing decisions were made by the LA.

Decisions to cease sometimes happened without discussions with school or parents/carers: 'In the annual review at the end there is always a tick box that says the plan should be continued – we always tick that, but sometimes those letters [stating that the plan is ceasing] just arrive' (S5). Another SENCO added that this sometimes happened to children who had not met their outcomes and who appeared to be reliant on the support: 'the learner received a letter to say that, as of the end of this, his plan will cease. He's probably one of our most vulnerable learners – his outcomes haven't been met yet' (S10). Participants believed that some of these decisions seemed to happen automatically, based on assumptions about the learner: 'they kind of assume that they're going on to university from us [and] we'll get the [ceasing] letter.' (S5).

SEN Officers highlighted that decisions about ceasing EHC plans were often made by a SEN panel within the LA: '[the panel] make a decision on whether or not it is appropriate to cease the plan. Once they've made the decision, the case officer proceeds with either ceasing the plan as per their suggestion or not' (SO1). SEN Officers explained that they relied on accurate paperwork about the student that demonstrated their progress and continuing areas of need: 'It's about that detail and the quality of the annual review documentation. ... our panel members read around 20 cases, of which some could be 80 pages long, and they just want it in a nutshell' (SO14).

Participants reported that ceasing could sometimes happen automatically if the student was not engaging in education: ' [the students] have basically two-thirds of the year to engage in education before a plan is ceased' (S3). Some professionals held concerns around the level of evidence needed to cease a plan or ongoing monitoring from the LA once it was decided that an EHC plan should cease: : 'we literally tick a box that says we all agree to cease the plan that goes to the LA – within a day they

will send you a letter back saying we ceased the plan. They don't seem to check with the parents/carers or do any kind of follow up'(S7). Participants suggested that this level of trust was not the case in other aspects of the EHC plan life cycle: 'If I wanted extra support I'd have to have reports to support it ... but to cease a plan you don't seem to need any of that' (S2). However, one SENCO expressed that their LA would confirm the ceasing decision with school staff if they had not been part of that ceasing discussion: 'if they haven't attended the meeting, and they received that paperwork, they will phone us to confirm that it's definitely the case' (S11).

Despite perceptions of ceasing as being a quick, easy process with minimal checking, professionals acknowledged that ceasing was a rare occurrence across both schools and LAs; 'it wasn't done very frequently, and a lot of the case officers that I worked with had never experienced ceasing a plan' (SO1). Some professionals perceived that ceasing should have happened before the CYP reached their setting, but this was uncommon: 'Any EHC plan being ceased is a rarity ... there are a lot of EHC plans that come to us, that actually could probably be ceased before' (S5).

Lack of Training. All participants expressed that there was a lack of training around ceasing processes and the criteria involved when ceasing an EHC plan: 'we were told what buttons we had to press on the system... that's about it' (SO16). Additionally, SENCOs emphasised that there was a lack of training on EHC plans in general: 'I don't really remember ever going to any EHC PLAN training' (S3). However, participants noted that they received an influx of training when the SEND legislation was first introduced: 'when the reforms came out in 2014, there was a whole raft of training around EHC plans' (SO12); and when they first started their jobs; 'when I first took over the role, I had a session with the assistant SEND Manager at the LA. She

came in and worked with me on the process for the EHC plans, for applying and reviewing' (S15).

This lack of formal training meant that participants were often reliant on other avenues to develop their knowledge and understanding of the EHC plan processes. For eight participants, their previous experiences played a large role in their understanding of the legislation: 'I taught myself, based on EHC plans weren't that different from Statements, apart from they go to 25 and include health issues as well.' (S2). SENCOs perceived that their links with the LA were an important way to learn on the job: 'I've got an almost direct hotline to the EHC Case Coordinator at the LA. I would say that there's barely a week that goes by where I don't have some level of communication with either the Assistant SEND Manager or the EHC Coordinator. The support from them is fantastic' (S15).

SEN Officers also relied on colleagues to help them with specific processes such as ceasing EHC plans: 'I would literally turn around to my colleagues and ask, "Has anyone ceased a plan? Can you give me some help?"' (SO1). Participants sometimes used websites to inform them of the current legislation or case law: 'I often look at NASEN [National Association for Special Educational Needs] ... I look at IPSEA [Independent Provider of Special Educational Advice]' (S18). However, several participants perceived that there might be difficulty in training around EHC plans when the processes and procedures were different in each LA with no standardised paperwork: 'because every EHC plan looks different around the country and there is no one standardised document, it's difficult to train someone on it. Every LA uses different processes, paperwork, and forms' (S5).

Lack of Capacity. SENCOs felt that EHC plans had become paperwork driven, leaving little time for monitoring other aspects of their role: 'one of the biggest downfalls

of the EHC plan is the amount of paperwork. The sending and receiving of paperwork is so labour intensive ... we should be working with students all day with interventions and advising on needs' (S5). Despite the amount of time spent on paperwork, SENCOs felt that paperwork was not considered or read: 'obviously none of the paperwork I send in is looked at. Hours go into it, nothing... plans aren't updated, nothing gets changed' (S18). Other SENCO identified that even when they requested a reduction in support or funding, their paperwork was not picked up: 'they just seem to ignore it. I get the updated version [of the EHC plan] with the same hours that I had before, which is fine because they're paying me. It doesn't seem to filter through to actually reduce the plan' (S7).

SEN Officers' caseloads within this study varied from 160 to 350 children with EHC plans and all SEN Officers also spoke about the high workload they were under: 'demands for EHC plans had gone up 80%, there were no new staff, so ceasing plans was a very low priority to be quite honest – you just didn't have the time to do it' (SO13). SEN Officers emphasised that a lot of their time was dedicated to the during the application and assessment stage of EHC plans due to statutory deadlines: 'I am out of the 20-week statutory processes right now, and I can't write [the plan] because I haven't got the EP report. The minute I get that EP report... everything just stops, and I write that plan' (SO14). SEN Officers found that ceasing EHC plans was their lowest priority when there were competing priorities: 'we've got to write the plans in the first place. We have to identify placements, we have to send consultations, we have to prepare reports for tribunal ... the ceasing of a plan, while it needed to be done, was quite low on that list' (SO16). SENCOs also identified these pressures around strict statutory timeframes within their LAs: 'their priority is to get the plans out to meet their SEN deadlines. When it comes to ceasing plans, it's the least of the priority' (S3). Even

when the decision to cease an EHC plan was made and agreed, SEN Officers did not feel they had the capacity to complete the task: 'I haven't got time to monitor their responses [to the ceasing letter]. It might be a month or two and then I'll send a second letter. I'm just so snowed under' (SO14).

Participants highlighted that capacity issues meant that representatives from the LA were unlikely to attend annual reviews unless the meeting was contentious: 'they usually come to the more difficult reviews, where we're asking for more funding or we're not the right placement for a young person, but if everything is going well they're unlikely to attend' (S17). SEN Officers explained that the time taken to attend reviews made it hard to justify their attendance: 'it took three hours to get there – that's my whole day for one child. I haven't got the ability to do that. I could do my work for 24 hours and it never gets done' (SO14). Ultimately, SEN Officers felt that the SEND reforms did not live up to their expectations and their high workloads made child-centred practice difficult to achieve: 'The EHC plan was mis-sold to us as professionals. It was very much this beautiful person-centred service, but actually we haven't got capacity to do that ... you're always reliant on other professionals' (SO14).

Need for Clearer Guidelines and Pathways. Seventeen participants expressed confusion around the lack of information in relation to the EHC plan processes and procedures. Several participants expressed that clarity only improved through case law and tribunals: 'the code of practice is a very vague document... the only way we will get clarity around certain situations is through case law. It's only through things going to the tribunal, and then making a judgement, that things are becoming clearer' (SO12). SENCOs felt that clearer procedures and guidelines would also support them with the legislation: 'understanding the workflow – exactly what to send and when – that would be good. I think giving options post-18, so [students and

families] are aware of those would be good' (SO14). Moreover, SEN Officers felt that there should be training on the legislation around ceasing EHC plans across services: 'there should be training for case officers on EHC plans – specifically ceasing a plan and what the protocol is; it should be a policy that all professionals have to be involved' (SO1).

Additionally, participants felt that the perception that EHC plans were guaranteed until age 25 had caused difficulties when managing parental expectations: 'I honestly think that the 0-25 description is misleading. That causes a lot of upset and confusion because it does sound like you're entitled to keep the plan until you are 25' (S3). Participants felt that clearer guidelines for parents/carers would help manage some of these expectations: 'It would be really good if there was more information around what ceasing a plan is. It should be about what ceasing a plan means ... ceasing a plan does *not* mean removing all support' (S7).

Several participants working in FE settings believed that there seemed to be a blanket rule that students who progressed to FE from a mainstream setting would have their EHC plan ceased: 'If they're in a mainstream secondary school and they're continuing into FE education, and they don't have a definable physical disability, that plan is going to be ceased' (S8). These participants felt that FE settings were often left out of discussions and guidelines and expressed that there needed to be more focus on FE providers: 'We are an equal provider. Everybody comes to FE or sixth form now ... we get a little mention at the bottom of [the guidance] – it would actually be really great to have a real focus on EHC plans in FE, because that's where a lot of it plays out' (S3).

Participants emphasised the need for clearer guidance and pathways which included case studies about different situations and outcomes when ceasing plans;

'...having more definitive guidelines, and being able to reference case studies to see what are valid reasons for ceasing an EHC plan' (S6). Participants explained that these case studies could be used to help understand whose voice took precedent – the student or their parents/carers: 'there are different scenarios to go on but actually who do you listen to? Do you listen to learner, or do you listen to the parents... if the learner wants to cease the plan, do you cease it?' (S3).

Theme 3: Factors That Support Decision-Making Processes

Importance Of CYP Involvement and Voice. Participants felt that student involvement during decision-making was an important aspect of the legislation, particularly during annual reviews when discussions about ceasing were usually raised: 'students should be at the annual reviews – their voice and their opinions are paramount, especially in secondary and higher' (S17). Participants highlighted that involvement within annual view helped the student's confidence to contribute and lead the discussions, and move towards independence: 'we always make them talk, a lot of them come to us in Year 7 and they've never been to a review before. Gradually over the five years, they get fine. Sometimes they lead the review, which is great' (S4). Student voice played an important role in understanding how CYP felt about the support in place and in promoting their independence: 'In Year 10 they said, "I don't really want [the TA] to sit with me anymore, can they sit at the back of the class, and I'll just ask if I need help?" So that's what we did, and we were really moving towards independence' (S7).

Eight participants highlighted that it was the student themselves who made the decision to cease their plan: 'The student said, "I don't want my plan. I don't need this ridiculous thing"' (SO14). Professionals expressed that it was difficult when this decision did not align with their own views around ceasing the support: 'there's a line

of us thinking that we know best, and sometimes we have to let the young person figure that out for themselves' (S11). SENCOs highlighted that this could create difficulties with parents/carers who wanted to be involved in the discussions or have the final say: 'parents/carers may have fought for the plan over years, and they see the value of it, but the young person doesn't – but we have to listen to the young person's wants' (S3).

Joined-Up Working. Participants felt that multi-agency working was key to informed decision-making about EHC plans, emphasising that professionals involved should be present during annual reviews, particularly at transition points: 'All the agencies should attend that annual review, including the EP and case officer, especially when it's a key stage transfer so that you can have a joined-up discussion' (SO1). Multi-agency working was important during annual reviews as this was when discussions around ceasing a student's EHC plan would often take place: 'we would come to that decision at an annual review. I think that's the way that the LAs want those decisions' (S17). SEN officers indicated that they would like to be involved in these discussions: : 'Ideally, we would be present in the annual review and we'd explore if they are making progress or their options before starting the ceasing process' (SO14). However, effective multiagency working was perceived to be a rare occurrence: 'I have only ever been to one meeting where there has been a health representative and a care representative ... the whole idea of this was plan to have everyone around the table...' (S10).

SEN Officers emphasised that strong links with adult social care could help prepare families for transitions away from the support in EHC plan and towards adulthood and greater independence: 'it's about ourselves, parents, the school and social care, looking at what the next steps are for that young person' (SO12). For

others, links with adult social care and health were vital but often lost; 'When it ceases it is absolutely critical, post-16, that we have health involved, because often the students are going into adult social care teams. It's essential that those people are around the table and they're often not' (S9)

Furthermore, four participants highlighted that EPs were not regularly involved during discussions around ceasing, and their focus seemed to be placed at the beginning of the EHC processes: 'I work really closely with our EP but if we're ceasing the EHC plan, the EP is not involved with them anymore. They are there for the needs' (S4). Others expressed that consistent EP support throughout the EHC process was important as these professionals could help to promote CYPs' independent skills: 'some of the EPs have worked with the young people for more years than we have – right up until they are 16, helping them develop life skills. We value their experience and their advice' (S17).

Finally, SENCOs expressed that maintaining relationships with parents/carers was an important part of their role, promoting joined up working during ceasing processes: 'It's about that relationship and being part of a journey with them' (S15). Open communication and trust helped when having difficult conversations around reducing or ceasing EHC plans when CYP no longer needed them: 'the minute you mention reducing [support] to a parent, it's met with a bit of a barrier. It's just communication and explaining to the parent about the different steps and what's happening' (S17). However, SENCOs felt that LAs did not always include parents/carers during decision-making processes and would sometime inform them of important changes by letter: 'If [the LA] do decide to cease, at least have a phone call or find out why the parents/carers need it. There's nothing... just a letter arrives' (S4). SENCOs reflected that this lack of parental involvement meant that parents/carers

could become more protective of the statutory support and wary of the LA: 'the mother hasn't managed to trust [the LA]. She thinks that they're trying to take [her son's] support away, and trying to rid him of support that he desperately needs' (S7).

Presence of SEN Officers During Meetings. Five SENCOs felt that an important part of SEN Officers' roles should be to meet with or observe students in their school setting, noting that EHC plans did not always accurately reflect the child: 'reading the paperwork often gives you a very skewed view of what the student's actually like, and the EHC PLANS are terrible for that. They are written as a worst-case scenario because that's what gets the EHC plan' (S2). SENCOs explained how supportive it was when SEN Officers attended meetings where support or provision in EHC plans were being discussed: 'They were really supportive, backing up what I was saying and explaining the best course of action' (S6). Yet this attendance seemed to vary by LA, depending on resources: 'One [LA] would rather not attend and the other [LA] will if they can. It's down to manpower and resourcing – all LAs have shed staff in education' (S2).

SEN Officers also highlighted that attending meetings with parents/carers could help challenge negative perceptions about the LA, particularly around ceasing: 'face-to-face definitely helps ... when it comes to crucial decisions like this, you can be transparent, you can be open ... they can feel that you're doing what's in the best interest of the child, rather than what a lot of people think is cutting costs' (SO1). However, a lack of capacity and large caseloads made attending meetings difficult in practice: 'The role is purely administratively-based now. With over 200 students, it's so paperwork-based that it can be impossible to keep on top of that' (S5). Participants outlined that having ongoing discussions with parents/carers (e.g. during annual review meetings) helped to prepare them for the idea of ceasing in the future 'We start

talking about the fact that the plan might cease ... because they need to know that this support won't be the same when they transition out of Key Stage 5' (S7).

Clear, Updated Plans. SENCOs expressed the difficulty they experienced when EHC plans were not updated nor reflective of students' needs: 'in an average year, I'll have about 60 consultations – only ten of them will have up-to-date paperwork. It makes life very, very difficult for me when deciding whether we can support their needs' (S5). Others highlighted that in some outdated EHC plans, students had achieved their outcomes years prior: 'They've met the outcomes since they've been at primary school – we've got lots of examples of EHC plans not being age appropriate. The quality is really quite dreadful' (S9). Some professionals felt that it was difficult to make an EHC plan accurately represent a whole host of children with different strengths, needs and aspirations: 'They need to look at EHC plan system and realise that it's not a one-size-fits-all document' (S5). Professionals highlighted the need for clear SMART outcomes in EHC plans: 'some of the outcomes are not necessarily written in an achievable way, even if you stayed in education for the rest of your life' (S3). Participants felt that clear, updated and flexible plans would lead to better outcomes and could support decision-making processes around ceasing: 'I'd love it if they were just more flexible around the entire plan process. If we could ask for increases and decreases in provision when we needed them, I think more plans would cease, because people wouldn't be too scared to cease them' (S7).

Keeping Plans Through Transitions. Participants expressed that CYP's EHC plans were often ceased prior to key transitions, which included transitions between settings: 'the primary school ceased the plan halfway through Year 6 because they decided that this young man didn't need a plan anymore' (S7); as well as between Key Stages: 'We did those at the point of transition ... in our school it was Year 9 and Year

11, and as far as I'm aware, that happens in most LAs' (S6). However, SENCOs highlighted that transitions to new settings were difficult times for children with additional needs. and EHC plans could support CYP during significant moves: 'It suits people because it's the end of the Key Stage but it's actually a weird time to remove support, just at that point when a child needs support most. As you go from, year six to year seven or year 11 to 12 – that's when the rugs pulled from underneath you' (S4).

SENCOs expressed that keeping EHC plans through key transition points could help new settings gain a clearer understanding of students' needs: 'if you don't keep the EHC plan, even temporarily in a transitional way for a term, then all that knowledge isn't going to be passed across. I'd be a big advocate for always keeping an EHC plan for a term, just to transition a child' (S4). This process could also help to ensure that their transition was successful: 'school and mum decided that we would keep the plan just for the transition into sixth form. At that point, he had an early annual review and it was ceased. It was merely just to make sure that everything was going to be okay during the transition' (SO14). Participants within FE settings indicated that they were often left out of pre-transition discussions about ceasing, which could affect the support available for the student: 'their need doesn't disappear over the summer – they still have a high level of need and we have to start the whole process of applying for a new EHC plan ... you shouldn't cease the plan without fully consulting current and future provider' (S10).

A Graduated Approach to Ceasing.

Participants suggested that a graduated approach to ceasing with reduced levels of support could help promote independence and assess CYPs' needs: 'it's difficult to just cease as the first stage. I would suggest scaling that back and reducing the hours, rather than ceasing the plan altogether ... reduce the hours by a bit and do

a *plan, do, review* (SO1). Others indicated that they were already reducing support gradually: 'If you are ceasing a plan, you probably have already removed some of that support and seen how it's gone' (S7). SENCOs highlighted that updating EHC plans could be difficult and there was not any guidance on how to use a graduated approach with EHC plans: 'people think I'm insane when I try and reduce a plan... there's a lot of training out there on the graduated approach in terms of SEN, but not on what the graduated approach is within an EHC plan' (S7).

Participants also expressed hesitation when ceasing an EHC plan because of the inability to restart it once ceased: 'We couldn't reopen the plan because it had been ceased. It would mean putting together a new request' (SO1); reinforcing the need for a trial period, without the EHC plan, where it could be reinstated: 'there needs to be a step between ceasing a plan and putting it on hold' (SO16). This trial period without support was something that professionals were already doing informally: 'we'll trial it without support for a while ... both times the EHC plan has been ceased because both students and parents/carers didn't want or need it in place' (S2). Participants also expressed the importance of tracking CYP's progress post-ceasing; 'The school after six months would review her progress to see if she was still making progress with the level of support in place' (SO1). Participants emphasised the importance of explaining this graduated approach to parents/carers to remind them that their child would still be supported post-ceasing: 'parents/carers often get very anxious when you talk about ceasing a plan – they assume that all support will be removed and they don't really understand the graduated approach ... it doesn't mean that we're removing all support, just the additional support that came with the plan' (S7).

4.3. Triangulation of findings

Triangulation of these findings was important to understand how similarities and differences arose from the two phases of data collection. The synthesis of the data showed that similar patterns, themes, and experiences arose across both interview and questionnaire data. As outlined in the methodology section, initial questionnaire data and themes helped to form the final semi-structured interview schedule. Data from both instances was then analysed and themed separately, the sections below outline similarities and differences through the two phases.

Similarities

Through familiarisation with the data sets and key themes that were arising, e.g., the final thematic map, the researcher was able to draw similarities between the two data sets and identify those aspects which were present in both phases.

There were a number of similarities across the interviews and questionnaires, particularly around re-occurring themes. For example, the use of the term 'safety net' was brought up in both phases, this helped to confirm the presence of this phenomena around EHC plans. The questionnaires were able to gather data from a wider demographic, providing breadth, with the use of interviews helping to explore these common themes in more depth. One example is having ongoing discussions before and after ceasing, this was raised as a theme within the questionnaires but provided little information on how this could work in current practice. The interviews highlighted this as a theme way to support joined up discussions and relieving anxiety around the cessation of EHC plans. Another example is the want for up to data information within EHC plans which arose during the questionnaires, however, it was only through this arising during the interviews that a broader understanding of the implications of out-dated plans and the barriers preventing plans being kept updated.

Other examples of similarities include: CYP involvement; reliance on EHC plans for additional funding; possibility to reinstate ceased EHC plans; good rapport between settings aiding conversations; early intervention towards independent skills; and a lack of criteria on ceasing EHC plans.

Differences

The familiarisation with the data sets also highlighted differences. It is important to note that there were some points raised in questionnaires that didn't arise within the interviews. These differences were not explored fully within the interviews and could be worth exploring within future research, for example, disjointed health services was a theme raised in the questionnaires but was not discussed within the interviews. From pragmatic reasons these were not able to be explored in further depth within this research without further data collection phases. Further examples of differences include: automatic transfer of statements to EHC plans; Services not working on independence; examples of multiple perspectives within a joined up approach.

Chapter 5: Discussion

This chapter aims to synthesise and interpret the findings outlined in the previous chapter, in the context of government guidance and legislation, and current literature in order to address the research questions of this study. The chapter begins by providing a summary of the research rationale, and aims to explore this study's contribution to this field of research by highlighting strengths and areas for development. This research highlights the complex interacting systems which exist within this area correlating with Bronfenbrenner and Morris' (2006) PPCT model, which will be drawn into the discussion. This chapter will also consider research implications for LAs, EPs and the wider policy makers, including potential areas for further exploration.

5.1. Research Question 1

How are decisions made to cease a CYP's EHC plan?

- *How do professionals view the ceasing process?*
- *What are the professionals' roles within the ceasing process?*

The first research question aimed to explore how participants perceived and experienced decision-making processes when ceasing a CYP's EHC plan. This included an exploration of when these discussions took place, who was involved, and the perceptions of professionals around ceasing. It was hoped that this research might be able to fill a gap in current literature around how and when discussions about ceasing take place, helping to inform future practice.

Decision-Making Processes

Participants in the current study highlighted that decisions around ceasing an EHC plan were predominantly made during annual reviews, or during the CYP's

transition to a new setting. These decisions were typically initiated by the SENCO or SEN Officer, however CYP would occasionally initiate these discussions. These findings echo those from previous research; Walker (2008) found that discussions about ceasing were generally held at the annual review under the previous Statements of SEN system. Although there is no stipulation within the Code of Practice (2015) as to when discussions about ceasing should take place, the guidance emphasises that both families and education settings should be informed and consulted, which suggest that the annual review would be the most convenient time to have these conversations. As identified in previous research, SENCOs and SEN Officers within this study highlighted that their roles during this process included providing information about next steps and pathways to adulthood for the CYP and their families (Eccleston, 2016; Jones & Swain, 2001; Redwood, 2015). Participants highlighted that this provided opportunity to revisit the legislation, ease parental anxiety, and emphasise that the CYP would still be supported if the EHC plan were to cease.

Need for Transparency. Despite guidance in the Code of Practice (2015) outlining that schools and families should be informed and consulted about ceasing decisions, participants in the current study raised concerns about a perceived lack of transparency within the LA around ceasing EHC plans. Participants in the current study explained that the annual review paperwork includes a section that asks stakeholders whether the EHC plan should be continued or ceased to maintain; SENCOs highlighted that despite their views or their response about ceasing in the paperwork, the final decision to cease an EHC plan was still made by the LA. SENCOs reported that families could receive letters without warning that the plan would be ceased which created anxiety amongst parents/carers. This lack of transparency around discussions was felt by numerous SENCOs, who expressed confusion about

the criteria the LA were using. Indeed, frustration around a lack of clarity in LA decision-making processes were raised by SENCOs in prior research, whereby a need for transparency was seen as key for informed decision-making (Boesley & Crane, 2018). Local authorities function within a CYP's exosystem, while they rarely have direct engagement with the CYP they have considerable influence over the microsystem (school and home) and support available (mesosystem), highlighting the importance of clear transparent processes which form predictable support for CYP over a period of time (chronosystem).

Moreover, SEN Officers – who were perceived by SENCOs as representing the LA – were rarely present for these discussions at annual reviews, which was congruent with previous research (Boesley & Crane, 2018; Pearson et al., 2015). SEN officers in the current study explained that decisions to cease were often not made by them, but by a SEN Panel who reviewed the annual review documentation and made decisions from the paperwork alone. Concerns about decision-making transparency within LAs are not uncommon; in their investigation into service user experiences of EHC plans, Adams et al., (2017) found a lack of transparency around SEN panel processes and decision-making, suggesting that decisions need to be clearer and stakeholders must be kept informed about the processes. However, findings from the current study suggest that more needs to be done to improve transparency, which will be discussed further in research question two.

Safety Net

Participants in both phases of data collection raised the theme of EHC plans acting as a *safety net* or a protective factor for CYP, with fears that they would be unsupported without these documents in place. Professionals also highlighted that external agencies seemed to hold these perceptions, believing EHC plans could act

as a preventative measure or protection against other vulnerability such as gang involvement. This aligns with perceptions from parents/carers within recent research, whereby EHC plans were seen as allowing improved access to specialist services, better support and improved joint working (Adams et al., 2017; Rao, 2020; Thom et al., 2015). Similarly, Walker (2008) found that statutory plans were often perceived as the only way to access additional support, with a belief held by stakeholders that support was not available post-ceasing, and the majority of participants within Cochrane's (2016) study also raised this perception of EHC plans as protection for CYP. These perceptions of EHC plans as a protective factor could be explained by the statutory duty placed on schools and LAs to support that student through transparent processes, parents/carers within Bentley's (2017) study highlighted that they see the EHC plan as a tool to help them oversee support, direct the school and hold people to account. Riddell et al. (2016) found similar perceptions within Denmark, with parents seeing IEPs as 'backpacks' that their children can take to different settings throughout their education and protect their children's access to resources. Other research within the United States has highlighted how parents feel a lack of trust of the system and the need for strong advocacy (MacLeod et al., 2017; Nicholson Sonntag, 2015).

Similar to previous research, participants within this study highlighted a growing awareness of EHC plans and less understanding of the graduated approach or support available outside of EHC plans with a perception that this is a way of ensuring support until the age of 25 (Eccleston, 2016). As well as acting as a protective mechanism, participants within the current study highlighted that parents/carers and wider stakeholders often wanted to hold onto EHC plans as a *golden ticket* to post-16 funding. Although SEN Officers highlighted that colleges could apply for additional funding for CYP without the need for a plan, some supported apprenticeships and

courses are only available to those with EHC plans, which may reinforce perceptions about plans being viewed as a *golden ticket*. The Code of Practice (2015) highlights that additional post-16 funding is available through the government and the Education and Skills Funding Agency, yet findings from the current study indicate that knowledge and understanding about alternative post-16 funding pathways may not be widely recognised, highlighting a disconnect within the mesosystem, the communication between LAs and school/families (Bronfenbrenner, 1979). Additionally, professionals in the current study indicated that EHC plans could entitle families to additional support, such as child benefits, that they perceived they would not be able to access otherwise. Indicating the need for more holistic, joined-up working for families who may be reliant on this type of support, ensuring that clear pathways and advice is in place to help them access additional support – e.g., an EHC plan is not required to demonstrate the additional need required to claim Disability Living Allowance, Child Benefit or Personal Independent Payments (Welfare Reform Act, 2012).

Additionally, similar to previous research professionals within the current study highlighted that there seemed to be a belief held by both parents/carers and wider professionals that EHC plans would always remain in place until age 25, regardless of need or any progress (Bentley, 2017; Eccleston, 2016). However, the Code of Practice (2015) states that although EHC plans can continue until the age of 25, 'this position does not mean that there is an automatic entitlement to continued support at age 19 or an expectation that those with an EHC plan should all remain in education until age 25' (p.190). These findings from the current study echoed those from previous research; evidence presented by the Education Committee (2019) indicated that parents/carers preferred their children to continue in post-16 education and continue their EHC plan, rather than transition to social care support, while Cochrane (2016)

expressed that EHC plans were perceived as being able to safeguard CYP's right to remain in education for longer. Similarly, Hunter et al. (2019) indicated that families were concerned that if a young person's plan was removed because they gained employment, but the employment broke down, they would be left unsupported without the EHC plan. These findings mirror perception in the current study whereby parents/carers and professionals were seen as wanting to keep EHC plans *just in case*. Participants felt that perceptions of EHC plans as a *safety net* or *golden ticket* meant that many parents/carers and professionals were reluctant to cease, despite some CYP having met their outcomes or no longer needing the additional support within their EHC plan. These findings demonstrate how a disconnect from the macrosystem policies and ideologies and the nested systems can create barriers further within processes (Bronfenbrenner & Morris, 2006).

Pressure to Cease

Participants in the current study perceived that schools and LAs were under pressure to cease EHC plans due to increasing funding implications. Within England, all mainstream schools are provided with resources to support SEN, and are expected to provide and monitor support through a notional SEN budget of £6,000 per pupil, that is funded directly by schools (DfE, 2015). SENCOs within this study perceived that the requirement to spend the initial £6,000 out of the school finances for every EHC plan could cause considerable outgoings for schools with high numbers of plans. For these SENCOs, they felt pressure from their school to reduce the number of EHC plans, and reduce the amount needed for the SEN budget overall.

SENCOs within this study also perceived pressure from the LA to cease plans, when possible, particularly if outcomes had been met or qualifications achieved; however, this was often viewed as a cost-saving exercise for the LA. SEN Officers in

the current study reported that this perception could also be felt by families, who viewed the LA as being less emotionally invested in supporting CYP. Other studies have reported similar concerns about LAs being more concerned about provision costs over the needs of the child (Sales & Vincent, 2018). Hunter et al (2019) highlighted that government financial allocations to LAs have failed to take account of the rapidly increasing number of EHC plans, meaning that funding per CYP has reduced by just under 20% over the past five years. These figures validate participants' concerns about a lack of funding for SEN and pressure to manage budgets.

While there are pressures to cease EHC plans due to the financial pressure placed in schools and LAs in maintaining the provision and support, SENCOs in the current study, and stakeholders in previous research have explained that EHC plans can also provide additional funding and resources to support multiple students in school (Adams et al., 2017). One SENCO in the current study referred to this as 'economies of scale' (S2). This perception was also present in the questionnaire, with professionals citing reliance on EHC plans to fund staff and SEN resources. Similar findings have previously been reported, with concerns raised by stakeholders around how EHC funding would affect staffing and provisions (Boesley & Crane, 2018; Education Committee, 2019; Norwich & Eaton, 2015). SENCOs in the current study perceived that they had become increasingly responsible for financial management, having to coordinate the cost and buying-in of interventions, external support and resources (Norwich & Eaton, 2015). These findings indicate that SENCOs appear to be balancing pressure to cease with pressures to retain EHC plans, in order to meet the needs of their students most pragmatically.

Ceasing as a Celebration

Participants within this study highlighted that ceasing an EHC plan could be seen as a celebration of how far the child has developed, as they no longer required the additional support outlined in the plan. In these circumstances, ceasing demonstrated the success of the EHC plan system and how it had supported the student's independence and move towards adulthood. The SEND Code of Practice (2015) instructed LAs to ensure that the transition to adulthood for CYP with SEN was well planned and integrated with the annual reviews. The aim of these reforms was to ensure a smooth transition from the EHC plan and Children's Services to Adult Services (where necessary), and adulthood. Additionally, legislation stated that outcomes should be ambitious, enabling the young person to make progress towards their aspirations. Similar to findings from the current study, Walker (2008) also encouraged a reduction of reliance on Statements of SEN. Walker found that all the young people they interviewed saw ceasing as a positive thing, as it was a demonstration of their voice being heard and their independence. Students were still able to access support in their education settings, but this was done in discussion with them and was often not taken up. Similarly, participants within the study by Gaona et al. (2019) expressed their desire for independence, especially around domestic life, self-care or transport. In this sense, ceasing plans may be seen a culmination of facilitating factors within the mesosystem (the communication between systems) and the processes over time (Bronfenbrenner & Morris, 2006) , including early preparation for adulthood, a graduated approach to reducing support, clear guidelines and communication around support post-ceasing, and CYP and parental involvement throughout.

5.2. Research Question 2

How do SENCOs and SEN Officers describe the key factors that influence the ceasing process?

- *What are some of the challenges faced?*
- *What supports decision-making during the ceasing process?*

The second research question aimed to explore the key factors impacting on the ceasing process, exploring both those steps towards the cessation, and post-ceasing. Discussion draws on the perceptions of both LA and school-based professionals to understand the key processes, what works, and how the ceasing process could be improved.

Capacity

Professionals within this study felt that the issue of capacity was a particular barrier to implementing the EHC plan reforms. Both in-school and LA professionals experienced difficulties finding the time to support staff and students to develop and monitor progress and promote independent skills. Their time was predominantly taken with paperwork around new EHC requests. The wider socio-political discourse and dominant ideology that exists within SEN (macrosystem) and the lack of consideration or priority given is not solely an EHC plan issue, Mitchell et al (2010) highlight this trend across multiple international contexts with IEPs. Francisco et al., (2020) highlight the time and paperwork needed for IEPs within the United States.

SENCO Capacity. SENCOs within this study highlighted that time spent at the beginning of the paperwork-heavy EHC process left less time for SENCOs to review the needs of students who already had EHC plans. As with participants in Walker's (2008) study, SENCOs reported little time or incentive to explore whether plans could

or should be ceased. SENCOs' lack of capacity prevented them from maintaining up-to-date EHC plans that were reflective of CYPs' strengths, needs and SMART outcomes, which in turn could act as a barrier to promoting CYP independence and reducing SEN support over time. Research on SENCO capacity has demonstrated similar findings; the Education Committee (2019) reported that schools and other professionals felt that SENCOs were being taken away from providing support and advice, in order to complete EHC plan paperwork. With the number of children being identified with SEN and receiving EHC plans continually rising, these capacity issues may only increase, (DfE, 2019). SENCOs within Gore's (2016) study felt that the reliance on repetitive EHC paperwork contributed to perceptions that their success as a SENCO was based on the number of EHC applications they made, rather than improving outcomes for CYP with SEN. Other research has demonstrated the same willingness from SENCOs to lead on inclusion and SEN support within schools, but policy issues, capacity, and bureaucratic paperwork continued to hinder this (Palikara et al., 2019; Pearson et al., 2015).

SEN Officer Capacity. Likewise, all SEN Officers within this study struggled with high workloads; they reported that their capacity was taken up by increasing numbers of new EHC requests, and they lacked the time and ability to monitor or maintain EHC plans. Participants noted that their priorities were on meeting statutory deadlines for EHC assessments, while concepts like ceasing were a low priority. Indeed, the Education Committee (2019) noted that these pressures could be exacerbated by parents/carers who could hold LAs and schools to account for assessment deadlines, taking time away from other key SEN processes. Moreover, another difficulty raised by SEN Officers in the current study was being reliant on other professionals to meet deadlines, with delays from other professionals having a knock-

on effect. Other research has highlight the difficulties that external professionals, such as health professionals, have meeting the six week deadlines (Skipp & Hopwood, 2016; Webster & Blatchford, 2017). The statutory timescales governed by the Code of Practice (2015), coupled with this lack of capacity that professionals experienced, could account for the reduced quality, co-production, and involvement of CYP and parents/carers during decision-making processes (Adams et al., 2017; Palikara et al., 2019; Webster & Blatchford, 2017). Participants highlighted that the aspirations of the SEND reforms required more time and money to be actualised, expressing their dismay that SEN Officers rarely had capacity to annual reviews, monitor or review plans.

Capacity of Wider Professionals. Participants in the current study expressed that a wider lack of capacity from other professionals to attend meetings and contribute to the accurate review of students needs was a barrier to informed-decision making. Participants raised concerns that professionals, such as EPs, had a lack of capacity to attend meetings or make recommendations during annual reviews. This led to concerns that these professionals would not have an accurate picture of the CYPs' strengths and needs. Participants within Redwood's (2015) study expressed similar frustrations with non-attendance during meetings where decisions were being made about provision in EHC plans. However, Redwood (2015) noted that this was a systemic issue, in that wider services were under their own pressures and their system structures did not allow the flexibility to attend meetings. The Education Committee (2019) found that external professionals, including speech and language therapists and EPs, were focused on undertaking needs assessments diverting resources from providing guidance and support for pupils at a SEN Support level. This implies that a lack of capacity can lead to difficulties in monitoring and supporting CYPs' independent

skills, the gradual reduction of support over time for students, and informed decision-making around ceasing. Redwood (2015) concluded that further training was needed across education, health and social care into the reforms and their roles within it, which participants in the current study echoed.

Child and Young Person Involvement

The meaningful involvement of CYP in planning for their own provision and transitions is a key aspect of the PPCT model (Bronfenbrenner & Morris, 2006)., within the *process* aspect, emphasis is placed on the interactions that take place over time between the CYP and their environment, e.g. SENCOs, teachers, and parents/carers. This theory highlights how the systems around the CYP can directly influence and support their development, including ability to take part in conversations around their EHC plan. Findings from both questionnaires and interviews explored CYP involvement during decision-making and highlighted their involvement as a key factor that could influence the ceasing process. Local authorities and professionals have a duty to work in partnership with parents/carers and CYP to ensure that they are involved in discussions and decisions about their support (DfE, 2001, 2011, 2014). One of the key aims of the Code of Practice (2015) and SEND reforms included extending the rights of CYP and their parents/carers to have a say in their education and to become active change agents of their own lives. Preparing for adult life and developing outcomes that worked towards CYPs' aspirations were stipulated as a core element of discussion throughout the EHC needs assessment and reviewing process (DfE, 2014, 2015). Additionally, the Children and Families Act (2014) stipulated that young people should normally be engaged with directly once they reach the end of compulsory school age. The Code of Practice (2015) added that LAs must not use the views of parents/carers as a proxy for these young people's views.

Within the current study, over 70% of questionnaire respondents reported that CYP had been involved during the ceasing process, however, questions could be raised about how meaningful the CYP involvement was given that almost half (45%) of the qualifying comments highlighted that their voice was given by proxy. However, interview findings also demonstrated examples of good practice, and the importance of CYP involvement during decision-making was identified as a key facilitating factor by participants. Interview participants described adapted discussions to be positively focussed, brought the student into discussions at each stage to develop their confidence over time, and one participant indicated that students would sometimes lead the review meetings. Involving CYP was seen by many as a move towards independence, and interview participants reported that CYP involvement was important as multiple CYP had voiced their desire to reduce or remove support during these meetings. Further strengthening this perception of the CYP at the centre of the processes and their development over time (Bronfenbrenner & Morris, 2006).

However, recent research demonstrates that child voice is often not given priority in discussions, nor is their preferred method of communication used (Franklin et al., 2018; Heasley, 2017; Rao, 2020; Redwood, 2015). Young people in Walker's (2008) study expressed frustration at not being listened to as their targets were often set by others. Moreover, Franklin et al. (2018) found that that majority of CYP they interviewed did not know that they had an EHC plan, with some parents/carers expressing that CYP lacked the capacity to understand what the plan meant. Mitchell et al (2010) indicate that this lack of meaningful student involvement in their own educational provision is commonplace internationally. Redwood's (2015) study noted that there could be difficulties when there were conflicting wishes between CYP and their parents/carers and professionals in the current research felt that it was important

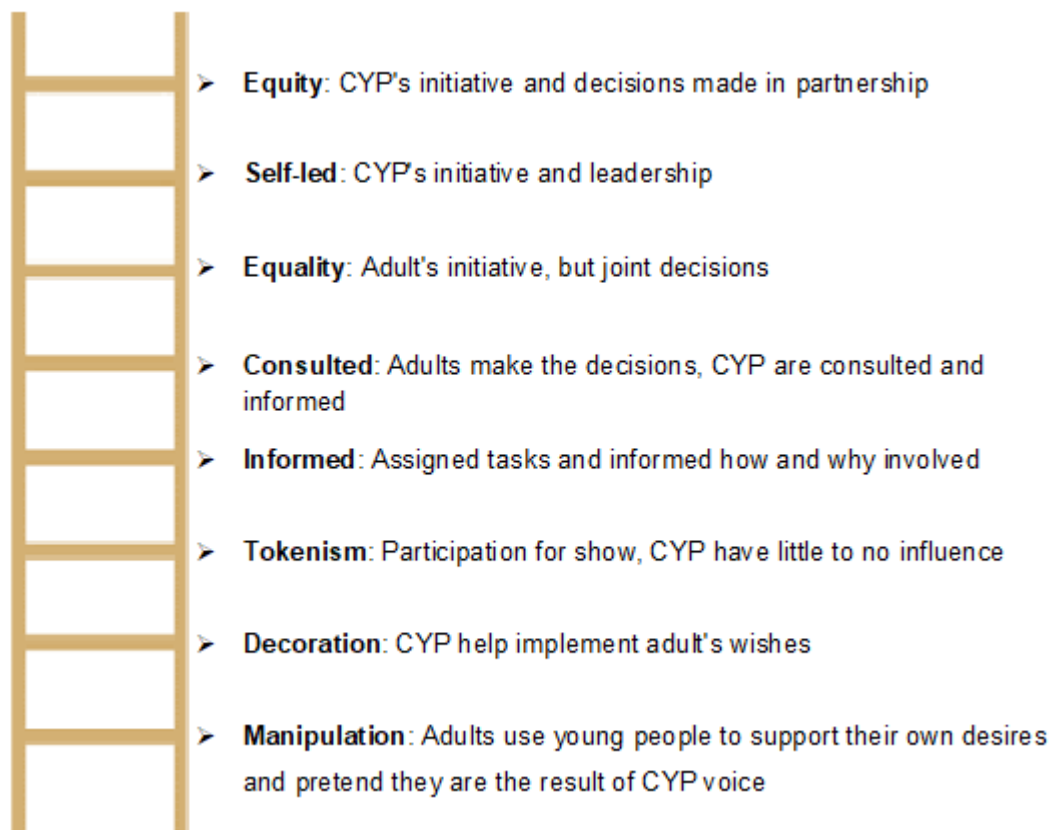
to separate CYP views from those of their parents, as they were often used as a proxy. However, it is important to note that the SENCOs interviewed for this research were based in secondary settings or higher, indicating that increased participation may come with age. Linking with this aspect of macrotime, with changing expectations of CYP over time. Parents within Adams et al.'s (2017) survey also indicated that CYP and parental inclusion during meetings seemed to with the CYP's age, however this survey did not separate parent and CYP involvement. Rao (2020) reported that factors such as the CYP's capacity, amount of contact, and levels of anxiety were all barriers to meaningful CYP involvement during EHC processes, while familiar adults, child-centred meetings, and greater understanding of the processes acting as facilitating factors. This lines up with participants' experiences in the current study who emphasised that continual involvement of CYP over time could increase the CYP's confidence and agency in the processes. Rao (2020) also highlighted that meaningful CYP involvement could lead to more effective provision and better outcomes, indicating that a sense of agency and autonomy over their learning could increase confidence and buy-in around their independence and learning.

A key recommendation from Walker's (2008) study on ceasing Statements of SEN was to include CYP voice in decision-making and ensure they had a say in their provision and support. The current study seems to indicate that the EHC reforms have addressed some of these concerns, with participants reporting increased levels of CYP involvement, who were able to make important decisions about their plans. Demonstrating the impact of the interaction between the macrosystem and the changing expectations over time (macrotime). However, although the current legislation emphasises the importance of CYP involvement, and research demonstrates its importance and effectiveness, there is little guidance on how this

should be achieved, particularly given the range of abilities across CYP with SEN. Hart's (1997) Ladder of Participation model may act as a useful framework to support CYP participation, which uses the rungs of a ladder to demonstrate a hierarchy of participation (see Figure 13).

Figure 13

Ladder of Participation model, Adapted from Hart (1997)



Eight stages exist in this model, starting with *manipulation* whereby the adults involve CYP without giving them the information or knowledge required to develop informed decisions, and CYP do not have a say in the outcome. The model ends on *child-initiated shared decisions with adults*, where CYP are able to partake in joint decision-making and play an active role in discussions about their education. Educational Psychologists are well-placed to support the disseminating and training of SENCOs and SEN officers into the meaningful participation of CYP and could utilise

Hart's (1997) model to support this process. Zickel and Arnold (2001) conducted research in individualized education plans (IEPs) in USA, demonstrating that the explicit teaching and training of CYP involvement helped to promote an increase in student self-advocacy skills and fostered a sense of ownership of the process and plan.

Multiagency Working

Participants in the current study emphasised the multiagency working was another factor that could influence ceasing processes. Bronfenbrenner's (1979) ecological systems theory emphasises the role of ongoing interactions between systems (mesosystem) to facilitate the best outcomes for CYP. The Children and Families Act (2014) placed a statutory duty on LAs to ensure that education, health and care services worked together to promote CYP's wellbeing and improve the equality of educational provision. It was the hope of these reforms that information sharing, joint planning, and multiagency collaboration would improve the quality of outcomes and provision for CYP with SEN. Although participants in the current study emphasised the importance and desire for joined up working with wider services, this was a rarity. Participants highlighted that external professionals were often involved in the beginning stages of EHC assessments and applications, yet involvement is rarely seen beyond that point. This was particularly noted when EHC plans were ceased and the CYP no longer required that level of additional support.

Similar difficulties related to this drop-off of involvement after plans were finalised have also been documented in previous research (Boesley & Crane, 2018; Cochrane, 2016; Skipp & Hopwood, 2016). Cochrane (2016) found that parents/carers felt led down by the lack of external agency involvement during annual reviews, with meetings largely held between the school and parent alone (microsystems). Parents

in Cochranes' (2016) study indicated the need for professional involvement to help demonstrate and influence CYPs' progress over time; this finding strengthens the rationale for increasing professional involvement during each stage of the EHC plan process, to support the development of CYPs' independent skills and provide guidance around the gradual reduction of support. Redwood (2015) found that professionals would engage in some joint planning during the EHC plan processes, but often worked separately, yet 39% of professionals expressed that they wanted a closer working relationship. Redwood (2015) also found that SEN Officers were seen as having a key role in facilitating and managing these processes. However, participants in the current study highlighted that SEN Officers rarely had capacity to take part in annual review meetings, with their work largely focussed on the beginning of the EHC process. Although, when SEN Officers were able to attend meetings, it was seen as beneficial to promoting CYPs' independent skills and future planning. This finding highlights the need for discussions not just between microsystems but involvement of the exosystem (wider professionals and SEN officers) to ensure wider support processes can be put in place for the CYP and monitored.

Participants within both questionnaires and interviews in the current study emphasised the need for stronger links with adult social care to support decision-making processes around ceasing and to inform and facilitate transitions to adulthood. This was also seen as a way to move away from the perception that EHC plans were a *golden ticket* to services and education until 25 and towards a greater understanding about alternative pathways of support. However, participants felt that, despite a statutory obligation to engage in multiagency working following the SEND reforms, social care did not appear to be held to the same pressure or scrutiny as education in relation to supporting CYP with SEN, and therefore these links were hard to develop

or enforce. Boesley and Crane (2018) reported similar findings, with SENCOs in their study sharing frustrations around limited involvement from health or social care professionals during EHC planning processes and an over-reliance on schools to monitor, review and plan support throughout the EHC plan lifecycle. Although participations in the current study emphasised that multiagency working was a key facilitating factor to better outcomes, independence, informed decisions and eventual ceasing, a lack of capacity to attend and contribute to review meetings throughout the EHC plan lifecycle limited the impact of this work. This indicates the need to develop and encourage greater multiagency working between professionals, particularly in relation to ceasing processes.

Clear Guidance and Guidelines Around Ceasing

Interview participations expressed that an essential factor for supporting decision-making processes around ceasing was clearer guidance and pathways To support the implementation of the reforms outlined in the Children and Families Act (2014) the DfE published the SEND Code of Practice (2015), outlining the duties of LAs, health bodies, and education settings, and providing guidance on the implementation and development of EHC plans. However, some researchers have argued that statutory guidance lacked the specificity needed to effectively support key stakeholders through the legislation (Allan & Youdell, 2017). It is important to consider the role of the macrosystem (Bronfenbrenner, 1979), where policies and legislation are developed to provide statutory duties on exo- and micro- systems without specificity. Indeed, participants in the current research consistently expressed the desire for clearer guidance around EHC and ceasing process and procedures, wanting a clear workflow and more standardised paperwork across LAs and settings.

Need for Consistency and Clarity. Multiple studies have reported similar frustrations around a lack of standardised paperwork and processes across LAs, creating a further burden on education settings and professionals (Adams et al., 2017; Boesley & Crane, 2018; Redwood, 2015; Thom et al., 2015). To mitigate against these challenges, Boesley and Crane (2018) found that some LAs had worked to adapt and streamline paperwork with settings. Similarly, SENCOs within the current study had managed this lack of standardisation by creating their own paperwork during consultation with LAs, which could ease workload by developing one process and one set of paperwork. Participants felt that consistency across the country and clearer guidance could also help to address misconceptions about EHC plans and ceasing (i.e., that CYP would be unsupported without an EHP plan or that plans were always maintained until the age of 25). Additionally, participants felt that clear, jargon-free guidance would reduce the reliance parents/carers had on professionals to understand the EHC plan processes, enabling more meaningful participation. Instead, prior literature has highlighted that the current, ambiguous guidance has resulted in LAs being left to interpret and devise their own frameworks and procedures (Curran et al., 2017; Norwich & Eaton, 2015; Thom et al., 2015), resulting in a reliance on SENCOs to understand different stakeholders' rights and responsibilities (Boesley & Crane, 2018; Cochrane, 2016).

Need for Clearer Pathways Towards Independence. Participants in the current study expressed that outlining the pathways to adulthood towards independence was perceived as a way to support CYP's autonomy and reduce reliance on EHC plans. Similarly, SENCOs in research by Palikara et al. (2019) expressed a similar need for clearer SEN pathways that would result in a smoother transition to adulthood. Moreover, findings from the Education Committee's (2019)

inquiry into SEND concluded that these transition processes or decisions were often made too late, with a lack of LA engagement. Additionally, LAs within their report also felt that the DfE only intended a small population to retain their plans until age 25, with tribunals being used to test and clarify the legislation. Participants within the current study cited similar concerns that clarity in legislation seemed to come from tribunals and caselaw, emphasising the need for clearer guidelines. To mitigate against these challenges, participants highlighted the need for training around the end of the EHC plan lifecycle, including when a plan should be ceased and how to work towards a graduated approach to ceasing that emphasised the independence of CYP. The introduction of case studies within guidance was also seen to be a way to provide success stories and clear outcomes for families and professionals to work towards. This closely relates to macro-time, a key component of Bronfenbrenner and Morris' (2006) model, focusing on changes to the broader culture and perception of CYP with SEN over longer periods time. Highlighting the need to create a discourse of possibility and independence for these CYP and their families. Ultimately, clearer guidance and pathways are needed; the Education Committee (2019) have emphasised the need for increased clarity and guidance for SEND processes and cited that the DfE had committed to reviewing the Code of Practice by the end of 2020, however this is yet to be come to fruition.

Preparing for Adulthood

Early preparation for adulthood was a factor raised by participants in the current study during both the questionnaires and interviews that could facilitate decision-making processes around ceasing. The *Preparing for Adulthood* framework was developed by the DfE to support transition planning for CYP with SEN as they move towards greater independence. The four key areas included pathways towards

employment, independent living, participation in society, and good health. The SEND Code of Practice (2015) stipulates that discussion around preparation for adulthood should start as early as possible but *must* be introduced during Year 9 reviews and onwards. Discussion should also include planning around whether the CYP will be moving to adult care and health services.

Promoting Independence. Participants in the current study emphasised that discussions around preparing for adulthood and relevant outcomes should be included in EHC plans from inception. Participants agreed with the ideology of the SEND legislation – that EHC plans could be used to promote independence for CYP and provide them with the skills to access employment and promote community involvement. In one interview, the participant explained that their student had a strong desire for independence and wanted to cease their plan and move away from specialist support, seeing mainstream college as ‘freedom’ (SO12). This finding correlates with existing literature that CYP are motivated by the possibility of independence and want to be able to manage without assistance (Gaona, Palikara, et al., 2019; Rao, 2020; Redwood, 2015). Gaona et al. (2019) highlighted that although the young people in their study acknowledged the role that learning support contributed to their development, one-quarter of CYP did not feel the support was needed. Gaona et al. (2019) found that participants did not experience the levels of independence that they had expected, and this is an area they wanted to develop. However, participants within the current study highlighted that parents/carers often had a fear of losing the EHC plan, which meant that independence and reduction in support was often not pursued.

These low expectations of the young person’s abilities may be explained within the *social and medical model of disability*. A social model of disability posits that CYP

with SEN are hindered by barriers in society and expectations, not their difference or needs; while a medical model of disability implies that CYP children with SEN are hindered by their differences or needs – looking to fix what is ‘wrong’ with the person (Scope, 2018; para. 3). This ongoing tension between the two models has been long recognised within SEN (Norwich & Eaton, 2015; Shakespeare & Watson, 1997). However, EHC plans are a complex combination of the two models: identifying and labelling the deficit and needs within CYP with SEN (Hunter et al., 2019), whilst also aiming to remove the barriers to learning that the student experiences. This is backed by literature which has outlined that EHC plans are by design, deficit and need-based (Education Committee, 2019). Within the international context, research highlights the over-emphasis on the individual, with IEPs acting within the medical model of pathologising CYP (Macartney, 2009; Mitchell et al., 2010). Heiskanen et al. (2018) suggested that the process of assessment serves to identify and document SEN, with descriptions rarely changing as the child grows and develops. Hunter et al. (2019) proposed that this deficit-based system highlights and problematises CYP within EHC plans, and that an EHC plan can never be truly strengths-based or without problem. It is also important to acknowledge that long-term outcomes for young people with SEN are poor (Ofsted & Care Quality Commission (CQC), 2017) there is a lack of effective engagement between colleges and employers, with a slow uptake of supported internships and apprenticeships (Hunter et al., 2019). Even with early preparations for adulthood, it can be difficult to reduce reliance on additional support and promote independence, particularly when EHC plans emphasise need. However, these outcomes demonstrate the importance of continuing to support independent skills, be ambitious, and work towards CYPs’ aspirations.

Graduated Approach Towards Ceasing

Participants within this study emphasised that a gradual approach to ceasing an EHC plan reducing support over a period of time, helped to promote CYPs' independence and accurately assess the impact of the provision in place. This approach is supported by SEND legislation; the SEND Code of Practice (2015) outlined that education settings should aim to support CYP with SEN by identifying and removing barriers to that student's learning and development using an *assess-plan-do-review* framework. Within an EHC plan, a graduated approach involves assessing needs, planning support, implementing support, and reviewing progress against SMART outcomes. Effective monitoring requires keeping EHC plans updated to reflect the strengths, needs, aspirations of each CYP, and the appropriate outcomes and support required. While this presents a positive framework, participants in the current study found it difficult in practice to keep plans updated and reduce or increase the provision, expressing that LA's rarely reviewed paperwork or updated EHC plans. Although the SEND reforms aimed to improve the functionality and flexibility of statutory plans, findings from the current study suggest that there is work to be done to develop clear, updated EHC plans that promote independence and are flexible to the needs of CYP with SEN. Mitchell et al (2010) highlights similar findings through an analysis of existing international literature on IEPs, suggesting that IEPs must allow for updating to reflect the CYP's changing needs, monitor and review provision, and reflect long-term goals and objectives.

SMART Outcomes. To help measure progress over time and identify whether provision needs to increase or decrease, the SEND Code of Practice (2015) stipulated that outcomes within EHC plans should be specific, measurable, achievable, realistic and time-bound (SMART); considering what is both important *to* and *for* CYP.

However, multiple studies, including findings from the current research, have highlighted concerns around the quality of EHC plans, including: a lack of relevant outcomes or SMART outcomes (Castro et al., 2019; Hunter et al., 2019; Skipp & Hopwood, 2016); ambiguity around provision (Castro et al., 2019; Ofsted & CQC, 2017); and plans not accurately reflecting the strengths, needs or aspirations of CYP (Adams et al., 2017; Education Committee, 2019). Franklin et al. (2018) emphasised the importance for CYP and their families that outcomes in EHC plans reflected the CYP's strengths and ambitions, rather than their needs alone; however, professionals were concerned that if strengths and aspirations were highlighted, it could lead to a loss of provision for that child – reinforcing a deficit-model. Yet research has indicated that generating SMART outcomes that were regularly updated and aspirational gave others confidence that the plan would be put into effect (Heasley, 2017; Skipp & Hopwood, 2016). These findings fit with the *person* aspect of the PPCT, emphasising how understanding the CYP biological and personal characteristics can support clear processes and development (Bronfenbrenner & Morris, 2006). This suggests that clear, updated plans with a gradual approach to reducing reliance on SEN support may help to alleviate anxiety around ceasing.

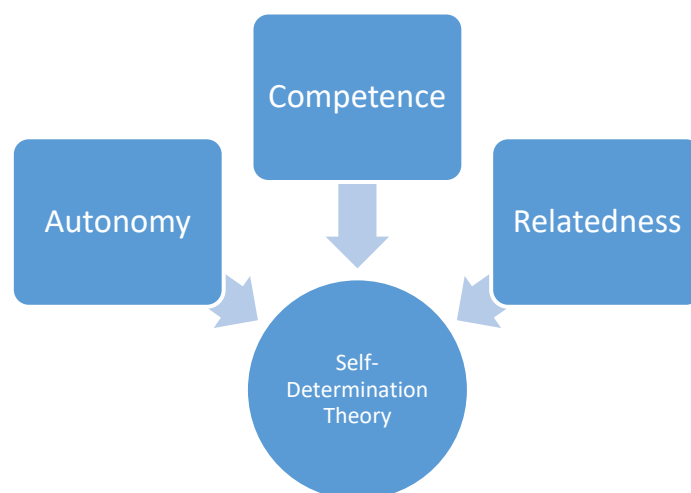
Promoting Autonomy. Participants in the current study emphasised that supporting CYP to develop independence and autonomy were key to effective support. Webster and Blatchford (2015; 2019) demonstrated that for many CYP with EHC plans, the reality of provision was often a one-to-one intervention with a teaching assistant. Webster and Blatchford indicated that teaching assistant hours were still present in EHC plans, rather than a clear description of the actual provision being delivered; this could result in a reliance on (and expectation of) out-of-class, one-to-one support for CYP with SEN. However, Webster and Blatchford (2015) found little

evidence that teaching assistant support could promote students' learning and independence. Walker (2008) highlighted that this reliance on one-to-one support was also present under the previous statementing system, expressing concerns that this hindered CYPs' progress and independent learning skills. These studies raised concerns about the over-reliance on teaching assistant support and the impact on CYP inclusion, autonomy and independence.

Self-determination theory (Deci & Ryan, 2012) emphasises the importance of autonomy on CYP's academic achievement (See *Figure 14*). This theory outlines how self-determined students will be able to make choices, act on these and evaluate the results (Wilson, 2017). This concept is particularly important for CYP with EHC plans, who may be experiencing a loss of autonomy through reliance on teaching assistant support. Self-determination theory suggests that by encouraging the development of independent skills, CYP will develop a stronger sense of autonomy, competence and relatedness that, over time, will promote positive outcomes and prepare these young people for adulthood (Gaona, Palikara, et al., 2019; Palikara et al., 2018; Webster & Blatchford, 2017). Therefore, it is important to consider the gradual reduction of support by developing and reviewing EHC plans that promote the independence and autonomy of students. Webster and Blatchford (2019) highlighted that some schools were already seeing the impact of taking this approach, by promoting a gradual reduction of individual support as CYP made their way towards adulthood.

Figure 14

Self-Determination Theory, Adapted from Deci and Ryan (2012)



Support Through Transitions. Another factor raised by interview participants in the current study for supporting successful transitions, was to keep EHC plans during moves between settings or key stages. Participants explained that plans were often ceased just prior to key transition points (e.g., at the end of secondary school), but felt that this was when CYP with SEN required support the most. Indeed, transition points during education have been widely recognised as a challenging process for students, particularly for those with SEN (Galton et al., 2000; Hughes et al., 2013). Transition brings changes across academic, social and structural levels as students adjust to changes in school size, academic expectations, and relationships with peers and adults (Anderson, 2012).

Legislation has highlighted that during transfers between phases of education, EHC plans must be reviewed and amended to allow for commissioning of support and provision at the new setting (DfE & DoH, 2015). However, participants in the current study raised concerns that decisions to cease were often made without consulting the CYP's new setting; therefore, if the student did not get the grades necessary for higher education, or they changed their mind, there were fears that it would be too late to appeal

and the CYP would have to reapply for a new EHC plan. However, the Code of Practice (2015) states that if a young person does not meet the entry requirements for higher education or change their minds after their final review, then the LA should review the EHC plan with them as soon as possible to arrange and agree new arrangements; this indicates that CYP should not be left without an EHC plan or having to reapply. Findings from the current study suggest that this may not consistently occur, which suggest that clearer guidelines are needed to support these decision-making processes. Participants recommended that the ceasing of EHC plans should be a longer process; they suggested that there should be a transition period where ceased plans remain dormant for a set period (e.g., a term), then reviewed to evaluate the CYP's progress and their ability to access learning without the additional support. It was thought that this could also help alleviate parental and professional anxiety around ceasing and promote better outcomes.

5.3. Limitations of the Current Research

Although this research has contributed insight into the cessation of EHC plans in a scarce area of research, several limitations have been acknowledged by the researcher.

Firstly, the sample of professionals may not be representative of the wider population. While participants' geographical locations demonstrated a reasonable spread across the country, the research findings have been drawn from a sample that included both SENCOs and SEN officers with a range of job titles, education settings, and different LAs; therefore, the homogeneity of the sample could be questioned. Despite variation in the sample, responses were reasonably consistent across both questionnaires and interviews in the current study, and previous research. This

supports the transferability of findings (Adams et al., 2018; Cochrane, 2016; Hunter et al., 2019; Walker, 2008)

Additionally, the voluntary nature of the participant recruitment may have influenced the sample and response rate. The motivations of participants to take part are unknown, and within this niche area of research, it is possible that those with particularly positive experiences of ceasing and its reflection on their practice may have been more motivated to participate. With the additional COVID-19 implications, the participants would have been those who had capacity to take part. However, findings largely aligned with previous research, adding further reliability to the findings. The use of a mixed-methods approach aimed to provide reliability across the research findings, with two distinct groups of participants (SENCOs and SEN Officers), again supporting transferability of the conclusions drawn (Creswell & Plano Clark, 2018; Teddlie & Tashakkori, 2009).

There were also concerns regarding data collection methods which should be acknowledged. The use of telephone and online interviews were convenient and made the research possible across the country, however this also meant that more effort was required to build rapport and support open and honest responses from participants (Flick, 2014). Time was spent at the beginning of interviews developing rapport and outlining the aims and purpose of the research, which hoped to encourage participants' honesty and ease throughout the interviews.

The potential disadvantages of online questionnaires should also be acknowledged. One concern was the low number of responses compared to the number of potential participants who could access the questionnaire. The online questionnaires relied on self-reported data, which was limited by participants' motivations and experiences around ceasing EHC plans. The self-selecting nature of

the sample meant that a large percentage of questionnaires were not completed, and it was not possible to measure the reach or response rate. Self-selection and low response rates within online questionnaires may limit the findings as it can be challenging to decipher whether the sample is truly representative of the target population (Sapsford, 2006).

Additionally, because of the niche sample within this research (e.g. SEN professionals who had experience around ceasing EHC plans, it can be difficult to ensure that the research information and questionnaire reached those potential participants. Cohen et al., (2017) highlighted that online questionnaires can prove difficult to distribute, with different approaches having both advantages and disadvantages, e.g. emailing to a wide range of potential participants may reach a wider sample, but the email can be marked as spam or junk mail by the recipients or their services. This approach also requires knowing the email addresses in the first place. Sapsford (2006) highlighted that online questionnaires can project a disconnect from the researcher and the research, which can affect rates of participation. Cohen et al., (2017) explained that that this disconnect can result in increased dropout, due to the ease of stopping altogether. The utilisation of semi-structured interviews in this research helped to mitigate some of these weaknesses, as it enabled in-depth discussion and response follow-up.

Finally, findings within this research were based on the experiences of professionals that volunteered to take part, which may impact the generalisation of findings, which may have been impacted by the researchers' own interpretation and perspectives. This impact was minimised by following to the guidelines for thematic analysis outlined by Braun and Clarke (2006), utilising member checking during the piloting phase and seeking advice from critical friends to reduce researcher bias.

Additionally, transparency was promoted by including extensive records of research activities, including transcripts (Appendix G), initial codes (Appendix G), and notes during interviews (Appendix J).

Future research could explore the experiences of other stakeholders (e.g. parents/carers, CYP whose EHC plans were ceased, and social care professionals) to gain a varied perspective of the issues raised.

5.4. Implications for Practice

The current research highlighted the challenges that SEN professionals face when a CYP's EHC plan is ceased before the age of 25. Findings from this research demonstrate the need for careful planning and preparation for adulthood within EHC plans and the promotion of student's independent skills and aspirations.

Implications for Policy Makers

This research has highlighted clear difficulties around the interpretation and implementation of the guidance provided by the SEND Code of Practice (2015). Guidance on the processes surrounding the application, maintenance and ceasing of EHC plans should be reviewed to provide clear pathways through the EHC plan lifecycle. This could include using case studies and concrete examples to provide evidence of best-practice for outcomes and provision. Participants in the current research have shown that there is a perception that EHC plans were a *golden ticket* to accessing support, services and external resources; clearer guidance and pathways of support could alleviate misconceptions and anxieties around EHC plans. Participants in the study also suggested that improving guidance documents around EHC process could provide greater standardisation between LAs and across practices and paperwork. Findings indicated that guidance also needs to be accessible for all

stakeholders, including professionals, parents/carers, and CYP, which could reduce reliance on professionals to interpret and translate guidance.

Implications for Local Authorities

This study has highlighted that both SEN Officers and SENCOs wanted to be working more closely together, taking part in annual reviews, transition processes and discussions around preparing CYP for adulthood. The lack of capacity to fulfil effective multiagency working seems to have created a barrier within the EHC plan lifecycle, highlighted by perceptions that an EHC plan was a *golden ticket* or *safety net*, which meant that stakeholders were resistant to ceasing. However, participants found that clear transitions to adulthood, links with adult social care, presence during review meetings, and a clear message from the onset about the aims of the plan (e.g., a graduated approach) could support successful transitions from EHC plans. However, LAs need to help facilitate multiagency working by supporting SEN Officers to attend annual reviews, and developing opportunities for joint training and joined up working between services – with a focus on reviewing CYP outcomes and provision. This could also support a shift in narrative around EHC plans, potentially reducing the pressure on LAs and enabling opportunity to adopt clear transitions to independence.

Implications for Educational Psychologists

There is a statutory role for EPs to provide psychological advice and information to outline CYPs' needs, outcomes and provision at the EHC needs assessment stage. If the assessment is taking place after Year 9, EPs can help to ensure that outcomes are preparing the student for adulthood. However, there is no stipulation for EP involvement or updated advice during later stages of the EHC plan lifecycle, such as annual reviews. EPs can ensure that they are part of these discussions, supporting SENCOs within schools to move towards adulthood, drawing CYP into these

discussions. Additionally, re-assessment is outlined within the Code of Practice (2015) and it is important that EPs identify CYP within schools whose EHC plans are not reflective of their current presentation and work with the school to update these. Discussion has also demonstrated that outcomes are rarely SMART or ambitious, and EPs can play a key role in supporting stakeholders to develop appropriate SMART outcomes and provision relevant to the setting, which are aspirational, ambitious and promote independence. This research has highlighted the need for clear, updated plans, particularly towards key transition points; EPs are well-placed within LAs to provide psychological advice that can help SEN professionals to plan how they might reduce support over time and promote independent skills. It is important that EPs also support parents/carers to understand the graduated approach, support post-ceasing, and transitions to adulthood. Additionally, EPs in their role as professionals within schools or LAs can take on systemic work to promote the meaningful involvement of CYP in discussions around their support through training, consultation and policy development.

Implications for Wider Contexts

Internationally, Individualised education plans similar to EHC plans have become commonplace (Anastasiou & Keller, 2014; Mitchell et al., 2010; Sacks & Halder, 2017). However, there is a lack of literature exploring the cessation or removal of these plans and how CYP and their parents/carers are able to make the transition away from these and towards independence and adulthood. Much of the current literature on IEPs indicates similar findings as highlighted throughout the discussion, namely the need for clear processes which support multi-agency collaboration, with CYP and their parents/carers at the centre of these discussions. Difficulties have also been highlighted with the need for updated IEPs which reflect the strengths, needs,

provision, and goals of the student at that time. These similarities in findings highlight that there is the potential for generalisability and transferability to international contexts to support the transitions of SEN students away from their personalised plans.

5.5. Conclusion

This study explored the experiences of SENCOs and SEN Officers when a CYP's EHC plan was ceased before the age of 25, and examined how these experiences could be used to inform policy and practice. It is one of the few research studies that has explored the ceasing of EHC plans (or Statements of SEN), addressing a significant gap in research and the SEND reforms. The professionals within this study had experienced a range of practices which impacted on the decision to cease an EHC plan. These perspectives highlighted key information about how decisions were made, including key facilitating factors and barriers which can impact on the process.

This research highlighted that ceasing an EHC plan is a rare occurrence, with the majority of professionals only having experienced a small number. Decisions were normally instigated by the school SENCO or SEN Officer, and the most common reason for ceasing a plan was that the CYP no longer needed the additional support and had achieved the educational outcomes in the EHC plan. Notably, participants perceived that SEN Officers or CYP often had the final say in ceasing. During interviews, participating SENCOs and SEN Officers highlighted that CYP involvement during decision-making processes were a key factor in deciding on appropriate levels of support, CYP aspirations and next steps – highlighting that ceasing can be a celebration for those students and their families. For many families and professionals, EHC plans appear to provide a layer of protection or *safety net* for students with SEN;

these perceptions can lead to hesitation around ceasing in case their needs changed and the EHC plan was lost.

The research highlighted several key facilitating factors and barriers to ceasing an EHC plan. Participants generally perceived capacity and workload to be a main barrier to effective child-centred practice, which could impact the development of independent learning skills and a reliance on support, reducing the likelihood of ceasing. Participants found that multiagency working reduced significantly once the EHC plan had been granted, with SENCOs largely left to maintain and review increasing numbers of plans. This lack of capacity also meant that EHC plans were rarely updated, impacting their quality over time and making it difficult for future educational settings to have a clear picture of that CYP's aspirations, strengths, and needs. Additionally, this meant that outcomes were rarely SMART or specific to the setting. SENCOs expressed that a key challenge was the lack of consistency across LAs, both with practice, policy and paperwork. This further added to their workload, while making it harder to understand procedures, particularly around ceasing an EHC plan. Participants felt that there needed to be further work on preparing CYP for adulthood and developing their independent skills so that they would be able to successfully transition away from the EHC plan. This also included CYP voice being at the centre of discussions and decisions, with clearer guidance needed on how to facilitate this, particularly when CYPs' wants (e.g., for reduced levels of support) did not line up with parents/carers desire for maintaining high levels of support.

Ultimately, a key message from the research was that clearer guidance is needed from the DfE to properly implement the aims of the 2014 SEND reforms. SEN professionals in the current study expressed a desire for standardisation across LAs,

specific examples and guidelines around ceasing EHC plans, and clear pathways towards adulthood, that were accessible to parents, CYP and professionals.

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Appendices

Appendix A: Literature Review Search Strategy

Defining the search questions:

The initial literature search determined that research surrounding EHC plans or Statements of SEN can take on many forms and referred to using a number of different acronyms or combination of words (e.g. Education, Health and Care Plans, EHC plans, EHCPs, Statements). This broad range of labels is partly due to colloquial differences and the focus of the research.

The search process:

The initial literature search identified 4 possible search terms to capture research focussing on EHC plans (see Table 15 - 20 for a list of the final terms). These terms were separated with the Boolean phrase "OR" with quotation marks to separate each phrase. Table 21 outlines the review literature used within the literature review and brief analysis of these.

British Education Index (BEI), Education Resource Information Centre (ERIC), SCOPUS, Web of Science, and PsycINFO were the electronic databases used for this literature review.

The large number of search results meant that searches were narrowed to only search the abstract, with the aim that it should be a focal part of the research. A revised search strategy involved using the Boolean phrase "AND" to narrow publications that focus on special educational needs, this was due to the variation in how Statements of SEN are referred to, requiring that it was broken into two terms "statement" and variations of "SEN".

Table 23 outlines the search terms and databases used to capture the international approach to ceasing individualised support plans (or equivalent). These search terms were developed through analysis of international legislation and the terminology used for EHC plan equivalents, e.g. in the United States 'Individualized Education Plans' would be the closest equivalent. Additionally, searches were made through *Google Scholar* using a combination of broader search terms to identify any missed pieces of literature.

Search inclusion criteria:

The literature search was refined by publication date, including papers from the year 2001- to date only.

Finally, abstracts were manually reviewed for their relevance to the research questions in the current study. A relevance score was calculated by allocating a point for each relevance question attended to in the abstract of the text being reviewed, the sum of these points would give a final relevance rating. Publications whose relevance score was <1 were not included in the final search. All searches were cross references and any duplicates were removed.

Relevance questions guiding the search:

Is there relevant information relating to the experiences of children, parents/carers or professionals around EHC plans?

Is there relevant information relating to the involvement of children with EHC plans?

Is there relevant information relating the processes involved with EHC plans? *Or Statements of SEN?*

Is there relevant information relating to the outcomes of children with EHC plans?

Is there relevant information relating to the policy or practice surrounding EHC plans?

Is there relevant information relating to the independence of CYP with EHC plans?

Once duplicates were removed, and the relevance questions applied, 35 pieces of literature were left. However, nine of these were inaccessible or not available online, see Table 22 for information on these pieces of literature. This meant the final number was 26 pieces of literature which were reviewed.

Abstracts reviewed for their relevance following the 6 relevance questions outlined

9

Table 16:

Systematic Search Strategy and Results for ERIC

Date	Database	Search strategy	Exclusion	No.
09.05.20	ERIC	ab(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	45
		ab(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs")) AND ab(("sen" OR "Special needs" OR "special educational needs" OR "SEND" OR "Special education" OR "complex needs"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	25

ab(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs"))

AND

ab(("sen" OR "Special needs" OR "special educational needs" OR "SEND" OR "Special education" OR "complex needs"))

AND

(ab(("independence" OR "autonomy" or "Self-determination" OR "advocacy*" OR "experience*" OR "involvement" OR "voice"))

OR

ab("Policy*" OR "outcome*" OR "cease*" OR "process*" OR "Practice*"))

Source:

Dissertation/Theses,
Journals and
Government/Official
publications

Date: 2001 –

Search: limited to abstract

21

Review of Abstracts	Notes:	Final number
Abstracts reviewed for their relevance following the 6 relevance questions outlined		14

Table 17:

Systematic Search Strategy and Results for Web of Science

Date	Database	Search strategy	Exclusion	No.
09.05.20	Web of Science	ab(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 –	825

<p>ab(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs"))</p> <p>AND</p> <p>ab(("sen" OR "Special needs" OR "special educational needs" OR "SEND" OR "Special education" OR "complex needs"))</p>	<p>Source: 32 Dissertation/Theses, Journals and Government/Official publications</p> <p>Date: 2001 -</p>
<p>AB(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs"))</p> <p>AND</p> <p>AB(("sen" OR "Special needs" OR "special educational needs" OR "SEND" OR "Special education" OR "complex needs"))</p> <p>AND</p> <p>(AB(("independence" OR "autonomy" or "Self-determination" OR "advocacy*" OR "experience*" OR "involvement" OR "voice"))</p> <p>OR</p> <p>AB(("Policy*" OR "outcome*" OR "cease*" OR "process*" OR "Practice*"))</p>	<p>Source: 25 Dissertation/Theses, Journals and Government/Official publications</p> <p>Date: 2001 -</p>

Review of Abstracts	Notes:	Final number
Abstracts reviewed for their relevance following the 6 relevance questions outlined		14

Table 18:*Systematic Search Strategy and Results for SCOPUS*

Date	Database	Search strategy	Exclusion	No.
09.05.20	SCOPUS	ABS(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	1440
		ABS(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs")) AND ABS(("sen" OR "Special needs" OR "special educational needs" OR "SEND" OR "Special education" OR "complex needs"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	107
		ABS(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs")) AND ABS(("sen" OR "Special needs" OR "special educational needs" OR "SEND" OR "Special education" OR "complex needs")) AND (ABS(("independence" OR "autonomy" or "Self-determination" OR "advocacy*" OR "experience*" OR "involvement" OR "voice")) OR ABS("Policy*" OR "outcome*" OR "cease*" OR "process*" OR "Practice*"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	56
		Review of Abstracts	Notes:	Final number
		Abstracts reviewed for their relevance following the 6 relevance questions outlined		28

Table 19:*Systematic Search Strategy and Results for PsycINFO*

Date	Database	Search strategy	Exclusion	No.
09.05.20	PsycINFO	AB ("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs")	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	84
		ab(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs")) AND ab(("sen" OR "Special needs" OR "special educational needs" OR "SEND" OR "Special education" OR "complex needs"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	22
		ab(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs")) AND ab(("sen" OR "Special needs" OR "special educational needs" OR "SEND" OR "Special education" OR "complex needs")) AND (ab(("independence" OR "autonomy" or "Self-determination" OR "advocacy*" OR "experience*" OR "involvement" OR "voice")) OR ab("Policy*" OR "outcome*" OR "cease*" OR "process*" OR "Practice*"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	16
	Review of Abstracts	Notes: Abstracts reviewed for their relevance following the 6 relevance questions outlined	Final number 8	

Table 20:*Systematic Search Strategy and Results for ProQuest*

Date	Database	Search strategy	Exclusion	No.
09.05.20	ProQuest	ab(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	772
		ab(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs")) AND ab(("sen" OR "Special needs" OR "special educational needs" OR "SEND" OR "Special education" OR "complex needs"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	121
		ab(("Education Health care plan" OR "EHCP*" OR " Education, Health and Care" OR "EHC" OR "statutory assessment" OR "Statements of SEN" OR "Statements of Special educational needs")) AND ab(("sen" OR "Special needs" OR "special educational needs" OR "SEND" OR "Special education" OR "complex needs")) AND (ab(("independence" OR "autonomy" or "Self-determination" OR "advocacy*" OR "experience*" OR "involvement" OR "voice")) OR ab("Policy*" OR "outcome*" OR "cease*" OR "process*" OR "Practice*"))	Source: Dissertation/Theses, Journals and Government/Official publications Date: 2001 – Search: limited to abstract	81
		Review of Abstracts	Notes:	Final number
		Abstracts reviewed for their relevance following the 6 relevance questions outlined	Removed duplicates Several articles relating to specific interventions Several articles (particularly theses) were unavailable	35

Table 21*Overview of final texts included in the Literature Review*

No.	Title	Text Type	Objective / purpose	Method	Data collection methods	Strengths and Limitations
1.	Allan, J., & Youdell, D. (2017). Ghostings, Materialisations and Flows in Britain's Special Educational Needs and Disability Assemblage. <i>Discourse: Studies in the Cultural Politics of Education</i> , 38(1), 70–82.	Journal Article	Reviewing the Code of practice as code	Qualitative	Examine Code of Practice using Deleuze's notion of assemblages.	Focuses on recent code of practice but does not examine legislation that is still in place, e.g., Children and Families Act or Education Act.
2.	Bajwa-Patel, M., & Devecchi, C. (2014). 'Nowhere that fits': The dilemmas of school choice for parents of children with Statements of special educational needs (SEN) in England. <i>Support for Learning</i> , 29(2), 117–135.	Journal Article	Exploring school placement and decision making for families of SEN CYP	Quantitative	Questionnaire to sample of 380 families of children aged 4-5 or 12-13.	Research conducted within one LA. Only 65 families took part (17% response rate), with over 75% aged between 41-50 indicates that results are not generalisable
3.	Bentley, L.-M. (2017). <i>What do parents report of the education, health and care needs assessment process?</i> [University of East London].	Unpublished Thesis	To understand the experience of parents within the EHC needs assessment process	Qualitative	Semi-structured interviews with parents who had recently gone through the EHC Needs Assessment process. Analysed with thematic analysis	Eight participants who were interviewed multiple times and presented as 17 interviews. Given in depth data from small sample, IPA may be more suitable analysis
4.	Boesley, L., & Crane, L. (2018). 'Forget the Health and Care and just call them Education Plans': SENCOs' perspectives on Education, Health and Care plans.	Journal Article	Exploring perspectives of SENCOs on the new legislation and role in	Qualitative	Semi-structured interviews with 16 SENCOs across England, thematically analysed	SENCOs all across different boroughs, but voluntary sampling might highlight bias

Journal of Research in Special Educational Needs, 18(S1), 36–47.

5.	Castro, S., Grande, C., & Palikara, O. (2019). Evaluating the quality of outcomes defined for children with Education Health and Care plans in England: A local picture with global implications. <i>Research in Developmental Disabilities</i> , 86, 41–52.	Journal Article	Looking at outcomes in plans and rating whether they are functional or high quality	Quantitative	Content analysis of the outcomes within 236 EHC plans based on specifically designed criterion	Large sample of EHC plans across different local authorities, however focussed within Greater London. Did not use current terminology to evaluate outcomes (SMART)
6.	Cochrane, H. (2016). <i>Exploring perceptions and experiences of the education, health and care process</i> . University of Birmingham (United Kingdom).	Unpublished Thesis	Exploring the perceptions of parents, schools and EP's around the EHC plan processes	Qualitative	Semi-structured interviews with parents, school and Educational Psychologists, analysed with Thematic Analysis. Case study design	Only 3 participants across different roles in one LA limits generalisability. IPA might be better analysis for indepth case study design.
7.	Eccleston, S. (2016). <i>'we're one side of the wall and they're the other': An interpretative phenomenological analysis study exploring parents' and young people's experiences of family engagement during the education, health and care needs assessment process</i> [D.App.Ed.Psy., The University of Nottingham]	Unpublished Thesis	Understanding how families are engaged in the EHC plan processes	Qualitative	Interpretative phenomenological analysis following semi-structured interviews with parents and young people	All participants from one LA shortly after legislation introduction. Additionally, research identified own bias which affected interview data collection
8.	Gaona, C., Castro, S., & Palikara, O. (2019). The views and aspirations of young people with autism spectrum disorders and their provision in the new Education	Journal Article	Exploring how views of ASD CYP are captured within EHC plans	Mixed methods	Semi-structured interviews with 12 CYP with ASD and content analysis of their EHC plans.	Content analysis data may lack inter-rater reliability. ASD population was predominantly from specialist provision (92%) despite the

	Health and Care plans in England. <i>Disability and Rehabilitation</i> , 0(0), 1–12.					majority of CYP with EHC plans attending mainstream
9.	Gaona, C., Palikara, O., & Castro, S. (2019). 'I'm ready for a new chapter': The voices of young people with autism spectrum disorder in transition to post-16 education and employment. <i>British Educational Research Journal</i> , 45(2), 340–355.	Journal Article	Exploring the views of ASD CYP in transition to post-16 settings	Qualitative	Semi-structured interviews with 12 CYP with ASD around their transitions to post-16 education and employment	Small sample size localised in Greater London area. 92% of participants were attending specialist provisions – government estimates 70% of CYP with ASD attend mainstream.
10.	Gore, H. (2016). <i>'working together .. It doesn't go far enough actually for what the relationship becomes': An ipa study exploring the experiences of primary school sencos working with parents through the ehcp process</i> [D.Ed.Ch.Psych., University of Essex (United Kingdom)].	Unpublished Thesis	The purpose of this research was to provide knowledge of the SENCO experience of the EHC plan processes	Qualitative	Interpretative phenomenological analysis of SENCOs views following semi-structured interviews	Sample limited to five SENCOs from primary schools in one LA. Additionally, volunteer sampling carries its own potential limitations or bias.
11.	Heasley, J. (2017). <i>Young people's views concerning their voice in education, health and care planning meetings: A participatory q-study</i> [D.Ed.C.Psy., University of Sheffield]	Unpublished Thesis	This research explores the experiences of YP described as having SEND participating in Education, Health and Care (EHC) planning meetings.	Qualitative	Q methodology used to explore CYP views	Participants were limited to those who agreed to have their CYP included, potentially impacting on the vulnerability of the CYP, their ability to communicate and needs. Q methodology also highlighted some Statements that could have multiple meanings – relying on researcher interpretation.
12.	Hunter, J., Wick-Cole, K. R., Goodley, D., & Lawthom, R. (2019). <i>Plans that work: Improving</i>	Journal Article	This article offers a critical reflection on the function of education,	Report	Review of the legislation. Critical evaluation on research and policy	Critical reviews focuses on challenging that EHC plans are a 'good thing'. It does not demonstrate a systematic approach to critique

	employment outcomes for young people with learning disabilities. <i>British Journal of Special Education.</i>		health and care plans (EHCPs) in pathways to employment for disabled young people			and leaves it unclear how or why literature was selected and the overarching themes chosen
13.	Jones, P., & Swain, J. (2001). Parents Reviewing annual reviews. <i>British Journal of Special Education, 28(2), 60–64.</i>	Journal Article	Exploring perceptions of parents and their involvement in annual review process	Mixed methods	Questionnaires and group interviews used to explore parental perspectives	Group discussion with parents who had volunteered to take part in the study may have highlighted specific views and affected by those around them rather than exploration of individual views or experiences. This is demonstrated in the contrast between the two groups
14.	Manning, J. A. (2016). <i>'entering a new dimension': An interpretative phenomenological analysis of the experience of transitioning from school to further education college for three young people who have an education, health and care plan</i> [D.Ed.C.Psy., University of Sheffield	Unpublished Thesis	explores the perceptions of three young people who have an Education, Health and Care Plan as they make their transition from mainstream secondary school to Further Education (FE) College.	Qualitative	Semi structured Interviews with CYP before and after moving to college, the support and preparation for transition. Reflecting on the process. Interpretative phenomenological analysis.	Researcher was not comfortable with extending the accounts of CYP. The CYP involved were all attending FE college and moving towards employment, demonstrating a specific group of child who are relatively able. This research focussed on spoken format only with CYP where research demonstrates that PCP and alternative communication means can be reliable and avoid interpretation bias
15.	O'Sullivan, J. K. (2010). <i>The impact of classroom practice on secondary school children with Statements of special educational needs</i> [Ed.D., University of Birmingham	Unpublished Thesis	Aim to evaluate the impact of classroom practice and TA support on CYP learning	Case study	Classroom observations, interviews, questionnaires and reviews used to document classroom practice	Working as SENCO within school, information presented by participants was with the knowledge that they and other staff members would have access
16.	Palikara, O., Castro, S., Gaona, C., & Eirinaki, V. (2019). Professionals' Views on the New Policy for Special	Journal Article	Aim to understand the views of different	Mixed methods	Views of 349 professionals gained through semi-structured online survey. ANOVA used to analyse	Predominantly SENCOs and EPs, with 72% of participants from London and the South east.

	Educational Needs in England: Ideology versus Implementation. <i>European Journal of Special Needs Education, 34(1), 83–97.</i>		professionals on the most recent legislation		likert scale response.	
17.	Palikara, O., Castro, S., Gaona, C., & Eirinaki, V. (2018). Capturing the Voices of Children in the Education Health and Care Plans: Are We There Yet? <i>Frontiers in Education, 3.</i>	Journal Article	Aimed to analyse how CYP voice was captured in EHC plans across Greater London	Mixed methods	Content analysis used to determine how CYP voice fits with a multi-dimensional classification system.	184 EHC plans analysed across nine LA's in London. (55% from two) Analysing Section A using the ICF-CY, which is used to classify disability within CYP. Deduce that mainstream schools report the methods used (more than special schools) however Section A is completed before consultations and CYP school placement is decided.
18.	Pearlman, S., & Michaels, D. (2019). Hearing the voice of children and young people with a learning disability during the Educational Health Care Plan (EHCP). <i>Support for Learning, 34(2), 148–161.</i>	Journal Article	Exploring how AAC can be used to meaningfully ascertain views of 22 children with high levels of need	Quantitative	Questionnaires developed and used within structured interviews supported by Augmentative and Alternative Communication (AAC) methods.	Large sample unable to respond to questions, and demonstrated CYP preference rather than views/voice.
19.	Redwood, M. (2015). <i>Insider perspectives of education, health and care plans</i> [D.Ed.Psych., University of Exeter (United Kingdom)].	Unpublished Thesis	Exploring CYP, parent and professional experiences of family voice and role in decision making	Qualitative	Interviews and person centred practice used to determine perspectives of CYP Interviews used to gain views of 31 professionals and parents. Two phase study	Research carried out shortly after legislation in place with a small sample in one LA. Highlights areas for further research or potential development
20.	Rix, J. (2009). Statutory Assessment of the Class? Supporting the Additional Needs of	Journal Article	Explores previous system of SEN support and provides critical	Systematic reviews	Foucauldian framework, draws on literature and provides critical analysis	Proposing alternative structure to funding within the previous system. Identifying

	the Learning Context. <i>International Journal of Inclusive Education</i> , 13(3), 253–272.		analysis of the literature			shortfalls and benefits of reducing reliance on Statements of SEN.
21.	Sales, N., & Vincent, K. (2018). Strengths and limitations of the Education, Health and Care plan process from a range of professional and family perspectives. <i>British Journal of Special Education</i> , 45(1), 61–80.	Journal Article	Exploring how EHC plan process has address previous system issues	Qualitative	Interviews, questionnaires and focus group used to gain perspectives of families and professionals.	Small interview samples across two LAs, limited to pre-16 education establishments with limited CYP voice.
22.	Sheffield, E. L., & Morgan, G. (2017). The perceptions and experiences of young people with a BESD/SEMH classification. <i>Educational Psychology in Practice</i> , 33(1), 50–64.	Journal Article	Exploration of CYP views into their needs and support	Qualitative	Grounded theory used to analyse data from semi-structured interviews with nine CYP	Nine participants, one female, aged 13-16 within one LA who had received their statement of SEN at different ages. Researcher viewpoint not stated, nor their own role within the interviews.
23.	Walker, L. (2008). <i>An investigation into young people's perception of special educational needs (SEN) where they have had a statement which ceased</i>	Unpublished Thesis	Exploration of CYP views when statement of SEN is ceased	Qualitative	Cultural web framework used to examine interviews with CYP.	Views of six CYP within one LA. Limited variation in SEN needs of CYP, and asking about perceptions of past experiences or discussions around them.
24.	Webster, & Blatchford. (2015). Worlds apart? The nature and quality of the educational experiences of pupils with a statement for special educational needs in mainstream primary schools. <i>British Educational</i>	Journal Article	Exploring experiences of CYP with Statement of SEN and their inclusion in mainstream provision	Qualitative	Thematic Analysis of 48 pupil case studies, containing interviews, documentation and field notes.	Findings based on data on yr 5 pupils with Statements of SEN for MLD and BESD in mainstream primary schools. Make generalisation to wider population based on other research

	<i>Research Journal</i> , 41(2), 324–342. Scopus.					
25.	Webster, & Blatchford, P. (2019). Making sense of 'teaching', 'support' and 'differentiation': The educational experiences of pupils with Education, Health and Care Plans and Statements in mainstream secondary schools. <i>European Journal of Special Needs Education</i> , 34(1), 98–113.	Journal Article	Exploring teaching and support for CYP with EHC plans	Mixed Methods	Observations and interviews used to explore provision and inclusion of 49 13-14 year olds. Thematic analysis	Focus on SEN CYP with cognition and learning needs. Specific year within secondary schools, which make generalisation difficult. Draw on previous research (above) from different system.
26.	Wilson, A. (2017). <i>Exploring children's views and experiences of having a learning difficulty and the support they receive at school.</i> University of East London (United Kingdom).	Unpublished Thesis	Understand perspectives of CYP and the support they receive	Qualitative	Six children interviews using pictorial prompts, thematically analysed to demonstrate views of support, friendships and inclusion	Provides clear outcomes for EPs and need to remain supporting CYP with EHC plans. Limitations with sample size and use of academic terms within thematic map

Table 22*Overview of inaccessible literature*

No.	Title	Text Type	Overview of Abstract	Impact on literature review	Reason for exclusion
1.	Carrier, S. (2002). <i>Parental challenges to educational and legal definitions of their children's special educational needs: An examination of decision-making in the field of special educational needs</i> [Ph.D., University of Sheffield (United Kingdom)].	Thesis	Study aimed to explore parent's perspectives of their children's SEN through a case study design. Exploring parent involvement and voice in decision making	This research was conducted in 2002 within the previous system of Statements of SEN. Concepts of parent's involvement and voice were a key aim of the Children and Families Act (2014). Although this research could have helped provide a background and need for the change, it would not add anything to the current study.	Thesis not accessible online and not possible to access hard copy
2.	Davis, M. E. A. (2014). <i>Exploring transition for young people with special needs</i> [D.Ed.Ch.Psych., University of Essex (United Kingdom)].	Thesis	Interviews with students, teachers and parents were used to explore the impact of transition to an inclusive sixth form for students with Statements of SEN.	This research focuses on the previous legislation, with the research conducted around a specific inclusive sixth form setting. Although findings could help to understand the impact of transition for CYP with SEN	Thesis not accessible online
3.	Desforges, M. (2018). Sheffield Psychological Service: A personal perspective. <i>Educational & Child Psychology</i> , 62–70.	Journal Article	Personal reflection of Educational Psychologist from 1980 to 1991, with the changes and initiatives that emerged over the years to address SEN and improve support for CYP	It was not possible to omit this article from the literature review using the relevance questions as the text was not accessible. However, it is likely this would have been the case based on the years reflected on and viewpoint of one professional	Journal only available through subscription and not available through UCL resources
4.	Erbes, V. S. (2016). <i>'it's a tsunami of emotions': Exploring parental perspectives on the transition into primary school for children with autism spectrum disorders (asd)</i> [Ph.D., University of London, University College London (United Kingdom)].	Thesis	Research aimed to explore parental perspectives of the transition from early years to primary for children with ASD using a mixed methods approach.	Study took place during the transition to EHC plans. Abstract indicates little relevance to the aims of this research, e.g. autonomy, independence, or end of EHC plan life-cycles.	Thesis not published online through UCL portal, and not possible to access hard copy

5.	Hafidh, R., Sharif, M. S., & Alsallal, M. (2019). Smart Holistic Model for Children and Youth with Special Educational Needs and Disabilities. In M. H. Miraz, P. S. Excell, A. Ware, S. Soomro, & M. Ali (Eds.), <i>2019 International Conference on Computing, Electronics & Communications Engineering (iccece)</i> (pp. 135–140). Ieee.	Journal Article	Abstract highlights aims of developing a different approach to the implementation of the SEND Code of Practice, using a data management model to create a knowledge based model that could facilitate better multi-agency working.	Article highlights a different approach to implementing the code of practice, however, it does not seem to evaluate or research current practice or provide insight into experiences of those involved.	Journal Articles not available through UCL resources at time of search
6.	Mcwilliam, R. (2006). <i>National Individualizing Preschool Inclusion Project</i> . Center for Child Development, Vanderbilt University Medical Center.	Report	Report evaluating the impact of a preschool inclusion project to support children with SEN.	Limited information available online about this report, with relevance questions unable to be used to analyse relevance to the current study.	Report no longer available online
7.	Rawal, R. (2015). <i>Working together through the statutory assessment process under the children and families act (2014): Using activity theory in a two phase multiple perspective analysis of the expectations and experiences of educational psychologists, health, social care and education professionals, parents and children working together in the context of the statutory assessment process under the children and families act</i> [D.App.Ed.Psy., University of Birmingham (United Kingdom)].	Thesis	Abstract indicates that this research focuses on the role of multi-disciplinary working during the application and assessment process of EHC plans. Use of Activity Theory methodology to explore expectations and experiences	Research could have provided meaningful insight into the assessment process from the perspectives of professionals, parents, and CYP. Researcher highlights that findings correlate with current literature – highlighting that this might be covered within the literature review. Additionally, this research was conducted shortly after the introduction of the Children and Families Act (2014).	Thesis not available to view online
8.	Stephens, C. (2012). <i>Using interpretative phenomenological analysis to listen to the experiences and perceptions of young people with autistic spectrum condition who are supported by teaching assistants</i> [D.Ed.Psych., University of Bristol (United Kingdom)].	Thesis	Use of Interpretative Phenomenological Analysis (IPA) and semi-structured interviews to explore how six CYP were supported by teaching assistants. All CYP had Statements of SEN	Abstract highlights similar findings to other reviewed research e.g. Webster and Blatchford (2014). Highlighting the approach taken by teaching assistants and schools in supporting CYP with SEN. Exclusion from the literature review or current research would likely not impact on the findings	Thesis not available to view online
9.	Tait, T. (2002). Could do better. <i>Learning Disability Practice (through 2013)</i> ; London, 5(7), 13.	Journal Article	Report focussed on evaluating five local authorities and their	Very limited information was available through online databases, although believed to have limited impact on the literature	Journal nor preview available online

work with children with SEN
between 2001 and 2002

review or current study based on the narrow
sample size over a course of four months
within the previous system of Statements of
SEN

Table 23:*Systematic Search Strategy and Results for International Literature*

Date	Database	Search strategy	Exclusion	No.
26.07.21	SCOPUS, PsycINFO, Proquest	ABS ("individualized education plan*" OR "individualized education programs*" OR "Individualized education" OR "IEP")	Source: Dissertation/Theses, Journals, and Government/Official publications, and books Date: 2001 – Search: limited to abstract	3881
		ABS ("individualized education plan*" OR "individualized education programs*" OR "Individualized education" OR "IEP") AND ABS ("SEN" OR "Special needs" OR "Special educational needs" OR "special education")	Source: Dissertation/Theses, Journals, and Government/Official publications, and books Date: 2001 – Search: limited to abstract	410
		ABS ("individualized education plan*" OR "individualized education programs*" OR "Individualized education" OR "IEP") AND ABS ("SEN" OR "Special needs" OR "Special educational needs" OR "special education") AND ABS("cease*" OR terminate* OR removal)	Source: Dissertation/Theses, Journals, and Government/Official publications, and books Date: 2001 – Search: limited to abstract	1
Review of Abstracts		Notes:	Final number	
Abstracts reviewed for their relevance to cessation of the plans		Duplicates between databases were removed Wildcards denoted with * which demonstrate that variations of that word or phrase will also be included in the searches	1	

Appendix B: Ethics Application

Institute of Education

Doctoral Student Ethics Application Form

Anyone conducting research under the auspices of the Institute of Education (staff, students or visitors) where the research involves human participants or the use of data collected from human participants, is required to gain ethical approval before starting. This includes preliminary and pilot studies. Please answer all relevant questions in simple terms that can be understood by a lay person and note that your form may be returned if incomplete.

Registering your study with the UCL Data Protection Officer as part of the UCL Research Ethics Review Process

If you are proposing to collect personal data i.e. data from which a living individual can be identified you **must** be registered with the UCL Data Protection Office **before** you submit your ethics application for review. To do this, email the complete ethics form to the [UCL Data Protection Office](#). Once your registration number is received, add it to the form* and submit it to your supervisor for approval. If the Data Protection Office advises you to make changes to the way in which you propose to collect and store the data this should be reflected in your ethics application form.

Please note that the completion of the [UCL GDPR online training](#) is mandatory for all PhD students.

Section 1 – Project details

a. Project title: An exploration of the experiences of professionals and parents when ceasing Education, Health and Care Plans

b. Student name and ID number (e.g. ABC12345678) John Cadman 15025702

c. *UCL Data Protection Registration Number Enter text

a. Date Issued: Enter text

d. Supervisor/Personal Tutor Dr Jo Van Herwegen

e. Department Psychology and Human Development

f. Course category (Tick one)

PhD

EdD

DEdPsy

g. If applicable, state who the funder is and if funding has been confirmed.

h. Intended research start date: May 2020

i. Intended research end date: June 2021

j. Country fieldwork will be conducted in United Kingdom

k. If research to be conducted abroad please check the [Foreign and Commonwealth Office \(FCO\)](#) and submit a completed travel risk assessment form (see guidelines). If the FCO advice is against travel this will be required before ethical approval can be granted: [UCL travel advice webpage](#)

l. Has this project been considered by another (external) Research Ethics Committee?

Yes External Committee Name: Enter text
Date of Approval: Enter text

No **go to Section 2**

If yes:

- Submit a copy of the approval letter with this application.
- Proceed to Section 10 Attachments.

Note: Ensure that you check the guidelines carefully as research with some participants will require ethical approval from a different ethics committee such as the [National Research Ethics Service \(NRES\)](#) or [Social Care Research Ethics Committee \(SCREC\)](#). In addition, if your research is based in another institution then you may be required to apply to their research ethics committee.

Section 2 - Research methods summary (tick all that apply)

Interviews

Focus Groups

Questionnaires

Action Research

Observation

Literature Review

Controlled trial/other intervention study

Use of personal records

Systematic review – if **only method used go to Section 5**

Secondary data analysis – if **secondary analysis used go to Section 6**

Advisory/consultation/collaborative groups

Other, give details: Enter text

Please provide an overview of the project, focusing on your methodology. This should include some or all of the following: purpose of the research, aims, main research questions, research design, participants, sampling, data collection (including justifications for methods chosen and description of topics/questions to be asked), reporting and dissemination. Please focus on your methodology; the theory, policy, or literary background of your work can be provided in an attached document (i.e. a full research proposal or case for support document). *Minimum 150 words required.*

The **purpose** of the research is to explore the experience of professionals (Special Educational Needs Coordinators, Educational Psychologists, and EHC coordinators/SEN officers) and parents when ceasing an Education, Health and Care (EHC) Plan and investigate how statutory recommendations about the process match with practice.

The **aims** of the current project are:

- To explore how decisions are made by Local Authorities to cease EHC plans, including who was involved in the process; barriers and facilitating factors that impact the decisions; and perceptions around these decisions by other key contributors (professionals and parents)
- To understand how children and young people are involved in the decisions around their EHC plans: how were these decisions discussed with the CYP; what were the CYP's opinion or voice in the decision and how was this gathered; how was it decided that they no longer needed the additional support
- To understand the impact of the EHC plan during and since cessation and its role in the independence of the CYP
- To identify factors that can support and promote successful transitions from EHC plans and use findings to help inform policy, practice, support and provision.

The **key research questions** for the current project are:

1. How are decisions made by LAs to cease EHC plans?
2. What factors contribute to an EHC plan being ceased?
3. How are children and young people involved in the decision to cease their EHC plan?
4. How are parents/carers involved in the decision to cease their child's EHC plan?

The **research design** will use a mixed-methods approach to explore the experiences of professionals and parents who have ceased an EHC plan. Both qualitative and quantitative methods will be used to gather data using open and closed survey questions. Quantitative data from questionnaires will be analysed using a combination of descriptive statistics and chi-square tests where appropriate. Follow up semi-structured interviews may be used on those who opt-in, to further understand the process and key themes emerging from their experiences. Qualitative data will be analysed using thematic analysis (Braun & Clarke, 2006) to identify key themes.

Participants will include a national sample of professionals involved with EHC plans (Special Educational Needs Coordinators (SENCOs), Educational Psychologists, Parents and SEN Officers within the local authority) and parents from both primary and secondary settings. The study hopes to gather the views of approximately 40-50 professionals and parents from the questionnaire data. Additionally, the study may use semi-structured phone interviews to gather further views of those who opt-in during the online surveys.

Volunteer sampling will be used during the study, and participants will be recruited by approaching Local Authorities (Principle Educational Psychologists/ Heads of SEN) inviting them to participate in an online survey and asking them to disseminate project information and survey link to staff (Educational Psychologists and SEN Officers) schools and parents within their borough / county.

The **method of data collection** will be through online surveys (to both professionals and parents) with a mixture of open and closed questions. Follow up semi-structured telephone interviews may be used to gather additional qualitative data from those who opt-in

➤ The **online survey** will use open and closed questions to explore:

- Contextual questions about the ceased EHC plan in question; age of child, special educational need, time EHC plan was in place, and types of professionals actively working with the child
- The involvement of the child or young person (CYP) in the ceasing process; whether the child's voice was (or able to be) heard, how was this discussed with the CYP, what was the CYP's indication of their wants, their outcomes since cessation
- The type of provision and support offered to the CYP prior to cessation and since; what were the steps leading towards the decision to cease the plan
- Their experiences of the decision-making process; who instigated the discussion/decision, what were the steps involved, understanding of the legal obligation, and who was involved in the process

Findings from the report will be disseminated to all who have taken part in the study and given contact information.

Section 3 – research Participants (tick all that apply)

- Early years/pre-school
- Ages 5-11
- Ages 12-16
- Young people aged 17-18
- Adults please specify below
- Unknown – specify below
- No participants

Special Educational Needs Coordinators (SENCOs), Educational Psychologists, Parents and Special Education Needs Officers within the local authority.

Note: Ensure that you check the guidelines carefully as research with some participants will require ethical approval from a different ethics committee such as the [National Research Ethics Service](#) (NRES) or [Social Care Research Ethics Committee](#) (SCREC).

Section 4 - Security-sensitive material (only complete if applicable)

Security sensitive research includes: commissioned by the military; commissioned under an EU security call; involves the acquisition of security clearances; concerns terrorist or extreme groups.

- Will your project consider or encounter security-sensitive material?
Yes* No
- Will you be visiting websites associated with extreme or terrorist organisations?
Yes* No
- Will you be storing or transmitting any materials that could be interpreted as promoting or endorsing terrorist acts?
Yes* No

* Give further details in Section 8 Ethical Issues

Section 5 – Systematic reviews of research (only complete if applicable)

- Will you be collecting any new data from participants?
Yes* No
- Will you be analysing any secondary data?
Yes* No

* Give further details in Section 8 Ethical Issues

If your methods do not involve engagement with participants (e.g. systematic review, literature review) **and** if you have answered **No** to both questions, please go to **Section 8 Attachments**.

Section 6 - Secondary data analysis (only complete if applicable)

- Name of dataset/s
- Owner of dataset/s
- Are the data in the public domain?
Yes No
If no, do you have the owner's permission/license?
Yes No*
- Are the data special category personal data (i.e. personal data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, or trade union membership, and the processing of genetic data, biometric data for the purpose of uniquely identifying a natural person, data concerning health or data concerning a natural person's sex life or sexual orientation)?
Yes* No
- Will you be conducting analysis within the remit it was originally collected for?

Yes No*

- If no, was consent gained from participants for subsequent/future analysis?

Yes No*

- If no, was data collected prior to ethics approval process?

Yes No*

* Give further details in Section 8 Ethical Issues

If secondary analysis is only method used **and** no answers with asterisks are ticked, go to Section 9 Attachments.

Section 7 – Data Storage and Security

Please ensure that you include all hard and electronic data when completing this section.

- Data subjects - Who will the data be collected from?
Adults (SENCOs, Educational Psychologists, Parents and Special Education Needs Officers within the local authority) via surveys.
- What data will be collected? Please provide details of the type of personal data to be collected
 - Optional:** Gender, age, ethnicity, local authority/borough and SEN of child or young person for demographic purposes
 - Optional:** email address or other contact information for dissemination of study findings and opportunity to be involved in follow-up interview. If participants agree to take part in a follow-up interview, then personal data that may be collected including the participant's name and contact number.

Is the data anonymised?

Yes No*

Do you plan to anonymise the data?

Yes* No

Do you plan to use individual level data?

Yes* No

Do you plan to pseudonymise the data?

Yes* No

* Give further details in Section 8 Ethical Issues

- Disclosure** – Who will the results of your project be disclosed to?
Results of the project will be disclosed to research supervisors and presented as a doctoral thesis, submitted in part fulfilment of the requirements of the UCL Institute of Education for Doctorate in Professional Educational, Child and Adolescent Psychology (DEdPsy). Results may be considered for publication following thesis submission. Findings from the study will also be disseminated to all participants who have indicated that they would like a follow-up summary of results.

Disclosure – Will personal data be disclosed as part of your project?

No – all personal data will be anonymised before processing, and any identifying information about participants (such as name, school, borough etc.) will be removed from the transcriptions making all the data anonymous. Once the final report has been written and summary emailed out to participants, all contact information for participants (i.e. name/email address/phone number) will be destroyed.

- d. Data storage – Please provide details on how and where the data will be stored i.e. UCL network, encrypted USB stick**, encrypted laptop** etc.

For transcription purposes, telephone interviews will be recorded (with consent from participants) using a password protected voice recorder which will be stored securely. Once the interviews are transcribed, the recordings will be deleted. Quantitative data from the survey will be collated using a statistical software programme (i.e. SPSS) for analysis. All files will be stored securely on a password protected laptop, in accordance with the University's Data Protection Policy. Only research supervisors and I will have access to data files. Any identifying contact information about participants will be stored in separate, password protected file location from the transcribed interviews and survey data.

**** Advanced Encryption Standard 256 bit encryption which has been made a security standard within the NHS**

- e. **Data Safe Haven (Identifiable Data Handling Solution)** – Will the personal identifiable data collected and processed as part of this research be stored in the UCL Data Safe Haven (mainly used by SLMS divisions, institutes and departments)?
Yes No

- f. How long will the data and records be kept for and in what format?
Data will be retained for a minimum of ten years and it will be kept in an electronic format, encrypted with a password on a password protected computer.

Will personal data be processed or be sent outside the European Economic Area? (If yes, please confirm that there are adequate levels of protections in compliance with GDPR and state what these arrangements are)
No

Will data be archived for use by other researchers? (If yes, please provide details.)
No

- g. If personal data is used as part of your project, describe what measures you have in place to ensure that the data is only used for the research purpose e.g. pseudonymisation and short retention period of data'.
Any identifying information (such as name, school, borough etc.) will be removed from interview transcriptions, making all the data anonymous. Pseudonyms will be used and in place of participant names. Interview audio files will be deleted once

transcribed. Contact information will be deleted once the final dissemination of information is complete.

*** Give further details in Section 8 Ethical Issues**

Section 8 – Ethical Issues

Please state clearly the ethical issues which may arise in the course of this research and how will they be addressed.

All issues that may apply should be addressed. Some examples are given below, further information can be found in the guidelines. *Minimum 150 words required.*

- Methods	- Risks to participants and/or researchers
- Sampling	- Confidentiality/Anonymity
- Recruitment	- Disclosures/limits to confidentiality
- Gatekeepers	- Data storage and security both during and after the research (including transfer, sharing, encryption, protection)
- Informed consent	- Reporting
- Potentially vulnerable participants	- Dissemination and use of findings
- Safeguarding/child protection	
- Sensitive topics	
- International research	

Sampling, Recruitment and Gatekeepers/

This project intends to collect data from participants (SENCOs, Educational Psychologists, Parents and Special Education Needs Officers within the local authority) through an online survey with the potential for follow-up semi-structured telephone interviews. Information about the project will initially be sent to Local Authorities (Principle Educational Psychologists/ Head of SEN) inviting them to participate in an online survey and asking them to disseminate project information and survey link to staff (Educational Psychologists and SEN Officers) schools and parents within their borough / county. Information about the project may also be advertised online, through SEN forums and approval and permission will need to be sought from any gatekeeper organisation before advertising the project.

This project will recruit participants using an opt-in approach. Following receipt of information about the research, the potential participant will take an active step in agreeing to participate by following the link to take part in the survey. Participants are actively choosing to attach their email address (or other contact information) if they are interested in receiving follow-up information about the project and future involvement (i.e. through a phone interview). While an opt-in approach might lead to lower response rates and potentially a less representative sample, it is the practical option for this study as participants must volunteer willingly.

Benefits of the research

This research aims to increase knowledge and understanding of the experiences of the professionals and families who have been involved in ceasing an EHC plan. By exploring their perspectives, this project hopes to identify factors that can support and promote successful

transitions from EHC plans and a move towards independence. This study hopes that these factors may help inform policy, practice, support and provision.

Informed Consent

Participants will be providing fully informed consent. The participant information sheet and consent form will contain details about the right to withdraw consent at any time, including information about omitting any interview or survey questions that participants do not wish to answer. During any interviews conducted, participants will need to confirm their consent to be recorded for transcription purposes and will be reminded that they may withdraw their consent at any time, during or after the interview. All unprocessed data will be destroyed if a participant chooses to withdraw. Contact information for withdrawal of consent will be provided on the initial information sheet.

Safeguarding / child protection

During surveys and interviews, it is possible that participants will be using examples and information about the children and young people they are in contact with. In order to safeguard all children in the study, the data will be anonymised and kept securely under the data protection measures outlined in section 7. No other participant will have access to another person's data and the overall results and findings will be coded and anonymised to protect the identity of all participants to prevent any safeguarding / child protection issues from arising.

Risks to participants and/or researchers

While there are no obvious risks of the research, participants may find it challenging to reflect on experiences that have not gone well or been difficult. To reduce this risk, participants will be informed about the length of the survey/interview and will choose to participate at a time and date convenient to them. They will be reminded that their participation is voluntary and that they have the choice to omit any questions or withdraw at any stage and that all content will be anonymous. They will be assured that the purpose of the research is to identify improvements to the system that may ultimately benefit themselves, other professionals, or other children and families. At the end of any interviews there will be the opportunity to debrief participants and, if necessary, have any follow up contact. Participants will receive a summary of results after the research is completed, if requested. Any interviews conducted will take place by phone in a private room where there is no immediate risk to the researcher when conducting the interviews.

Confidentiality / Anonymity

Any interviews conducted will be recorded on a password-protected voice recorder (with consent from participants) for transcription purposes only and will be deleted immediately after transcription. Transcription files will be stored on a password protected laptop, in accordance with the University's Data Protection Policy. Any identifying information (such as name, school, borough, LA, etc.) will be removed from the survey responses and interview transcriptions, making all the data anonymous, and pseudonyms will be used in place of participant name. Any identifying contact information about participants (i.e. for arranging interview times or for the dissemination of the report findings) will be stored in completely

separate, password protected file location and destroyed after final dissemination is complete. Consent will be stored in a separate location from the linked data with the same regard to the confidentiality and anonymity protocols of the research.

Disclosures / limits to confidentiality

Confidentiality will be maintained in all situations unless the participant discloses that someone is at risk of immediate harm, in which case I will have to inform my supervisors. This information will be included in the pre-interview brief, so participants are aware. As I will be arranging, undertaking and transcribing any interviews, complete anonymity of participants is not possible as I will be aware of the participants' identities. However, the above measures will be taken to ensure that the information is kept securely and confidentially. While I am invested in the project's completion, I remain independent from the outcome of the research and have no conflicts of interest or partiality over the results.

Data storage and security

For transcription purposes, any interviews conducted will be recorded (with consent from participants) using a password protected voice recorder or using a secure voice recording device attached to a phone (for phone interviews). The voice recorder will be stored securely in a locked cupboard in a locked room, once interviews are transcribed, recordings will be deleted. Transcribed interview files and collated survey data will be stored on a password protected laptop. Only myself and my research supervisors will have access to these files. Should the voice recorder or laptop be stolen/lost, this data will remain on the devices but due to the secure encryption, this should not pose a risk. Once transcribed, recordings will be deleted, and all data will be anonymised and coded to prevent any personal or private information revealing the identities of participants.

Reporting, Dissemination and use of findings

All participants will be asked if they would like to receive follow-up about the project findings. If so, participants will have the choice to leave their email address and findings from the report will be disseminated once the reported has been completed and a summary of findings created. Participants' email addresses will not be linked to their survey data to maintain confidentiality and anonymity. Once the report has been completed and the summary emailed out to participants, all contact information will be destroyed. Upon completion of the research an electronic and printed copy of the dissertation will be submitted to UCL's Institute of Education as per course requirements. The project may be considered for publication.

Please confirm that the processing of the data is not likely to cause substantial damage or distress to an individual

Yes

Section 9 – Attachments. Please attach the following items to this form, or explain if not attached

- a. Information sheets, consent forms and other materials to be used to inform potential participants about the research (List attachments below)

Yes No

- Information sheets for professionals and parents
- Consent forms for professionals and parents
- Draft survey questions for professionals and parents
- Draft interview question for professionals and parents

- b. Approval letter from external Research Ethics Committee Yes
- c. The proposal ('case for support') for the project Yes
- d. Full risk assessment Yes

Section 10 – Declaration

I confirm that to the best of my knowledge the information in this form is correct and that this is a full description of the ethical issues that may arise in the course of this project.

I have discussed the ethical issues relating to my research with my supervisor.

Yes No

I have attended the appropriate ethics training provided by my course.

Yes No

I confirm that to the best of my knowledge:

The above information is correct and that this is a full description of the ethics issues that may arise in the course of this project.

Name John Cadman

Date 27/04/2020

Please submit your completed ethics forms to your supervisor for review.

Notes and references

Professional code of ethics

You should read and understand relevant ethics guidelines, for example:

[British Psychological Society](#) (2018) *Code of Ethics and Conduct*

Or

[British Educational Research Association](#) (2018) *Ethical Guidelines*

Or

[British Sociological Association](#) (2017) *Statement of Ethical Practice*

Please see the respective websites for these or later versions; direct links to the latest versions are available on the [Institute of Education Research Ethics website](#).

Disclosure and Barring Service checks

If you are planning to carry out research in regulated Education environments such as Schools, or if your research will bring you into contact with children and young people (under the age of 18), you will need to have a Disclosure and Barring Service (DBS) CHECK, before you start. The DBS was previously known as the Criminal Records Bureau (CRB). If you do not already hold a current DBS check, and have not registered with the DBS update service, you will need to obtain one through at IOE.

Ensure that you apply for the DBS check in plenty of time as will take around 4 weeks, though can take longer depending on the circumstances.

Further references

The www.ethicsguidebook.ac.uk website is very useful for assisting you to think through the ethical issues arising from your project.

Robson, Colin (2011). *Real world research: a resource for social scientists and practitioner researchers* (3rd edition). Oxford: Blackwell.
This text has a helpful section on ethical considerations.

Alderson, P. and Morrow, V. (2011) *The Ethics of Research with Children and Young People: A Practical Handbook*. London: Sage.
This text has useful suggestions if you are conducting research with children and young people.

Wiles, R. (2013) *What are Qualitative Research Ethics?* Bloomsbury.
A useful and short text covering areas including informed consent, approaches to research ethics including examples of ethical dilemmas.




Departmental use

If a project raises particularly challenging ethics issues, or a more detailed review would be appropriate, the supervisor must refer the application to the Research Development Administrator via email so that it can be submitted to the IOE Research Ethics Committee for consideration. A departmental research ethics coordinator or representative can advise you, either to support your review process, or help decide whether an application should be referred to the REC. If unsure please refer to the guidelines explaining when to refer the ethics application to the IOE Research Ethics Committee, posted on the committee's website.

Student name	<input type="text"/>
Student department	<input type="text"/>
Course	<input type="text"/>
Project title	<input type="text"/>
Reviewer 1	
Supervisor/first reviewer name	<input type="text"/>
Do you foresee any ethical difficulties with this research?	<input type="text"/>
Supervisor/first reviewer signature	<input type="text"/>
Date	<input type="text"/>

Reviewer 2	
Second reviewer name	<input type="text"/>
Do you foresee any ethical difficulties with this research?	<input type="text"/>
Supervisor/second reviewer signature	<input type="text"/>
Date	<input type="text"/>
Decision on behalf of reviews	
Decision	Approved <input type="checkbox"/>
	Approved subject to the following additional measures <input type="checkbox"/>
	Not approved for the reasons given below <input type="checkbox"/>
	Referred to REC for review <input type="checkbox"/>
Points to be noted by other reviewers and in report to REC	<input type="text"/>
Comments from reviewers for the applicant	<input type="text"/>
<i>Once it is approved by both reviewers, students should submit their ethics application form to the Centre for Doctoral Education team: IOE.CDE@ucl.ac.uk.</i>	

Appendix C: Information Sheet and Consent Form

<p>Institute of Education</p> 	<p>Institute of Education</p> 
<p>My name is John Cadman and I am completing my doctorate in Educational, Child and Adolescent Psychology at the Institute of Education, UCL.</p> <p>My thesis is exploring the experiences of professionals when a child's Education, Health and Care (EHC) plan is <i>ceased</i> before the age of 25. No research to date has explored the cessation of EHC plans or how the EHC cycle comes to an end.</p> <ul style="list-style-type: none"> • The purpose of the research is to try and understand how decisions are made to cease an EHC plan, including: who was involved in the process; what were the facilitating factors and/or barriers that impacted the process; and what are the perceptions of those who were involved. • The hope is that through this research, factors can be identified to support and promote the successful transitions of children and young people when an EHC plan ceases. Findings will be published with the aim of informing future policy, practice, support, and provision. <p>I aim to gather the views of SEN Officers and SENDCos through a short online questionnaire (approx. 10 minutes). I hope you will be interested in helping with this important project and giving [Name of Service]'s voice to current research.</p> <p>Only my research supervisors and I will have access to the data files, all of which will be anonymised.</p> <p>If you would like to support the research:</p> <ul style="list-style-type: none"> • Please ask members of your <i>SEN team</i> to complete the questionnaire. • Please forward information about this project to <i>SENCOs</i> in your area to complete the questionnaire. <p>Professionals can access the questionnaire through this link: https://ucl.oe.ucl.ac.uk/qualtrics.com/ife/form/SV_6VeDZmzYmpZV4Db <i>This link also contains a detailed information sheet and consent form</i></p> <p>Yours faithfully,</p> <p>John Cadman j.cadman@ucl.ac.uk</p> 	<p>Why are we doing this research? Since the implementation of Education, Health and Care plans, there has been a wealth of research into various parts of its lifecycle. However, there is surprisingly little research about the end (or ceasing) of these plans. For the purposes of this research, a ceased EHC plan is when a decision is made to bring the EHC plan to an end before the age of 25. The Education Committee (2019) highlighted the growing number of parents dissatisfied with legislation surrounding EHC plans. No research to date has explored the cessation of EHC plans.</p> <p>The aims of this research are:</p> <ol style="list-style-type: none"> 1. To explore how decisions are made by Local Authorities to cease EHC plans before the age of 25, including the experiences of those involved in the process and identify factors and/or barriers that impact these decisions. 2. To understand how children and young people are involved in the decisions around their EHC plans: how were these decisions discussed with the CYP; what were the CYP's opinion or voice in the decision and how were their views gathered; how was it decided that they no longer needed the additional support. 3. To understand the impact of the EHC plan during and since ceasing and its role in the independence of the CYP. 4. To identify factors that can support and promote successful transitions from EHC plans and use findings to help inform policy, practice, support and provision. <p>Why am I being invited to take part? You have been asked to participate because you are a professional who was involved in the process (i.e. SENCO or SEN/EHC Officer) We are inviting professionals to provide a first-hand account about how they experienced the process of ceasing a CYP's EHC plan, and the impact on the child or young person.</p> <p>What will happen if I choose to take part? You will be asked to complete an online survey (approx. 10 minutes) about your experiences during the process of ceasing an EHC plan. Following the survey, you can choose to provide contact information with the possibility of taking part in a telephone/online interview (approx. 30 minutes) at a convenient date and time. The interview hopes to gather further information about the experiences, but you will have complete control over what information you choose to share and can omit any questions you do not wish to answer. You have the right to withdraw from the project at any time and all unprocessed data will be destroyed.</p> <p>Do I have to take part? Your contribution will be invaluable to the process and families in the future. It is important to understand your experiences and what we can learn from that. We hope that you would like to contribute to this study, but the decision is yours. If you choose to take part, you can still withdraw from the project at any time and any unprocessed data will be destroyed. You do not have to give a reason for your decision.</p>

Institute of Education



What happens to the results of the study?

If you would like to receive a summary of the findings from the report, please leave your email address at the end of the questionnaire. Please note, your email address will not be linked to your questionnaire and responses will stay confidential and anonymous.

What if I have any questions or concerns?

If you have any additional queries or concerns, please contact me directly in the first instance. If you are unhappy with the response, please contact either of my research supervisors:

- John Cadman (Researcher) UCL Institute of Education: j.cadman@ucl.ac.uk
- Dr Jo Van Herwegen (Research Supervisor) UCL Institute of Education: j.vanherwegen@ucl.ac.uk
- Dr. Jeremy Monsen (Research Supervisor) UCL Institute of Education: j.monsen@ucl.ac.uk

Data Protection Privacy Notice

The data controller for this project will be University College London (UCL). The UCL Data Protection Office provides oversight of UCL activities involving the processing of personal data and can be contacted at data-protection@ucl.ac.uk. UCL's Data Protection Officer can also be contacted at data-protection@ucl.ac.uk.

This 'local' privacy notice sets out the information that applies to this particular study. Further information on how UCL uses participant information can be found in our 'general' privacy notice:

For participants in research studies, click [here](#)

The information that is required to be provided to participants under data protection legislation (GDPR and DPA 2018) is provided across both the 'local' and 'general' privacy notices.

The lawful basis that will be used to process your personal data are: 'Public task' for personal data and 'Research purposes' for special category data.

Your personal data will be processed so long as it is required for the research project. We will endeavour to minimise the processing of personal data wherever possible. If you are concerned about how your personal data is being processed, or if you would like to contact us about your rights, please contact UCL in the first instance at data-protection@ucl.ac.uk.



Consent Form

Title: An exploration of the experiences of professionals when young person's Education, Health and Care Plan is ceased.]

Researchers: John Cadman, supervised by Dr Jo Van Herwegen and Dr. Jeremy Monsen.

If you would like to participate in the study, please complete the following consent form:

1. I confirm that I have read and understood the information sheet for this research project and have had the opportunity to ask questions and have these questions answered satisfactorily.
2. I understand that my responses will be recorded and analysed for the purpose of completing the above research project.
3. I understand that my participation is voluntary and that I may withdraw at any time; any unprocessed data will be destroyed. I understand that it will no longer be possible to withdraw as my data once data has been anonymously collated for analysis.
4. I understand that my responses will be anonymised before analysis and will be confidential as detailed in the information sheet. I understand who will have access to my personal data and how the data will be anonymised, stored, and what will happen to the data at the end of the project.
5. I give permission for data to be analysed and used for academic purposes, to inform and I understand that results may be shared in research publications and presentations.
6. I agree to take part in the above research project.

Participant's Name (Printed)*

Participant's Signature*

Date

If you have any questions or would like further information about this research, including if you would like to withdraw consent, please contact John Cadman (Researcher) UCL Institute of Education: j.cadman@ucl.ac.uk

Thank you for your involvement in the project.

*Participants wishing to maintain further anonymity may use their initials (from the British Psychological Society Guidelines for Minimal Standards of Ethical Approval in Psychological Research).

Appendix D: Online Questionnaire

Start of Block: Professional Contextual

Q1 What is your role?

Assessment Coordinator, SEN Officer, EHCP Coordinator

SENCO

Other (please specify) _____

Q2

For the next few questions, think about a recent child or young person who had their EHC plan ceased.

For the purposes of this research, a ceased EHC plan is defined as an Education, Health and Care plan that was brought to an end before the age of 25

Q3 What stage of education was the child or young person in at the time of ceasing?

Primary

Secondary

College

Further Education

Q4 What type of provision/school/college does/did the child or young person attend?

- Mainstream
- Special
- Mainstream with provision/unit
- Pupil Referral unit or Alternative Provision
- Other (Please specify) _____
-

Q5 How long ago was the EHC plan ceased?

- Within the last six months
- Between six months and one year ago
- One year to two years ago
- Two or more years ago
-

Q6 From your understanding how long had the child or young person had an EHC plan (approximate number in years)

▼ 1 ... 25

Q7 What professionals/practitioners were involved with the child or young person

- Educational Psychologist
- Health professional (e.g. Speech and Language therapist, Occupational therapist, GP etc)
- Social care (e.g. family support worker or social worker)
- Specialist school staff
- Other (please specify) _____

Start of Block: Professionals: Provision and support available

Q8 When was the decision made to cease the EHC plan?

- During or following an Annual review
- During Educational Psychologist involvement
- During the transfer from Statement of SEN to EHC plan
- During the transition to a new setting (e.g. moving from primary to secondary school)
- Other (please specify) _____
-

Q9 Who initiated the discussion to cease the EHC plan?

- The parent/carer
 - The child or young person
 - Special Educational Needs Coordinator (SENCO)
 - School staff member (e.g. class teacher, head of year, headteacher)
 - Educational Psychologist
 - SEN Officer (within the Local Authority)
 - Other (please specify) _____
-

Q10 What was the reason behind the ceasing?

- Achieving the educational or training outcomes outlined in the plan
 - Education no longer the most significant priority
 - No longer required the special educational provision outlined in the plan
 - Reached the age of 25
 - Other (please specify) _____
-

Q11 What other factors contributed to this decision to cease? Could you tell me more about how this decision was made?

Q12 How involved do you think the child or young person was during the ceasing process?

- Very involved
- Involved
- Moderately involved
- Slightly involved
- Not at all involved

Q13 How was the child or young person involved during the ceasing process?

Q14 How involved do you think the parents/carers were during the ceasing process?

- Very involved
- Involved
- Moderately involved
- Slightly involved
- Not at all involved
- Comments (please add any further comments about parental involvement)

Q15 How involved did you feel during the ceasing process?

- Very involved
- Involved
- Moderately involved
- Slightly involved
- Not at all involved
- Comments (please add any further comments about your involvement)
-

Q16 What communication or involvement have you had with the CYP and their family since the ceasing of the EHC plan?

Start of Block: Professionals: Experiences of decision making

Q17

For the next few questions, think about your experiences with ceased EHC plans in general.

Q18 Thinking about your experience of the ceasing process: What **works** well for you as a professional?

Q19 Thinking about your experience of the ceasing process: What **does not** work well for you as a professional?

Q20 Would you make any specific changes to the way the ceasing process works? *What would you suggest services do differently?*

Q21 Is there anything else you'd like to add about the ceasing process?

Appendix E: Example Interview Schedule

Introduction:

The aim of this interview is to gain an in-depth understanding of your experience when a child's EHC plan is ceased before the age of 25– I will be asking about what you think has worked well, what you think has not worked well, and also about your experiences of working with families, children and other professionals during the process.

I am interested in exploring your thoughts, feelings, perceptions and reflections. There are no right or wrong answers and I would like you to be as open and honest as possible. Also, during the interview, I may ask you to expand on your answers by giving specific examples; if you feel uncomfortable about any question or would prefer not to answer a question, please let me know, as it is important that you feel happy and comfortable throughout the interview. If at any point you wish to stop, that's fine – just let me know. Everything you say will be kept confidential and anonymised during transcription so please do speak freely and take your time to think and talk.

- *Revisit information contained within the Participant Information Sheet. (can I just check you have had a chance to read through the information sheet... and do you have any questions)*
- *Give participants time to ask any questions and give verbal consent.*

Before we begin, are you happy for me to record our conversation on a computer/voice recorder to make sure that I don't miss anything? This recording will only be listened to by myself and once I've transcribed your words it will be deleted.

Questions:

1. Background information

- How long have you been a SENCO/SEN Officer?
- What type of school setting do you work in? (i.e. stage of education and type of school, age etc)
- How many children with EHC plans do you currently have in your setting?
- Which county are you in?
- How many EHC plans have you supported to cease? (general reason for ceasing?)

2. I understand that each area has slightly different processes around EHC plans – can you tell me about the process for ceasing an EHC plan in your area?

- How have you found this process in practice? (*What has worked well/ what has been more challenging/ what could be done differently*)

3. Thinking about a specific example when a child's EHC plan was ceased (most recent if more than one) Can you tell me about how the decision was made to cease the child's EHC plan?

- *What were the steps taken/ who initiated the discussion/ why was the decision made – why then?*

- How successful was their transition following the plan ceasing (what supported/ restricted this?)
- What do you think worked well in that case? (around the ceasing)
- What do you think was more challenging or could have been done better? (*prompt for both*)

4. A key aspect of the EHC plan legislation and process is working with families and other professionals. I want to ask about your experience with this side of the process when a plan is ceasing.

- Let's start by talking about parent's first – what has your experience been when working with parents/carers during the ceasing process? (*prompt for what works well/ what is more challenging if they only mention one*)
- Another key focus is including the child's voice in the plan and decision making process – how have you found this aspect? (*prompt for what works well/ what is more challenging if they only mention one*)
- Can you tell me about your experiences of working with other professionals when an EHC plan is ceased? (i.e. educational psychologists, virtual school staff, social workers, other teaching professionals) – (*prompt for what works well/ what is more challenging if they only mention one.*)
- What could be done to improve multiagency working with parents, children and professionals around ceasing EHC plans?

5. Can you tell me about any training you've had on EHC plans in general?

- Can you tell me about any training/information around ceasing plans specifically?
- What was your understanding of the ceasing process and reasons that a plan could be ceased?
- What kind of training would be useful for you in this area?

6. Conclusion

- Is there anything else that you'd like to mention about ceasing EHC plans that you haven't had the opportunity to discuss in the interview?
- If you could make a recommendation to the Department for Education about the process of ceasing an EHC plan, what would you say? what would have made it better for you?

Debrief:

- Thank for taking the time to talk about experiences.
- Highlight information in the Participant Information Sheet about what will happen to the results and who to contact for further information.
- Emphasise to get in touch if they want to discuss anything further.
- Time to process and reflect on the interview. How did they find it? Do they have any additional questions?
- Ask about whether they would like to receive information about the findings.

Appendix F: Example of Questionnaire Analysis

What other factors contributed to this decision to cease? Could you tell me more about how this decision was made?

Assessment Coordinator	When contacted regarding the transfer from SEN statement to EHCP the young person and parent felt plan was no longer needed and wanted to cease it.
Assessment Coordinator	The CYP was receiving only one funded hour over the core hours. The CYP had made progress against their outcomes and therefore the EHCP was not needed.
Assessment Coordinator	All outcomes in plan met. Provider could offer no further advancement
Assessment Coordinator	YP had made good progress and would be able to supported from resources normally available in a FEQ
Assessment Coordinator	The young person was having their Y8 Annual Review. Following their transition to secondary school, the SENDCo raised that the child had made excellent progress and achieved all outcomes within the EHCP and no further outcomes were required. Parent and professionals were in agreement with this and it was felt that the child's EHC Plan should be ceased and moved to school action for SEN monitoring, but needs where not at an EHCP level. This was discussed with the young person in the review and was seen as a real celebration of their achievement of their hard work to make such great progress.
Assessment Coordinator	YP did not want to engage with further education or support. Had reached the age of 21 and mental health needs were priority. Supported by Social Worker and transgender services. No intention of entering education or training despite 18 months of being offered support and mentoring.
Assessment Coordinator	
Assessment Coordinator	All outcomes of the plan met, no new outcomes. If an assessment was to be asked at the time the young person would not have met the criteria for an assessment or Plan.
Assessment Coordinator	The young person was no longer making academic progress. There was a referral made by the parent to Adult Social Care.
Assessment Coordinator	The young person was moving from school to a mainstream college for post 16. He had behavioural difficulties. The course he was enrolled on at college was a vocational plastering course in order to lead him to a job in this area. This young person did not require additional support over the national threshold (£6000) in order to complete this course. The LA view is that any additional support needs he may have to complete his college course could be met from within the college's own SEN resources. A full time course at college can be around 15 hours and the staff to pupil ratios are high. £6000 equates to approx 12 hours 1-1 support.
Assessment Coordinator	The young person was not making educational progress and was accessing an educational setting primarily because they needed somewhere to live

Codes:

35 responses

CYP and Parent decision to cease (6)

Outcomes achieved (8)

Needs able to be met at SEN support level (11)

Celebration of achievement (2)

following transition (1)

No longer in education/not engaging in education/ University (5)

Move to adult social care (3)

SEMH needs improved (4)

SLNC/EAL needs improved (1)

Medical needs improved (4)

LA decision without discussion (2)

Before transition (1)

Appendix G: Example Interview Transcript and Initial Coding Categories

P1

So with the SENCo I would have quite regular meetings with the SENCo about all the children in the school that were kind of raising a concern and, and so if we had decided to cease that would be one child, I would kind of bring up and and like I said, if they were doing kind of a review after six months, I'd bring that up at the next meeting we'd have. And similarly with our EPs, we would have meetings. And I would just bring that up and say, actually, at the annual review, you know, this was what was discussed, the EP wasn't at the annual review for this child because it couldn't attend, but as soon as we kind of had discussed ceasing, I... because they were working in the same office, popped around and just let them know that this was what was been discussed and that the EP had worked with this child before and also felt it was appropriate.

John Cadman

Okay, see, and so how regular you meetings with the SENCo?

P1

formal meetings were probably about once a month, but I would speak to her kind of, on a couple of days basis, like, every three days. I had open lines of communication. So if there was anything concerning her around a child that had an education, health and care plan, or that was potentially could benefit from one, she would just literally call me up and tell me, and we would discuss it. Also, we would also seek EP's advice as part of the process once we've got the annual review paperwork for their comment on on the annual review.

John Cadman

Okay, was that for all annual reviews?

P1

Yeah. So all annual reviews that required a change in provision: so if it was going to be ceased, if they wanted to top up a funding, or change of school setting, they would, we would, we would do all the admin work around that, annual review paperwork, give it to the EP the link up for that school for their comment. And then that comment would also be included in the pack that went to panel.

John Cadman

Okay, but the EPs wouldn't come to the annual reviews?

P1

The EP came to a couple of annual reviews. but they didn't manage to come to all of them. Now for this one, I'm not sure if they were made aware that prior to the annual review that they wanted to cease. So perhaps if they did know that they would have come to the annual review.

Coding Density			
<ul style="list-style-type: none"> • Putting a face to a name • Putting a face to a name • Keep track of progress post ceasing • Keep track of progress post ceasing • Keep track of progress post ceasing • Keep track of progress post ceasing • Importance of multiagency working around ceasing • Importance of multiagency working around ceasing • Importance of multiagency working around ceasing • Importance of multiagency working around ceasing • Informal conversations with EP • Informal conversations with EP • Informal conversations with EP • Informal conversations with EP • Informal conversations with EP • Attending annual reviews aids work • Attending annual reviews aids work • Attending annual reviews aids work • Attending annual reviews aids work • Hard to get, easy to cease • Importance of relationships with school • Importance of relationships with school • Importance of relationships with school • Importance of relationships with school • P1 • Need for clearer guidelines and pathways 			
			<ul style="list-style-type: none"> • Keep EP involved in important discussions • Keep EP involved in important discussions • Keep EP involved in important discussions • Keep EP involved in important discussions

John Cadman

Yeah. Okay. Yeah, that makes sense. Thank you, . Is there anything else you'd like to mention about ceasing plans that you haven't had an opportunity to mention?

P14

Well, just obviously, schools if we, if I did cease, like, let's say that when I was talking about which went into sort of into the sixth form, doing A levels, they still have a responsibility to actually provide support. Which is another thing that I do say to parents actually, younger, you know, younger down the line sort of thing. If we were to cease, I've had situations historically like that, actually, school should be providing 15 to 15 hours. Yeah. So it's not as if like, EHCP goes and that's it. For those mid year, kind of kiddies. Because that, you know, every school has money to do that. And also that, I know, you're talking about ceasing. But that is a conversation I have, when school haven't submitted the ehcp request yet. Okay. At the other end of the scale, so I'd be saying, Well, how do you demonstrate what support you're putting in? And how you're basically not coping?

John Cadman

Yes, he says, more emphasis on that first 6000 pounds. And yeah, and that being used? And I guess, more reliance on that?

P14

Yeah. And more, I think the EHCP was also it was missold. It was it was sold as like, it's like the "golden sort of tickets" thing? Actually, you know, there were lots of children in those schools that go on perfectly well, without an EHCP. You know, and schools, at times need to crack on a bit. I mean, for them, obviously, the majority of mine. Obviously, they've got significant needs, of course, otherwise they wouldn't need an EHCP. But we would try and stop applications going on at the beginning of the cycle, just as we're stopping it at the end.

P14

But yeah, it was it was I mean, it was even the EHCP was missold to us as professionals like and and our service was mis sold. It was very much like, Oh, it's this massive, beautiful person centred service. But actually, we haven't I haven't got capacity to do that. I work four days a week, 20 hours. And I've got 120 on my caseload, you know, how person centred Can I be? So you are sort of always reliant on other professionals. Not it's my role to, to necessarily support and more support transition

P14

I mean, I remember working in connections, and I had at young people, and that was hard. That was hard. And I knew my young people as well. And that, that, you know, these to come to drop in, and I knew them, and I used to support them, you know, mostly group works and assemblies and all these lovely things parents evenings, and you know, from from what it was to now is very different. I mean, I, I, this is gonna sound awful. I do not make one to ones with any young person. I might see them in an annual review, and obviously, have a little chat with them. But I don't build relationships, because they don't, they're never going to see me potentially, again, not for the next transition point. It's not good.

- Lack of training about ceasing
 - LA work seen as only work for teaching teachers
 - LA training networks
 - LA offers specialist and supporting schools with different needs
 - Informal learning about the role
 - Going to colleagues for information about ceasing
 - Limited amount of training
 - Lack of training
 - SENCO role with EHCPs
 - LA reliant on settings to inform them of changes and leaves
 - LA funding leading to less staff to manage EHCPs
 - High workload
 - EHCPs paperwork driven
 - Ceasing is a low priority with the focus on meeting new plan deadlines
 - Lack of capacity
 - Process and procedural challenges
 - Pressure to cease from school funding perspective
 - Perception that LA want to save money by ceasing
 - LA message to cease gains when outcomes or qualification achieved
 - Pressure to cease
 - Hard to get, easy to cease
 - EHCPs as 'safety net'
 - Want for independence
 - Outcomes achieved
 - Needs able to be met at SEN support level
 - EHCP level of support not needed
 - Ceasing seen as celebration
 - Ceasing providing part of final evidence of support
 - ...ceasing as celebration
 - Perceptions around EHCPs ceasing
-
- Capacity a theme with new requests
 - Lack of capacity to monitor plans
 - EHCPs as 'golden ticket'
- Coding: Priority

Appendix H: Initial Interview Analysis Codebook

Table 24:

Initial codes developed with Thematic Analysis

Academisation leading to lack of scrutiny	CYP not aware of processes and not wanting for it to continue in FE
Accountability of EHCP	CYP not engaging with additional support
Alternative routes for funding FE and above without an EHCP	CYP not engaging with additional support or processes (Codes)
Ambiguity around ceasing	CYP not needing additional support
Attending annual reviews aids work	CYP voice over parental voice
awareness of rights	Decisions or recommendations changed by LA
Can't restart ceased plan	Detrimental impact of EHCP support on CYP
Capacity is taken with new requests	Different LAs have different processes
Ceasing as a rarity	Different reasons plan could become inactive
ceasing before higher education	Discrepancies between LAs and their involvement
Ceasing decision made by panel	Discrepancy between CYP wishes and parents
Ceasing discussion at annual review	Discrepancy between LA funding and support
Ceasing is a low priority with the focus on meeting new plan deadlines	Early intervention important to process
Ceasing only happening at annual review	Easy to cease, hard to get
Ceasing process an admin task with minimal work	Economies of Scale supporting multiple CYP with one EHCP
Ceasing providing part of that evidence of support	Education not health or care plans
Ceasing seen as celebration	EHCP able to be maintained even when not in education
Ceasing those who won't engage with learning	EHCP as a hinderance to some careers
colleges not reliant on EHCP for support or funding	EHCP as safety net for parents/carers (and professionals)
Comical amount of training	EHCP for free education
Communication with parents/carers is key	EHCP level of support not needed
Completing review without CYP or Parent in attendance to meet timelines	EHCP only way to access some support
Confidence to bring up ceasing	EHCP providing support outside of education
Consistent numbers of EHCP learners	EHCPs evolving over time
CYP capacity to make decisions without parents	EHCPs not kept updated
CYP capacity to take part in decisions around ceasing	EHCPs paperwork driven
CYP expressing not wanting additional support (or to be seen as different)	EHCPs predominantly ceased because they leave education

EP involved at start of EHCP process not end	LA don't have capacity to attend meetings
FE being an after thought with advice and legislation	LA Funding leading to less staff to manage EHCPs
FE establishments being left out	LA involved when theres disagreement over ceasing
Financial advantages for families with an EHCP	LA involvement leads to better outcomes
Going to colleagues for information about ceasing	LA message to cease plans when outcomes or qualification achieved
golden ticket	LA need to work with parents/carers more
Graduated approach to ceasing	LA not attending annual review or important meetings
High workload	LA not aware of ceasing discussion
Importance of annual reviews	LA officers being link between schools and other agencies
Importance of consistent EP	LA officers specialising and supporting schools with different needs
Importance of EHCP through transitions	LA reliant on settings to inform them of changes and leavers
Importance of informed decisions for families	LA role in making recommendations
Importance of involving CYP through person centred reviews	LA supporting parental decision
Importance of joined up thinking	LA training networks
Importance of LA officer meeting the CYP	LA work seen as easy work for failing teachers
Importance of multiagency working around ceasing	Lack of capacity to monitor plans
Importance of outcomes written to the provision	Lack of communication around ceasing arrangements affecting funding
Importance of relationships with school	Lack of communication with LA
Importance of setting voice in establishing best practice across the board	Lack of communication with next placement
Importance of transfer annual reviews	Lack of training about ceasing
including examples of when a plan can be ceased	LAs limited by lack of funding
Inclusion and best practice limited by funding	Learning on the job
Inequity with access	Managing parental expectations
Informal conversations around ceasing	Moral dilemma around ceasing and removing support for whole family
Informal conversations with EP	Need for EHCP support earlier in primary schools to reduce the need when in secondary
Informal learning about the role	Need for safeguards around decisions
Informed via automatic letter	Need to hold onto plan as getting one is so difficult
Keep EP involved in discussions	Need to provide evidence or reasoning of continuation in college
Keep EP involved in important discussions	needs able to be met at SEN support level
Keep track of progress post ceasing	No pressure to attend annual reviews
Knowing beforehand so could prepare	Non-SMART outcomes

Not ceasing without parental consent	Professionals involvement in college leads to better outcomes
Notify LA that plan can be ceased	Providing clear guidance for settings around plans including ceasing
One size fits all	Providing parents/carers with pack when receiving plan to outline what to expect
Outcomes achieved	Pupil voice as fleeting moment
outcomes for the sake of outcomes	Pupil voice is helpful to the annual reviews
Outcomes not always relevant for FE	Pupil voice is important to make decisions
Parental and CYP decision to cease	Putting a face to a name
Parental view that they don't need plan	Rare to cease
Parents/carers disagreeing with decision to cease	Role of case officer not to make suggestions
Parents/carers in agreement with decision	School to alert LA if they want to cease
Parents/carers living vicariously through the needs of their children	Schools not informed about ceasing
Parents/carers relying on schools for support	SENCO role with EHCPs
Parents/carers trust of the school	Starting ceasing process without discussions
Perception that can stay in college perpetually	Still supported post ceasing
Perception that EHCPs are until 25	taboo topic
Perception that LA want to save money by ceasing	The value of additional services is hard to give up
Perception that schools avoid taking on children with EHCPs	training at legislation inception
Planning for support post-ceasing	Training in processes
Planning for transition away from plan with other professionals	Training through networking
Plugging the gap created by external agencies dropping	Transition away from plan
Preparing for Adulthood transition events	Transition package
Pressure to cease from school funding perspective	transition reviews seen as time to cease
Pressure to help CYP gain EHCP regardless of need	Transition to adult social care
Pressure to involve parents/carers regardless of CYP wishes	Trial period without EHCP
Pressure to maintain and introduce EHCPs to keep staff numbers	unclear guidance around ceasing
Previous experience as training	Up to individuals if they want to attend annual reviews
Previous experience important to role	Use of mentoring or supervision to support SENCO role and understanding
Previously more support available for transitions to adulthood	Want for independence
Primary schools not applying for EHCPs through lack of funding or need and the pressure on secondaries	Weight of EP voice for parents
Prior experience playing a large role in understanding of SEN	Wide variety of need with EHCPs

Appendix I: Example of Codebook Grouping

Code name	Number of Codes
...ceasing as celebration	
Ceasing providing part of that evidence of support	1
Ceasing seen as celebration	7
EHCP level of support not needed	5
needs able to be met at SEN support level	5
Outcomes achieved	4
Want for independence	1
Ceasing as a rarity	
Rare to cease	3
ECHPs as 'safety net'	
Accountability of EHCP	1
CYP not needing additional support	6
EHCP as safety net for parents/carers (and professionals)	12
Parents/carers living vicariously through the needs of their children	1
Perception that can stay in college perpetually	1
Perception that EHCPs are until 25	7
The value of additional services is hard to give up	1
ECHPs as 'golden ticket'	
Alternative routes for funding FE and above without an EHCP	4

colleges not reliant on EHCP for support or funding	5
Economies of Scale supporting multiple CYP with one EHCP	2
EHCP as a hinderance to some careers	1
EHCP for free education	4
EHCP only way to access some support	4
EHCP providing support outside of education	1
Financial advantages for families with an EHCP	1
golden ticket	5
Inclusion and best practice limited by funding	2
Inequity with access	2
LAs limited by lack of funding	1
Moral dilemna around ceasing and removing support for whole family	2

Appendix J: Example Interview Notes

SENDCo
 → 56, 1000.
 → 1 secondary

2 measure based

net outcomes
 → unsupported?
 → change outcomes.
 → annual reviews
 → testing
 → performance
 → write to express

lots of anxiety
 - when net outcomes.
 - in one test
 - generalise literacy skills

look more broadly
 'has net criteria.
 'SEN support.
 'access exam paper

- net outcomes
 - struggling after
 - teacher → move back to mainstream
 ↳ graduated approach.
 → support reduced.
 → meet net.

LA trust us.
 - however.
 - supportive.

→ hardware, weekly mentors/m.
 → QFT
 → 2009 or - yr 10 more needy.
 → hospoke lol over learning.
 → streetwise - correct more about being different

transition inference

session at LA.
 process.
 applying/reviewing
 direct time.
 - informal - all.
 - evidence outcomes.
 - own observation.
 - speech & language.

→ consideration of wider generalisation.
 → feedback/obs
 → wider assessment.
 → checking how - split resource base.

intuitive, own at psych.
 - support for SEN pupils
 - regulation
 - relationship
 - direct/honest.
 - etc - goes in because genuine.
 - integrity/trust.

→ parents fine. - specific need.
 - celeb
 - celebration
 - more support than before
 - wraps arms round.

what else will they have?
 fight.
 - Trust the SENDCo
 - know the child.
 - hard to articulate on paper
 - LA come in observe/meet child.
 → understand - parent activity.
 → relationship
 - wellbeing, monitoring
 - trust

- annual review - exams shared.
 celebration

updates.
 Clear message

- very supportive
 - retain unit/space.
 - take on board
 - Educational Psy.

0-25
 give at end of computer.
 - apply for unitally