Delivering for Students with Additional Care Needs.

The Right Support at the Right Time in Schools

A Proposed Model of Support

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I want to thank Minister Richard Bruton TD for appointing me as Chairperson of this NCSE Working Group.

This report sets out the working group’s proposal for a new model of support to provide better outcomes for students with special educational needs who have additional care needs.

The working group took great care to ensure that the additional care needs of students with special educational needs were kept at the centre of its work at all times.

The working group is confident that its proposed new model is a better way of delivering for students with additional care needs. It will also give schools greater capacity to provide the right supports at the right time to students who have additional care needs.

I want to thank the members of the working group and its associated advisory group for their individual contributions and dedication, for their assistance in preparing drafts of documentation and for the generous way they engaged with the work involved in finalising this report.

I also want to thank senior officials of the NCSE who gave great guidance and support to the working group.

The full list of names of all those involved is provided in Appendix 2.

I am very pleased to recommend this report to the Council.

Eamon Stack  
Chairperson of the Working Group  

December 2017
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<th>Definition</th>
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<tr>
<td>AIM</td>
<td>Access and Inclusion Model</td>
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<td>ASD</td>
<td>Autism spectrum disorder</td>
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<td>AT</td>
<td>Assistive technology</td>
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<td>CAMHS</td>
<td>Child and Adolescent Mental Health Service</td>
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<td>CPD</td>
<td>Continuing professional development</td>
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<td>DEIS</td>
<td>Delivering Equality of Opportunity In Schools</td>
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<td>DES</td>
<td>Department of Education And Skills</td>
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<td>DoH</td>
<td>Department of Health</td>
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<td>EBD</td>
<td>Emotional/behavioural difficulties</td>
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<td>EPSEN Act</td>
<td>Education for Persons with Special Educational Needs Act</td>
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<td>ERC</td>
<td>Educational Research Centre</td>
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<td>HSE</td>
<td>Health Service Executive</td>
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<td>Home school community liaison</td>
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<td>ISL</td>
<td>Irish Sign Language</td>
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<td>National Council for Special Education</td>
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<td>National Framework of Qualifications</td>
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<td>National Parents Council</td>
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<td>SLT</td>
<td>Speech and language therapy</td>
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<td>SNA</td>
<td>Special needs assistant</td>
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Executive Summary
Executive Summary

Introduction

In September 2016, the Minister for Education and Skills, Richard Bruton, T.D., asked the National Council for Special Education (NCSE) to lead a comprehensive review of the special needs assistant (SNA) scheme, in consultation with other relevant Departments and State agencies. The terms of reference for this comprehensive review are included in Appendix 1 of this report.

The NCSE provided a progress report to the Minister in May 2017. This report recognised that the SNA scheme, as currently configured, has many positive features. It has greatly assisted students with additional and significant care needs to attend mainstream and special school and such support continues to be necessary for students. It meets the needs of many students with significant care needs and has the confidence of parents and schools.

Despite its many positive features, the NCSE concluded that while SNAs work very well to support students with care needs, they work within a scheme that is a blunt instrument to respond to a very wide range and complexity of student needs, age ranges, developmental stages and school settings. The scheme can work well for younger children in junior primary school classes and those with very significant care needs, but there are concerns about whether or not it is the most appropriate or effective support for post-primary aged students and for some primary aged students. SNAs are sometimes seen as the ‘answer to everything’ and are called upon to fill all gaps when what students actually need is access to personnel with an appropriate range of skill-sets and qualifications who can provide a tailored response to students’ identified needs.

The NCSE has expressed concern that SNAs, who are not required to have any particular professional qualifications, may be expected to support students who require complex medical procedures and/or present with extremely challenging behaviour, without having the necessary professional qualifications or training.

Given its findings, the NCSE advised the Minister that it intended to establish an NCSE-led working group comprising relevant stakeholders to assist in developing a proposal for an alternative and improved model of support to provide better outcomes for students with special educational needs who have additional care needs.

Progress of Work

The NCSE Working Group on Additional Care Needs met first in July 2017 and set about developing a proposed model for additional care needs that would address the concerns identified in the NCSE Progress Report.
The working group’s report is informed by the knowledge that a DES-led cross-sectoral working group has been set up to consider the needs of students with complex medical needs. This cross-sectoral working group was set up as an immediate response to NCSE concerns that SNAs were being asked to support students with very complex medical and/or behavioural needs, sometimes without adequate training and/or supervision. This working group will also specify what should be regarded as adequate training/qualifications for personnel carrying out or overseeing such interventions.

**Care Needs and Additional Care Needs**

The term **care needs** is taken to refer to student needs that can reasonably be expected to be met, with appropriate planning and preparation, by the teaching staff and, as necessary, through teachers upskilling their knowledge and practice; curricular differentiation; the use of assistive technology/specialist equipment; the adaptation of the learning environment; and the advice and support provided by the NCSE, NEPS, the HSE, and other support services.

**Additional care needs** are functional and adaptive difficulties\(^1\) that represent a significant barrier to the ability to learn and participate in the school environment. These are described as additional care needs because they arise to the extent that some other or more intensive extra support, over and above all of the supports listed above under care needs, is essential to include students with additional care needs and to provide better outcomes for them.

**Guiding Principles**

The working group was focussed on developing an improved model of support for students with additional care needs and adopted the following guiding principles to underpin its work:

1. All students, irrespective of special educational need, are welcomed and enabled to enrol in their local schools.
2. Schools make the necessary adaptations to include students with additional care needs.
3. Additional supports are deployed and managed effectively by schools to support those students with additional learning and care needs who most need them.
4. Allocation and deployment of supports is flexible and responsive to students’ needs and focussed on delivering the right supports to meet additional care needs at the right time.
5. The use of additional care supports is focussed on the development of students’ resilience and independence so that students are enabled to live independent lives when they leave school – in line with their individual abilities.
6. Additional care supports are used to drive better outcomes for students.

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1 Functional and adaptive skills are skills that students use every day to take care of themselves, to engage with others and to cope with the demands of the world around them.
7. Parental engagement in their child’s education is of central importance.

8. Student participation and engagement in learning and other aspects of school-life is promoted. Students will be facilitated to have a voice in decision-making about how he/she is to be supported in school.

Key Changes

- Access to the right in-school support at the right time delivered by the right people;
- A broader range of support options available to students with additional care needs under a tiered model of support;
- Care supports frontloaded into schools and available upon enrolment;
- Access to support linked to assessed need rather than disability diagnosis;
- Schools will have continuity of access to better trained and qualified in-school personnel supporting students’ additional care needs;
- NCSE, in collaboration with the relevant DES bodies, will build school capacity through the provision of a broad range of support options including speech and language therapy, occupational therapy and behaviour support.

Improvements

The working group’s proposed model is focussed on supporting students with additional care needs to achieve improved outcomes. Schools will be better able to support students with additional care needs to achieve improved outcomes because the proposed model provides:

- Immediate access to supports because students will no longer have to wait for a diagnosis to access care supports;
- Equitable access to supports because:
  - Students with the greatest level of need can access the greatest level of support
  - Care supports will be immediately available in schools irrespective of the ability to access public or private diagnoses of disability
- Students and parents will have more meaningful engagement in school planning to identify and meet additional care needs;
- The role of in-school personnel who support students’ additional care needs will be more clearly defined;
- More time for appropriate interventions to inform teaching and learning in schools;
• Reassurance to parents who will no longer have to wait to know whether their child has access to supports as the supports will be in the school on enrolment;

• Schools will have greater stability in staffing levels allowing them to better plan how to meet the additional care needs of their students;

• Access to the NCSE support service to provide, where necessary, expert advice, continuing professional development (CPD) and in-school support;

• Access to NEPS, appropriately resourced to provide a comprehensive educational psychological service, to assist schools to address the learning, behaviour, well-being and care needs of all students where required.

Roles and Responsibilities of Principals and Teachers

The principal has overall responsibility for day-to-day leadership and management of teaching and learning for all students in the school. This includes ensuring a sufficient number of school staff has received adequate training to meet the care needs of students, and adequate cover is in place where staff designated to provide essential care support is absent on any particular day. It also includes deploying resources so children with the greatest level of need receive the greatest level of support in the school.

The class/subject teacher has first-line responsibility for the progress and care of all students in the classroom, including those who have special educational needs. Teachers therefore have primary responsibility for ensuring that additional care needs of students are met in the classroom. Teachers should have received the necessary training and continuing professional development to discharge this responsibility.

Special education teachers provide supplementary teaching support for students with special educational needs, where this is required. They provide this support in consultation with class teachers and should plan their interventions carefully to address students’ priority learning needs and to achieve the targets identified in the relevant continuum of support plan, including those targets relating to student well-being and behaviour.

While the teacher always has primary responsibility for overseeing interventions carried out in his/her classroom he/she may need the support of a trained responsible adult to assist, as and when necessary, in meeting certain aspects of the students’ needs. The teacher retains primary responsibility, however, even when the intervention is supported by or delegated to another responsible adult in the school. Support and/or clinical oversight from a relevant professional may also be necessary in guiding implementation and reviewing progress towards agreed outcomes.
Role and Responsibility of Additional Care Support Personnel

A central tenet of the proposed model is that a broader suite of appropriate support options will be in place to support students with additional care needs. Under the proposed model, in-school care support personnel will continue to play a key role in assisting schools to meet the additional care needs of students. The main focus of their key role will be to assist schools to enable students with additional care needs to participate meaningfully in school activities, develop resilience and become as independent as possible in accordance with their age and ability.

The working group recommends that the title inclusion support assistant should be used to describe the evolving role of in-school support personnel as it captures the role’s positive focus which is to promote student inclusion and develop resilience and independence. The working group recommends that from now on existing special needs assistants (SNAs) should be called inclusion support assistants and the term SNA should no longer be used.

Inclusion support assistants are a targeted support allocated solely to discharge the responsibility outlined above and the DES should specify duties that can be assigned to them to enable them to deliver on their main responsibility. Inclusion support assistants should have access to appropriate training tailored to their role in the school setting. They should not be responsible for, or engaged in, teaching any student including those with additional care needs.

The role of the inclusion support assistant, along with responsibilities and duties, is outlined in greater detail in the body of the report.

Frontloading

Frontloading means that a proportion of the available inclusion support assistant posts is allocated in advance to schools to enable them to respond to existing and emerging need within their schools. The working group recommends that the greater proportion of available inclusion support assistant posts should be allocated to schools in this manner.

There are considerable benefits to be derived from frontloading inclusion support assistant posts into schools including that:

- Supports will be in place for students with additional care needs from the first day they enrol in the school;
- Students will no longer have to receive or wait for a professional diagnosis of disability before accessing support for additional care needs. In future professional assessments (by professionals external to the school) will be conducted for the right reason – to identify the student’s profile of needs and strengths and inform their teaching, and learning and care plan and not for the purpose of accessing State-funded supports;
• Parents will have greater reassurance because they will no longer have to wait to see if their child will have access to care supports;

• Schools will have trained and qualified in-school personnel;

• Schools will have continuity of access to trained staff and greater certainty about their staffing levels allowing them to:
  ■ Plan their support for students with additional care needs as early as possible in advance of the next school year; and
  ■ Plan for appropriate further training where necessary.

The Educational Research Centre (ERC) has assisted the working group to establish an equitable basis for frontloading inclusion support assistants into mainstream and special schools and special classes. In the case of mainstream classes, the ERC found the strongest single predictor of care needs in a school is the level of special education teachers allocated to a school. In the ERC’s judgement, a substantial proportion of the available additional inclusion support assistant posts should be frontloaded into mainstream schools on this basis, while also taking into consideration the school’s current allocations of SNAs. Schools’ allocations will be monitored and regularly reviewed, along with the methodology underpinning the frontloading of supports to ensure it continues to provide a reliable and equitable basis for the allocation of care supports to schools.

The working group considers that the DES should determine the precise extent of the frontloading during the next phase of the model’s development as was previously the case with the teacher allocation model. A small proportion of posts should be retained to support schools where unanticipated exceptional or emergency circumstances arise.

The NCSE, with the ERC, also undertook an analysis of allocation data in special schools and special classes. The working group considers special schools and special classes need to be staffed with appropriate levels of dedicated multidisciplinary support including speech and language therapy, physiotherapy, occupational therapy, behaviour support, nursing, educational and clinical psychology, psychiatry – in line with the needs of their students. It is not acceptable that some students with significant needs have uneven access to such supports. The working group recommends that the Departments of Education and Skills and Health need to work together and agree a funding and staffing package for special schools and special classes as a matter of priority. Part of this work should include a determination of the correct levels of inclusion support assistants for this cohort of students.

In the meantime, the working group recommends that every class in a special school (with the exception of schools for students with specific learning disability) should have a baseline allocation of at least one inclusion support assistant assigned so that two adults are present in every classroom.
The following categories of special classes in mainstream schools should have a baseline allocation of at least one inclusion support assistant assigned: mild, moderate; deaf/hard of hearing and EBD.

Classes that currently have a baseline allocation of two SNAs should maintain that baseline allocation.

**Oversight, Monitoring and Evaluation**

The DES needs to consider the overarching governance framework for the model as it is important that a satisfactory level of external oversight is in place. The working group recommends that the operation of the scheme for additional care needs is overseen by the DES in conjunction with the NCSE. Student progress and outcomes should be monitored and the methodology underpinning the frontloading of resources should similarly be regularly evaluated to ensure its ongoing reliability.

**Guidance**

The DES Continuum of Support Framework recognises that special educational needs occur along a continuum, ranging from mild to severe and from transient to long term, and that students require different levels of support depending on their identified needs.

In advance of implementation, the DES (Inspectorate and NEPS) and the NCSE will need to provide schools with specific guidance and support in using the Continuum of Support Framework to identify and meet students’ additional care needs in an appropriate manner. This guidance should align with previous guidance provided as part of the introduction of the special education teacher allocation model.

**Training and Qualifications**

The proposed model recognises the fundamental importance of building schools’ capacity to meet students’ additional care needs with a view to bringing about improved outcomes for them. As part of the proposed model the NCSE will be funded to design, develop and deliver a national training programme tailored to the needs of school communities\(^2\) to ensure that schools have the professional capacity necessary to meet students’ additional care needs. This training programme will include training for inclusion support assistants to ensure they have the requisite skills to assist schools and teachers to meet students’ care needs arising from significant medical, physical, emotional/behavioural, sensory/communication and from other significant difficulties with engaging in learning. This programme will be developed in consultation with NEPS and the DES Inspectorate.

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\(^2\) The school community includes members of the board of management, students, parents, principal, classroom and special education teachers, inclusion support assistants and ancillary staff.
A training programme tailored for inclusion support assistants, will be developed (preferably online) and made available at a minimum Level 5 on the National Framework of Qualifications. Current SNAs without this equivalent level of qualification, or whose qualifications are not relevant to their SNA work, will be required to complete this level of training within a reasonable period.

A relevant Level 5 qualification should be the minimum future entry level requirement for all newly appointed inclusion support assistants. This reflects what has been current practice in schools for some time whereby schools are seeking SNAs to hold a Level 5 qualification on appointment.

Teachers and inclusion support assistants will be required to attend further training from time to time in line with the needs of some students in their schools. Principals, classroom and special education teachers, parents and inclusion support assistants, as appropriate, should be included together in this further training where required.

An outline of the proposed model follows.

Outline of Proposed Model

A broader range of support options is available to students with additional care needs through a Continuum of Support Framework. A two-step process is in place for allocation and deployment of supports for additional care needs.

**Step 1:**
Supports are allocated to mainstream primary, post-primary and special schools for students with additional care needs:

- Through frontloading the greater proportion of available inclusion support assistant posts to schools; and/or
- Application and timely sanction from the NCSE where a school demonstrates, following quality assurance processes and implementation of advice and guidance that it is unable to meet students’ needs through its existing in-school and frontloaded supports.

The broader range of additional support options available for schools through application and sanction from the NCSE (to assist students with additional care needs) includes:

- Focused support and development work for schools;
- Access to NCSE specialist teams;
• Personnel to assist in addressing exceptional circumstances (e.g. inclusion support assistants, Irish Sign Language communication supporter, braille supporter, if required);

• Assistive technology to assist students with physical and/or communicative disabilities who without such technology would be unable to access the school curriculum;

• Limited pool of ring-fenced funding for schools for specified exceptional and essential purposes not already covered by the extensive range of other supports available in the system;

• A tiered in-school therapy support service available to schools through the NCSE;

• Ring-fenced funding for therapeutic supports provided to the HSE or service provider to deliver a specified level of support to school-aged students.

This proposed model of support will complement and enhance the support already provided to schools. In addition, schools will continue to need access to an adequately resourced comprehensive educational psychological service from NEPS.

**Step 2:**

Supports are deployed and utilised by schools based on students’ identified additional care needs through a Continuum of Support Framework:

• Additional care supports are deployed and utilised by schools through the Continuum of Support Framework based on students’ additional care needs as identified through their school support plans;

• Schools are supported in this process by the NCSE support service working with NEPS psychologists, as required and where appropriate, in:
  - identifying students additional care needs across the continuum
  - advising schools on how to develop appropriate goals for students receiving additional care
  - devising appropriate evidence-based interventions
  - recording student outcomes and reviewing needs;

• The DES (Inspectorate and NEPS) and the NCSE provide guidance for schools, parents and other stakeholders in advance of implementation.
Key Actions Required for Successful implementation

The following six key actions are required for successful implementation of the model:

1. Embedding of a Continuum of Support Framework into schools’ policies and practice as a key element in developing inclusive school cultures.

2. Development of the NCSE regional support service to schools to build schools’ capacity to include students with additional care needs.

3. The DES ensures the NCSE support service is adequately resourced to provide these services, including cover for maternity and other long-term leave.

4. The DES ensures that NEPS is adequately resourced, including cover for maternity leave and other long-term leave, to provide a comprehensive educational psychological service to all students (having particular regard for those with special educational needs and additional care needs) and all schools (including special schools and special classes).

5. The NCSE designs, develops and delivers a national training programme tailored to the needs of school communities. This programme will be developed in consultation with NEPS and the DES Inspectorate.

6. The DES satisfies itself that all boards of management of primary, post-primary and special schools are aware of their responsibility to apply appropriate and regular oversight of the teaching and learning in the school and to place a greater emphasis on building partnerships with parents.

Implementation Plan

The implementation plan comprises three overlapping phases:

Consultation Phase

Any change to the current model of support for students with additional care needs must be carefully planned. It is important that the DES allows sufficient time to engage with parents, schools and other stakeholders to: clearly explain the proposed model and ensure it is understood; listen and respond to people’s concerns and questions about the model; refine and/or make necessary changes to the model before implementation.
Pilot Phase
As with the special education teacher allocation model, the DES should arrange for the proposed model of support to be piloted in schools in advance of implementation. This provides a valuable opportunity for the DES to learn from schools about what works well, any concerns that schools have and any refinements that need to be put in place. It also builds schools’ confidence in the model and allows them to identify any further supports/training they require in order to implement the model effectively.

Funding
The DES should ensure adequate funding is in place for:

- Building school capacity to embed a continuum of support;
- Maintaining continuity of supports in schools;
- Development of NCSE support service;
- Development of an in-school therapy support service;
- Expansion of NEPS.

A full list of the report’s recommendations is provided in the body of the report.
Introduction
Introduction

In September 2016, the Minister for Education and Skills, Richard Bruton, T.D., asked the National Council for Special Education (NCSE) to lead a comprehensive review of the special needs assistant (SNA) scheme, in consultation with other relevant Departments and State agencies. The terms of reference for this comprehensive review are included in Appendix 1 of this report.

The SNA scheme is designed to provide schools with additional adult support that can assist students with special educational needs who also have additional and significant care needs. Such support is provided to facilitate the attendance of those students at school and also to minimise disruption to class or teaching time for them, or for their peers, and with a view to developing their independent living skills.

The NCSE provided an interim progress report to the Minister in May 2017. This report recognised that the SNA scheme, as currently configured, has many positive features. It has greatly assisted students with additional and significant care needs to attend mainstream and special school and such support continues to be necessary for students. It meets the needs of many students with significant care needs and has the confidence of parents and schools.

Despite its many positive features, the NCSE has concluded that while SNAs work very hard to support students, they work within a scheme that is a blunt instrument to respond to a very wide range and complexity of student needs, age-ranges, developmental stages and school settings. It can work well for younger children in junior primary school classes and those with very significant care needs, but there are concerns about whether or not it is the most appropriate or effective support for post-primary aged students and for some primary aged students. SNAs are sometimes seen as the ‘answer to everything’ and are called on to fill all gaps when what students actually need is access to personnel with an appropriate range of skill-sets and qualifications who can provide a tailored response to students’ identified needs.

The NCSE expressed particular concern that SNAs, who are not required to have any particular professional qualifications, may be expected to support students who require complex medical procedures and/or present with extremely challenging behaviour without having the necessary professional qualifications or training. In addition, some schools are giving SNAs a teaching type remit and some students with care needs are being ‘taught’ for some of the day by SNAs. As a result, these students spend time away from their class teachers and other students with people who, however well intentioned, are not qualified teachers. Some students are becoming increasingly over-dependent on having things done for them and are not developing their own independent lifeskills – this is borne out by their experience when they arrive in post-school settings.

Given its level of concern, the NCSE advised the Minister that it intended to establish an NCSE-led working group, comprising relevant stakeholders, to assist in developing a proposal for an alternative and improved model for providing care supports having regard to the significant amount of state investment in this area.
The working group’s term of reference was to:

Identify and develop a proposal for a model of support to provide better outcomes for students with special educational needs who have additional care needs.

The deadline for completion of the working group’s work was the end of December 2017.

**Progress of Work**

The NCSE working group met first in July 2017 and set about developing a proposed model for additional care needs that would address the concerns identified by the NCSE interim report.

The NCSE working group met nine times. A sub-group comprising a number of members of the working group was formed to develop and draft proposals for consideration by the larger group. This was called the advisory group, and this group met on nine additional occasions. Membership of the working group and advisory group and dates of meetings are provided in Appendix 2.

The working group’s report is informed by:

- The DES Action Plan for Education 2017\(^3\) which recognises that education is about equipping students of all ages and capacities to participate and succeed in a changing world. The action plan aims to improve the impact of education and training on the lives of each and every student, particularly those likely to face greater obstacles because of disadvantage or special needs.

- The report from a cross-sectoral working group\(^4\) set up to consider the needs of students with complex medical needs. Issues can arise in schools concerning who, for example, is responsible for carrying out certain medical-related interventions and/or who is responsible for administration of medication. The cross-sectoral working group will specify what should be regarded as adequate training/qualifications for personnel carrying out or overseeing such interventions.

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\(^4\) At the time of writing, this report is being finalised for publication.
Structure of Report

The proposed model was developed within the context of the existing extensive system of supports available for students with special educational needs as outlined in Appendix 5.

The working group’s proposed model to support additional care needs is outlined below under the headings:

- Key terms from term of reference;
- Aim and guiding principles;
- Key changes being proposed;
- Improvements;
- Description of the proposed model;
- A two-step process for allocation and deployment of supports;
- Implementation.
Key Terms from
Term of Reference
Care Needs and Additional Care Needs

The term care needs is taken to refer to student needs that can reasonably be expected to be met, with appropriate planning and preparation, by teaching staff and as necessary through teachers upskilling their knowledge and practice, curricular differentiation, use of assistive technology/specialist equipment, adaptation of the learning environment, and the advice and support provided by NEPS, the NCSE, the HSE and other support services.

Additional care needs are functional and adaptive difficulties\(^5\) that represent a significant barrier to the ability to learn and participate in the school environment. These are described as additional care needs because they arise to the extent that some other or more intensive extra support, over and above all the supports listed above under care needs, is essential to include students with additional care needs and to provide better outcomes for them.

Additional care needs can arise for a small number of students due to significant medical needs, physical needs, sensory (hearing and visual) needs, social communication and social interaction needs (combined with rigid and repetitive patterns of behaviour), and/or cognitive and adaptive functioning needs. In addition, a small number of students have additional care needs arising from significant emotional and behavioural difficulties not consequent to any of the above conditions. Please see Appendix 3 for a short note on significant emotional and behavioural difficulties. Indicative examples of additional care needs and how these can be met in school are included in Appendix 4.

Within each of these care areas there can be a range of needs that vary in degree, duration and intensity from transient needs to long-term and life-limiting conditions. Students can require very different types and levels of support depending on the nature and severity of their needs at different times in the course of their education. Times of transition can pose particular challenges. Meeting their support needs is informed by implementation of evidence informed practices and careful review of outcomes.

Other supports (in addition to those listed above under care needs) that will be available under the working group’s proposed model for students with additional care needs include more focused continuing professional development (CPD) and in-school support from the NCSE support service; specialist assessment and intervention support from NEPS; specialised interventions from therapists, including speech and language therapists, occupational therapists, behaviour advisers; personnel to assist in addressing exceptional circumstances; Irish Sign Language (ISL) communicators; braille support; parent training; and a limited pool of ring-fenced funding for specified exceptional and essential purposes not already covered by the extensive range of other supports available in the system, e.g. specialised assistive technology or expertise not available through the NCSE, NEPS or the HSE.

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\(^5\) Functional and adaptive skills are skills that students use every day to take care of themselves, to engage with others and to cope with the demands of the world around them.
Better Outcomes for Students

As previously advised by the NCSE educational outcomes for students with special educational needs should include:

- Academic achievement-related outcomes (such as literary, numeracy, examination results);
- Attendance-related outcomes (such as school attendance, early school leaving);
- Happiness-related outcomes (such as well-being, confidence, positive relationships, self-esteem, attitude to school and learning, engagement in extra-curricular activities, quality of life indicators);
- Independence-related outcomes (such as resilience, socialisation, mobility, use of assistive technology, lifeskills);
- End of school outcomes.

Better outcomes for students with additional care needs would mean an observable improvement across the above outcomes. As every student with special educational needs is different his/her outcomes should be measured against his/her own baseline measures and one single yardstick of progress should not be applied for all. Student progress should therefore be measured by recording changes achieved over time against students’ own baseline information. Schools should collect and record data for each outcome, measured in line with students’ own needs and abilities, as part of the student’s support plan.

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Aim and Guiding Principles
Aim and Guiding Principles

Aim

The aim of the proposed model is to facilitate improved outcomes for students with additional care needs by enabling the right school-based supports to be in place for these students, at the right time, delivered by the right people.

This model should be read and understood along with DES and NCSE documentation on the model for allocating additional teaching supports to schools7.

Guiding Principles

The working group adopted the following guiding principles to underpin the proposed new model of support for students with additional care needs:

1. All students, irrespective of special educational need, are welcomed and enabled to enrol in their local schools.
2. Schools make the necessary adaptations to include students with additional care needs.
3. Additional supports are deployed and managed effectively by schools to support those students with additional learning and care needs who most need them.
4. Allocation and deployment of supports is flexible and responsive to students’ needs and focused on delivering the right supports to meet additional care needs at the right time.
5. The use of additional care supports is focused on the development of students’ independence so that they are enabled to live independent lives when they graduate from school – in line with their individual abilities.
6. Additional care supports are used to drive better outcomes for students.
7. Parental engagement in their child’s education is of central importance.
8. Student participation and engagement in learning and other aspects of school-life is promoted. Students will be facilitated to have a voice in decision-making about how he/she is to be supported in school.

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7 DES (2017) DES Circular Special Education 0013/17 Special Education Teaching Allocation – Mainstream Primary Schools.
DES (2017) Guidelines for Primary Schools: Supporting Pupils with Special Educational Needs in Mainstream Schools
DES (2017) DES Circular Special Education 0014/17 Special Education Teaching Allocation – Mainstream Post-Primary Schools
DES (2017) Guidelines for Post-Primary Schools: Supporting Pupils with Special Educational needs in Mainstream Schools
Key Changes

- Access to the right in-school support at the right time delivered by the right people;
- A broader range of support options available to students with additional care needs under a tiered model of support;
- Care supports frontloaded into schools and available on enrolment;
- Access to support linked to assessed need rather than disability diagnosis;
- In-school personnel supporting students’ additional care needs will be better trained and qualified and have greater stability of tenure;
- NCSE, along with other existing DES bodies, will build school capacity by providing a broader range of support options including speech and language therapy, occupational therapy and behaviour support.

Improvements

The working group’s proposed model focuses on supporting students with additional care needs to achieve improved outcomes. Schools will be better able to support these students to achieve improved outcomes because the proposed model provides:

- Immediate access to supports because students no longer have to wait for a diagnosis to access care supports;
- Equitable access to supports because:
  - Students with the greatest level of need can access the greatest level of support
  - Care supports will be immediately available in schools irrespective of the ability to access public or private diagnoses of disability
- Students and parents with more meaningful engagement in school planning to identify and meet additional care needs;
- More time for appropriate interventions to inform teaching and learning in schools;
- Reassurance to parents who will no longer have to wait to know if their child has access to supports as the supports will be in the school on enrolment;
- Schools with greater stability in staffing levels allowing them to better plan how to meet the additional care needs of their students;
- Access to NEPS that will be appropriately resourced to provide a comprehensive educational psychological service, to assist schools to address the learning, behaviour, well-being and care needs of all students where required;
- Access to NCSE support service to provide where necessary expert advice, continuing professional development and in-school support.
Roles and Responsibilities
Under the New Model
Roles and Responsibilities Under the New Model

Role of Principal and Teachers

The principal has overall responsibility for day-to-day leadership and management of teaching and learning for all students in the school. This includes ensuring that a sufficient number of school staff have received adequate training to meet the care needs of students and that adequate cover is in place where designated teachers are absent on any particular day. It also includes ensuring that children with the greatest level of need receive the greatest level of support in the school.

The class/subject teacher has first-line responsibility for the progress and care of all students in the classroom, including those who have special educational needs. Teachers therefore have primary responsibility for ensuring additional care needs of students are met in the classroom. Teachers should have received the necessary training to discharge this responsibility.

Special education teachers provide supplementary teaching support for students with special educational needs where this is required. They provide this support in consultation with class teachers and should plan their interventions carefully to address students’ priority learning needs and to achieve the targets identified in the relevant continuum of support plan including those that relate to student well-being and behaviour.

The plan for meeting learning and care needs should be devised collaboratively by those providing support to the student and should be set out as part of the student support plan with the respective role and duties of the class or subject teacher, the special education teacher and the inclusion support assistant where appropriate, clearly set out.

Further information on the roles of class/subject teachers and special education teachers is provided in the DES Guidelines for Primary and Post-Primary Schools (DES, 2017).

While the teacher always has primary responsibility for overseeing interventions carried out in their classroom he/she may need the support of a trained responsible adult to assist, as and when necessary, in meeting certain aspects of the students’ needs. The teacher retains primary responsibility, however, even when the intervention is supported by or delegated to another responsible adult in the school. Support and/or clinical oversight from a relevant professional may be necessary in guiding implementation and reviewing progress towards agreed outcomes.
Role and Responsibility of Additional Care Support Personnel

A central tenet of the proposed model is that a broader suite of appropriate support options will be in place to support students with additional care needs. Under the proposed model, in-school support personnel will continue to play a key role in assisting schools to meet the additional care needs of students. The main focus of their key role will be to assist schools to enable students with additional care needs to participate meaningfully in school activities, develop resilience and become as independent as possible in accordance with their age and ability.

The working group recommends that the title inclusion support assistant should be used for this evolving role as it captures the positive focus of the role which is to promote student inclusion and develop resilience and independence. The new title strengthens the good practice already evident in many schools of moving the focus away from needs-based, medical models of disability to a focus on ability-based empowerment models. It is also the case that many students express a dislike of being singled out as having special needs and do not wish to be associated with this terminology. The proposed change in title signifies a move away from the ‘special needs’ label and would be welcomed by these students.

Inclusion support assistants are a targeted support allocated solely to discharge the responsibility outlined above and the DES should specify the duties that can be assigned to them to enable them to deliver on their main responsibility. Inclusion support assistants should have access to appropriate training tailored to their role in the school setting.

Inclusion support assistants must be deployed in the first instance to support students with the most significant and immediate additional care needs including significant medical, physical, sensory, communication, therapeutic and behavioural needs. The working group has provided indicative examples of these needs in Appendix 4.

Students’ additional care needs must be clearly identified and the school must have tailored support plans in place to enable students, insofar as possible, develop independent living skills. The support provided in meeting these needs must be commensurate with the level of training and qualification provided to the inclusion support assistant involved in the task.

When students’ most immediate and significant additional care needs have been adequately addressed in schools, inclusion support assistants may be deployed to support a wider range of care needs or other students with care needs or be assigned other duties which are necessary and linked to improving outcomes for students with additional care needs.

Inclusion support assistants can offer insights into students’ needs as they arise in the school. To discharge their responsibility and duties in an effective manner, inclusion support assistants should be included in developing student support plans and should understand what is involved in the plans.
Inclusion support assistants may be deployed to mediate therapy programmes, including psycho-educational programmes such as anger management or social skills’ development, only when the programme is:

- Carried out under the direction of qualified personnel, including appropriately qualified class teachers or special education teachers or under the supervision of the relevant professional; and
- Where the inclusion support assistant has the appropriate training and skills.

A school should reconfigure inclusion support assistant duties should new students enrol with more significant additional care needs or as necessary to meet additional care needs that emerge during the school year.

A range of tasks should not be assigned to inclusion support assistants any more than they would be to teachers. These include cleaning the school or staffroom, covering books, clearing lockers (unless it is the locker of a student whose care needs are such that s/he is unable to do so), making tea/coffee for teaching staff or visitors, administrative tasks not connected to additional care needs, preparing the school for summer camps unless a particular piece of preparation is required for specific students with additional care needs, and other tasks similar in nature that do not relate to their work in supporting the school to meet the additional care needs of students enrolled.

Inclusion support assistants should not be responsible for or engaged in teaching any student including those with additional care needs.

Under the new teacher allocation model recently introduced in schools the title of additional support teachers changed from ‘resource’ and ‘learning support’ teachers to ‘special education teacher’. In the same way, the working group is recommending that from now on existing special needs assistants (SNAs) should be called inclusion support assistants and the term SNA should no longer be used.
Description of the Proposed Model
Description of the Proposed Model

Full details of the proposed model and recommendations are provided in the remaining sections of the report.

In addition a full list of the recommendations is provided in the body of the report.

Continuum of Support

Recommendation 1

The working group recommends that in line with international best practice the proposed model is based on a Continuum of Support Framework where students’ additional care needs are identified and met through whole-school, targeted and intensive-school support within an inclusive school context.

This recommendation is based on the recognition that:

- All students with care needs are supported through whole-school planning and supports. This is called whole-school support⁸;
- In addition to whole-school support, targeted-school support is provided for students with additional care needs who require additional support over and above what can be provided through whole-school support. This is called targeted-school support⁹;
- In addition to whole-school and targeted-school supports, more intensive support is provided for a smaller number of students who have the greatest level of additional care needs to assist in enabling them to achieve their individualised goals in schools. This is called intensive-school support¹⁰.

It is possible for students to receive support at all three levels of the continuum depending on their capacities and needs. It is also possible for a student to move from one level to another as their needs change. The arrows in the figures below are included to reflect this flexibility.

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⁸ This corresponds with the whole-school and classroom support tier of the NEPS/DES Continuum of Support (see Appendix 5)
⁹ This corresponds with the school support tier of the NEPS/DES Continuum of Support (see Appendix 5)
¹⁰ This corresponds with the school support plus tier of NEPS/DES Continuum of Support (see Appendix 5)
In an inclusive school, all students are educated within an environment characterised by:

- An empowering school culture where everyone subscribes to the inclusive values and attitudes necessary to welcome and educate all students enrolled;

- Shared leadership where each individual in the school community has a shared sense of his/her individual responsibility to contribute to creating a learning environment that is inclusive of all students. This includes the board of management, parents, students, principal, teaching staff, care assistants and ancillary staff;

- Professional development and upskilling of staff to ensure school personnel have the relevant competencies necessary to work with all students, including those with special educational needs. This includes principals, teachers, members of the board of management, inclusion support assistants and ancillary staff;

- Equitable access to available supports and resourcing in line with student needs;

- Equitable deployment of available supports to ensure students with the greatest level of need get the greatest level of support;

- Partnership with students, parents and families to promote student engagement and participation in their learning and the life of the school;

- Building linkages with the larger school community and across different sectors, e.g. preschool, health services.
Figure 2: Proposed Model within an Inclusive School Culture

Description of the Proposed Model

Recommendation 2

The working group recommends that a broader range of support options is made available as part of whole-school, targeted-school and intensive-school support that encompasses and enhances the existing extensive support options already in place in schools.
This recommendation is based on previous NCSE policy advice\textsuperscript{11} which identified that while the correct supports are in place for students with special educational needs in schools, there are areas where further developments are required to enhance outcomes for this cohort of students. At that time the further areas specified included professional development for teachers; timely, consistent and adequate access to necessary therapeutic supports; and further training opportunities for SNAs and other school personnel.

Students with additional care needs can have a range of requirements including personal care, toileting, administration of medication, communication needs, behavioural needs, physical needs and so on. It is therefore necessary to have a range of support options in place so the appropriate response can be accessed including for example, speech and language therapy, occupational therapy, inclusion support assistants, assistive technology or behavioural support.

The working group’s proposed model encapsulates the totality of supports required by schools to support students with special educational needs who have additional care needs and to enable improved outcomes for them. This includes existing support options already available in the system and a range of further support options identified as necessary to strengthen the current system. A full description of the overall supports currently available in the system is provided in Appendix 5.

As previously stated, the existing special needs assistant scheme is used to respond to a very wide range and complexity of student needs, age-ranges, developmental stages and school settings. This is due in part to other supports (e.g. speech and language therapy, occupational therapy, nursing supports, behaviour support) not being readily available. By broadening the support options available for students, supports can be better targeted to ensure those with the greatest needs get the right support at the right time.

As the proposed model is developed and a broader range of support options is provided it is important that the model adapts accordingly to ensure available resources are used to meet the evolving additional care needs of students in an equitable and efficient way. Therefore it is crucial that the model is regularly reviewed, student outcomes and progress are monitored, evaluated and reported so it is clear the model is meeting its overarching objective – better outcomes for students with additional care needs.

The proposed tiered model of support is outlined in the following section.

\textsuperscript{11} NCSE (2013). Supporting Students with Special Educational Needs in Schools. NCSE: Trim
Whole-School Support

The learning, wellbeing and care needs of the majority of students are met through whole-school and classroom planning and supports, which includes preventative and early intervention approaches. This is called whole-school support.

Key Existing Whole-School Supports

- Professional and qualified teachers and principals alongside ancillary staff;
- Parental engagement and support for children’s learning;
- Boards of management with statutory duty to provide an appropriate education to all students;
- NEPS: psychological advice, support, consultation and training on the provision of universal and whole-school support;
- Continuing professional development through NCSE support service;
- DES Inspectorate provides quality assurance and promotes school improvement;
- Professional Development Service for Teachers (PDST) supports school self-evaluation and ongoing development of teachers and school leaders;
- DES guidance on use and deployment of additional teaching supports;
- Flexible curriculum; and
- Options for certification at post-primary level;
- DES funding schemes for capitation grants, school adaptations, school transport and programme to tackle disadvantage.

Recommendation 2(a)

The working group recommends that the existing range of whole-school support options is broadened and enhanced for students with care needs so that:

- Students are included in planning how their additional care needs are met, in line with age and capacity;
- Parents are engaged by the school in planning for their child’s education;
- Schools are provided with additional guidance and support to enable them to implement the Continuum of Support Framework. Schools can access this support as appropriate from the PDST, NCSE support service and NEPS;
- Boards of management and principals are better supported by the DES to apply appropriate and regular oversight of the teaching and learning in the school and to play a key role in improving standards in the school;
- An in-school therapy service is provided to schools through the NCSE support service.
Targeted-School Support

In addition to existing whole-school supports and those recommended at 2(a) above, targeted-school support is provided for students with greater additional care needs who require extra support over and above that which can be provided through whole-school support, to assist them to achieve their individual potential.

Key Existing Targeted-School Supports

Includes all whole-school supports and also

• Competent and confident school staff;
  ■ Class, subject and special education teachers;
  ■ Special needs assistants (SNAs) for some students (renamed inclusion support assistants under proposed model).

• Parental engagement and support for learning;

• Specialist advice and support to develop school capacity;
  ■ NEPS: psychological advice, support, training and individual casework and consultation as required;
  ■ NCSE support service: CPD and in-school support.

• Therapeutic interventions;
  ■ HSE: limited access to therapeutic supports;
  ■ NCSE: therapy supports in some DEIS schools.

• Assistive technology (AT) and equipment and adaptations.
  ■ DES provides grants for AT, furniture, equipment and building adaptations;
  ■ ISL grants to families.

Recommendation 2(b)

The working group recommends that the range of existing targeted support options is broadened and enhanced to include:

• Trained in-school personnel (with a relevant Level 5 qualification set as the minimum entry requirement) to assist schools to deliver improved outcomes for students with additional care needs.

• From now on, existing special needs assistants should be called inclusion support assistants and the term SNA should no longer be used;

• Focused in-school support and development work from the NCSE support service and NEPS;

• Access to adequate therapy services where required.
Intensive-School Support

In addition to existing whole-school and targeted-school supports recommended at 2(a) and 2(b) above, intensive-school support is provided for a smaller number of students with the greatest level of additional care needs who require yet more intensive support to assist them to achieve their individual potential.

Key Existing Intensive-School Supports
Includes all whole-school and targeted-school supports and also

- Specialist Support
  - NEPS: Individual psychological casework encompassing specialist assessment, formulation, intervention planning and review;
  - NCSE support service: Works with schools, parents and students.

- Further Supports for Students with Significant and Exceptional Needs
  - Access to SNA support (retitled inclusion support assistants under proposed model);
  - Limited access to nursing supports in some schools;
  - Parents working in partnership with schools to develop individualised planning.

Recommendation 2(c)

The working group recommends that the range of existing intensive-school support options is broadened and enhanced to include the following support options, through application and sanction from the NCSE:

- Access to NCSE specialist teams to assist schools to identify and meet student needs;
- Personnel over and above those allocated through recommendation 3A below, e.g. trained inclusion support assistants or Irish Sign Language communicators or braille supporters, to assist in addressing exceptional circumstances;
- Limited pool of ring-fenced funding for specified exceptional purposes, e.g. specialist technology, not already covered by the extensive range of other supports available in the system.

While these supports may also be available through whole-school and targeted-school support, they should be available in a more intensive form or for longer duration as part of intensive-school support.
A Two-Step Process for Allocation and Deployment of Supports
A Two-Step Process for Allocation and Deployment of Supports

The proposed model has two steps:

Step 1: Supports are allocated to schools for students with additional care needs.

Step 2: Supports are deployed and utilised by schools based on students’ identified additional care needs through a Continuum of Support Framework.

Step 1: Allocation of Supports to Schools

In the context of this section, supports should be taken to include:

- Focused support and development work for schools (including CPD and in-school support) through the NCSE support service. This includes support from behaviour advisers, speech and language therapists and occupational therapists;

- Access to NCSE specialist teams where specialist expertise is drawn together from NCSE regional support teams to support schools where students have very complex needs requiring more specialist advice and support;

- Personnel to assist in addressing exceptional circumstances, e.g. inclusion support assistants, Irish Sign Language communicators, braille supporters, as required;

- Assistive technology to assist students with physical and/or communicative disabilities who without such technology would be unable to access the school curriculum;

- A limited pool of ring-fenced funding is set aside to which schools can apply for exceptional and essential purposes e.g. very specific specialist technology not already covered by the extensive range of other supports available in the system.
**Allocation of Supports**

**Recommendation 3**

The working group recommends that supports are allocated to mainstream primary, post-primary and special schools for students with additional care needs:

A. Through frontloading the greater proportion of available inclusion support assistant posts to schools; and/or

B. By application and timely sanction from the NCSE where the school demonstrates, through quality assurance processes and the implementation of guidance, it is unable to meet students’ needs through its existing in-school and frontloaded supports.

**A. Frontloading**

Frontloading means a proportion of available inclusion support assistants is allocated in advance to schools to enable them to respond to existing and emerging need within their schools.

The working group recommends the greater proportion of inclusion support assistant posts should be frontloaded but considers the precise extent of the frontloading should be determined during the next phase of the model’s development.

Recommendation 3 is based on the considerable benefits to be derived from frontloading inclusion support assistant posts into schools including that:

- Supports will be in place for students who require them from the first day they enrol in the school;

- Students will no longer have to wait for a professional diagnosis of disability before accessing support for additional care needs;

- Parents will no longer have to pay for private consultants to diagnose their children with a disability purely to access additional care support. In future students will receive assessments for the right reason, that is to inform their teaching and learning plan and not for the purpose of accessing state-funded supports;

- Schools will have continuity of access to trained staff and greater certainty about their staffing levels allowing them to:
  - Plan their support for students with additional care needs as early as possible in advance of the next school year; and
  - Plan for appropriate further training where necessary.
Allocating to Mainstream Primary and Post-Primary Classes

Recommendation 3(a)

The working group recommends that:

- The greater proportion of available inclusion support assistant posts is frontloaded into mainstream primary and post-primary schools for students in mainstream classes, on the basis of the school’s allocation of special education teachers; and/or

- A number of inclusion support assistant posts is made available to the NCSE to address exceptional circumstances that may arise in mainstream schools from time to time;

- The mechanism for frontloading additional support assistants into schools should be regularly reviewed and the first review should be carried out no later than two years after its introduction.

This recommendation is based on research undertaken by the Educational Research Centre (ERC) to determine whether an equitable basis can be established for frontloading inclusion support assistants into mainstream classes in mainstream schools.

In doing so, the ERC has examined the relationship (or correlation) between the number of SNA posts currently allocated to schools and other variables to establish which variable best predicts the level of additional care need support required by a school. The variables examined include school size, achievement scores, level of educational disadvantage, gender, teacher allocation under the new teacher allocation model, urban and rural locations of schools, categories of low incidence special educational needs overall and by individual category, school absence rates, and different combinations of these variables.

This analysis showed the strongest single predictor of SNA allocation in primary and post-primary schools is the level of special education teachers allocated to a school. The analysis also showed that no combination of variables was appreciably better in terms of predictive power than the single teacher allocation variable.

In the ERC’s judgement, a substantial proportion of available additional inclusion support assistants should be frontloaded into mainstream classes on this basis. It will be important to monitor and review schools’ allocations on an ongoing basis to ensure the level of teaching allocation continues to provide a reliable basis for allocation of additional care supports. On the other hand it is reasonable to expect that as the basis for allocating teachers is revised its predictive power may increase.
On these grounds, the working group has recommended that the greater proportion of inclusion support assistant posts should be frontloaded into mainstream schools. A small proportion should be retained to support schools where unanticipated exceptional or emergency circumstances arise. The working group considers the precise extent of the frontloading should be determined by the DES during the next phase of the model’s development as was the case in developing the teacher allocation model.

The existing correlation between teaching allocations and care supports is obviously not a perfect one and as in all such circumstances there may be outliers, e.g. schools with high additional teaching allocations that do not have a large number of students with care needs or the reverse. The DES will need to examine any such schools and consider how best to allocate additional care supports in circumstances where there is a disconnect between the school’s profile for teaching allocations and current level of care supports allocated to it. This could be done as part of a quality assurance process of the kind carried out in the previous resource allocation exercises, e.g. DEIS and the special education teacher allocation model.

The working group notes that every year a number of schools (about 500-600) have no SNA supports allocated to them because they have no students enrolled who have been identified as requiring access to such additional care support. However, these schools do have additional special education teachers allocated under the teacher allocation model. It is not intended that these schools will automatically have a level of inclusion support assistants allocated to them under the proposed model. Instead they will be able to apply on an individual basis to the NCSE for access to inclusion support assistants in instances where the school considers additional care supports are required.

**Special Settings**

The working group considered the allocations of SNAs in special schools and special classes. The DES policy is that SNAs are allocated to special schools and special classes in line with the category of disability in the school or class and taking into account the level of student need for SNA support. Each category of disability has a baseline level of SNA support assigned which is augmented in line with the needs of students. The working group notes this flexibility is working well.
### Allocation to Special Schools and Classes

<table>
<thead>
<tr>
<th>Recommendation 3(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The working group recommends that:</td>
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<tr>
<td>• The baseline level of 0.25 and 0.5 SNA posts per class (to be renamed inclusion support assistant posts under the new model) that currently applies to some special schools should be increased to a baseline level of one per class. This will ensure that special schools have a baseline allocation of one inclusion support assistant allocated to every class, with the exception of special schools for students with specific learning disability.</td>
</tr>
<tr>
<td>• The baseline level of 0.25 and 0.5 SNA posts (to be renamed inclusion support assistant posts under the new model) that currently applies to some special classes should be raised to one for the following categories of special classes in mainstream schools:</td>
</tr>
<tr>
<td>■ EBD;</td>
</tr>
<tr>
<td>■ Deaf/hard of hearing;</td>
</tr>
<tr>
<td>■ Mild general learning disability;</td>
</tr>
<tr>
<td>■ Moderate general learning disability.</td>
</tr>
</tbody>
</table>

This recommendation is based on an analysis of the enrolment data for special schools and special classes. ERC’s advice was that it is difficult to draw conclusions from the data where there are only a small number of special schools or special classes in a particular category. Equally as numbers attending special schools and special classes can be small, the provision of supports for students with 1:1 supports can have a disproportionate effect on the overall data.

But it is reasonable to conclude from the data that current baseline levels of support are exceeded in most special schools and certain categories of special classes.
Special Schools
The working group looked at the overall levels of SNA support in each special school and compared them to the levels recommended in the SERC report.

Table 1: Overall Level of SNA Support in Special Schools

<table>
<thead>
<tr>
<th>Category of School</th>
<th>SERC recommended ratio for SNA support per teacher</th>
<th>Average SNA support per teacher</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASD</td>
<td>2</td>
<td>3.9</td>
</tr>
<tr>
<td>EBD</td>
<td>0.25</td>
<td>1.9</td>
</tr>
<tr>
<td>Hearing impairment/deaf</td>
<td>0.25/0.5</td>
<td>1.2</td>
</tr>
<tr>
<td>Mild general learning disability</td>
<td>0.25</td>
<td>1.4</td>
</tr>
<tr>
<td>Moderate general learning disability</td>
<td>0.5</td>
<td>2.3</td>
</tr>
<tr>
<td>Multiple autism</td>
<td>2</td>
<td>2.8</td>
</tr>
<tr>
<td>Physical</td>
<td>1</td>
<td>2.3</td>
</tr>
<tr>
<td>Severe emotional/behaviour disorder</td>
<td>1</td>
<td>2.1</td>
</tr>
<tr>
<td>Severe or profound general learning disability</td>
<td>2</td>
<td>2.6</td>
</tr>
<tr>
<td>Specific learning disability</td>
<td>0</td>
<td>0.4</td>
</tr>
<tr>
<td>Specific learning disability &amp; autism</td>
<td>n/a</td>
<td>1</td>
</tr>
<tr>
<td>Blind/visual impairment</td>
<td>0.25</td>
<td>2.3</td>
</tr>
</tbody>
</table>

It was noted that many special schools, most notably those ostensibly catering for students with a mild or moderate general learning disability, have become essentially community special schools and enrol students with many different disabilities. Other single category special schools, e.g. deaf or visual impairment enrol students with co-morbid disabilities. It was also noted that some special schools had access to clinical supports such as nursing or therapeutic staff while others did not.

From additional work carried out in respect of those schools with a severe/profound general learning disability, it is clear that current baseline levels of support are not sufficient to meet the extent and intensity of support required now for many of these students – mobility, physiotherapy, behavioural, medical and technological.

Baseline levels of SNA supports do appear to be sufficient still for the schools catering for specific learning disability.

On the basis of the analysis to date, the working group recommends that in special schools (with the exception of those for specific learning disability), every class should have a minimum of one inclusion support assistant allocated per class to ensure every class has two adults.
Recommendation 3(c)

The working group recommends that given the complexity of needs in special schools and classes (the provision for which is currently provided for separately by the DES and Department of Health) and as a matter of priority:

- The Departments of Education and Skills and Health should jointly discuss and agree a staffing and funding package for special schools and special classes;
- The DES should ensure that NEPS is adequately resourced to provide a comprehensive educational psychological service to all students and all schools where required, including special schools and special classes. Funding provision should be sufficient to provide cover for psychologists during periods of extended leave such as maternity and long-term sick leave.

From the analysis of data, it became clear to the working group that the increasing diversity and intensity of need in the special school student cohort requires a fundamental and broader review than time permits this working group. Special schools need to be staffed with appropriate levels of dedicated multidisciplinary support including speech and language therapy, occupational therapy, physiotherapy, behaviour support, nursing, educational and clinical psychology, psychiatry – in line with the needs of their students. It is not acceptable that some students with significant needs have an uneven access to such supports. The Departments of Education and Skills and Health need to work together and agree a funding and staffing package for special schools. Part of this work should also include the determination of the correct levels of inclusion support assistants for the cohort of students.

The Programme for Partnership Government (2016)\textsuperscript{12} recognised the importance of investing in the National Educational Psychological Service and committed to providing additional NEPS psychologists (up to a 25 per cent increase) to support school staff and students. The National Council for Special Education has also consistently recommended that NEPS staffing be increased so that it can provide a comprehensive service to schools\textsuperscript{13} and students, including those in special schools and special classes.

**Special Classes**

The working group looked at the overall levels of SNA support in each primary and post-primary school with a special class and compared them to the baseline levels recommended in the SERC report. The numbers of classes in certain groups is quite small.

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\textsuperscript{12} Government of Ireland (2016), A Programme for a Partnership Government.

\textsuperscript{13} NCSE (2016). Supporting Students with Autism Spectrum Disorder in Schools. NCSE: Trim

NCSE (2013). Supporting Students with Special Educational Needs in Schools. NCSE:Trim
Table 2: Overall Levels of SNA Support in Special Classes

<table>
<thead>
<tr>
<th>Category of class</th>
<th>Number of classes</th>
<th>% of primary special classes with SNA at SERC levels</th>
<th>% of post-primary special classes with SNA at SERC levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>EI ASD (2 SNAs: class)</td>
<td>127</td>
<td>91%</td>
<td></td>
</tr>
<tr>
<td>ASD (2 SNAs)</td>
<td>764</td>
<td>71%</td>
<td>90%</td>
</tr>
<tr>
<td>Combination (n/a)</td>
<td>6</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>EBD (1 SNA: 4 classes)</td>
<td>8</td>
<td>17%</td>
<td>50%</td>
</tr>
<tr>
<td>SEBD (1 SNA per class)</td>
<td>1</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>HI (1 SNA: 4 classes)</td>
<td>16</td>
<td>9%</td>
<td>40%</td>
</tr>
<tr>
<td>Mild GLD (1 SNA: 4 classes)</td>
<td>62</td>
<td>51%</td>
<td>31%</td>
</tr>
<tr>
<td>Mod GLD (1 SNA: 2 classes)</td>
<td>57</td>
<td>15%</td>
<td>38%</td>
</tr>
<tr>
<td>S/P GLD (2 SNAs per class)</td>
<td>8</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Multiple (1 SNA per class)</td>
<td>22</td>
<td>58%</td>
<td>40%</td>
</tr>
<tr>
<td>SLD (no SNAs)</td>
<td>12</td>
<td>92%</td>
<td></td>
</tr>
<tr>
<td>SSLD (1 SNA: 3 classes)</td>
<td>65</td>
<td>72%</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>1148</td>
<td>70%</td>
<td>78%</td>
</tr>
</tbody>
</table>

The current baseline levels of support are still applicable for special classes for students with autism, specific speech and language disorder and specific learning disability. Other special class category groups more consistently exceed current baseline levels – most notably special classes for primary age students who are deaf/hard of hearing, emotional behaviour disorder and a moderate general learning disability. The working group therefore recommends that the baseline levels for these classes, along with classes for mild general learning disability, should be increased to one inclusion support assistant for each class group.

In other cases, the numbers of special classes is relatively small and the working group considers the flexibility of the current scheme allows for the needs of students to be met with greater levels of SNA support as needed.

The same difficulties in accessing therapeutic support apply for special classes and as with special schools these students should have access to necessary multidisciplinary supports in line with their needs. The Department of Health and the HSE have noted that the DES is funded to provide teachers and SNAs to an increasing number of special classes but that the HSE is not funded to similarly increase their clinical and therapeutic services. This issue requires cross-departmental working and agreement, as a matter of priority.
B. Application and Sanction from the NCSE

The following range of additional support options will be available to schools through application and sanction from the NCSE:

- Focused support and development work for schools (including CPD and in-school support) through NCSE support service. This includes support from behaviour advisers, speech and language therapists and occupational therapists;

- Access to NCSE specialist teams. Students with more complex additional care needs may require their schools to have more specialised advice and guidance. This will be available through NCSE by drawing together specialist expertise from its regional teams into a specialist team, where this is required;

- Personnel to assist in addressing exceptional circumstances, e.g. inclusion support assistants, Irish Sign Language communication supporters, braille, if required;

- Assistive technology to assist students with physical and/or communicative disabilities who without such technology would be unable to access the school curriculum;

- A limited pool of ring-fenced funding will be set aside to which schools can apply for exceptional and essential purposes, e.g. very specific specialist technology not already covered by the extensive range of other supports available in the system.

Under the proposed model, the NCSE support service will be staffed with advisers, SENOs, visiting teachers, speech and language therapists, occupational therapists and behaviour advisers to provide the above support and development work for schools as well as formal CPD opportunities for school staff. An information note on the NCSE support service is attached as an appendix to this document.

This proposed model of support will be complementary to and enhance the support already provided to schools. Schools will continue to need access to a comprehensive educational psychological service from NEPS.

Application and Sanction for Additional Support Options

Given the extensive support that will be available to schools under the proposed model, it is envisaged that students with additional care needs will in the main be supported through supports available at whole-school and through frontloaded supports, in line with the Continuum of Support Framework.

From time to time, a school may consider it is unable to meet students’ additional care needs from within its own in-school supports and frontloaded inclusion support assistants. In such cases, schools may consider they need advice on how best to deploy their resources to optimum effect or advice and CPD to develop the schools’ capacity to support student to achieve better outcomes.
In these cases, schools may apply to the NCSE for focused support and development work that could include CPD and/or in-school support. The focus of this work is to develop the school’s capacity to meet the needs of students with additional care needs.

A clear application process, with transparent criteria, will be developed and available to schools that wish to apply to the NCSE for additional supports.

As part of this application process schools will first be requested to engage in their own self-reflective practice to examine how they are currently deploying and using their resources to support students with additional care needs. A key element of the application process will be the submission made by schools based on this self-reflective process.

As part of its support service, the NCSE will develop a cohort of staff who will be trained to process schools’ applications in accordance with standard criteria. These staff members will be trained and competent to analyse submissions for additional supports based on a school’s own reflective practice and assess what further support if any it requires. An assessment and monitoring framework will be developed to assist the NCSE staff with this process and to ensure consistency of approach.

Schools where exceptional circumstances arise will be able to apply for further supports, including access to inclusion support assistant posts under this application process. In these cases the school will be required to demonstrate, through quality assurance processes and the implementation of guidance, that it is unable to meet students’ needs through its existing in-school and frontloaded supports.

### Ring-Fenced Funding for Therapy Services

<table>
<thead>
<tr>
<th>Recommendation 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>The working group recommends that adequate ring-fenced funding is made available for:</td>
</tr>
<tr>
<td><strong>•</strong> The NCSE to deliver an in-school therapy service developed in line with the findings of the In-School Therapy Service Demonstration Project due to commence shortly in a number of mainstream primary, post-primary and special schools.</td>
</tr>
<tr>
<td><strong>•</strong> The HSE/service provider to deliver a specified level of multidisciplinary support to school-aged children (i.e. speech and language therapy, occupational therapy, behavioural therapy, psychology, physiotherapy, psychiatry, nursing), taking into account the findings of the In-school Therapy Service Demonstration Project and the report of the working group on complex medical needs.</td>
</tr>
<tr>
<td><strong>•</strong> HSE funding provision should be sufficient to provide cover for therapy staff during periods of extended leave such as maternity, long-term sick leave. HSE support levels should be specified in terms of therapy posts and not in terms of hours.</td>
</tr>
<tr>
<td><strong>•</strong> A child-centred approach should be adopted in relation to the delivery of therapy supports with explicit communication between home, school and clinical services.</td>
</tr>
</tbody>
</table>
If implemented this recommendation would ensure that the NCSE is adequately resourced to provide therapy supports to schools, through its regional NCSE support service. This service will work to:

- Assist schools to develop their capacity to support children requiring speech and language therapy and/or occupational therapy while also focusing on early identification and intervention;
- Provide therapy services on a multi-tiered level of support model (at whole-school, targeted and intensive-school support); and
- Provide professional support, training and guidance for school staff and parents.

If adequately resourced, the development of this service will ensure that where required students have immediate access to therapy supports on a consistent, equitable and timely basis. This will go some way to meet the needs of many students who currently are on HSE waiting lists and in doing so, should free up HSE therapists’ time for appropriate interventions.

This work will be informed by the findings of the In-school Therapy Services Demonstration Project announced in Budget 2018. The pilot will focus on developing greater linkages between educational and therapy supports. It will provide for school therapy services and also professional support, training and guidance for school staff and parents. It will seek to assist schools to develop their capacity to support students in schools through tiered levels of support, while also focusing on early identification and intervention.

There are some students whose greater and more complex needs require them to have timely, adequate and consistent access to multidisciplinary clinical supports for individualised assessment and intervention. Such supports are currently provided through the HSE multidisciplinary services but these are not fully staffed to meet demand. The HSE advises that it is not funded sufficiently for this purpose. Evidence to date indicates considerable waiting lists for some clinical services in certain parts of the country.

Access to adequate therapeutic services is critical to delivering improved educational outcomes for some students with additional care needs. The working group is therefore very concerned that implementation of the proposed model will not be successful unless therapeutic services are adequately resourced and delivered. The relevant Government Departments (Education and Health) must commit to providing sufficient and ring-fenced funding for this purpose.

It is also important that students experience continuity in terms of the personnel delivering therapy support as this ensures continuity in the assessment, planning and delivery of therapy programmes. For this reason, the working group specifically recommends that the HSE support levels should be specified in terms of therapy posts rather than in terms of hours.

Finally it will be important that in-school therapy teams adopt a child-centred approach and work closely with student, family, school and other HSE multidisciplinary teams.
Step 2: Deployment and Utilisation of Supports

Under the proposed model schools deploy and utilise additional care supports in an equitable manner based on students’ identified additional care needs through a Continuum of Support Framework. The deployment of these supports should be in line with the student’s support plan.

NEPS describes the development of a student support plan\textsuperscript{14} as the outcome of a problem-solving process, involving school staff, parent(s)/guardian(s) and the student. The student support plan should specify the nature of the student’s learning needs; define specific targets for both learning and care needs; set out how these needs are to be met; and set a timeframe for review. The plan should be devised collaboratively by those providing support to the student and should clearly set out the respective role and duties of school-based staff (class or subject teacher, the special education teacher and the inclusion support assistant where appropriate), parents and any other professionals working with the student.

Schools will be supported in this process by the NCSE Support Service working along with NEPS psychologists in:

- Identifying students additional care needs across the continuum;
- Advising schools on how to develop appropriate goals for students receiving additional care support;
- Selecting and implementing appropriate, evidence-based interventions;
- Recording student outcomes and reviewing needs.

Oversight, Monitoring and Evaluation

Recommendation 5

The working group recommends that:

- The operation of the scheme for additional care needs will be overseen by DES along with the NCSE.
- The DES should consider the overarching governance framework of the model and in particular, clarify the respective roles of the DES and NCSE in providing consistent and transparent monitoring and/or evaluation of the model, including the methodology underpinning the frontloading of supports.
- To assist in providing oversight of the model and following consultation with management bodies and other relevant stakeholders, schools should be required to provide annual reports to the NCSE on progress made and outcomes achieved through students’ support plans.

\textsuperscript{14} NEPS has provided an explanatory note on student support plans on its website at: \url{https://www.education.ie/en/Schools-Colleges/Services/National-Educational-Psychological-Service-NEPS-/Student-Support-File-Guidelines.pdf} Accessed on April 1st, 2017.
This recommendation is based on the need to ensure robust oversight of the model and that additional care supports are being used by schools to drive improved outcomes for the students for whom they are intended. It should be expected that schools account for additional resources allocated to them. It is also important that the methodology underpinning the frontloading of resources is evaluated on an ongoing basis to ensure it continues to provide a reliable and equitable basis for the allocation of care supports to schools.

The NCSE has previously advised[^15] that the level of care support, intervention and recording of student outcomes should be graduated in line with the intensity of the individual student’s need. Every effort should be made to ensure that reporting on student outcomes does not become an additional administrative burden for schools. Schools should be supported in this process by the use of online reporting templates and exemplars.

**Guidance**

<table>
<thead>
<tr>
<th>Recommendation 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>The working group recommends that the DES (Inspectorate and NEPS) and the NCSE provide guidance for schools, parents and other stakeholders in advance of implementation. Guidance for schools should have a particular focus on the identification of students' additional care needs and on the use and deployment of resources to meet those identified needs.</td>
</tr>
</tbody>
</table>

This recommendation is based on the need for schools to be provided with guidelines on the operation of the model in advance of implementation. The DES (Inspectorate and NEPS) developed guidelines for schools to coincide with the introduction of the new model for the allocation of additional teaching supports. These guidelines support schools in identifying and meeting students' educational needs and in monitoring and recording progress and outcomes.

The DES and NCSE guidance should align with previous advice and guidance on using a Continuum of Support Framework to identify and meet student needs. At the same time, the DES (Special Education Section) should ensure that an explanatory booklet for parents and other stakeholders is published which clearly sets out how students will be supported under the new model and provides answers to questions that commonly arise in relation to this support.

Appeals Process

Recommendation 7

The working group recommends that as part of the implementation phase, the DES consults with parents, schools and other stakeholders regarding the development of appeals processes for parents and schools that are timely, transparent and equitable, up to and including a formal independent appeals process where a local resolution cannot be found.

This recommendation is based on a recognition that occasions may arise where a school considers that an error was made in calculating its allocation of inclusion support assistants for example it was not matched correctly to the school special education teacher allocation.

Occasions may also arise where parents want the school to give their child a greater level of care support. Schools should have in place a process to review the information provided to ensure the appropriate level of support is being given to the child. If necessary, schools may draw on advice and/or support from the NCSE support service in determining the level of support a student requires. Where parents continue to believe their child requires additional support they can raise this first with the principal and, if necessary at a later point, with the chairperson of the school’s board of management.

In a small number of cases, every effort to find a local solution may prove unsuccessful. For these problematic cases, it will be necessary to have a more formal and external appeals process in place.

The grounds for an appeal and the procedures to be followed should be carefully devised and clearly stated, as part of the implementation process and following consultation with school management bodies, parents and other relevant stakeholders.
National Training Programme to Develop School Capacity

Recommendation 8

The working group recommends that:

• The NCSE designs, develops and delivers a national training programme tailored to the needs of school communities. The school community includes members of the board of management, students, parents, principal, classroom and special education teachers, inclusion support assistants and ancillary staff.

• This programme will be designed to ensure that schools have the professional capacity necessary to meet students’ additional care needs, including those arising from significant medical, physical, emotional/behavioural, sensory/communication and other significant difficulties engaging in learning.

• This programme will be developed in consultation with NEPS, the DES Inspectorate and other relevant agencies as appropriate.

This recommendation is based on the need to upskill school communities to meet additional care needs of students in order to bring about improved outcomes for them.

As part of this national training programme a programme tailored for inclusion support assistants must be developed (preferably online) and made available at a minimum Level 5 on the National Framework of Qualifications. Existing SNAs who do not have an equivalent level of qualification or whose qualifications are not relevant to their SNA work will be required to complete this level of training within a reasonable period. These SNAs should be supported to do this.

A relevant level 5 Quality and Qualifications Ireland (QQI) qualification should be the minimum future entry level academic requirement for all newly appointed inclusion support assistants. In essence this recommendation reflects the practice in schools for some time where schools seek SNAs to hold a Level 5 qualification.

Teachers and inclusion support assistants will be required to attend further training from time to time in line with the needs of some students in their schools. Principals, classroom and special education teachers, inclusion support assistants, parents and therapy support team members, as appropriate, should be included together in this further training.
Implementation
Implementation

Key Actions Required for Successful Implementation

The following six key actions are required for successful implementation of the model:

1. Schools embed the Continuum of Support Framework into their policies and practice as a key element in developing inclusive school cultures. This will assist schools to identify students requiring support and enable them to provide the greatest level of support to those with the greatest level of need.

2. The NCSE develops its regional support service in order to build schools’ capacity to include students with additional care needs.

3. The DES ensures the NCSE support service is adequately resourced to provide these services, including cover for maternity and other long-term leave. The NCSE will have ten regional support teams across five regions. It is estimated that at the outset each team will require the following level of staffing:

<table>
<thead>
<tr>
<th>Staff</th>
<th>Numbers per regional team</th>
</tr>
</thead>
<tbody>
<tr>
<td>SENOs</td>
<td>Number determined by caseload of schools</td>
</tr>
<tr>
<td>Advisers</td>
<td>15- 20 depending on regional needs</td>
</tr>
<tr>
<td>Visiting teachers</td>
<td>Number determined by caseload within region</td>
</tr>
<tr>
<td>Speech and language therapists</td>
<td>Number to be determined following the conclusion of the demonstration pilot project</td>
</tr>
<tr>
<td>occupational therapists</td>
<td></td>
</tr>
<tr>
<td>behavioural advisers</td>
<td></td>
</tr>
</tbody>
</table>

In addition, the NCSE will continue to have access to some additional contingency funding and special education teacher and/or inclusion support assistant posts to cater for emergency cases that may arise in schools from time to time.

4. The DES ensures that NEPS is adequately resourced, including cover for maternity and other long-term leave, to provide a comprehensive educational psychological service to all students (having particular regard for those with special educational needs and additional care needs) and all schools (including special schools and special classes).

5. The NCSE designs, develops and delivers a national training programme tailored to the needs of school communities to ensure schools have the professional capacity necessary to meet students’ additional care needs, including those arising from significant medical, physical, emotional/behavioural, sensory/communication and significant difficulties engaging in learning. This programme will be developed in consultation with NEPS and the DES Inspectorate and other relevant agencies as appropriate.
6. The DES satisfies itself that all boards of management of primary, post-primary and special schools are aware of their responsibility to apply appropriate and regular oversight of the teaching and learning in the school and to place a greater emphasis on building partnerships with parents. This should be a key aspect of schools’ reporting under school self-evaluation.

**Implementation Plan**

<table>
<thead>
<tr>
<th>Recommendation 9</th>
</tr>
</thead>
<tbody>
<tr>
<td>The working group recommends that in advance of implementation arrangements for the following must be in place:</td>
</tr>
<tr>
<td>1. Consultation phase</td>
</tr>
<tr>
<td>2. Pilot phase</td>
</tr>
<tr>
<td>3. Funding</td>
</tr>
</tbody>
</table>

The implementation plan should comprise the following overlapping phases:

1. **Consultation Phase**
   Any change to the current model of support for students with additional care needs must be carefully planned. It is important that the DES allows sufficient time to engage with parents, schools and other stakeholders to clearly explain the proposed model and ensure it is understood, listen and respond to people’s concerns and questions about the model, refine and/or make necessary changes to the model before implementation.

   It is important that school principals and NCSE staff keep parents informed, where necessary, on how the implementation of the model affects their child with additional care needs.

2. **Pilot Phase**
   As with the special education teacher allocation model, the DES should arrange for the proposed model of support to be piloted in schools in advance of implementation. This provides a valuable opportunity for the DES to learn from schools what works well, any concerns schools have and any refinements that need to be put in place. It also builds schools’ confidence in the model and allows them to identify any further supports/training they require in order to implement the model effectively.
3. Funding
The DES should ensure that adequate funding is in place for:

- **Building School Capacity to Embed a Continuum of Support:**
  Embedding the Continuum of Support Framework within a whole-school culture of inclusion will require training and upskilling for some boards of management, principals, teachers, inclusion support assistants and ancillary staff in schools. The relevant training will also need to be available, on an ongoing basis, for new staff-members and new boards of management.

  Parents of students with additional care needs will also require information on how the new model supports their children in the school setting.

  Further higher education institutes providing programmes of initial teacher education should audit their courses to ensure that both the Continuum of Support Framework and the culture of inclusion are core to every aspect of teacher learning.

- **Maintaining Continuity of Supports in Schools**
  The working group is very conscious of the importance of maintaining care supports in schools while the proposed model is being implemented. The DES should very carefully consider the need to ensure that supports for individual students are maintained during the transitional phase – as was the case during the transition to the teaching allocation model.

- **Development of NCSE Support Service**
  The DES must ensure that the NCSE support service is adequately resourced to provide the necessary supports and services to schools. Funding provision should be sufficient to provide cover for NCSE staff during periods of extended leave such as maternity and long-term sick leave.

- **Development of an In-School Therapy Support Service**
  The DES must ensure adequate resourcing is in place for the development of an in-school therapy support service as proposed in the Programme for Government\(^\text{16}\). Its development should be in line with the findings of the pilot shortly to be commenced in a number of schools.

- **Development of NEPS**
  The DES ensures that NEPS is adequately resourced, including cover for maternity leave, to provide a comprehensive educational psychological service to all students (having particular regard for those with special educational needs and additional care needs) and all schools (including special schools and special classes).

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Outline of Proposed Model
Outline of Proposed Model

A broader range of support options is available to students with additional care needs through a Continuum of Support Framework.

A two-step process is in place for allocation and deployment of supports for additional care needs:

**Step 1:** Supports are allocated to mainstream primary, post-primary and special schools for students with additional care needs:

- Through frontloading the greater proportion of available inclusion support assistants to schools; and/or
- By application and sanction from the NCSE where a school demonstrates, following quality assurance processes and implementation of advice and guidance that it is unable to meet students’ needs through its existing in-school and frontloaded supports.

**Step 2:** Supports are deployed and utilised by schools based on students’ identified additional care needs through a Continuum of Support Framework.

**Step 1**

The broader range of additional support options available for schools through application and sanction from the NCSE (to assist students with the greatest additional care needs) includes:

- Focused support and development work for schools (including CPD and in-school support) through NCSE support service;
- Access to NCSE specialist teams;
- Personnel to assist in addressing exceptional circumstances e.g. inclusion support assistants, Irish Sign Language communication supporters, braille, if required;
- Assistive technology to assist students with physical and/or communicative disabilities who without such technology would be unable to access the school curriculum;
- Limited pool of ring-fenced funding for schools for specified exceptional and essential purposes;
- A tiered in-school therapy support service is available to schools through the NCSE;
- Ring-fenced funding for therapeutic supports provided to the HSE or service provider to deliver a specified level of support to school-aged children.

This proposed model of support will encompass, be complementary to and enhance the range of support options already provided to schools. Schools will continue to need access to an adequately resourced comprehensive educational psychological service from NEPS.
Step 2
The second step in delivering an enhanced range of support options for students with additional care needs is the deployment/utilisation of these supports in an equitable manner by schools:

- The enhanced range of care supports will be deployed and utilised by schools through the Continuum of Support Framework based on students’ additional care needs as identified through the student’s school support plan;

- Schools will be supported in this process by the NCSE support service working along with NEPS psychologists as required and where appropriate using a problem-solving framework to support schools in:
  - Identifying students additional care needs across the continuum;
  - Advising schools on how to develop appropriate goals for students receiving additional care;
  - Devising appropriate, evidence-based interventions;
  - Recording student outcomes and reviewing needs.

- The DES Inspectorate and NEPS provide guidelines for schools, parents and stakeholders in advance of implementation.
Full List of Recommendations
Full List of Recommendations

Continuum of Support

Recommendation 1

The working group recommends that in line with international best practice the proposed model is based on a Continuum of Support Framework where students’ additional care needs are identified and met through whole-school, targeted-school and intensive-school support within an inclusive school context.

Range of Support Options

Recommendation 2

The working group recommends that a broader range of support options is made available as part of whole-school, targeted-school and intensive-school support that encompasses and enhances existing extensive support options already in place in schools.

Whole-School Support

Recommendation 2(a)

The working group recommends that the existing range of whole school support options is broadened and enhanced for students with care needs so that:

- Students are included in planning how their additional care needs are met in line with their age and ability to understand the nature and consequences of the decision to be made;
- Parents are engaged by the school in planning for their child’s education;
- Schools are provided with additional guidance and support to enable them to implement the Continuum of Support Framework. Schools can access this support as appropriate from the PDST, NCSE and NEPS;
- Boards of management and principals are better supported by the DES to apply appropriate and regular oversight of the teaching and learning in the school and to play a key role in improving standards in the school;
- An in-school therapy service is provided to schools through the NCSE support service.
Targeted-School Support

Recommendation 2(b)

The working group recommends that the range of existing targeted support options is broadened and enhanced to include the following supports:

- Trained in-school personnel (with a relevant QQI Level 5 qualification set as the minimum entry requirement) to assist schools to deliver improved outcomes for students with additional care needs. These personnel should be called inclusion support assistants. From now on, existing special needs assistants should be called inclusion support assistants and the term SNA should no longer be used;
- Focused in-school support and development work by the NCSE support service and NEPS;
- Access to adequate therapy services where required.

Intensive-School Support

Recommendation 2(c)

The working group recommends that the range of existing intensive-school support options is broadened and enhanced to include the following support options through application and sanction from the NCSE:

- Access to NCSE specialist teams to assist schools to identify and meet student needs;
- Personnel over and above those allocated through recommendation 3(a) below, e.g. trained inclusion support assistants or Irish Sign Language communicators or braille supporters to assist in addressing exceptional circumstances;
- Limited pool of ring-fenced funding for specified exceptional and essential purposes, e.g. specialist technology not already covered by the extensive range of other supports available in the system.

Allocation of Supports

Recommendation 3

The working group recommends that supports are allocated to mainstream primary, post-primary and special schools for students with additional care needs:

- Through frontloading the greater proportion of available inclusion support assistant posts to schools; and/or
- By application and timely sanction from the NCSE where the school demonstrates through quality assurance processes and the implementation of guidance that it is unable to meet students’ needs through its existing in-school and frontloaded supports.
Allocation to Mainstream Primary and Post-Primary Classes

**Recommendation 3(a)**

The working group recommends that:

- The greater proportion of available inclusion support assistant posts is frontloaded into mainstream primary and post-primary schools for students in mainstream classes, on the basis of the school’s allocation of special education teachers; and/or

- A number of inclusion support assistant posts is made available to the NCSE to address exceptional circumstances that may arise in mainstream schools from time to time;

- The mechanism for frontloading additional support assistants into schools should be regularly reviewed and the first review should be carried out no later than two years after its introduction.

Allocation to Special Schools and Classes

**Recommendation 3(b)**

The working group recommends that:

- The baseline level of 0.25 and 0.5 SNA posts (to be renamed inclusion support assistant posts under the new model) that currently applies to some special schools should be increased to a baseline level of one. This will ensure that special schools have a baseline allocation of one inclusion support assistant allocated to every class with the exception of special schools for students with specific learning disability;

- The baseline level of 0.25 and 0.5 SNA posts (to be renamed inclusion support assistant posts under the new model) that currently applies to some special classes should be raised to one for the following categories of special classes in mainstream schools:
  - EBD
  - Deaf/hard of hearing
  - Mild general learning disability
  - Moderate general learning disability.
Staffing and Funding Package for Special Schools and Classes

**Recommendation 3(c)**

The working group recommends that given the complexity of needs in special schools and classes (the provision for which is currently provided for separately by the DES and Department of Health) and as a matter of priority:

- The Departments of Education and Skills and Health should jointly discuss and agree a staffing and funding package for special schools and special classes;
- The DES should ensure NEPS is adequately resourced to provide a comprehensive educational psychological service to all students and all schools where required, including special schools and special classes. Funding provision should be sufficient to provide cover for psychologists during periods of extended leave such as maternity and long-term sick leave.

Ring-Fenced Funding for Therapy Services

**Recommendation 4**

The working group recommends that adequate ring-fenced funding is made available for:

- The NCSE to deliver an in-school therapy service developed in line with the findings of the In-school Therapy Service Demonstration Project due to commence shortly in a number of mainstream primary, post-primary and special schools;
- The HSE/service provider to deliver a specified level of multidisciplinary support to school-aged children (i.e. speech and language therapy, occupational therapy, behavioural therapy, psychology, physiotherapy, psychiatry, nursing) taking into account the findings of the In-school Therapy Service Demonstration Project and the report of the working group on complex medical needs;
- HSE funding provision should be sufficient to provide cover for therapy staff during periods of extended leave such as maternity, long-term sick leave. HSE support levels should be specified in terms of therapy posts and not in terms of hours;
- A child-centred approach should be adopted for delivery of therapy supports with explicit communication between home, school and clinical services.
Oversight, Monitoring & Evaluation

**Recommendation 5**

The working group recommends that:

- The operation of the scheme for additional care needs will be overseen by DES along with the NCSE;
- The DES should consider the overarching governance framework of the model and in particular clarify the respective roles of the DES and NCSE in providing consistent and transparent monitoring and/or evaluation of the model, including the methodology underpinning the frontloading of supports;
- To assist in providing oversight of the model and following consultation with management bodies and other relevant stakeholders schools should be required to provide annual reports to the NCSE on progress made and outcomes achieved through students' support plans.

Guidance

**Recommendation 6**

The working group recommends that the DES (Inspectorate and NEPS) and the NCSE provide guidance for schools, parents and other stakeholders in advance of implementation. Guidance for schools should have a particular focus on the identification of students' additional care needs and on use and deployment of resources to meet those identified needs.

Appeals Process

**Recommendation 7**

The working group recommends that as part of the implementation phase, the DES consults with parents, schools and other stakeholders about development of appeals processes for parents and schools that are timely, transparent and equitable, up to and including a formal independent appeals process where a local resolution cannot be found.
National Training Programme to Develop School Capacity

Recommendation 8

The working group recommends that:

• The NCSE designs, develops and delivers a national training programme tailored to the needs of school communities. The school community includes members of the board of management, students, parents, principal, classroom and special education teachers, inclusion support assistants and ancillary staff;

• This programme will be designed to ensure that schools have the professional capacity necessary to meet students' additional care needs, including those arising from significant medical, physical, emotional/behavioural, sensory/communication and other significant difficulties engaging in learning;

• This programme will be developed in consultation with NEPS, the DES Inspectorate and other relevant agencies as appropriate.

Implementation Plan

Recommendation 9

The working group recommends that in advance of implementation arrangements for the following must be in place:

1. Consultation phase
2. Pilot phase
3. Funding


Appendices
Appendix 1: Comprehensive Review of the SNA Scheme
Terms of Reference

September 2016

The Minister for Education and Skills, Richard Bruton, T.D., requests the NCSE to lead a comprehensive review of the SNA scheme, in consultation with other relevant Departments and State Agencies, including the National Disability Authority (NDA) and in that context to:

1. Identify and recommend how, in the future, the additional care needs of students, over and above those needs that could be reasonably expected to be managed by teaching staff, should be met and

2. Identify and recommend the most appropriate form of support options to provide better outcomes for students with Special Educational Needs who have additional care needs, having regard to the significant amount of State investment in this area.

The Minister also requests the NCSE, as part of the review, to:

1. Examine whether the SNA scheme continues to meet its purpose as set out in Circular 0030/2014.

2. Consider whether the scheme is being used to meet needs, other than care needs, and if so, what are those needs, taking into account the primary and secondary care needs outlined in Circular 0030/2014.

3. Provide advice on appropriate SNA qualifications and training levels.

4. Evaluate the role of professional reports in providing a robust basis for the allocation of additional care supports under the scheme.

5. Conduct a detailed analysis of the current allocation and distribution of SNAs focusing on what support is being given, to whom and why?

6. Define and examine outcomes of students under current arrangements, taking into account the findings of the Altered Provision Pilot Project.

7. In preparing its report, to have regard to the commitments set out in the programme for a Partnership Government in relation to the introduction of an in-school speech and language service.

8. In preparing its report to take account of the findings and recommendations of the Report on the Role of the Special Needs Assistant which was published by the Joint Oireachtas Committee on Education and Social Protection in January 2016.
Appendix 2: Membership of Working Group and Schedule of Meetings

Front Row (from left): Jim Mulkerrins (DES), Teresa Griffin* (NCSE), Eamon Stack* (Chair), Anne Tansey* (NEPS), Pat Goff (IPPN).

Back Row: Marie Mulvihill (DPER), Marion Meany* (HSE), Mary Byrne* (NCSE), Lorraine Dempsey (Parent), Maria McCarthy* (DES Inspectorate), Peter Archer* (ERC), Helen Guinan (NCSE), Frank Moran (Principal), Adam Harris (NCSE Consultative Forum), Bernie McNally (DCYA), Aine McElearney (SNA).

Absent from photo: Áine Lynch (NPC Primary), Brendan Doody* (DES Inspectorate)

* members with an asterisk were also members of the advisory group

<table>
<thead>
<tr>
<th>Dates of Working Group Meetings 2017</th>
<th>Dates of Advisory Group Meetings 2017</th>
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<tbody>
<tr>
<td>July 17th</td>
<td>July 24th and 25th</td>
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<td>August 1st and 29th</td>
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<td>November 22nd</td>
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<td>December 14th</td>
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Appendix 3: Emotional and Behavioural Difficulties (EBD)

Significant emotional and/or behavioural difficulties (EBD) may arise for a small number of students from conditions such as general learning disabilities, ASD and other special educational needs. For another small group of students significant emotional and behavioural difficulties may arise but are not consequent to other conditions such as those above.

For both groups of students, individual needs may be observed as externalising behaviours or as internalising difficulties and emerge as a significant barrier to participation in school and challenge those who work with them. These behaviours manifest in a wide range of observable difficulties such as maintaining appropriate social relationships, academic participation, lack of engagement and withdrawal as well as noncompliance and aggression towards themselves and others. A continuum of support and intervention is required to understand and respond appropriately to the needs of these students.

NCSE has previously advised (NCSE, 2012) of strong anecdotal evidence suggesting that at the extreme end externalising behaviours triggered by a student’s emotional/behavioural needs may at times include frequent, unprovoked and unpredictable outbursts resulting in violent and injurious actions toward self and/or others.

Emotional and behavioural needs of students in mainstream settings are met within the context of the continuum of support with additional support available to class/subject teachers from the special education teaching team. In certain cases teachers may require extra support from inclusion support assistants to support the school in enabling these students to meet targets set in their student support plan.

Teachers who work with students with the most severe and challenging behaviours require intensive training and support in the management of these behaviours. Specialist schools and special classes for a small group of individuals with very significant needs require access to adequate and ongoing educational and clinical supports from multidisciplinary teams, including therapeutic and medical interventions. These teams in educational settings should include support from NEPS and the NCSE support service to build the capacity of teachers and other staff members.

Emotional and behavioural difficulties must be understood within the context of the interaction between the individual and the individual setting. Schools, therefore, will use a data-informed problem-solving approach to understand behaviour and identify appropriate interventions. Such a systemic approach to manage individual challenges should be based on a multifactorial model with the flexibility to draw on a wide range of supports, including but not limited to class teacher, special education teacher team, inclusion support assistants, NEPS, NCSE support service, speech and language therapy, occupational therapy, HSE clinical services, CAMHS and Tusla. Additional specialist training may be required to build capacity of teachers and other staff members. This approach will take an ecological perspective and consider the function of the behaviours, the views of the students, their understanding of their environment and ability to communicate their needs. The views and needs of parents/guardians to support students in the home setting inform understanding of an individual’s needs and of protective and sustaining factors.
At post-primary level further consideration must be given to the most effective way to enable students to move towards greater levels of personal responsibility and independence. A range of strategies is available that can make a positive contribution to student engagement, achievement, resilience and independence in post-primary settings. These strategies include building the capacity of whole-school staff to utilise positive behaviour management strategies, mentoring, peer-assisted learning and self-management strategies.

At post-primary level students may find it very difficult to accept the presence of additional adult support. Consideration should therefore be given to exploring different models of support, e.g. by rebalancing the number of inclusion support assistants in post-primary schools in favour of having teachers with training in behaviour for learning or specialist expertise in functional behavioural assessment in the educational setting, and/or behaviour advisers who can build the capacity of the whole-school staff to promote positive behaviours and to manage challenging behaviours when they arise.
Appendix 4: Indicative Examples of Additional Care Needs

The working group has provided the following indicative examples of additional care needs that can arise in the school context. As care needs are not discrete, individual care needs may be observed in one or several of the follow areas. The amount and type of support required depends on the nature and intensity of the student’s need, their age and their abilities. Care needs can change over time.

<table>
<thead>
<tr>
<th>Significant Medical Needs</th>
<th>Significant Adaptive Functioning Needs</th>
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<tr>
<td>Administration of medication</td>
<td>Self-care including feeding, toileting and general hygiene</td>
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<td>Peg-feeding</td>
<td>Daily living skills</td>
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<td>Catheterisation</td>
<td>Resilience</td>
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<td>Diabetes</td>
<td>Independence skills</td>
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<td>Seizures</td>
<td>Social interaction skills</td>
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<td>Life-threatening allergies</td>
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<td>Respiratory care</td>
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<td>Vital signs monitoring</td>
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<td>Oxygen care</td>
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<td>Cardiac conditions</td>
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<td><strong>Significant Adaptive Functioning Needs</strong></td>
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<td><strong>Significant Physical Needs</strong></td>
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<td>Moving and lifting</td>
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<td>Operation of hoists and equipment</td>
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<td>Assistive technology</td>
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<td><strong>Significant Physical Needs</strong></td>
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<td><strong>Significant Emotional/Behavioural Needs</strong></td>
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<td>Internalising and externalising behaviours expressed as needs associated with:</td>
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<td>• Significant lack of engagement</td>
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<td>• Significant social withdrawal</td>
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<td>• Significant noncompliance</td>
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<td>• Significant aggression towards self or others</td>
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<td>• Significant dysregulation</td>
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<td>• Significant trauma</td>
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<td>• Significant anxiety</td>
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<td><strong>Significant Communication and Sensory Needs</strong></td>
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<td>Social communication (including students who are non-verbal)</td>
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<tr>
<td>Rigid and repetitive patterns of behaviour</td>
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<td>Self-regulation</td>
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<tr>
<td><strong>Significant Hearing/Visual Needs</strong></td>
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<td>ISL as primary means of communication</td>
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<td>Speech and language skills</td>
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<td>Braille</td>
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<td>Mobility/orientation</td>
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<td>Assistive technology</td>
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<td><strong>Other Significant Difficulties in Engaging in Learning</strong></td>
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<tr>
<td>Task initiation</td>
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<td>Concentration/staying on task (including where these difficulties arise from sensory processing needs)</td>
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<td>Split attention</td>
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<tr>
<td>• Interpreting teachers’ instructions</td>
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<td>• Taking down work from blackboard</td>
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<tr>
<td>Personal organisation and orientation</td>
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Why Is It Necessary To Meet Additional Care Needs?

The working group considers that students’ additional care needs must be met in order to:

- Ensure students’ attendance in school to participate in and receive an appropriate education;
- Enable students to develop independent living skills in line with their abilities and strengths;
- Create a positive learning environment for the students concerned and for their peers.

How Should Schools Meet Students’ Additional Care Needs?

For each indicative example above, there can be a range of need that varies in degree, frequency, duration, persistence and intensity from transient needs to long-term or life-limiting conditions. Students require very different types and levels of support depending on the nature and severity of their care needs and at different stages during their education.

Teachers are usually very supportive to students requiring additional assistance and there are many examples of really good practice whereby schools provide support in ways that preserve students’ dignity, promote independence and without the student feeling stigmatised or isolated.

These schools adopt a commonsense approach to meeting students’ additional care needs, while bearing in mind that the teacher has the primary responsibility for ensuring that these needs are met in their classrooms. The amount of support offered is in line with the nature and intensity of student needs – and these schools are very careful not to over-support students. Those with additional care needs are allowed the opportunity to develop their own independence and to learn from making mistakes.

In these schools the first-line person to offer support is the most trained and/or experienced person and/or the person with whom the student is most comfortable. Where any student requires immediate support, however, these schools expect the nearest available and competent adult will assume responsibility for providing this support and that students are not left waiting, sometimes in very compromising situations, for a designated adult to arrive from elsewhere to provide the required support.

In these schools routine care needs are generally met by the teacher in the classroom – in the same way that teachers meet the care needs of all students. e.g. where a student requires medication from time to time or where a student presents with occasional episodes of challenging behaviour. Students can also require additional support at times of transition – including for some students transitions during the school day.
In these schools a care need is only regarded as being additional or exceptional where teaching and learning in the classroom are disrupted to an unacceptable level and on a frequent and ongoing basis and/or where meeting the need requires the teacher to leave the classroom leaving the rest of the class unsupervised. Student age and capacity also influence whether a need is regarded as routine or exceptional, e.g. it is quite usual for a young child to need assistance with toileting from time to time but this would be exceptional for an older student in a higher primary class or post-primary setting.

Where meeting students’ additional care needs causes undue disruption to the teaching and learning process, these schools recognise that teachers need supplementary support from a special education teacher or in certain cases from an inclusion support assistant. This support is provided in a timely and appropriate manner and for as long as it is necessary.

To the greatest extent possible, additional care needs are met in the classroom but student and parent views on how best to meet needs are also taken into account. When all interests are balanced students’ perspective on how they wish additional care needs to be addressed is given priority.

Other Difficulties In Engaging In Learning

Groups consulted for this review consistently described a cluster of student needs that in their view required additional supports to enable some students with learning needs to keep up with other students in classroom work. Here these needs are described as other difficulties in engaging in learning. The working group accepts there can be a continuum of need within this category of needs. Very significant difficulties in this area can have a significant impact on a student’s learning or attending to a cluster of students with high levels of needs within one class-group can cause an undue level of disruption to teaching and learning in the classroom.

However at the less extreme end of this continuum the working group considers the needs can be met by the teacher in the classroom or by technology. For example, a recurring scenario used to illustrate the need for an SNA was where a student was having difficulties taking down homework from a blackboard. The working group considers that these needs should be met by the class teacher with the assistance of special education teachers as necessary and by the appropriate use of technology. The working group also suggests that schools explore the use of technology in these cases, e.g. taking a photo of the blackboard or emailing homework home.
Appendix 5: Current System of Supports for Students with Special Educational Needs in Schools

The DES supports students with special educational needs through:

1. Additional funding
2. Improving school capacity
3. Additional advice and guidance to schools.

Additional Funding

The DES provides for the delivery of education to students through its funding of school services including the funding of salaries for principals, class, and subject teachers; ancillary school staff; capitation grants for school running costs; the provision of school buildings; school transport arrangements and so on.

The DES currently spends €1.7bn on supporting students with special educational needs in school, including those with additional care needs. This amounts to almost 19 per cent of the Department of Education and Skill’s gross current funding allocation. Most of this expenditure (about €1.5bn, an estimated 88 per cent) relates to pay, with additional teacher pay of around €1.0bn (61 per cent of total) and special needs assistants’ pay of €464m (27 per cent of total)\(^{17}\).

Special Education Teachers

The DES recognises that there are students who need additional help and assistance so it funds over 13,500 additional special education teachers in mainstream schools to work with class and subject teachers to meet the educational needs of these students.

Special Classes/Schools

The DES funds significantly reduced class sizes for special classes and special schools which educate students with certain disabilities.

Special Needs Assistants

The DES also funds about 14,000 SNAs to assist teachers to include some 3.5 per cent\(^{18}\) of students identified as having additional care needs over and above those that could reasonably be expected to be managed by the school within their existing resources.

As this model is currently configured, students with special educational needs and assessed significant care needs are given access to the support of a SNA.


\(^{18}\) This figure is based on the number of students who accessed SNA support in the 2016-2017 school year, as a proportion of the total school population.
DES-Funded Schemes
These schemes support students with special educational needs including special school transport arrangements, teacher professional development, adaptations to school buildings, the funding of specialist equipment and assistive technology.

Improving School Capacity
The DES Inspectorate provides quality assurance and promotes best practice and school improvement by advising teachers, principals and boards of management. The Inspectorate’s Looking at Our School 2016\(^{19}\) sets out the responsibility of boards of management and principals to foster a commitment to inclusion, equality of opportunity and the holistic development of each student and sets out the relevant key standards to be met in these areas.

Many of the standards set out in the quality framework will guide schools to ensure that students engage purposefully in meaningful learning activities. They are also intended to guide teachers to select and use teaching approaches appropriate to the learning objective and to students’ learning needs, to respond to individual learning needs and to differentiate teaching and learning activities as appropriate.

The DES funds the National Educational Psychological Service (NEPS) whose role is to strengthen school capacity to support the wellbeing and personal, social and educational development of all children through the application of psychological theory and practice in education, having particular regard for children with special educational and additional care needs and those at risk of marginalisation due to disadvantage. NEPS psychologists work with school communities to develop support structures and processes to maximise their capacity to respond to the needs of all learners and those with particular needs. They engage in systemic work to improve outcomes for all learners through delivery of training for teachers in the provision of universal and targeted evidence-informed approaches and early intervention. NEPS psychologists work directly with some students experiencing complex learning, social, emotional and/or behavioural difficulties in order to identify need, inform interventions and provide advice to teachers and parents to effect positive change for those students. NEPS has published three separate guidelines\(^{20}\) to support schools to implement the continuum of support.

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The DES funds the NCSE to support schools to enable students with special educational needs achieve better outcomes. The NCSE does this by:

1. Providing additional education supports to schools that enrol students with special educational needs;
2. Ensuring an adequate range of educational placements is available for students with special educational needs;
3. Providing specialist support services to schools;
4. Providing the Minister for Education and Skills with expert, independent, evidence-informed policy advice on special education for students and young adults;
5. Commission, conducting and sharing research on all aspects of special education;
6. Reviewing and advising on the continuing options available in higher, adult and continuing education, rehabilitation and training for adults with special educational needs;
7. Providing information on special education to all who need it.

**Additional Advice and Guidance**

The DES recently issued guidance to schools on devising and implementing a whole-school approach to special educational needs to accommodate the diverse needs and learning differences of all students.

The DES advised schools to use the DES/NEPS Continuum of Support Framework when providing additional teaching support for students who require such support in the school. This framework (Figure 3) recognises that special educational needs occur along a continuum, ranging from mild to severe and from transient to long term, and that different levels of support are required, depending on the identified educational needs within the school:

- The needs of most students are met through whole-school and classroom planning and supports and include preventative and early intervention approaches. This is called whole-school and classroom support.
- In addition, some students have needs that require additional support over and above that which can be provided through whole-school/classroom support. This is called school support. It typically involves the class teacher and special education teacher, in collaboration with student and parent, devising and implementing a student support plan. This support may be in the form of team-teaching, group learning, access to time-bound evidence-based programmes and additional teaching.
For students with the greatest level of need, their needs are met through more individualised and intensive supports. This is called school support plus. It typically involves the class teacher and special education teacher, usually with the support of NEPS, NCSE support service and sometimes with the support of other services including HSE support services, in collaboration with the student and parent, devising and implementing a student support plan.

This model is premised on the principle that students with the greatest level of need have access to the greatest level of support.

**Figure 3: The DES/NEPS Continuum of Support Framework**

NEPS supports schools to implement the continuum of support through a problem-solving model of assessment and intervention that enables schools to gather and analyse data, as well as to plan and review the progress of individual students (Figure 4). The problem-solving team of teachers within the school needs to have the skills and competence to implement the Continuum of Support Framework and is supported in doing so by a range of support services that include the NCSE, NEPS, PDST, Inspectorate and other statutory service providers where possible and appropriate including HSE and Tusla.
The working group’s proposed model of support for students with additional care needs is similarly based on a Continuum of Support Framework to identify and meet student needs. The working group has adapted some of the language used in the DES Continuum of Support Framework to reflect its preferred way of describing some components of the approach.
Appendix 6: Information Note on NCSE Support Service

A regional support service is being developed within NCSE that will have the permanent staff necessary to deliver a full year-round service. This will be organised on the basis of five regions, each with two NCSE teams. The regional teams will comprise specialist teachers, special educational needs organisers (SENOs) and therapists in the areas of behaviour, speech and language and occupational therapy.

The service will also include specialist teams staffed by specialists drawn from the regional teams to support students with more complex needs. These teams will also draw on the expertise of NEPS psychologists. Specialist teams will provide support across several areas where students have more complex or multiple needs including deaf/hard of hearing students, blind/visual impairment, ASD, behaviour, speech and language and learning disability.

Supports available for schools and students from the NCSE support service will include:

- Continuing professional development (CPD) and where appropriate following CPD in-school support provided by experienced advisers, including speech and language therapists, behaviour advisers and occupational therapists;
- Staff trained and competent to assess whether schools have optimised use of their existing supports for students with additional care needs and if not to identify further training and supports available to assist schools in this process;
- Signposting to other agencies, as appropriate;
- Assistive technology and/or equipment and/or building adaptations.