



Northern Ireland  
Assembly

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COMMITTEE FOR  
HEALTH, SOCIAL SERVICES AND  
PUBLIC SAFETY

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**OFFICIAL REPORT**  
(Hansard)

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**Autism Bill: Committee Stage:**  
**Department of Education**

20 January 2011

**NORTHERN IRELAND ASSEMBLY**

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HEALTH, SOCIAL SERVICES  
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**Members present for all or part of the proceedings:**

Mr Jim Wells (Chairperson)  
Mrs Michelle O'Neill (Deputy Chairperson)  
Mr Mickey Brady  
Mr Pól Callaghan  
Dr Kieran Deeny  
Mr Alex Easton  
Mr Sam Gardiner  
Mr Paul Girvan  
Mr John McCallister  
Ms Sue Ramsey

**Witnesses:**

Mrs Dorothy Angus     )  
Ms Gillian Boyd        )     Department of Education  
Ms Debbie Gladwell    )

**The Chairperson (Mr Wells):**

We will hear from the representatives from the Department of Education (DE). Dorothy Angus is the director of access, inclusion and well-being; Debbie Gladwell is the head of the special educational policy advisory team; and Gillian Boyd is a DE official. Ladies, you are very

welcome. The Department of Education has tabled a paper. Ladies, we would normally ask you to give a 10-minute opening address, which would be followed by between 45 minutes and an hour for questions. However, I suspect that the session will not be as long as that.

**Mrs Dorothy Angus (Department of Education):**

Good morning, Chairman and members of the Committee, and thank you for the invitation. My short presentation will be on the educational framework in which an autism Act would operate. A briefing paper has been sent, and I hope that you have it. I have a short summary, if members would find it helpful, with some of the key points; it is to those that I will speak.

The education sector has a legislative framework for special educational needs under the Education (Northern Ireland) Order 1996 and the Special Educational Needs and Disability (Northern Ireland) Order 2005 (SENDO). More details of the provisions in the legislation are set out on pages 7 to 10 of your briefing paper, so I will not go into them other than to say that they are extensive and cover definitions, duties, education in special and mainstream schools, statements, appeals mechanisms, advice to parents etc.

The 1996 Order marks the start of a more contemporary approach, where special educational needs are mainstreamed and recognised as an integral part of education provision. It also marks the beginning of the inclusion agenda, as SENDO gave parents stronger rights to have their children educated in mainstream schools. Of course, there is more to the concept of inclusion than that: it means that all children should feel full and valued members of the school population.

The legislation is supported by clear, published, practical guidelines in the ‘Code of Practice on the Identification and Assessment of Special Educational Needs’. That code is provided for in the legislation; it gives detailed guidance and is a key document for all those who deliver support to children with special needs in the education sector. There is a duty on education and library boards and on schools to have regard to the code, and in practice they all work to it.

Importantly, there is a statutory duty on education and library boards and on the boards of governors of schools to secure provision for a pupil’s learning difficulty. Another important principle of our framework is that support is provided according to the individual needs of the child arising from a learning difficulty and not according to a specific condition or disability. That applies to children and young people with autism, support for whom is not dependent on

their autism.

The definition of special needs in the legislation is broad. Section 3(1) of the 1996 Order states that:

“a child has ‘special educational needs’ if he has a learning difficulty which calls for special educational provision to be made for him.”

“Learning difficulty” is defined as when a child has a significantly greater difficulty in learning than the majority of children of his or her age. In the accompanying guidance to schools on recording children with special needs, autistic spectrum disorder (ASD) is regarded as a special needs condition that relates to communication and interaction. In the briefing paper, we have given you case studies that outline the kind of support that is provided to children with autism. The intervention is matched to the individual needs of the child.

SENDO introduced for the first time disability discrimination laws for the whole of the education sector. Between 2002 and 2009, the prevalence of autism in schools, as recorded in the schools’ census, increased by 243% from 1,158 pupils to almost 4,000. In 2002, the task group on autism highlighted an autistic spectrum wave rising through the school system. Therefore, the increase was not unexpected. It could represent something of a success in the education sector because the findings cover the period 2002 to 2009, which is after the task group report. It may reflect, to some extent, a greater response in education to the needs of autistic children, as more of them are recognised and recorded in the schools’ census.

Much of the increase has been in mainstream schools, which may reflect the greater propensity of children with special educational needs to attend mainstream schools. However, some of it may be in the higher-functioning end of the autism spectrum. During the same period, the prevalence of special educational needs generally increased by 36.3% in the school population; it now stands at just over 63,000. That means that 20% of pupils have a special need.

Autism has been a priority for the Department since the report of the task group on autism in 2002. That report recommended areas for improvement and set an agenda for 10 years. Since the report was published, £9.3 million in addition to the normal spend on special educational needs has been expended to put in place measures to address ASD.

On page 13 of the briefing, you will find the measures that were put in place. I will highlight

only one of those: the establishment of an inter-board autistic spectrum disorder advisory service. That service brought greater focus and cohesion to the support for children with autism, with multi-agency and multidisciplinary assessment services, common frameworks for assessment and training for parents and staff. The Education and Training Inspectorate reported very favourably on the service in 2009 and suggested some improvements around a regional service and a preschool support programme in tandem with the Health Service.

The inspectorate also recommended that a strategic policy be developed to map progress against recommendations in the 2002 task group report. That mapping exercise was undertaken in 2010, and work on developing a strategic framework and implementation plan is ongoing. The areas for improvement that have been identified include collaboration between the Department of Education and the Department of Health, Social Services and Public Safety (DHSSPS) to ensure continuity in policy and strategic approaches; further collaboration between the education and library boards and the health trusts to promote uniformity and cohesion in health and education provision; addressing the increasing demand on resources to ensure more equitable and effective provision; and shaping policy development through local and internationally based research.

Finally, in parallel and led by my colleague Gillian Boyd, we are undertaking a capacity building programme for the school workforce, particularly in mainstream schools, to equip it better to support children with special needs, including autism. As well as direct training, that includes a resource pack for schools, which will be available electronically as well as in hard copy. People from the health sector have worked with us very closely in the development of that programme.

**The Chairperson:**

Thank you for your presentation, and thank you for being spot on time. It may be stating the obvious, but we are here not so much to hear about the excellent work that is being carried out by the Department of Education in this field as to get the Department's comments on the private Member's Bill that is sponsored by Dominic Bradley.

In the Minister's letter and your presentation, I notice that, although you emphasised the ongoing work that you are doing, you have not actually stated your opinion, as a Department, on the Bill, on either the amendment to the Disability Discrimination Act (DDA) or the proposal for an interdepartmental strategy, which would encompass many Departments and would include

your Department as a major player. In her letter, the Minister said that she supported in principle at Executive level the concept of the Bill and that she has sought views in the Department. Is that right?

**Ms Debbie Gladwell (Department of Education):**

We have started a pre-consultation exercise on our autism strategy. We intend to go out to consultation as soon as we possibly can once that pre-consultation has finished. I have written to the Education Committee to say that we will be doing that.

**The Chairperson:**

Does that mean that you are not in a position to say what your views on the Bill are?

**Mrs Angus:**

In her letter, the Minister says that she supports the principle of the Bill and that there is a need to consider the impact of the Bill on the current legislative framework. We cannot divorce the Bill from the current legislative framework, which is why I have set it out for you this morning. The particular issues that the Minister feels need to be looked at are the Bill's potential to create a hierarchy of special educational needs, to create an imbalance in the budget for all special educational needs and to impose unnecessary bureaucracy. You mentioned the consultation point. Those are the issues that the Minister would like us to follow through on to a greater extent.

**The Chairperson:**

If the Bill, as it is presently drafted, became law, what would the implications be? How would the redefinition of the DDA and the overall planning strategy impact on the Department of Education?

**Mrs Angus:**

As I have outlined, under the current legislative framework, the support is provided in relation to the specific learning difficulty that the child has, not on their having autism as such. The priority for us is not the condition; it is whatever difficulties the child has. In that sense, our legislative framework would be able to continue in that way because it is not impacted by the precise definition.

**The Chairperson:**

Are you basically saying that, as things stand, the Department could continue to develop that work and so the Bill would not make any substantive difference to what you are doing already?

**Mrs Angus:**

No. It would not impact in definitions because it does not depend on a DDA definition or the condition.

**Ms Gladwell:**

Dorothy has already described the special educational needs (SEN) framework. It is robust, and I go back to it for a reason. The 1996 Order brought in inclusion. Then, in 2005, SENDO brought in two main aspects that the Committee will want to consider. The first part was the SEN aspect of provision and strengthening parents' right to inclusion. The Committee, in the evidence that it is considering today, must look at the Autism Bill within the context of that framework.

The second part is in relation to SENDO and the disability discrimination aspects. It strengthened the rights of children to be educated in ordinary schools, and it brings about responsibilities as it links the legislation to the Disability Discrimination Act and the definition that is described in it. Therefore, our SEN framework links to the current disability discrimination legislation. It places a lot of emphasis on education and library boards and on schools to ensure that they do not discriminate against pupils with a disability. One of the main thrusts of SENDO is that it links to the current Disability Discrimination Act and brings that legislation right in to the school. It places very strong duties on education and library boards and on schools to ensure that they make adjustments so that pupils who have a disability are not put at a substantial disadvantage compared with pupils who do not have a disability.

It also places a very strong duty on them to ensure that the pupils have an equal right and that there is nothing that prohibits children with a disability from accessing education and even the premises and the curriculum. Therefore, it makes it illegal for schools and education and library boards to discriminate against disabled children, for example, in their admission arrangements, in the education and in any associated services that are provided by the schools for its pupils. That even relates to pupil exclusion from school.

If that is abused in any way — legislation, no matter who it applies to, does not always go

right and can be abused — there is a right of appeal. The SENDO legislation — this is why I keep going back to the framework that we have — expanded the old SEN tribunal to become a Special Educational Needs and Disability Tribunal (SENDIST) so that it was able to hear disability discrimination cases. It is important to understand where our legislation sits as regards disability discrimination and, if there are changes, how that may change that type of legislation.

**The Chairperson:**

We are playing devil's advocate. We are being told that the Bill will lead to a radical change in how we treat autistic children in terms of medical provision, social services, education and so on. You are basically saying that, because you take the view that it is not the label but the needs of the child, you are addressing that already. You do not see any radical change.

If there was a cross-cutting Executive strategy that encompassed all Departments and took in the needs of those with autism from cradle to grave, would that lead to a radical change in how we treat and deal with those who have autism?

**Ms Gladwell:**

For the past year, in developing its strategy, the Department of Education has been working closely at every level with its counterparts in the Health Department, from the Department itself to the Regional Autistic Spectrum Disorder Network (RASDN) and the Health and Social Care Board. The opposite is also true: education and library boards and the Department have been interlinking throughout all that work. That work has developed the strength of strategies. For example, in the mapping exercise that the Department has been undertaking over the past year, we have had representation and input right through to the development of areas for improvement, including identifying and building on the strengths that exist.

Strengths exist already in interdepartmental, inter-agency working. We have identified areas for improvement on the basis of advice from the Education and Training Inspectorate as well as that of colleagues from the Health Department. We will ensure that whatever strategy comes out of the Department of Education links into the health strategy.

The Health Department's strategy has identified five areas for improvement and has looked at the four key areas under its care pathway. That involves looking at early assessment, which the Department of Education wants to do for the preschool package, so linkages exist there. It then



covers diagnosis as well as the interventions that will be put in place. Again, that is relevant to educational interventions. The strategy will cover the transition arrangements and will strengthen the linkages between education and library boards' ASD and transition services and those of the health trusts. Therefore, a cross-cutting, cradle-to-grave strategy that involves the education of children is already being worked on.

**The Chairperson:**

Would it be more effective if the Bill compelled Departments to work together in a single strategy rather than each Department going its own way and co-operating only if it deemed it appropriate?

**Mrs Angus:**

It is difficult from this perspective to know whether that would be the case because so much work is going on to which we are all committed. We look at special educational needs across the board, so creating an environment in which there is a strategy for one particular special educational need that is set out differently from that for all the other special educational needs might create difficulties and a hierarchy. We are developing our strategy with our colleagues in the Health Department in the broader framework of special educational needs.

**Mr McCallister:**

I was going to ask Dorothy about that hierarchy. If the Bill becomes law, is there a danger that the condition becomes more important than the need? Am I overemphasising the risk? In fairness to the sponsor of the Bill, I do not think that that would be an intended consequence. However, is that your understanding of what would happen if the Bill were enacted? Like the Chairperson, I am not getting a clear steer on whether the Bill will be an advantage to your Department or whether you are saying that, like the Health Department, you have all the tools that you need.

**Mrs Angus:**

We feel that a strong legislative framework already exists that does not depend on a condition. Children with conditions are listed under various headings; that is how they are recorded in the schools' census. However, the important thing is that that is not how the support is provided. It is difficult to say whether highlighting the condition, as opposed to the need, could ultimately cause a problem. If we maintain our legislative framework, we will continue to give support in the education sector according to the need. That is probably the only way that it could work. We

have to concentrate on the learning difficulty that may be related to the condition, because that is what exhibits in school.

**Mr McCallister:**

If the Bill is passed, will you have two competing pieces of legislation? If so, which one will take priority? That will be the problem. We are all open to your guidance on that; this evidence session is about hearing which one you think will take priority or how you will square that circle.

**Mrs Angus:**

We certainly feel that it is an area on which we need a clearer understanding, and we are taking advice on how much it might impact on our ability to consider the need or to provide equity of support across the range of special educational needs. We would not want to move away from a focus on all of the needs that we consider to have equality in our system. We need to do a little bit more work on that to be sure that we understand what such a situation might mean.

**Mr McCallister:**

It would be useful for the Committee to have an answer to that issue. We could really do with having that, bearing in mind that the Bill is progressing at a fairly rapid pace and could be back before the Assembly for its Consideration Stage in February. We do not have a lot of time to act.

I am encouraged by your Department's response and its collaboration with the Health Department in early diagnosis, treatment or support. What happens if the Bill compels you to do a strategy and the Departments cannot agree on that strategy? The obvious example of that is the Middletown Centre for Autism. Your Department is committed to that project, and the Minister mentions it in her opening letter. Obviously, the Health Department has a different view on that. Where would the Bill leave you on such issues where the two Departments, or, as the Chairperson said, as many as seven or eight Departments, are trying to form a strategy and get a combined way forward?

**Mrs Angus:**

That might depend on how any strategy is funded. If each Department continued to fund and to have a degree of control over its own strategy, there would presumably be more scope for Departments to have their own priorities in the strategy for how they address autism. If there was one pot of funding, that is where the tensions would start to arise, because, as you say, there are

things that we are doing specifically and there are other things on which we are working very closely with other Departments to deliver on the ground. For instance, the collaboration between people in the health and education sectors is quite close, and I suspect that there would be quite a lot of agreement on how that would be dealt with. However, there are areas for which we would have to give very clear consideration to our particular priorities.

**Mrs O’Neill:**

I will pick up on the last point that John made. If Departments cannot agree, surely that is the point of our legislating for a strategy in the first place. Departments might work together on many levels, but there are many instances where they do not. We are all very realistic around this table, and I am quite sure that everybody knows that, unless it has a lead responsibility, quite often a Department will sit back and let someone else take responsibility. We want to legislate for a strategy to address that very point, which is why we need to push forward with it.

The Department of Education has already started the work on the autism strategy. If this legislation is passed, there is no reason why that work cannot fit in and carry on. In some senses, the Department of Education is ahead of the legislation, because the work is already happening. That is a point that I wanted to make.

Dorothy, you said that a strong legislative framework is already in place. Your point was that amending the Disability Discrimination Act would have no impact on the service that is provided to children in schools. So, there is no harm. It would not have any direct or negative impact on services that are already provided.

**Mrs Angus:**

It appears that that would not impact on the way that we provide services to children, because, as I have said, we provide according to need. The impact that we are looking at, which we have already covered, is the hierarchical one. We need to understand that more clearly. However, considering that the legislation is framed in terms of a strategy, I do not think that there would be any impact on the way that children are provided with services. However, I do not know how the courts might read it in the future.

**Mrs O’Neill:**

When do you think that you will be in a position to comment more on the impact of the Bill on,

for example, SENDO? Debbie, you picked up on that point.

**Ms Gladwell:**

We would have to have received advice from a few areas on that. We are currently seeking that advice, so we will comment more as soon as possible.

**Mrs O'Neill:**

Given our timetable for getting through our scrutiny of the Bill, will you try to hurry that along and to share your views with the Committee as soon as possible? Even if you cannot come before us again, you could send your views to us in written form.

**Ms Gladwell:**

Yes, we will.

**Mr Easton:**

I agree with the Deputy Chairperson: if passed, the Bill will not do any harm. It is good to know that you agree with that.

Your strategy with the Health Department is good in so far as it goes, but there is no joined-up strategy with other Departments on vital issues. For example, I am dealing with a case in which the parents of a child with autism are applying for disability living allowance (DLA). Many parents of autistic children receive that benefit for their children, but this child has been turned down. The DLA application was not turned down because the parents did not have the medical evidence from their GP and other health professionals; it was because of the report from the school, which put the child down as being hyperactive and naughty. We have to go through an appeal, and I believe that the decision will be successfully overturned.

That is an example of a lack of a joined-up approach between the Department for Social Development, the Health Department and the Department of Education. If the Bill is passed, can you see a joined-up approach emerging as a result? Such an approach is essential, because there are some children missing out. Do you see a joined-up approach between all Departments being a good thing?

**Ms Gladwell:**

As regards advice from schools, I am not clear how the strategy could influence advice from schools in the way that you described. I am not familiar with the circumstances of the case that you mentioned, so I cannot comment on it.

**Mr Easton:**

There are teaching staff who have failed to recognise, despite the medical evidence, that a child has autism. Consequently, they have failed the child and the family. Obviously, there is a lack of understanding about autism and, in certain elements of the education sector, a lack of awareness training. Your strategy will probably address some of those issues, but there are failings. The Bill is vital to ensure that there is a joined-up approach between all Departments to help to deliver the best for a child, not just in health and education but through access to benefits that they are entitled to.

**Ms Gladwell:**

The training aspect of any strategy is vitally important. The Department of Education is currently undertaking a capacity building exercise around all SENs in the classroom, which includes training in autism. Gillian might want to comment on some of her work.

**Ms Gillian Boyd (Department of Education):**

As a former principal of two special schools, I have had to fill in many of those forms. Schools are not asked about the diagnosis or the condition in those forms; they are asked about how the behaviour presents in the experience of the school. The school has to truthfully reflect how the child behaves instead of concentrating on the diagnosis. So, I cannot see how any changes would impact on the advice that schools give in those forms.

**Mr Easton:**

Better training would make teachers more aware of the condition, which means that, when families who are applying for DLA need their support, there would be a better understanding and families would not be losing out. It is a failure on the part of the Department of Education that that has not happened. That might be addressed in your review, but I do not know, because I am not totally au fait with your strategy. Obviously, your strategy is a good thing, but the joined-up approach is not quite working yet. You may need to think about that a wee bit.

**Ms Boyd:**

I am on secondment to the Department of Education and work for the Education and Training Inspectorate as an inspector for special education. As part of that role over the past five or six years, I have been looking at SEN in mainstream and special schools. I can honestly say that I have not come across any school that is not aware of ASD. Expertise on ASD varies from outstanding to good and satisfactory. I can truly say that in the many schools that I have inspected, I have not seen a lack of awareness.

We have ASD training teams in each board; we have the Middletown training and advice centre for the more complex youngsters; and we have sent out a training tool to all schools for all staff to access whenever they wish. We have a team putting together strategies that every classroom teacher, every classroom assistant and every principal will be able to access. Those will be written by outstanding practitioners in the field; classroom teachers, principals and advisers who are working to disseminate their outstanding practice. When we looked at a Northern Ireland-wide survey of ASD, we found that practice ranged from good to outstanding. There is always room for improvement; we would like to see every school become an outstanding school.

**Mr Easton:**

As part of your strategy, you are providing access to measures that make everybody aware of autism.

**Ms Boyd:**

No. We are providing access to measures that help school staff become outstanding in their practice.

**Mr Easton:**

Will that be mandatory? Will staff know about that?

**Ms Boyd:**

They will certainly all know about it.

**Mr Easton:**

You might want to consider Millisle Primary School, because the staff there obviously do not

know much about autism at the moment. You might want to take that back.

**Mr Gardiner:**

Thank you for your presentation. Will the Bill give you additional powers to look after children with autism? We want the best for those children.

**Mrs Angus:**

The Bill requires that the Departments devise a strategy. We are already devising a strategy in conjunction with our health colleagues. I am not sure that the Bill gives us any further powers.

**Mr Gardiner:**

So, you have the power at the moment without the Bill.

**Mrs Angus:**

We have the power to provide for the children.

**Mr Gardiner:**

Will the Bill allow you to implement more than you can do with the powers that you have at the moment?

**The Chairperson:**

That is an important point. Is there anything that you would like to do but cannot because you are constrained by legislation in the education sector?

**Mrs Angus:**

No.

**Mr Gardiner:**

There is nothing more that you can offer.

**Mrs Angus:**

There is nothing that legislation constrains us from providing.

**Ms S Ramsey:**

The fundamental issue is that there are a lot of laws out there. Sometimes, Departments do not carry them through because of the financial aspect. The Bill will make it a legal duty to act rather than a statutory duty. That is the key point.

**The Chairperson:**

Is there anything that you are not doing at the moment that you feel that you would be forced to do by the Bill?

**Mrs Angus:**

I come back to the point about the hierarchy. Would we be forced to give priority to children with autism over children with moderate learning difficulties, severe learning difficulties, dyslexia and all the other range of special educational needs?

**The Chairperson:**

Presumably, with a finite budget, if autistic children were given priority, it would be to the detriment of those other children.

**Mrs Angus:**

We are concerned about that. That is the issue that we have already mentioned; we need to understand better whether the Bill would put us in that position. I do not think that there is anything that the Bill helps us to provide for children with autism that we are not able to provide with the powers that we have at the moment.

**Mr Easton:**

Chairperson, your question is very unfair. There is nothing in the Bill to say that autism will get priority over anything else. To say otherwise is very misleading. I do not agree with that analysis, and there is no proof for it. I want to put on record that there is nothing in the Bill to suggest that autism will be given priority over any other disability.

**Mrs Angus:**

I have not suggested that either. I said that we need to understand better whether that could be the result of the Bill.



**Mr Callaghan:**

I very much concur with what Alex has said. It is very important that we do not overhype the potential of the Bill. That could be a downside from the perspective of some people, but it also does away with some of the objections that are being raised to the Bill.

I want to touch on the degree of co-operation between Departments. In some of the evidence that has been submitted, every Department and agency has received some criticism for what they are doing or are not doing. I cannot speak for other members of the Committee, but it seems to me, from a lot of the evidence that we have received from parents, carers and representatives of some of the autistic spectrum disorder groups, that people are not properly co-operating and co-ordinating. That seems to be the problem. It is not necessarily that there is a deficiency in what they are doing. What is the Department's view on the potential for better co-operation between it and its agencies — my definition of which includes schools — over and above what exists?

We are getting a wee bit confused in this session about the importance of definition in bringing about a step-change in services. The definition, to some extent, stands on its own in the DDA-related clause. Aside from the first clause, the Bill's clauses deal with the strategy, and they are not predicated on the definition per se. I am just interested in your view on there being better co-operation and co-ordination.

Let me put it like this: everything that the representatives from the Department of Education have said here today, just like everything that the representatives from the Health Department and other statutory bodies might have said to us before, has been — this is not necessarily a criticism, but it is certainly a reflection of the governmental approach — about how the Department responds when it encounters those issues. In contrast, the Bill is trying to change the paradigm so that we can say how a family is responded to by the system in its entirety, regardless of what part of the system it is dealing with, be that a school or something else.

**The Chairperson:**

Is there a question coming?

**Mr Callaghan:**

What do you think of that? [*Laughter.*]

**Mrs Angus:**

We agree with you — the end result of whatever we do ought to be the support that we provide for the child and that support ought to be joined-up. I entirely agree with you. In the mapping exercise that we did for our strategy, some of the areas for improvement that we uncovered related to collaboration at all levels: for example, collaboration between the Departments, which we have been making efforts to improve — I see some of my health colleagues here — and the way in which the professionals on the ground work to support the children.

So, there is scope for improvement, and it is good that we do everything that we can to ensure that that happens. Debbie has been working on the strategy and has been working very closely with our health colleagues at the policy and delivery levels to try to do that.

**Ms Gladwell:**

I will tease that out a wee bit more. There has always been collaborative working between the two sectors, but there has also always been room for improvement in that. We have evidence that collaboration has already been established. We have issued documents that have identified standards for collaborative working.

On the autism strategy specifically, we have been working very closely with our health colleagues. Our work has been so closely linked that we have almost been speaking with one voice. Our health colleagues have been working very closely with my education groups to determine where the gaps are and to identify the areas for development. We have discussed whether those gaps are at a departmental level and have agreed that we should link the education strategy strongly with the health strategy and have a joint statement of some sort to strengthen both strategies by bringing them closer together.

In addition, we have RASDN, which is a health-related network that has representatives from education and library boards sitting on its board. I also have a seat on that board. However, education and library boards and trusts must work together more closely and be much more collaborative. The strategy seeks to identify collaboration as an area for improvement and to have specific actions in place to formalise that arrangement. There will be full, 360 degree reporting back, through the implementation plan and a joint implementation group, so that we can ensure that that is happening.

So, collaborative working is a good thing. It has to continue to be improved on, and we have to continue to ensure that we put those actions in place. That will be done through the draft strategy and the implementation plan. It will report back through the existing structures, and the two Departments will have a monitoring role to ensure that there is collaborative working. There are examples of good practice. We have evidence of collaborative working between the two Departments in certain areas, and we want to strengthen that even further.

**Mrs Angus:**

What Mr Callaghan said is right: we need to recognise that, at the end of the day, parents do not care whether the support comes from the education sector or the health sector; they just want the support for their children.

**Mr Callaghan:**

Although what you are saying is positive to an extent, it is only fair to say that it does not tally with everything that we have heard about user experience.

One thing that I found very interesting in what the Health Department provided us with this week was that there was not really any reference to any Department other than itself and the Education Department on the issue of collaborative working. The Bill's provisions are not restricted to childhood. In the transition phase for people aged 18 or 19 years, is there much scope for improvement in relationships with other Departments and their agencies? The Department for Social Development (DSD) and the Department for Employment and Learning (DEL) come to mind, in particular. The Bill is not aimed at just the Department of Education and the Health Department.

**Mrs Angus:**

We have had a couple of exercises on that. The Department of Education led an exercise a few years ago on transitions, when there was an action plan and so on. Presently, as part of the ministerial group on children and young people, I chair a group that looks specifically at transitions. That group has on its membership not just the health partnership, which, as you said, has been mentioned quite a lot today, but DSD, because it looks at housing. There are also representatives from the Department of Justice on the group, because too many young people with special educational needs end up in the justice system because they have not done well in education. Debbie, remind me of the other Departments represented on the group.

**Ms Gladwell:**

There is the Department for Employment and Learning.

**Mrs Angus:**

That Department is represented because young people in their transition years move into further education when they leave school.

**Mr Callaghan:**

Some do not.

**Mrs Angus:**

Yes. We recognise that all those Departments have to work together to ensure that, when young people move on from school, they move into something meaningful. A lot of them move on from special schools, where they have been given a lot of stimulation that meets their needs. Perhaps, the broader system has not been able to meet those needs so far. We presented our action plan on that to Ministers, it was approved, and we are working on moving it forward.

**Mr Callaghan:**

So, a statutory duty to co-operate would not necessarily run against those efforts.

**Mrs Angus:**

No.

**Dr Deeny:**

I apologise for missing your presentation; it took a lot longer for me to get down this morning than I had anticipated.

I want to ask about an issue that you may have covered. It was touched on by Mr Easton. There has been mention of a hierarchy of disabilities and a concern about disabilities being prioritised. There are a lot of teachers in my family; my wife and my brothers and sisters are teachers. What are the views of principals and senior teachers?

In my practice, we have people with all sorts of disabilities, including children with muscular

dystrophy and cerebral palsy. Are some of the senior teaching professionals concerned that the Bill would prioritise disabilities? For example, autistic spectrum disorder has a spectrum, and I can think of some people who are severely autistic. I like the fact that you are talking about the individual needs that arise from a learning difficulty. Some people are at the milder end of the spectrum. Is there concern that someone at the milder end of the spectrum will receive the support that they need and that someone with another disability, such as cerebral palsy, will not? I would not like to see that happening. Is that a concern among senior teachers? Do they know about the Bill?

Who assesses the individual needs of a schoolchild? Is it the principal? Severely autistic children need a lot of support, whereas, at the other end of the spectrum, children with Asperger's syndrome who are quite intelligent may not need much support. Who makes that call? Do you know of any concern among senior and experienced teachers about the Bill leading to a prioritisation of disabilities?

**Mrs Angus:**

I will answer the second part of your question first, because it may lead to an answer for the first part.

The determination on the support that a child needs is made according to the code of practice that I referred to in the presentation. That code of practice has five stages, some of which are school-based and others, for children with more challenging needs, are based in the education and library boards. The fifth stage is where a child is statemented, because he or she has the most challenging of special educational needs. Therefore, sometimes the school will be able to determine what is needed and will be able to put that intervention in place. However, in some cases, an educational psychologist will be needed to consider the child, who will be taken through all five stages of the code of practice. Autistic children will go through that process as well. Is there anything to add to that, Debbie?

**Ms Gladwell:**

The teacher makes an assessment in the classroom based on the behaviour that the child presents. The stages of the code of practice apply at that point, and the child is placed on the SEN register.

**Mrs Angus:**

Some children are on the SEN register, and some are statemented. I said earlier that 20% of children in our schools have a special educational need, but they will not all be at the statemented stage.

That is the context in which to answer the first part of your question, Dr Deeny, because that is the framework within which schools are used to operating. Schools are used to treating special educational needs by looking at the learning need of the child, not the condition that the child has. Schools look at the specific learning need and what support they need to put in place.

In those terms, we have heard, through the teachers' unions, some concern about the Bill. That goes back to the question of hierarchy, which is one of the reasons why we are seeking to understand that better. That is also one of the reasons why the Minister has asked us to look at the particulars of the Bill. We have made it very clear that the Minister supports the principle behind the Bill, but she has asked us to better understand the hierarchy issue, because we are hearing concern expressed about it, although not a huge amount.

**Dr Deeny:**

I presume that principals and senior teachers have looked at the Bill, are aware of it and are interested in it.

**Mrs Angus:**

They do have awareness of it, although I cannot say to what extent. Certainly, the unions have been looking at the Bill, and they normally represent the voice of the teachers.

**The Chairperson:**

I predicted that this would be a short session, but it turned out to be much longer, which is an indication of the content of what you told us. I should have declared an interest, because my mother, my wife and my two daughters are all teachers. That is not in the Register of Members' Interests, and this is the first interface that I have had with the Department of Education. This session has been very useful and has helped the debate considerably. Thank you.

**Ms S Ramsey:**

Is that what Stephen Nolan calls nepotism, or does it only apply to politicians?

**The Chairperson:**

I do not know what it is, but I think that it needs to be declared in this context.

**Mrs Angus:**

Thank you for the opportunity to give evidence.