

# SEND Reform Consultation

## Barnsley SENDIASS – Concise Data Report

“Families’ shared view on the Schools White Paper & SEND Reforms” (Feb–May 2026)

### 1) Executive summary (headlines)

- **High appetite to engage when the method feels safe and accessible:** families did **not** meaningfully engage with a formal survey approach, but engagement rose strongly via **short social media polls** and direct conversations.
  - **Trust is the dominant theme:** the biggest barrier to participation and system confidence is **trust** (in processes, policy, schools, and decision-making).
  - **Consultation scepticism is high:** the majority view in Poll 1 was “**It will not change anything**” and many felt “**it has already been decided.**”
  - **Education preference trends away from mainstream:** families most frequently selected **specialist provision** (or specialist provision within mainstream) over mainstream.
  - **Social isolation is significant:** nearly half of respondents reported their child/young person has **little or no social life**.
  - **Local service demand snapshot (during consultation window):** SENDIASS supported a collective caseload of **350 families** with **631 casework interventions**.
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### 2) Approach & coverage (what you did)

#### Engagement routes used

- Initial: SEND reforms **PowerPoint explainer**, survey guidance/tutorial, face-to-face and virtual drop-ins.
- Adapted approach: “**5 Questions over 5 Days**” as daily social media polls (time-limited consultation window + low survey engagement).

#### Key limitation (important to state)

- Poll responses reflect **social media users** and self-selecting participants; families reported **fear** of contributing to change that could harm SEND children/YP (which also suppressed survey engagement).
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### 3) Digital engagement (reach + interaction)

#### Reform explainer / consultation support posts (Facebook)

- **25 Feb 2026: SEND reforms explainer video (~16 minutes)**
  - 6.0K views, 3.7K viewers, 41 positive reactions, 49 comments, 10 shares
- **10 Apr 2026: local simplified survey link post**
  - 666 views, 365 viewers, 2 interactions, 1 share
- **19 Apr 2026: advertise face-to-face & virtual support sessions**
  - 1.6K views, 1.2K viewers, 18 interactions, 1 share
- **6 May 2026: launch “5 questions over 5 days” + prize draw**
  - 1.3K views, 963 viewers, 16 interactions

**Interpretation (concise):** “Explainer” content produced the strongest engagement (views/comments/shares), while the **traditional survey route underperformed**—supporting the view that *format and trust* heavily shape participation.

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## 4) Service activity snapshot during consultation window (contextual data)

23 Feb – 18 May 2026

- **Collective caseload: 350 families**
- **Casework interventions: 631**

### Demand patterns (ranked observations)

- **Highest demand age range:** Key Stage 1–4, then **Post-16**, then **Early Years** (lowest).
  - **Most common reasons for support:**
    1. **School placement**
    2. **SEN Support**
    3. **Requests for EHCNA and Annual Reviews** (noted as high-ranking needs)
  - **Referral routes:** returning parents/carers highest; then web search/word of mouth; then social media.
  - **Primary SEND need group:** **ASD** highest; then **SEND needs without assessed diagnosis**; then **SEMH** (with likely overlap noted).
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## 5) “5 Questions over 5 Days” – Poll findings (what families said)

**Total engagement note:** Across the 5 polls, the report states **179 people** took part overall (some dipped in/out across days).

*(Each day’s poll represents the responses of that day’s participants; totals differ by day.)*

## Poll 1 – Feelings about the SEND consultation (views: 1.3K; viewers: 719)

Top responses:

- **62% (48 votes):** “It will not change anything”
  - **23% (17 votes):** “It has already been decided”
  - Smaller proportions selected lack of understanding, fear of negative impact, etc.  
**Meaning:** Skew towards **low confidence in influence** and **pre-determined outcomes**.
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## Poll 2 – Best type of education (views: 1.1K; viewers: 529)

Top responses:

- **49% (45):** Specialist
- **25% (27):** Specialist provision within mainstream
- **11% (13):** EOTIS
- **8% (10):** Mainstream
- **7% (7):** EHE

**Meaning:** Strong preference for **specialist pathways** (or embedded specialist support), contrasting with reform emphasis on mainstream inclusivity as primary route.

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## Poll 3 – Helpful health service (views: 1.4K; viewers: 695)

Top responses:

- **25% (27):** Paediatrician
- **18% (21):** SALT
- **15% (17):** CAMHS
- **14% (16):** Other

**Comment insight:** Some parents noted therapies (e.g., SALT/OT) are more available in certain specialist independent settings; overall positivity about paediatricians; some negative lived experience about access barriers.

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## Poll 4 – What social experiences work (views: 1.6K; viewers: 738)

Top responses:

- **48% (60):** “My child/young person has little or no social life”
- **19% (25):** Friends and families
- All other options were low single figures/low teens.

**Comment insight:** social isolation linked to lack of suitable provision, unmet needs in holiday/community groups, and limited visibility of alternatives on the Local Offer.

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## Poll 5 – What “trust” looks like (views: 1.6K; viewers: 753)

Top responses:

- **25% (32):** All decisions are child-centred
- **23% (28):** Sticking to agreed timeframes
- **18% (24):** Information is transparent
- **15% (20):** Co-production = equal in design/delivery

**Comment insight:** Trust was described as feeling safe, not needing to “fight,” being told the truth, the law being followed, and professionals respecting parents as experts.

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## 6) Key implications (short, action-focused)

1. **Engagement design matters:** short, accessible formats drove participation where formal surveys did not.
2. **Rebuild trust through measurable behaviours:** families defined trust as **child-centred decisions, timeframe reliability, transparency, and genuine co-production**—these can be translated into service standards and reporting.
3. **Mainstream-first policy needs credibility locally:** family preferences indicate a gap between reform intent and lived experience of inclusion.
4. **Social isolation is a major quality-of-life issue:** significant proportion report little/no social life; community provision and Local Offer visibility appear key levers.
5. **Health integration is essential:** paediatrics, SALT and CAMHS were most frequently noted as helpful; access variability remains a concern.

## 7) Final Key Messages for Audience

### For DfE

- Consultation methods must be **accessible and trusted**, not just available
- Reforms must address **confidence gaps in mainstream inclusion**
- Trust should be embedded in **measurable system behaviours**

## **SENDIASS Strategic partnership work:**

### **For Colleagues within SEND**

- Focus on **local trust-building actions** (timeliness, co-production, transparency)
- Strengthen **local social and community SEND provision**
- Address gaps in **health integration and access**

### **For Parent/Carers**

- Your views clearly show:
  - A strong desire to be heard
  - A need for systems that **work consistently and fairly**
- This feedback is being used to influence **local and national discussions**

**Sarah Wike**

**SENDIASS Manager 18/5/26**