

# **SEND reform: putting children and young people first**

## **SEND in The Specialists coalition response**

### **May 2026**

#### **About the SEND in The Specialists coalition**

The SEND in The Specialists coalition was formed in November 2022 to campaign for increased investment in and improved workforce planning for the specialist workforce for children and young people with SEND.

The coalition, made up of over 130 organisations, takes a broad and inclusive approach to defining the specialist workforce and to the settings in which they work. It covers early years, schools, and post-16 settings, and professionals working in education, health and social care, justice, and other relevant fields.

This consultation response is based on the experience and expertise of the coalition members. It highlights areas of concern where clarification is required, particularly in relation to the 'Experts At Hand' (EAH) offer and proposed solutions and recommendations.

Our overall conclusion is that SEND reform will only succeed if it is backed by clear guidance, equitable access, strong accountability, and long-term investment (including improved workforce planning) in the whole specialist workforce supporting children and young people with SEND, while ensuring that the proposed EAH offer strengthens rather than weakens existing local specialist provision, and all children and young people with SEND can access the support they require.

#### **Concerns and clarifications**

The main themes on which the coalition has concerns and seeks clarification include:

1. Experts at Hand
  - a. how the EAH will work in practice
  - b. early years and PVI settings
  - c. workforce capacity and sustainability
2. access to specialist expertise
3. recognition of different specialist roles
4. accountability, funding, and implementation
5. identified risks within the reform

## ***Experts at Hand***

### **Lack of clarity about how EAH will work in practice**

Clarification by the Government is required on:

- whether the EAH offer sits within universal, targeted, or targeted-plus support;
- which children and young people, and which early years settings, schools, and post-16 settings, will be able to access it;
- whether the EAH includes individual assessment and direct intervention, or mainly advice/cohort support.
- how children and young people who fall below the specialist support threshold will receive individual support from the specialist workforce if they need it; and

### **Early years and PVI settings**

There is a strong concern that private, voluntary and independent (PVI) early years settings could be excluded or disadvantaged.

Clarification by the Government is required on:

- how they will ensure that early years' providers have the same access as schools to the EAH service; and
- whether access to EAH will be dependent on children having an Individual Support Plan; if so, this will will exclude children in some early years settings from accessing the service.

### **Workforce capacity and sustainability**

There is a concern about the sustainability of the EAH model given existing shortages in specialist services.

Clarification by the Government is required on how:

- the specialist workforce will be trained, recruited, fund, retain, and developed; and
- EAH work will be balanced with other duties, such as statutory provision pathways.

### ***Access to specialist expertise***

There is a concern that inclusive mainstream practice may not succeed unless specialist expertise is available early and universally, not just once needs escalate.

Clarification by the Government is required on:

- what support children and young people with low-incidence, high-need conditions, including rare conditions, and those who use Augmentative and Alternative Communication (AAC), will receive – for example, how will those with various communication disabilities, difficulties, or differences, such as stammering or childhood apraxia of speech (CAS), receive access to the evidence-based speech and language therapy they require.

### ***Recognition of the totality of specialist roles***

The coalition welcomes the MOdelling Therapies for Improved Futures study which focuses on some of the health therapies' workforce.

We are, however, concerned there is not a similar study being undertaken on all the specialist workforce, including the non-therapies' workforce, that supports children and young people with SEND.

Clarification by the Government is required on how it plans to improve workforce planning for, investment in, and access to, the totality of the specialist workforce working with children and young people with SEND – for example, specialist teachers, local authority advisory services, those with expertise in learning disability, communication, and inclusive practice, and sensory support services, including Qualified Teachers of the Deaf, Qualified Teachers of Visual Impairment, and Qualified Teachers of Multi-sensory Impairment.

We would want to see evidence that the funding and planning for workforce improvement via EAH goes beyond allied health professional roles and includes those currently funded and provided via local authorities such as specialist sensory support services.

The Government must ensure that there are sufficient advanced training and development opportunities for specialist teachers, with specialisms in all types of special educational needs.

### ***Accountability, funding, and implementation***

Coalition members have expressed concerns about accountability, funding, and implementation.

Clarification by the Government is required on:

- funding mechanisms;
- accountability arrangements;
- who acts when expert advice identifies unmet need;
- how advice will translate into funded provision, commissioned services, or enforceable support; and
- how the EAH model will be evaluated.

### ***Risks within the reform***

Coalition members have identified potential risks in the proposed reforms.

Clarification by the Government is required on how these potential risks will be mitigated:

- potential weakening of existing local authority specialist support services;
- diluting of specialist roles or expecting non-specialists to deliver specialist interventions; and

- concern that schools may shift away from existing specialist provisions to access new funding.

### **Solutions and recommendations**

The coalition highlights the following solutions and recommendations for improving SEND support. They have a strong focus on the EAH model, workforce planning and recruitment and retention, and equitable access to specialist services for all children and young people with SEND whatever their age and whatever setting they are in.

#### ***Complement, not replace, local specialist services***

The EAH service must enhance and integrate with existing access to specialist professionals rather than be a substitute for them.

#### ***National guidance and monitoring***

There needs to be clear national guidance on the purpose, thresholds, and delivery expectations of EAH, and how it fits within universal, targeted, targeted-plus and specialist layers of support, is required.

The delivery of the EAH service must also be monitored and evaluated to demonstrate equitable access across early years, schools, and post-16 settings.

#### ***Centrality of specialist workforce***

Improved workforce planning for, and investment in, the specialist workforce is central to the proposed reforms and that there should be a SEND workforce strategy, jointly developed by the Department for Education and the Department of Health and Social Care, with input from other relevant Government Departments, the SEND in The Specialists coalition, other partners, and children and young people with SEND and their families.

This workforce strategy must set out plans for how the recruitment, retention, and continuing professional development of the specialist workforce is going to be improved and how the geographic and condition postcode lottery of access to support is going to be addressed.

#### ***Equity of access***

Access to the specialist workforce must be equitable across all settings. For example, PVI early years settings must have the same access to specialist advice and specialist professionals as schools, and support models such as ISPs must apply across all settings.

### ***Accountability and funding***

Greater clarity is needed on accountability and funding and there needs to be guidance on what happens if expert advice identifies unmet need, in relation to there being clear responsibility for action, routes into commissioning, funding, and provision, and mechanisms for challenge where advice is not acted on.

### ***Sustained support***

There is a need for long-term models, where specialists work alongside schools over time; the Government needs to set out how the EAH model will be evaluated and sustained in the longer-term and beyond the planned three-year funding for the model.

### ***Professional boundaries and safety***

Settings should not be expected to deliver specialist or clinical interventions without appropriate expertise.

### ***Other recommendations***

Other recommendations suggested by coalition members include:

- a glossary of terms and definitions;
- clarification the parity of support staff roles alongside specialist teachers;
- the holding of regional information on expert specialists so local authorities can share expertise and capacity;
- the use of phased implementation, linked to workforce capacity, training, and evaluation;
- stronger links with rare condition centres and local hospitals for those with particular conditions;
- national pathways for some rarer conditions;
- earlier access to AAC; and
- more tertiary specialist centres.

### **SUBMISSION DETAILS**

This submission is made by [peter.just@rcslt.org](mailto:peter.just@rcslt.org) for and on behalf of the SEND in The Specialists coalition.