Evaluation of the Special Educational Needs Parent Partnership Services in England

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### GLOSSARY

<table>
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<th>Acronym</th>
<th>Definition</th>
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<tr>
<td>ACE</td>
<td>Advisory Centre for Education (London)</td>
</tr>
<tr>
<td>ADD</td>
<td>Attention Deficit Disorder</td>
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<tr>
<td>ADHD</td>
<td>Attention Deficit Hyperactivity Disorder</td>
</tr>
<tr>
<td>AEN</td>
<td>Additional Educational Needs (sometimes used in preference to SEN)</td>
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<tr>
<td>ASD</td>
<td>Autistic Spectrum Disorders</td>
</tr>
<tr>
<td>CCCU</td>
<td>Canterbury Christ Church University</td>
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<tr>
<td>CDC</td>
<td>Council for Disabled Children</td>
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<tr>
<td>DDA</td>
<td>Disability Discrimination Act</td>
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<tr>
<td>DfES</td>
<td>Department for Education and Skills</td>
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<tr>
<td>DR</td>
<td>Disagreement (or Dispute) Resolution</td>
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<tr>
<td>EP</td>
<td>Educational Psychologist</td>
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<tr>
<td>EWO</td>
<td>Education Welfare Officer</td>
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<tr>
<td>GO</td>
<td>Government Office Region</td>
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<tr>
<td>IEP</td>
<td>Individual Educational Plan</td>
</tr>
<tr>
<td>IPS</td>
<td>Independent Parental Support (Parent Befriender)</td>
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<td>LA</td>
<td>Local Authority</td>
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<td>LEA</td>
<td>Local Education Authority</td>
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<td>Napps</td>
<td>National Association of Parent Partnership Staff</td>
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<td>NCB</td>
<td>National Children’s Bureau</td>
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<td>NPPCG</td>
<td>National Parent Partnership Collaboration Group</td>
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<td>NPPN</td>
<td>National Parent Partnership Network</td>
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<tr>
<td>PPS</td>
<td>Parent Partnership Service(s)</td>
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<tr>
<td>PSP</td>
<td>Pastoral Support Plan</td>
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<tr>
<td>RNIB</td>
<td>Royal National Institute for the Blind</td>
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<tr>
<td>SA</td>
<td>School Action</td>
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<tr>
<td>SA+</td>
<td>School Action Plus</td>
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<tr>
<td>SEN</td>
<td>Special Educational Needs</td>
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<tr>
<td>SENDIST</td>
<td>Special Educational Needs and Disability Tribunal</td>
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<tr>
<td>SENRP</td>
<td>Special Educational Needs Regional Partnership(s)</td>
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<tr>
<td>SPSS</td>
<td>Statistical Package for the Social Sciences</td>
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<td>WEA</td>
<td>Workers’ Educational Association</td>
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EXECUTIVE SUMMARY

There is continued commitment by the government to inclusion and improving achievement and educational outcomes for individual Special Educational Needs (SEN) pupils. The role of parents in their child’s social, emotional and cognitive development has been recognised through Parent Partnership Service (PPS) initiatives and emerging agendas for early intervention and multi-agency working. Recommendations in this report seek to build on progress made by mature and developing services by addressing issues linked to strategic working, capacity building, funding, impact evaluation and self improvement.

1. This report sets out the details of an evaluation of PPS in England. These services are designed to ensure that parents and carers of children with SEN have access to information, advice and guidance on SEN matters in order to support them in making informed decisions about their child’s education and to reduce the need for formal disagreement resolution. PPS are supported by The National Parent Partnership Network (NPPN) funded by DfES and the National Association of Parent Partnership Services (Napps) that is supported by a small grant from the DfES to cover central costs. PPS meet together in nine National Partnership Regional groups.

2. Parent Partnerships schemes have been in existence since 1994 but since the Special Educational Needs and Disability Act 2001 (SENDA) LAs have a duty to ensure that parents in their area have access to Parent Partnership Services (PPS). The LAs has responsibility for standards of the PPS service, funding, resources, management and monitoring.

3. This PPS evaluation is the first to be carried out in England since PPS became a statutory service. Localised evaluation of individual services has been ongoing in the interim period. Vernon (1999) carried out funded research for the NCB/DfEE into perspectives on developing practice for parent partnership and Wolfendale and Cook carried out an evaluation for the DfEE of parent partnership schemes in 1997. Furthermore, the National Assembly for Wales and National Association of Special Educational Needs funded an evaluation of all Welsh PPS in 2001 (see Wolfendale and Bryans, 2002).

4. The overall aim of this evaluation is to assess the effectiveness and impact of the PPS. This evaluation is referenced to the 2001 revised SEN Code of Practice that set out the responsibility of the LEA (LA) for the parent partnership service (paragraph 2:18) and minimum standards for PPS (paragraph 2:21).

5. The evaluation reported here was carried out between December 2004 and August 2005 by a team of researchers from the Department of Educational Research at Canterbury Christ Church University. Data sources used were:
   - anonymised national benchmarking survey data of 148 PPS (110 respondents representing 75% response rates)
   - telephone interviews with 32 (22%) of all PPS
20 in depth case studies involving a range of PPS staff, volunteers, LA staff, school staff and relevant stakeholders and an in depth audit of case study websites

6. Overall findings confirm previous evaluations (Wolfendale and Cook 2002) that PPS are valued by parents and enhance local SEN provision and services. Case studies and telephone interviews provided strong evidence that PPS are rooted in a culture of commitment to parent partnership through hard work by individuals to secure outputs and processes linked to the minimum standards for PPS set out in the SEN Code of Practice 2001.

7. As found by Wolfendale and Cook (2002), there remain wide variations in practices and outputs within PPS. There is strong evidence that variations within PPS are linked to staffing, workload and budgets which in turn are linked to overall spend rather than spend per pupil on roll. This finding suggests that in smaller LAs the PPS may need more external support and collaborative working in order to deliver the range of services that are possible in larger areas.

8. It has been possible to map these variations in practice, relating them to the minimum standards (DfES 2001). This has led to a model where there are six criteria each with three levels. The six criteria are training, IPSs, networking, impact, publicity and monitoring. Using the following model developmentally it could be said that a PPS operating mainly at level 3 would be largely reactive, providing an advice and support service to parents, whereas a PPS operating mainly at level 1 would additionally be operating more proactively, thinking strategically, providing training for and working closely with schools and other agencies.

9. It is important to note that no PPS was found to be operating in the same model for every aspect of their work.
Table i. Framework data synthesis

<table>
<thead>
<tr>
<th>Composite Criterion</th>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
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| 1 Input Variables   | • Funding levels mean that the PPS is innovative and creative, with a pro-active advice and guidance service  
• Experienced staff with transferable skills and knowledge are able to find new solutions to problems  
• Work is at a strategic level, with effective management and monitoring systems and action taken on feedback | • Funding allows the PPS to cover casework and some strategic work but the latter is given less priority in busy periods  
• Staff have been able to build good relationships with some agencies and schools but this tends to be reactive  
• Limited resources tend to restrict the work of the PPS | • Limited funding so little long term investment or strategic planning  
• Caring staff support parents and carers but in general can only address immediate problems and react to given situations |
| 2 Training / IPSs   | • Provides needs-led training, designs and runs courses for parents, schools, LA staff and other agencies, often by invitation  
• Transfer of policy and practice knowledge to parents and professionals  
• Effective deployment of skills of IPSs, ongoing training programmes | • Training courses offered to parents, IPSs, some front-line workers  
• Increased knowledge about SEN for parents and others  
• Some use of IPSs | • Limited or no involvement in training, mainly training for IPSs  
• Some increase in knowledge, mainly for IPSs  
• Little or no use of IPSs |
| 3a Networking – other agencies | • Pro-active, understand the importance of close relationships with other agencies and work to foster and maintain these  
• Play a key role, sitting on major boards and steering committees  
• Culture of collaboration and partnership with the PPS involved in policy and decision-making | • Have built good relationships with some organisations which enables the PPS to provide a wider service to parents  
• Relationships may still be being developed  
• Some involvement in policy and decision-making, attending some steering group meetings | • Staff know where to signpost parents but lack of resources makes it difficult to build close relationships  
• Some collaboration with certain organisations |
| 3b Networking – schools | • Staff work in both a reactive and pro-active way with schools, building effective and supportive relationships  
• PPS facilitates a culture of co-operation which reduces the need for tribunals  
• Schools routinely invite PPS to SENCO and governor training, transition meetings, open days | • Tend to be reactive but the PPS is able to work well with some schools to help them improve their relationships with parents  
• The number of tribunals is likely to be reduced through co-operation in the early stages of a dispute | • Relationships tend to be based on individual cases, with limited referrals from some schools |
| 4 Impact – parents | • PPS work to support individual parents but also to empower parents as a group, by helping them to sit on steering groups and influence policy  
• Seek out and participate in parents’ groups | • Mainly work with parents on an individual basis, but some involvement with parents groups | • Provide support for parents on an individual basis |
| 5 Publicity and accessibility | • Funding and staffing levels/experience permit good publicity including websites etc  
• Needs-led up-to-date leaflets and flexible approach to publication and information sharing | • Produce and issue informative leaflets and other forms of publicity to schools and other locations  
• Staff consider the most effective way to publicise the service | • Produce and issue information leaflets and other forms of publicity to schools and other locations but with limited attention to their effectiveness or distribution |
| 6 Monitoring | • Actively seek feedback from parents, schools and professionals  
• Feedback informs LA policy, decision making and PPS practice | • Obtain parental feedback, perhaps on a sample basis, and use it to inform PPS practice | • Gather some evaluation data, eg by issuing a limited number of satisfaction questionnaires |
10. Summary of findings:

a) **Staffing:** There was significant variation in staffing levels between PPSs, even within the same Government Office Region (GO). PPSs with limited staffing tended to prioritise casework over strategic work and were less able to develop an active strategic work agenda. Administrative support also had a strong effect over the workload of the PPS in that those without any administrative support scored less well for their publicity and monitoring. Over half of those interviewed who described their main barriers to achievement mentioned a lack of resources and staffing levels. PPSs with two or more paid workers tended to have very effective ways of dividing their work, with each worker having a specific, clearly designated task and area of expertise. Strong associations were found between enhanced effectiveness of PPS and determined individuals with clear leadership and management qualities working within the PPS.

b) **Budget:** Strong associations were found between the level of service the individual PPSs could provide and their overall funding levels, rather than funding levels in proportion to the populations they serve. The strength of the association suggests that in smaller LAs, the PPS may either need to receive more external support or to work more collaboratively with others if they are to deliver the range of services that are possible in larger areas. There was no evidence of transparent systems for calculating budget allocations. PPS funding limitations reduced their ability to recruit, train and supervise IPSs, provide training to other groups, and to devote sufficient time to developing their strategic work.

c) **Monitoring:** Monitoring is undertaken by 95% of the 105 PPSs that responded to the benchmarking exercise. Although 24 out of 52 PPS interviewed monitored through parent satisfaction surveys, with the majority of these routinely following up any negative feedback. Wider monitoring of the impact of training and outcomes of networking remain areas for development. Monitoring was largely used summatively rather than formatively and data collected for LAs was driven by summative assessment of minimum standards outputs rather than impact measures. There was no clear chain whereby monitoring data given to LAs influenced funding, policy or future targets. LAs need to make clear the purpose of monitoring and to play an active role in ensuring that PPSs are fully supported and informed about how to monitor impact.

d) **Information sharing:** Interview data suggested that information sharing between the LA and PPS was problematic for the majority of PPSs. This was often attributed to relationship issues but also lack of systems for data sharing between LAs and PPS. Approximately half of the PPSs interviewed stated that they had experienced some problems getting information from the LA and around 20% expressed major concerns with communication and information sharing with the LA. Strong relationships and good levels of communication were found where there were supportive individuals in the LA, but also where there were strong, determined personalities working within the PPS.

e) **Role of NPPN and Regional Groups:** NPPN is considered a valuable source of practical information and guidance on new legislation and the E-Forum and Regional Parent Partnership Groups were considered particularly useful in providing professional and practical support. This support is especially valuable given that many Parent Partnership Officers (POs) feel relatively unsupported by their LA. There is potential
for providing more staff development opportunities for more experienced PPOs and exploring opportunities for career progression within PPS.

f) **Training:** There was strong evidence that training was considered to be an important part of PPS work. 50 out of 52 PPS interviewed were involved in training with almost 90% offering their training to a wide range of people including school and LA personnel, voluntary agencies and parents. However from those who responded to the benchmarking survey the mean time spent delivering training was 9.7% with limited opportunities for accreditation. There was evidence that accredited training is more likely to be provided in PPSs with larger overall funding levels. However, the training on offer was not always strategically planned. Although PPS were strong on monitoring quality of training through satisfaction questionnaires, they were not strong on evaluating the impact of their training.

g) **Independent Parental Supporters (IPSs):** The original intention was that IPSs should be involved in casework and would a key feature of PPS. This aim has been facilitated through recent guidance materials (CDC & ACE 2005). There was evidence that IPSs can make a contribution to PPS from the association between evaluative ratings for impact and the number of IPSs reported in the 2004 benchmarking data. However there were significant variations in the numbers of IPSs with very strong evidence of a positive relationship between number of IPSs and overall spend of the PPS. Furthermore, although valuing the contribution of IPSs, around half of PPOs questioned in telephone interviews and case studies also expressed some reservations concerning how they could best utilise the skills and support offered by IPSs. This was largely due to training and supervising costs. Although many PPOs preferred to have IPSs working on less complicated casework or managing help lines, there remained a lack of consensus regarding how the experience and support offered by IPSs could be best utilised. Some PPOs suggested that IPSs could be *less* involved in casework and more on other areas, such as publicising the PPS as this would free up the PPOs to concentrate on casework and strategic work. Some PPOs expressed concern about relying on unpaid staff to conduct often complicated and demanding casework. It is important that the experience PPOs have of working with IPSs is used to inform service development so that volunteers can have an enhancing rather than compensatory role.

h) **Networking:** The value and importance of establishing good working relationships with other agencies was recognised by all PPOs.

- All PPOs signposted parents to LAs, health and social services, other PPSs, voluntary services and community organisations.
- Networking, as measured by participation in parent carer forums, was recorded by 47% of responding PPSs and was more likely to happen within a PPS profile characterised by higher overall spend, higher reported volumes of business, more time spent on strategic work and less time working directly with parents.
- Factors influencing good working relationships with other agencies were noted by PPOs as being linked to time in post, previous experience and personality.
- Although barriers still existed in relation to contact with some schools, PPSs were very good at establishing strong relationships with schools once initial contact had been made.
- In addition to time constraints, a lack of understanding of the role of PPS was noted as a key barrier to establishing these relationships.
• LAs need to play a much more proactive role in ensuring that schools and other agencies are fully aware of the purpose and value of PPS.
• There is potential for PPSs to develop a more strategic and less reactive approach in building relationships with school.

i) **Impact on parents:** Assessing parental views from PPS satisfaction data monitoring suggests overwhelmingly strong and consistent satisfaction with the ‘experience’ of involvement with PPSs. Through the case studies 23 parents were interviewed and a further nine contacted the evaluation team directly. All parents interviewed positively endorsed PPS in relation to informing parents of their rights and responsibilities, increasing their awareness of SEN, and empowerment including providing emotional and moral support. All 23 interviewed commented positively on the neutrality of PPS. There was an imbalance between the overwhelmingly positive comments by parents interviewed and critical comments expressed by the very small number of parents who contacted the evaluation team directly. These differences may be attributed to sampling method and reflect that parent satisfaction data may be related to both quality of PPSs experience and/or the achievement of a particular desired outcome.

11. Overall the evaluation supports the view that PPSs have developed in response to the requirements for the minimum standards set out in the SEN Code of Practice 2001. There is evidence of areas of good practice in PPSs and of LAs that seek to enhance the impact of PPS through strategic capacity building activities. These include networking and multi-agency working, training, workload planning that balances strategic and reactive endeavours, purposeful monitoring and use of feedback, development planning and good communication with their LAs, collaboration of voluntary agencies and support groups. PPS is enhanced by support from national bodies (NPPN and Napps).

12. PPSs have continued to retain their reputation in providing a valuable service to parents but acknowledge that there is need for improvements in extending their relationships with schools, and accessing a wider group of parents including the ‘hard to reach’. There are wide variations within the PPS linked to funding staffing and resources, which results in parental partnership activity that cannot ensure equality of opportunity for parents of SEN children. LAs are not all equally persuaded of the benefits of PPS and the way in which they interpret the minimum standards is highly variable. This is turn threatens a national agenda that seeks to reduce inequalities of educational outcomes for children with SEN identified by the Audit Commission 2001 and highlighted in ‘Removing Barriers to Achievement (DfES 2004b)."
Key Messages for DfES

- Minimum standards are currently open to too broad an interpretation and there is room for developing supplementary guidance in order to measure the extent to which PPS meet the minimum standards.
- Further consideration needs to be given to the role and deployment of IPSs and the extent to which they should be involved in casework. IPSs should have an enhancing rather than compensatory role and should not be seen as an alternative to paid staff.
- It needs to be made clear to LAs that they have a responsibility to ensure the effectiveness of PPSs.

Key Messages for LAs

- Impact and effectiveness of PPS is strongly associated with staffing levels, and PPSs need sufficient staffing to meet their strategic work, casework and administrative work demands.
- Effective networking is vital and LAs can play a more active role in supporting PPSs in networking and building relationships with other agencies.
- There needs to be a clear chain whereby PPS are routinely provided with accurate information on all SEN processes and policy changes.
- ALL schools need to be informed about the existence of PPS and to understand fully the value and purpose of PPS.
- The status, cost effectiveness and accountability of PPS would be greatly enhanced by more regular monitoring and review of performance.
- PPSs need a clear sense of the value and purpose of impact monitoring and a clear line of sight from data collection through reporting to review of strategy and resources.
- There should be a transparent way of allocating funding to PPS, whereby LAs consider impact monitoring as indicators of their achievements and funding needs.

Key Messages for PPS

- The demands of casework need to be balanced with the need for strategic work that will ensure more long term impact and reach a wider range of parents.
- The status and accountability of PPS would be improved if PPSs developed monitoring arrangements that extended beyond monitoring of minimum standards and included monitoring of impact. This might include monitoring the impact of training provided, impact of involvement with schools and other agencies and the extent to which they are accessing hard to reach groups.
- There is room for exploring a more strategic approach to training, whereby rather than responding to specific requests, PPSs also identified the training needs within the community. This training also needs to be monitored with a view to supporting capacity building.
- While it is recognised that the use of IPSs has been a cost effective mechanism for building capacity, it is timely to consider how best their roles can be defined and developed in support of both casework and strategic functions.
Recommendations

1) PPS located in smaller LAs either need additional funding or need to work more collaboratively with other agencies in order to deliver the range of services possible in larger LAs.

2) Consideration should be given to staffing levels within PPS with the minimum recommendation of a strategic worker, caseworker and administrative support.

3) Impact monitoring needs to be strengthened if PPS are to build on and develop their practices.

4) LAs need to work collaboratively with PPS to enhance the value and efficacy of monitoring data.

5) The current minimum standards are definitions of role rather than measures of performance. Supplementary guidance should be issued so that it is possible to monitor the extent to which PPS meet these minimum standards.

6) LAs need to take more account of value for money when monitoring the impact of PPS.

7) It is important to reconsider the role, strategic use of time, and opportunities for development of IPSs in a way that enhances cost effectiveness, recruitment and retention.

8) PPS need to be afforded every opportunity to play an active role and fully contribute to the Every Child Matters agenda.

9) Recruitment and retention could be enhanced through career progression opportunities within PPS.

10) LAs need to take more responsibility for ensuring that PPS are provided with up to date information on SEN policy and processes.
1. INTRODUCTION

This report sets out the details of an evaluation of Parent Partnership Services (PPS) in England was carried out by a team of researchers from the Department of Educational Research at Canterbury Christ Church University, between December 2004 and August 2005.

Parent Partnership Schemes were first promoted in the SEN Code of Practice published in 1994. These were designed to encourage the development of active parent partnership practices for children with statements (significant SENs). The objectives were to provide information and advisory services, initiate the named person scheme to reduce conflict and minimise the number of SEN tribunals. Since SENDA, 2001 LAs have a duty to ensure that parents in their area have access to parent partnership services and to appoint an independent person to assist in the resolution of disputes between parents and LAs and/or schools. PPS are currently meant to work with parents of all children with SEN, provide information and publicity, training, advice and support, networking and collaboration, as well as help to inform and influence local SEN policy and practice.

Parent Partnership Services became statutory when the SEN and Disability Act 2001 amended the 1996 Education Act (adding section 332A) to include a general duty for the LEA:

- to arrange for the parents of any child in their area with SEN to be provided with advice and information about matters relating to those needs
- to take such steps as it considers appropriate for making services known to:
  - the parents of children in their area
  - the head teachers and proprietors of schools in their area
  - such other persons they consider appropriate

In 2001, following Parliamentary approval, the DfES published a revised SEN Code of Practice. This set out the responsibility of the LEA for the PPS (paragraph 2:18) and minimum standards for PPS (paragraph 2:21). The LEA has responsibility for the funding, resources, management, monitoring and standards of the PPS service, although they do not necessarily have to provide a PPS themselves. In establishing PPS LAs are encouraged to work with voluntary groups and organisations to deliver the services which best meet the needs of parents. Where the PPS is provided in-house LAs are encouraged to ensure the PPS is run at arms length to ensure parent confidence in the impartiality of advice and information given. There is no guidance on the minimum number of hours that is required to meet the minimum standards.

In some areas PPS have been running almost continually since 1994 using funding from Grants for Education and Support and Training (GEST) 1994-7 and subsequently the Standards Fund 1998 -2001. Other PPS have been in existence for little more than two years.

PPS are supported by two organisations. The National Parent Partnership Network (NPPN) was established in 1995 under the aegis of the Council for Disabled Children. The DfES funds NPPN to support parent partnerships including website maintenance, a database of PPS services, and other activities to support communication. The National Association of Parent Partnership Staff (Napps) is a professional organisation for those working in parent
partnership, supported by a small grant from the DfES to cover central costs. PPS meet together in nine National Partnership Regional groups.

This evaluation seeks to build on previous evaluations and examine developments within PPS since their existence became a statutory function of LAs. The overall aim of the evaluation is to examine the effectiveness and impact of the PPS in delivering relevant and timely advice and information to parents and to examine the extent to which they have met their objectives.

This evaluation of all PPS in England is the first to have been carried out since they became a statutory service but there has been localised evaluation of individual services. Wolfendale and Cook undertook an evaluation for the DfEE of parent partnership Schemes in 1997 and Vernon (1999) carried out funded research for the NCB/DfEE into perspectives on developing practice for parent partnership. The National Assembly for Wales and National Association of Special Educational Needs funded an evaluation of all Welsh PPS in 2001 (see Wolfendale and Bryans, 2002).

The evaluation was carried out within a context in which PPS are ‘nationally given’ but ‘locally driven, thus they differ in relation to maturity, experience, funding and relationship with the LA. Criteria for this evaluation were prescribed through the Code of Practice minimum standards for PPS and the defined responsibilities of the LA for the PPS. PPS are now rooted within a national agenda of Every Child Matters (ECM) (DfES 2004a) that includes workforce remodelling and extended schools. Significantly for PPS the ECM agenda is outcomes led against the Government’s five outcomes for children to be healthy, stay safe, enjoy and achieve, make a positive contribution, and achieve economic well being. Changes to practice will include the reconfiguration of services around children and their families in one place and a strengthening of inter-agency and multidisciplinary working.

The evaluation examined the processes involved in service design and delivery, and tried to identify the factors that commonly are either ‘bridges’ or ‘barriers’ to success. The evaluation explored the outcomes and impact of PPS on parents and children and schools, and on policy-making within and beyond individual LAs. Findings are discussed in relation to how best PPS can build on progress made and experience gained in order to ensure that they continue to build partnerships with parents of SEN pupils within the contexts and aims of Every Child Matters.

There are many issues within academic debate relevant to this study. These include:

The nature of parent partnership: although the idea of parent partnership has appeal there are conceptual, evaluative and practical problems with the partnership model as reported in the literature by Wolfendale (1984) Bastiani (1987) and Croll (2001). A focus on partnership within educational contexts still needs to address barriers perceived by both teachers and parents about their role and status and impact on learning outcomes for the child. The establishment of services for ‘SEN parents’ tagged to a national agenda for improved outcomes assumes some homogeneity of parental need and expectation that is not supported by parental diversity studies (Vincent, 2001).
The focus of parental partnership endeavours: this debate is concerned with achieving relevance, consistency of advice and support through the LA and schools while ensuring the much valued impartiality of service.

National agenda v/s local need: this remains a dilemma for policy makers in seeking to reduce inequalities of provision and outcomes for SEN pupils (Audit Commission 2001, Removing Barriers to Achievement, 2004b) through national policy while still allowing for services to develop individually in response to local imperatives and need.

SEN specific v/s inclusion: debate exists about the paradox of having PPS for parents of pupils with SEN located within a national agenda for inclusion. This has implications for the development of parent partnerships as a whole within the agenda for Every Child Matters and a concern for early identification and intervention. (Norwich, Griffiths and Burden, 2005).

Impact measures: PPS are framed within a policy agenda of reducing parental conflict with the LA and a reduction in statementing procedures (Ofsted/Audit, 2002). These may be used as impact measures by Government but they may conflict with impact measures that are expected by parents or from inclusive schools and LAs. External evaluations are necessarily time framed whereas outcomes of good parental partnership for individual children and their parents are likely to be longer term. This results in evaluation concentrating on measures of service outputs rather than impact.
2. LITERATURE REVIEW

2.1. Introduction
As part of the evaluation of PPS the evaluation team has undertaken a review of the literature, searching for relevant material to find ideas and evidence about partnerships with parents of children with SEN and looking at earlier evaluations of the PPS (Vernon 1999, Wolfendale and Bryans 2002, Wolfendale 2002).

2.2. Policy and parent partnership
With its beginnings in the late 1970s, parent support has developed along the following timeline, as outlined by the Council for Disabled Children (2005):

- The importance of parents as partners was identified in the Warnock Report in 1978 (HMSO 1978), which highlighted the importance of information, advice and support and practical help for parents.
- The Education Act 1981 required authorities to provide parents with a Named Person when they issued parents with the final version of their child’s statement.
- The 1993 Act introduced a Code of Practice founded upon the principle that parents’ knowledge, views and experience are crucial, and which aimed to increase parental involvement. The 1993 Act also introduced an independent system of appeals in the SEN Tribunal.
- LEAs started setting up parent partnership schemes in 1994, with funding from central government. Emphasis was on developing information for parents and recruiting, training and supporting Named Persons.
- The Education Act of 1996 brought together all prior educational legislation.
- A green paper, SEN, Excellence for all children: meeting special educational needs, published in 1997 signalled a new direction in national policy. This was important for the re-establishment of parent partnership services and the re-instatement of funding.
- A research report published in 1999 investigated the work of PPS and relationships between parents and schools, LEAs and voluntary organisations. A key finding was the wide variation between services, particularly in terms of organisational arrangements, staffing and resource (Vernon, 1999).
- The Special Educational Needs and Disability Act of 2001 made PPS statutory, with LEAs having a duty to ensure that any parent in their authority with a child with SEN is given advice and information about their child’s special needs, and to ensure that PPS are known to parents and head teachers.
- PPS minimum standards were established in the 2001 SEN Code of Practice, with recognition of the need for services to be responsive to parents, to provide information and to influence local systems.
- The 2001 Audit Commission Report found that parents had benefited from the support of local PPS, and identified aspects that parents found valuable and those which they found stressful and alienating.
- A ten year strategy, Removing Barriers to Achievement, details the government’s continuing commitment to PPS and its development and improvement (DfES, 2004b).
2.3. Research into Parent Partnership Services

A study commissioned by the DfEE in 1996-97 to evaluate the impact and effectiveness of PPS found support for the view that they do make a difference, with parents perceiving the post of PPO to be a positive source of information, support and reassurance (Wolfendale, 2002). Vernon (1999), in a study involving voluntary organisations and schools in six LEAs, found that PPS may contribute most to parent partnership through their potential to facilitate and coordinate the contribution of others. This supports the findings of Mortimer (2001) who says that central to partnership is the quality of the interaction which takes place on a day to day basis: in working in partnership there is a need for sensitive communication, and for understanding that partnership is much more than the different types of collaboration which can exist between parents and professionals when meeting SEN or raising achievement.

Research has found variation in the service offered by the PPS, the extent to which partnership occurs and the issues which affect partnership. Wolfendale (2002, p11) writes that, ‘it cannot be said that there is, or should be, one Parent Partnership Services model’. Vernon (1999, p3) similarly found that while all PPS were involved to some degree in ‘the provision of advice, information and support for parents’ and have links with the voluntary sector, schools and the LEA, there are many differences between them, including, for example, the extent to which they work with parents in groups or as individuals and to which they adopt advocacy, conciliation or facilitating roles. In their report for the DfEE, Wolfendale and Cook (1997) found that PPS do not conform to a specific model. They do share core activities: casework with parents, information and publicity services, training and support and networking and the facilitation of interest groups, but local PPS placed different priorities or emphasis on these activities.

Bishop (2002) has described the strengths of the Special Needs Advisory Project (SNAP) Cymru in Wales as that it is driven by parents and independent of the LA (and thus seen to be primarily impartial). It also covers many LA areas and, with common objectives and quality standards as well as opportunities for the cross-pollination of ideas, is said to provide an opportunity to develop a consistent quality of service.

In addition to reports of the ways local PPS are organised and operate, mention is also made in the literature of the types of challenges PPS face. Jackman (2002) observes, ‘The negative factors for Parent Partnership nationally and locally include confusion over what exactly inclusion encompasses and how to empower parents and children in the education process without disenfranchising the existing power-brokers (including school staff)’ (p88). Tensions faced generally by PPS are seen to be:

- providing individual support for parents and developing a culture of partnership across schools and the LEA;
- the proper management of services by LEAs and the provision of independent advice;
- the statutory requirement for a service and the impact of funding changes;
- the need to develop partnerships with a range of agencies, the requirement to publicise services and the need to develop access for all (Jackman, 2002 p 46).
2.4. The relationship between Parent Partnership Services and LAs

LAs have wide ranging responsibilities, to schools and to children and their parents. Vernon (1999) found that the local PPS’s relationship with the LEA was central to the PPS effectively promoting partnership – a feature of those PPS which have successfully engaged with schools is clear ownership by the LEA of the overall service.

Other researchers have raised concerns about issues related to independence and impartiality. Wolfendale (2002) describes a small focus group of IPSs interviewed as part of an interim evaluation of the London Borough of Sutton PPS who commented ‘How can parents get their head round the LEA link and IPS independence since ultimately the LEA controls the scene?’ (Wolfendale 2002, p13).

Stobbs (2002) found that establishing themselves as separate organisations with charitable status allowed PPS to be independent, and therefore able to set their own work priorities and direction. They could also have a more autonomous relationship with parents, work with a variety of statutory bodies and work with the LEA without needing to follow its line. Clarkson et al (2002) show how the involvement of the WEA has enabled the Devon, Torbay, Plymouth and Cornwall LEAs to develop PPS which are seen to be independent. Similarly Lloyd (2002) describes Family In Focus (Essex) which operates as a charity separate from the LEA, and which ‘enables the emotions which drive parents to continue what they call ‘the fight’ for their child in an unequal society to be harnessed positively for the long term benefit of the whole family’, in contrast to what she suggests can be a short term solution for the benefit of the child only in terms of the educators’ roles (p128).

Disadvantages of independence from the LEA were seen to be a lack of funding and the inability to influence LEA policy and practice from within, as well as a lack of visible LEA ownership and commitment to the aims of the PPS (Vernon, 1999).

2.5. The relationship between Parent Partnership Services and schools

Establishing relationships with schools can be complex and requires perseverance and credibility with the school. Wolfendale (2002) suggests that relationships with schools may be under-developed when PPOs and PPS colleagues are employed by LEAs. Other studies (Russell, 2002, Vernon, 1999) found that engagement with schools has been under-developed partly due to insufficient opportunity and inadequate PPS staffing levels, as well as to schools not being knowledgeable about or proactive with their local PPS.

Vernon (1999) says it is important to know who speaks on behalf of the school, and who the PPS should be seeking to communicate with. She notes that becoming involved in a range of professional networks could be a way to develop relationships with head teachers or other key school staff members. Wolfendale (2002, p16) identifies a need for schools to do more to encourage parents to use the PPS and cites a survey by Rathbone/Centre for Inclusive Education and SEN (2001) which found that:

- schools do not seek out or use parental information about their children;
- many parents continue to feel excluded from involvement with schools about their children’s progress, difficulties, reviews;
- many parents are not aware of the existence or purpose of Parent Partnership Services;
• many schools fail to inform parents of local services for them, such as the Parent Partnership Services.

Leming (2002) describes how the Suffolk PPS has capitalised on its position within the LEA to assist in supporting school improvement by adopting an inclusive practice whereby they work with the entire parent body rather than focusing exclusively on issues related to parents with children with SEN or other potentially vulnerable groups, although highlighting these issues ensures that awareness of the needs of these groups is raised within mainstream activities. Russell (2002) suggests that in addition to fulfilling their broader roles and responsibilities in supporting families in dispute resolution, PPS could also work with the ‘whole school’ to promote greater access. They might, for example, ensure that there are sufficient IPSs with disability equality training and encourage young disabled people to take a more proactive role, which would help in clarifying their needs and negotiating access to the wider range of school activities.

Even when links with schools are established, the relationship can remain problematic. Hunter-Carsch (2001), has observed that ‘it takes only one teacher with a negative attitude to seriously undermine the policy of the school’ (p181) so it is important to get ‘everyone on board’.

2.6. The relationship between parents and professionals

The SEN Code of Practice (DfES, 2001) highlights the critical role of parents in holding key information and in their unique strengths, knowledge and experience. The view put forward by Dockell et al (2002) that the involvement of parents in the education of children with disabilities is not only a right but a necessary component of the delivery of effective and efficient provision is echoed in DfEE and DES publications between 1997 and 2000 and further recognised in the Code of Practice (2001) and more recently in Every Child Matters (DfES, 2004a). It is also a fundamental issue in developing an inclusive school and inclusive practices in school as promoted in the Index for Inclusion (Booth and Ainscow, 2002).

The important role that partnerships with parents play in both the success of early childhood and special needs education has been noted by Nind (2002). She describes the relationships between parents and professionals in relation to SEN as moving from a transplant model to a consumer model, and more recently to a rights model. Although identifying an imbalance of power between parents and teachers in relation to partnership, parents are now recognised as being in ‘a unique position to support and extend children’s development in ways that are in keeping with their social and cultural background’ (Nind, 2002, p81).

Other writers have considered factors which affect the empowerment of parents. According to Phillips et al (1999), the majority of parents with children with SEN want to be actively involved in helping their child, but may not be sure how to do this and, as a result, may seek ‘expert advice’ in the hopes of finding a ‘cure’: ‘One of your greatest tasks, therefore, is to ‘demystify’ both the nature and the assessments of a child’s difficulties and demonstrate what steps can be taken to help the child’ (Phillips et al 1999, p178). They, and others, note that it is crucial to establish procedures for involving parents which recognise ‘partnership’ as a two-way process in which both the school and parents are needed to make contributions to improve a child’s learning (Heywood-Everett, 1999, Phillips et al, 1999).
Wolfendale (1997) has observed that a partnership relationship that does not lead to empowerment on the part of parents is static and unproductive. In the same vein Braham (2002), writing about the PPS in Islington, says ‘Perhaps the greatest cause for celebration is the fact that parents themselves are feeling empowered to take the lead in many of the activities, particularly in schools. They are also beginning to be active in spreading the word about the talks and the courses on offer’ (p101).

Paige-Smith (1997) describes difficulties regarding partnership between parents and professionals as stemming from the unequal power relationships between the two groups - education policy and practice restrict the rights of parents to participate in decision-making about SEN and choice of provision. Paige-Smith found that while parents may have different reasons for joining or even starting parent groups, they share a common concern about the position of their child in education and society. Parents go through a process of empowerment to represent their views, and their actions result in other parents becoming empowered.

The benefits of parents and professionals working together have been described in terms of various initiatives or models. The Portage model, originally from Portage, Wisconsin, emphasises the close working partnership that develops between parents and professionals in support of the child, with professionals providing input regarding the child’s assessment and parents providing intimate knowledge of their child. This collaboration enables the development of an in-depth profile, to maximise teaching activities which take advantage of naturally occurring practices in the home. White (1997) says that while shared parent-professional assessment and intervention is a feature of good practice in SEN, the degree to which parents are involved in negotiating teaching targets and designing individual teaching activities is unique to the Portage model.

Mortimer (2001) suggests initiatives such as Playsense and Bookstart are important in developing the role of parents as educators and describes local initiatives to improve home-school links, such as a bookshelf with useful pamphlets for parents, within-setting Portage parenting groups and discussion groups for talking about areas of common interest (such as child behaviour) in order to share ideas and strategies.

Cook and Swain (2001) describe a study examining parents’ views of partnership with the LA after the adoption of an inclusive policy for young disabled people. Although almost all the parents in the study were in favour of their children attending a mainstream school, the parents expressed concern about the processes adopted by the LA. They felt that what may have been an opportunity to work together had been compromised because the LA made decisions without input from parents and parents’ ideas were not considered.

Another study also emphasises the importance of professionals taking time to listen to parents. Bowers (1995) reports that 35 parents of children with SEN were interviewed about three main areas: ‘their child’s difficulty in home and school, their successes and frustrations in dealing with an educational system which could distribute or withhold resources, and their encounters with education officers and other related professionals such as education psychologists who operated that system’ (Bowers, 1995 p139). Thirty-four of the 35 parents described having had negative experiences with education officers of local authorities. Negative behaviours were attributed to traits within the officers themselves, traits categorised as the ‘put-off specialists’, the ‘excluders’, the frighteners’ and ‘the liars’.
In contrast, positive experiences with education officers were largely attributed to elements external to the individual. The author notes that the message from this study is ‘that to be too busy is to risk conflict; in new relationships with parents, time taken to listen and establish an open dialogue may be time saved from what might well become subsequent dispute and disharmony’ (Bowers, 1995 p146).

Authentic partnerships with parents, in this case using the definition given by Wolfendale (1984), have been difficult to achieve according to Todd (2003). She notes that although the way parents are regarded by educators has evolved over the years, a ‘deficit myth’ continues to ‘underlie parent/professional relationships’ (p282). Gascoigne (1995) cite research by Sandlow (1987) which highlights gaps in beliefs and perceptions between teachers and parents: parents, for example, rated professionals keeping in contact with and knowing a child highly, while professionals rated this lower. Parents assumed that partnerships existed between professionals, and that comments made to professionals would be shared and acted upon, and felt their input was not valued when this did not happen.

Partnerships are complex, and other research has suggested that partnership can work to disempower parents, by making it more likely that they follow professional views. Heywood-Everett (1999 p272) observed that, ‘active involvement of a limited and marginal kind has served, in many ways, to hold parents at a distance from policy and decision-making in any sense of empowerment’. Todd’s (2003) study of a PPS in the north of England found a lack of awareness of the importance of negotiating the meaning of partnership and suggests that the common view of partnership as positive means that its potentially disempowering effects are overlooked: for some parents PPOs are another tier of professionals who create distance between parents and decision-makers.

2.7. The role of the voluntary sector
Vernon (1999) writes that although voluntary organisations set up by and for parents at a local level are often lacking in infrastructure and resources, they can have considerable impact on their community. She describes the unique position the voluntary sector has, in terms of being well placed to promote partnership, because of its access to the views of parents of children with SEN. She notes that the potential contribution of the voluntary sector is essentially twofold, in terms of offering information, support and advice to parents and giving voice to parents in developing services. Her research found that PPS have been successful in involving the voluntary sector through the training of school and LEA personnel and membership of the steering group of the PPS. Clarkson et al (2002 p106) writing about PPS in the South West of England, noted ‘Our steering groups have proved to be an excellent example of partnership working’ and of involving parents, LEAs and members from other statutory and voluntary organisations’.

2.8. Giving information
According to Wolfendale (1997), parental advice is the fourth ‘cornerstone’ of assessment. Waller and Waller (1998) noted that a DfEE booklet was not ‘fully accessible’ to all parents, some of whom may have literacy difficulties, but in Wolfendale’s (1997) study analysis of data from 25 case studies found that SEN documentation provided for parents by LEAs and PPS demonstrated a move towards parent-friendly, parent-accessible materials. Good practice was illustrated by:
• explicit, strong reference to the fact that parent’s views are welcomed
• acknowledgement of the fact that parents know their own child best and can therefore make a valid contribution to the assessment and decision-making
• reproduction of the guidelines for writing a parental profile
• supporting and supportive notes, flowcharts and glossary of terms
• attractively presented materials.

Wolfendale and Bryans (2002) say that most parents do not have experience of disability or SEN and so find themselves in an ‘information vacuum’ at various stages of their child’s life (p44) and literature is the gateway to finding out about provision and procedures. In their evaluation of PPS in Wales they found ‘many examples of parent-unfriendly literature’ (p60), where LEAs had fulfilled their basic duties in providing written documentation about SEN for parents but not in a spirit of partnership where parents could feel part of or welcomed into the process.

The purpose of literature for parents is not just to inform them about the availability of advice and guidance but to encourage them to take an active part in the statutory assessment process and support them in doing so. Waller and Waller (1998) found little progress towards having a written parent statement to complement assessments undertaken by professionals, first recommended by Wolfendale in 1984. They cite the example of Dorset LEA’s parent profiles, which were said to contribute to a significantly higher level of response by parents at the statutory assessment stage. Among factors said to contribute to their success are a user-friendly writing style, valuing the key role played by parents and offering a continuing channel of communication with professionals.

Other writers also advise making printed communication more accessible. Copeland (2000) writes that care should be taken in ensuring that writing in brochures and other forms of communication is clear to ‘adults whose knowledge of school may extend but little from that of their own schooling’ (Copeland, 2000, p. 248). Hunter-Carsch (2001) notes similarly that parents of children with literacy difficulties face a variety of challenges, including lack of communication with and support from teachers, and, in some cases, parents’ insecurity about their own literacy difficulties.

Using the internet for communication is a relatively new development and rarely referred to specifically in the literature, although there are guidelines for producing accessible websites (as mentioned in Section 3.4). In 2002 ACE conducted a survey of 150 English LA websites and found that only ten provided all the information required in accordance with Schedule to the SEN Regulations (2001). ACE set up a working group to consider what information parents seek and (would) find helpful on websites, resulting in a guide for LAs, Websites that work for parents (ACE, 2002). Subsequently Ofsted made its inspection of LA websites more rigorous. Referring to Statutory Instrument 2002 No. 2218, the Ofsted/Audit Commission Supplementary Guidance (2005) The Inspection of Special Educational Needs from September 2004 states that inspectors will investigate what SEN information is being published on LA websites to see whether and how LAs are meeting their legal requirements.

Writing about the development of the NPPN Stobbs (2002) refers to the significance of electronic communication in transforming the way information flowed around the Network, and providing an excellent way of keeping in touch and providing news. Mitchell and
Sloper (2000) found that parents valued having the option of a range of information formats available – written leaflets and books, verbal advice and guidance and the internet – but in their study only a small number of parents had internet access at home or had ever used the internet as a source of information. However this study was published in 2000 and more parents will have access to the internet today.

2.9 Every Child Matters

Of the most recent policy and guidance materials that seem likely to impact on the development of partnerships with parents, Every Child Matters: Change for Children (DfES, 2004a) reflects previous research pointing to parental involvement as a key factor in educational and social outcomes for young people (Hobcraft, 2000, Cornwall and Walter, 2005). It recommends good quality universal support as well as specialised targeted support and suggests that all schools should actively seek to engage parents and carers in children’s and young people’s education. It further espouses the development of a coherent set of services to support and involve parents (DfES, 2004a). The setting up of Children’s Trusts is seen as a move towards achieving these aims, with a focus on parents and carers accessing the support they need. It is implicit in the Ofsted (2005) Framework for Inspecting Children’s Services that parents’ and carers’ views will be elicited ‘...by identifying the needs, views and concerns of children and young people, their parents and carers and establish ways of meeting them’. The notion of partnership is still somewhat ambiguous, as it is still expressed from the professional intervention viewpoint, including the toolkits for practitioners and multi-agency working.

Conclusion

Key findings from earlier studies are the wide variation in PPS, particularly in terms of resourcing, organisational arrangements and staffing (Vernon, 1999) and the Audit Commission (2001) conclusion that parents had benefited from the support of local PPS.
3.1. Design
The evaluation methodology implemented was shaped by the aims specified by the DfES, the theoretical framework developed by the evaluation team, and the availability of recently gathered survey data from a benchmarking exercise conducted by the National Parent Partnership Collaboration Group (NPPCG). The NPPCG consisted of a national collaboration between PPS, Napps, NPPN, and the SEN Regional Partnerships (SENRPs).

The DfES invitation to tender stated that the evaluation should investigate:
- the context and characteristics of parent partnership services
- the processes involved in delivering the services
- the impact and effectiveness of the services

Existing survey data made it unnecessary and inappropriate to send new questionnaires to all parent partnership services and local authorities. However, the aims of the benchmarking exercise were different from those of the evaluation. Consequently, it was agreed that the methodology should include measures to ensure that ‘missing’ data (for evaluation purposes) could be gathered from a representative sample of services.

3.2. Sources of evidence
The team employed a variety of methods for collecting data, ensuring that sources included representatives of all relevant stakeholder groups. This meant consultation with people involved in SEN and Parent Partnership work for LAs, PPS staff and volunteers, staff in schools, members of statutory or voluntary/community organisations, and parents.

The sources of evidence or data were:
- Policy documents
- Information published on Council LA about PPS, and online information produced by PPS (with or without the LA) for parents
- Service publicity and information or guidance materials for parents produced by PPS
- PPS newsletters
- PPS Development Plans and Service Level Agreements
- PPS surveys of parents (for in-house monitoring and evaluation)
- Anonymised responses to the NPPCG Benchmarking Exercise
- Telephone interviews
- Face-to-face interviews in 20 areas to produce case studies
- Audit of PPS websites

3.3. Methods of data collection and analysis
Evidence/data were gathered and analysed from the various sources using either traditionally qualitative or quantitative methods, or a combination of the two.

a. Analysis of benchmarking and SEN data
In order to minimise the burden on LAs and PPS of data provision (which would otherwise have been collected through surveys of all PPS and all LAs), the NPPCG kindly agreed to
permit the evaluation team to have access to anonymised survey data that it had collected in September 2004. All 148 PPS had been asked to participate in this (pilot) benchmarking exercise, and a response rate of around 75% (110 services) had been achieved. It was felt that these high levels of participation were ‘…very encouraging and reflect a strong commitment by parent partnership services…’ (NPPN 2005, p5). Each PPS had been asked to fill in two survey forms: baseline information for the year 2003-2004; service characteristic including the operational arrangements (financial data and numbers of paid, full-time staff and volunteers), the types of services delivered, numbers of referrals, numbers of tribunals, monitoring and evaluation activities, promotion activities and information provided and contributions to local decision-making about SEN/inclusion.

The Benchmarking exercise (2004) responses provided a wealth of data that the evaluation team was able to use to explore the range of characteristics manifested by PPS nationally, as well as to provide a basis from which to seek further information (through telephone interviews) and to identify a representative sample of PPS for case study work. The data was also considered and analysed in relation to general SEN statistical data published by the DfES (2005) which provided a context for PPS work. The benchmarking data was entered into a database and, using the statistical software package, SPSS, was analysed for patterns and anomalies against the evaluation’s research objectives/questions1.

b. Telephone interviews with PPS
Telephone interviews were conducted with a stratified random sample of 32 (22% of all) PPS. The focus of the interviews was:

- Signposting - the types of services and organisations to which PPS make referrals
- Follow-up work between PPS and the service that made/received a referral
- The nature and extent of links with referral sites - whether there are partnership connections, formal structures between partners or specific protocols in place, service level agreements, and the extent to which they share information
- The nature and extent of contact with PPS (including short term contact), estimates for the numbers receiving leaflets / telephone advice, either directly, or through other agencies
- Numbers of parents who have been allocated an IPS
- Numbers or percentages of parents receiving ‘long term’ or ongoing support
- Proportion of time spent with different types of user - parents whose child may have or have already been identified as having SEN, may be in need or have already been identified as being at School Action (SA), School Action + (SA+)2, or has been or is being issued with a statement

1 References to the benchmarking data included in this evaluation should be considered in relation to the following cautionary note: ‘All benchmarking is only as good as the data contributed. Every effort has been made to identify obvious data entry errors. However this is the first time most PPSs have been involved in benchmarking and it is the largest scale benchmarking of PPS yet undertaken in England, so the reliability and validity of some data will be limited. Caution must therefore be exercised in interpreting some of the charts’ (2005, p7).

2 ‘School Action’ (or Early Years Action for very young children) may involve a different way of teaching certain things, some extra help from an adult or using particular equipment like a computer or special desk. School Action Plus (or Early Years Action Plus) involves support from people outside the school, such as specialist teachers or particular therapists. A statement is issued as a result of the statutory assessment and sets out the type(s) of support to be provided, how much and by whom.
(Source: http://www.direct.gov.uk/EducationAndLearning/Schools/SpecialEducationalNeeds)
• Amount or proportion of time spent on training other agencies or services, and identification of which ones
• Further exploration of routine monitoring and evaluation
• Further investigation of publicity and community awareness strategies

In June and July 2005 semi-structured telephone interviews were carried out with 31 PPS. Interviews lasted approximately an hour, although several were closer to one and a half hours. PPS who took part were initially contacted by telephone and/or email and asked if they would be able to participate in this part of the PPS Evaluation. The evaluation team explained that participation was entirely voluntary, and outlined the aims of the evaluation, and the purpose and nature of the telephone interviews.

The evaluator explained the ethics around the interview and the general process both when they made contact with the PPS and at the beginning of each interview.

In some cases the interviews were tape-recorded and in all cases detailed handwritten notes were taken. Following the interviews, these were developed into field notes. Responses to the questions in the telephone interviews were considered by two researchers reading and re-reading notes, working first independently and then together, to highlight commonalities and as areas of divergence. The responses were then analysed in terms of themes identified by the PPS Evaluation Steering Committee:

• Contextual information
• Processes
• Impact

c. Case study work
Robson (1993) defines case study as ‘a strategy for doing research which involves an empirical investigation of a particular contemporary phenomenon within its real life context using multiple sources of evidence’. He adds that case studies need not be studies of individuals, but can be about a service or programme with many possible foci, including policy implementation and evaluation (p146-147).

The use of case studies allowed the evaluation team to develop methods and a framework for the investigation of key issues or themes to answer specific evaluation research questions. The face-to-face methods employed in data collection also provide the team with opportunities to ‘tailor the line of discussion to the expertise of the individual, probe and explore issues in depth, and engage the informant in careful reflection’ that would not easily have been achievable through, for example, questionnaire work (Rossi, Freeman and Lipsey, 1999, p.164).

The overall aims of the case studies were:
• To allow for a combination of research methods that will elicit information from a range of stakeholders (who are linked within a particular context and with specific goals)
• To explore the ways in which PPS operate to achieve particular goals within the context of a specific set of relationships and processes
• To explore the implicit theory (or theories) that underpins the actions and assumptions of the key stakeholders in service delivery
To triangulate data gathered from different sources and stakeholders

The case study sites were sampled from all the PPS that had responded to the Benchmarking Exercise (n=110; see below for details of sampling methods). It was intended that visits to each location would allow for consultation with a range of stakeholders. Pilot work was carried out through discussions with one LA and one PPS to refine the research questions, which were also discussed at meetings of the regional PPS collaboration groups. The pilot work also helped to develop a ‘picture’ of the key stakeholders in PPS work.

A sample of 22 PPS was identified (from the benchmarking data) for case study work and 20 were successfully completed. The sample covered the nine regional PPS collaboration regions, with at least two PPS sampled from each of the regions.

The team employed mainly face-to-face, semi-structured interview methods to gather the views of participants and, where this was not feasible, the same questions were asked over the telephone or sent in written form to participants. Early research instruments were trialled in pilot interviews and informal discussions with two Parent Partnership Officers, one LA officer, two parents, one SENCO and members of the DfES Steering Group. After revising pilot instruments in accordance with comments, each stakeholder group had its own interview schedule and/or series of prompts for discussion. Some questions were directed towards all types of participants, but others were specific to PPS staff, for example, or to staff in PPS where a particular issue had been highlighted in the benchmarking data they had supplied.

Where possible, discussions were arranged with PPS staff, volunteers, LA staff, school staff, parents and other relevant stakeholders. Interviews or discussions were face-to-face where possible, or by telephone where participants had not been available at the time of the visit. Participants from (primary, middle, secondary and special schools) included head teachers, SENCOs and teaching assistants. Discussions with parents took place individually or in groups, according to parental choice. Not all parents had used PPS, but all had children with SEN, which allowed for some comparison of experiences. Where possible interviews were recorded on tape and later transcribed: in some cases participants felt uncomfortable with the idea of being taped and in those circumstances, the researchers took extensive notes of the discussions. All participation was on a voluntary basis, discussions were confidential, and notes or transcripts were anonymised. All participants were given the option of seeing copies of the notes or transcripts of interviews, and some provided additional information after receiving their notes. The average duration of interviews was one hour for PPS staff, 45 minutes for LA officers, and 30 minutes for IPS, parents, school staff and other participants. The transcribing process took between five and ten hours per interview depending on its duration. Table 3.1. illustrates the broad subjects discussed and the types of participant to which they applied.
Table 3.1. Subjects included in interviews and discussions with different participants

<table>
<thead>
<tr>
<th>Subject</th>
<th>PPS Staff</th>
<th>IPSs</th>
<th>LA Staff</th>
<th>School Staff</th>
<th>Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role/responsibilities</td>
<td>√</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service aims</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Services delivered / received</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td>√</td>
</tr>
<tr>
<td>Code of Practice</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Influences on remit</td>
<td>√</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Networks / liaison</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Monitoring</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Evaluation / Feedback</td>
<td>√</td>
<td></td>
<td>√</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Publicity</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Budgets / staffing</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Multi-agency work</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training (own)</td>
<td>√</td>
<td></td>
<td>√</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Training (others)</td>
<td>√</td>
<td></td>
<td>√</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Supervision / management</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Policy development</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disagreement Resolution</td>
<td>√</td>
<td></td>
<td>√</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Bridges &amp; barriers</td>
<td>√</td>
<td></td>
<td></td>
<td>√</td>
<td>√</td>
</tr>
<tr>
<td>Good practice</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Outcomes</td>
<td>√</td>
<td></td>
<td>√</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Impact</td>
<td>√</td>
<td></td>
<td>√</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Position / status of PPS</td>
<td>√</td>
<td></td>
<td>√</td>
<td></td>
<td>√</td>
</tr>
</tbody>
</table>

The case studies also involved the collection of documentation produced by LAs and PPS to either structure or explain the work of PPS (such as service level agreements, development plans, flyers, leaflets and newsletters), to inform parents of SEN processes, their rights and responsibilities or support their contribution to meetings concerning their child (such as information leaflets or booklets and guidance or toolkits for filling in forms and attending meetings); and monitoring and evaluation data (such as feedback from parents of their use of and satisfaction with the services made available to them). Schools were also asked about the documents that the PPS provided.

d. Case study participants

A total of 188 people provided evidence for the case study work. One hundred and thirty eight people were interviewed in person and 50 provided evidence over the telephone or in writing. Of those interviewed in person, 120 were tape recorded and 18 were not recorded, but extensive notes were taken during the interview.

The numbers of participants varied in each case study. In some case studies, meetings were arranged only with PPS and LA staff. In other areas, the PPS staff went to great lengths to organise a series of discussions that, in some cases, took two or three days to complete; the
team was extremely grateful for all assistance given in this respect. The variation in numbers of participants across cases was a result both of numbers of people employed by or volunteering for PPS, and of availability or willingness to participate. Similarly there was variation in the numbers of volunteers (IPS) who were interviewed, either because a PPS operated without IPS, or because they were unavailable. Interviews were requested with LA staff in all PPS areas. In some cases these proved very difficult to arrange because the officers in question were extremely busy. Consequently, some agreed to be interviewed at a later date by telephone and others offered to respond to questions in writing. Similarly, in some PPS areas it was possible to carry out face-to-face interviews with several school staff and parents, but in others this proved more difficult. Once again, some school staff and some parents offered to participate by giving a telephone interview or providing written information instead.

e. Audit and content assessment of PPS websites
In accordance with the minimum standards set out in the 2001 SEN Code of Practice, LAs must ensure that:

‘parents and schools are provided with clear information about the parent partnership service, and about the various other sources of support in their area, including statutory and voluntary agencies’ (p.20).

The evaluation team was aware, through pilot discussions with various stakeholders, that online information is increasingly being used as an additional source of advice and support for parents of children with SEN, and publicity of PPS. It was decided, therefore, to carry out an audit of information published about PPS on Council websites, and also to assess in more detail the content and presentation of a final sample of 21 websites in more detail. The 21 websites pertained to the 20 PPS that were involved in the case study enquiries, plus one PPS that had been involved in the pilot work.

The audit of online information had two overall aims, relating to the accessibility and the quality of information provided (including its accuracy and neutrality), taking into consideration different target groups (such as schools, parents and others) and diversity within those groups.

The audit was carried out by two different researchers working both separately and together to ensure that there was consistency in the assessment of the content of sites and in methods used to retrieve and record data.

The aim of the first stage (the audit) was to ascertain whether information about a PPS was available online and, if so, whether it was contained within a LA l website, whether the PPS had its own site, or both and how easily the information could be accessed. The primary focus of the audit was the availability and accessibility of information about the PPS itself and guidance for parents on SEN processes and their rights and responsibilities. The aim of the second stage (content assessment) was to assess the neutrality, accuracy, relevance, usefulness, readability, and adequacy of information available online about SEN processes and parents’ rights and responsibilities. The criteria to determine the quality of each of these conditions was derived from a number of sources:
• Wolfendale and Bryans (2001), and Wolfendale and Cook (1997) who assessed the quality of information provided by (Welsh 2001, and English, 1997) PPS. In their analysis of the presentation, content and (in 1997 only) readability of documents, they developed criteria to represent ‘good’ and ‘poor’ practice. Information about these criteria was made available to all PPS in a discussion paper circulated by the NPPN (July 2002).

• The ACE / Yorkshire and Humberside SENRP guide to developing good websites for parents, Websites that Work for Parents, which was based on the findings of a survey of websites and on consultations with parents about what information they felt they needed, and the ways that they used the internet to find such information.

• The RNIB guidance on accessibility of website design.

• The National Dyslexia Association’s guidance on dyslexia-friendly documentation.


By recording the amount of information provided, the audit sought to analyse whether LAs were:

• fulfilling basic requirements by providing minimal details about PPS (or failing to fulfil requirements by providing no details)

• fulfilling the requirement and providing additional information

• capitalising on the existence of the website to provide useful information, links and downloads for parents, schools and others.

For overview of sampling, see Appendix 4.

f. Minimum standards framework and coding scheme

One aspect of the evaluation was to find examples of good practice and models of the ways in which PPS work. In order to do this, and to provide a foundation for the evaluation, a framework was developed at the start of the evaluation, using the minimum standards for PPS (Appendix 2). The six main themes taken from the minimum standards were:

1 Information, in these cases, refers to paper copies rather than that found online.
Table 3.2. Minimum standards framework and coding scheme

<table>
<thead>
<tr>
<th>Training</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• providing information on SEN procedures to parents through training</td>
<td></td>
</tr>
<tr>
<td>• providing appropriate training for IPSs, ensuring they are kept up-to-date with all relevant aspects of SEN policy and procedures so they can fulfil their role effectively</td>
<td></td>
</tr>
<tr>
<td>• ensuring training on good communication and relationships with parents is made available to teachers, governors and staff in SEN sections of the LEA</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IPSs</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• using best endeavours to recruit sufficient IPSs to meet the needs of parents in the area</td>
<td></td>
</tr>
<tr>
<td>• using best endeavours to provide access to an IPS for all parents who want one</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Networking</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• working with schools, LEA officers and other agencies to help them develop positive relationships with parents</td>
<td></td>
</tr>
<tr>
<td>• establishing and maintaining links with voluntary organisations</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Impact</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• providing a range of flexible services</td>
<td></td>
</tr>
<tr>
<td>• providing practical support to parents to help them in their discussions with schools, LEAs and others</td>
<td></td>
</tr>
<tr>
<td>• where appropriate and in conjunction with parents, seeking and taking into consideration the views and wishes of the child</td>
<td></td>
</tr>
<tr>
<td>• interpreting information published by schools, LEAs and other agencies interested in SEN</td>
<td></td>
</tr>
<tr>
<td>• ensuring that parents’ views are heard and understood and inform and influence the development of local SEN policy and practice</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Publicity / Informing</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• providing parents with accurate, neutral information on their rights, roles and responsibilities within the SEN process, and on the wide range of options available for their child’s education</td>
<td></td>
</tr>
<tr>
<td>• informing parents about other agencies, such as Social Services and voluntary organisations, which can offer them information and advice</td>
<td></td>
</tr>
<tr>
<td>• using a variety of means, widely publicising information about available services</td>
<td></td>
</tr>
<tr>
<td>• providing neutral, accurate information for parents on all SEN procedures as set out in SEN legislation and the SEN Code of Practice</td>
<td></td>
</tr>
<tr>
<td>• providing a wide range of information for parents in community languages and in a form accessible to parents who cannot access information through conventional means</td>
<td></td>
</tr>
<tr>
<td>• providing information on SEN procedures to parents through information and support</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Monitoring</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• regularly reviewing the effectiveness of the service they provide, for example by seeking feedback from users</td>
<td></td>
</tr>
</tbody>
</table>

Where possible, the evaluation team made evaluative assessments of the PPS selected for case study and telephone interview in relation to each of these six themes. The rating given for each theme ranged from 1 = best practice, 2 = good practice, 3 = minimum.

To investigate the feasibility of defining groups of PPS on the basis of these ratings, three clusters were calculated. The results did not suggest a clear distinction between those close to level 1, level 2 or level 3 in that none of the PPS scored the same for all of the themes. The third cluster was clearly the least successful overall and in each separate rating. The first cluster, however, although having better ratings in general, overlapped considerably
with cluster 2 in terms of overall rating and had poorer rating for impact and for training (see Appendix 3).

The evaluation team were mindful of the subjective nature of this scoring technique and took appropriate measures to ensure its validity and consistency. The scoring technique was also used cautiously and considered most useful when correlated with the benchmarking data. Validity tests were performed of the scoring technique. For example, greater proportions of time reported in the benchmarking data as spent by paid staff with parents was associated with higher evaluative scores independently given for Training and for IPSs. Conversely, more time reported spent on training was associated with higher ratings for Training and for IPSs.

The methods outlined here were used to address the overall aim of the study: to examine how stakeholder experience was influenced by PPS structures and processes at local, regional and national level.

The following questions were extrapolated from DfES specification:

- **Individual PPS:** How have PPS developed their ways of working in order to meet national requirements and local needs? How is this impacting on local policy, parental confidence and needs, and mainstream and special school cultures for building effective parent partnership arrangements?
- **Parents/caretakers:** How do parents view the quality and utility of PPS?
- **Regional and LA:** How are the structure, processes and outputs of PPS being influenced through the statutory requirements for LAs (SENDA 2001) to monitor the impact and cost effectiveness of PPS services? How do SEN regional partnerships support LA and PPS work?
- **National:** How well do nationally funded PPS groups support the work of PPS? How have the minimum standards set out in the Code of Practice impacted on the work of PPS? To what extent does PPS work support national strategies for promoting inclusion and reducing poor outcomes for some individual SEN pupils?

These key questions were addressed through the evaluation methods and are discussed in the main body of the report.
### 4. CONTEXTUAL INFORMATION

<table>
<thead>
<tr>
<th>Content Summary</th>
<th>Budget</th>
<th>Wide variation in budget and some evidence that overall budget more significant than budget relative to the numbers of pupils</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Staffing</td>
<td>Wide variation in staffing levels for PPS. Some evidence that individual personalities of PPOs significant in determining impact of PPS</td>
</tr>
<tr>
<td></td>
<td>Maturity of service</td>
<td>No strong correlation between maturity of service and impact of PPS</td>
</tr>
<tr>
<td></td>
<td>Accessibility / Publicity</td>
<td>PPS tend to use a wide range of methods for distributing their publicity, but more could be done by the LA to actively publicise and promote the PPS</td>
</tr>
<tr>
<td></td>
<td>NPPN, Napps, Regional Groups</td>
<td>NPPN considered a valuable source of practical information on new legislation and E-Forum and Regional Groups in providing emotional and moral support</td>
</tr>
<tr>
<td></td>
<td>LA arrangements for meeting the expectations for PPS</td>
<td>Some PPS experience significant problems in receiving information from LA and more support could be offered to strengthen this relationship</td>
</tr>
</tbody>
</table>

### Mapping of current profile of PP Services in England

In order to map the profile of PPS, data was gathered from benchmarking data, website audit, telephone interviews and case studies with PPS\(^1\). The data gathered from these sources revealed a large variation in PPS, particularly in terms of budget and staffing levels. Contextual information was enhanced through the case studies and telephone interviews. All 20 case study PPS and 18 of the telephone interview PPS had responded to the 2004 benchmarking exercise. These 38 had provided details of their service types, budget allocations, funding bodies, and staffing arrangements, which are detailed in Appendix 5.

### 4.1. Budget

The LA spend on PPS reported in the 2004 benchmarking data for 2003-2004 varied between £8,000 and £370,000. This is partly due to differences in population size.

The following table details the variation between areas, looking at the total PPS spend per pupil on the roll of maintained school in the relevant LA.

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\(^1\) As stated in 3.3.a. (p 14), references to the benchmarking data included in this evaluation should be considered in relation to the following cautionary note: 'All benchmarking is only as good as the data contributed. Every effort has been made to identify obvious data entry errors. However this is the first time most PPSs have been involved in benchmarking and it is the largest scale benchmarking of PPS yet undertaken in England, so the reliability and validity of some data will be limited. Caution must therefore be exercised in interpreting some of the charts'. (2005, p7)
Table 4.1. Mean and median LA spend per pupil on roll on PPS 2003-2004, by categories of LA

<table>
<thead>
<tr>
<th>Category of LA</th>
<th>Mean spend on PPS 2003-2004</th>
<th>Mean spend on PPS 2003-2004 £/pupil</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>91,200</td>
<td>1.54</td>
</tr>
<tr>
<td>NE</td>
<td>38,800</td>
<td>1.08</td>
</tr>
<tr>
<td>NW</td>
<td>104,800</td>
<td>1.80</td>
</tr>
<tr>
<td>Yorkshire &amp; Humberside</td>
<td>97,100</td>
<td>1.72</td>
</tr>
<tr>
<td>E Midlands</td>
<td>104,400</td>
<td>1.34</td>
</tr>
<tr>
<td>W Midlands</td>
<td>141,800</td>
<td>1.95</td>
</tr>
<tr>
<td>East</td>
<td>99,500</td>
<td>0.92</td>
</tr>
<tr>
<td>SE</td>
<td>22,500</td>
<td>1.28</td>
</tr>
<tr>
<td>SW</td>
<td>63,900</td>
<td>1.37</td>
</tr>
<tr>
<td>London</td>
<td>72,900</td>
<td>1.77</td>
</tr>
<tr>
<td>London Boroughs</td>
<td>72,900</td>
<td>1.77</td>
</tr>
<tr>
<td>Metropolitan Boroughs</td>
<td>103,800</td>
<td>1.76</td>
</tr>
<tr>
<td>Unitary Authorities</td>
<td>47,900</td>
<td>1.55</td>
</tr>
<tr>
<td>New Counties</td>
<td>130,500</td>
<td>1.21</td>
</tr>
<tr>
<td>Old Counties</td>
<td>118,700</td>
<td>1.20</td>
</tr>
</tbody>
</table>

The figures in Table 4.1. show strong evidence for systematic differences between Government Office Regions (GOs) and types of LA. Although in Unitary Authorities and London Boroughs the total spend tends to be low, the spend per pupil on roll is lowest in old and new counties. However, it is important to remember that there were often considerable differences within the region.

None of the PPS or LAs selected for case study or telephone interview said that the LA had an explicit formula for calculating budgets for PPS and their monitoring did not appear to be linked to budgeting for SEN in general. There was no evidence of a coherent national LA system for calculating budget allocations.

Using the evaluative coding (see section 3.3f) ratings given for Impact and Publicity were strongly associated with the size of the overall spend, rather than spend per pupil on roll. This association suggests that in smaller LAs, the PPS may need more external support in order to deliver the range of services that are possible in larger areas and that the difference in overall budget of the PPS has a significant impact on the level of service the PPS is equipped to provide.

4.2. Staffing

Significant variation in staffing levels can be seen from the minimum and maximum number of paid full-time equivalent (fte) staff reported in the benchmarking data and shown in Table 4.2. (Some non-responding PPS may fall outside the ranges shown). Variation within the GOs is more significant than the variation between them. Nonetheless there is strong evidence of systematic difference between GOs and between types of LA. PPS in the Midlands and those serving county LAs were likely to have more fte staff.
Table 4.2. Minimum, maximum and mean staffing levels for PPS, number of paid full-time equivalents

<table>
<thead>
<tr>
<th>Category of LA</th>
<th>Minimum staffing level</th>
<th>Maximum staffing level</th>
<th>Mean staffing level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>0.2</td>
<td>13.0</td>
<td>2.8</td>
</tr>
<tr>
<td>NE</td>
<td>0.2</td>
<td>3.0</td>
<td>1.0</td>
</tr>
<tr>
<td>NW</td>
<td>1.0</td>
<td>13.0</td>
<td>3.3</td>
</tr>
<tr>
<td>Yorkshire &amp; Humberside</td>
<td>1.2</td>
<td>7.0</td>
<td>2.7</td>
</tr>
<tr>
<td>E Midlands</td>
<td>0.4</td>
<td>7.3</td>
<td>4.1</td>
</tr>
<tr>
<td>W Midlands</td>
<td>1.7</td>
<td>12.6</td>
<td>5.1</td>
</tr>
<tr>
<td>East</td>
<td>0.8</td>
<td>6.0</td>
<td>3.3</td>
</tr>
<tr>
<td>SE</td>
<td>0.8</td>
<td>7.9</td>
<td>2.8</td>
</tr>
<tr>
<td>SW</td>
<td>0.8</td>
<td>2.8</td>
<td>1.9</td>
</tr>
<tr>
<td>London</td>
<td>0.3</td>
<td>4.8</td>
<td>1.9</td>
</tr>
<tr>
<td>London Boroughs</td>
<td>0.3</td>
<td>4.8</td>
<td>1.9</td>
</tr>
<tr>
<td>Metropolitan Boroughs</td>
<td>0.3</td>
<td>12.6</td>
<td>3.3</td>
</tr>
<tr>
<td>Unitary Authorities</td>
<td>0.2</td>
<td>6.4</td>
<td>1.7</td>
</tr>
<tr>
<td>New Counties</td>
<td>0.4</td>
<td>13.0</td>
<td>4.3</td>
</tr>
<tr>
<td>Old Counties</td>
<td>1.0</td>
<td>7.3</td>
<td>3.5</td>
</tr>
</tbody>
</table>

From the benchmarking, the lowest staff numbers were reported not by PPS providing a term-time only service but by those whose service was interrupted only by annual leave, suggesting that these PPS are unable to provide cover for staff holidays. The mean numbers of staff are 3.5 for LAs providing a year-long service, 2.6 for those providing a term-time only service and 1.7 for those interrupting only for annual leave. This is strong evidence for a systematic relationship between staffing and period of service. One interpretation of this is that low staffing levels lead to a disrupted service. It is possible that the two-thirds of PPS providing data for this analysis were on average doing more than the remaining third and the picture presented here may be optimistic.

There was also interview evidence that PPS with limited resources very much prioritised casework over strategic work. This suggests that services needing to break for annual leave may also be less likely to have an effective and active strategic work dimension, being forced, instead to operate more as a reactive service.

There is a strong relationship between reported numbers of referrals and the period of service provided. The mean number of referrals reported for LAs providing a year-long service was 462, for those breaking only for annual leave 262, and for those providing a term-time only service 189. However, once the number of staff is taken into account, the association between number of referrals and period of service is much weaker but still strong (a comment justified by partial correlation). The mean number of reported referrals per fte staff was 156 for LAs providing a year-long service, 195 for those breaking only for annual leave and 80 for those providing a term-time only service.

There are a number of possible interpretations of this. One interpretation could be that smaller PPS who close for annual leave are dealing with the highest number of referrals per staff and those working term-time only are dealing with fewest referrals. Another

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1 Only 59% of responding LAs reported offering a service all year round. In 6% the service was term-time only. In the remaining 36% the service was interrupted only when staff took annual Leave. It is quite possible that a different picture would be presented if data were available on PPS in the remaining 46 LAs. Only 35% of responding London Boroughs but 79% of responding new counties provided a year-long service.
interpretation is that PPS closing for annual leave have the lowest numbers of staff whereas PPS opening all year have the highest numbers of staff. However, there are many other possible interpretations. What the data does suggest is that the number of staff determines the period of service offered in that whilst providing a term-time only service may be a policy decision, closing for annual leave is more likely to be a matter of necessity.

There was wide variation in the numbers of staff, from as many as 13 paid employees including administrators to as few as one part time employee (and no volunteers). From the 38 where data was available, 14 PPS did not have any administrative support. PPOs without administrative support were also responsible for answering initial telephone enquiries or relying heavily on answer machines, leading to a strong association between administrative support and impact. All six case studies without administrative support were given the lowest evaluative code ‘3’ for Publicity and/or Monitoring.

In the PPS with fewer staff, casework was generally prioritised over strategic work or building on existing relationships with agencies or schools. Staffing levels also affected the ability of the PPS to conduct home visits (one PPS had a policy of never conducting home visits).

Taking the case studies and telephone interviews together, of the 26 PPOs who described their main barriers to achievement, over half (16) repeatedly referred to lack of resources and staffing levels as a problem. They felt that staffing shortages placed a direct restriction on what the PPS could achieve despite their best efforts to use employees’ time resourcefully and to use volunteers to reduce workloads. A small number of participants also reported that they usually worked significantly more hours than they were being paid for.

Without being asked, around 25% of those interviewed for case study said that they had clear ideas for where they would like to see the service developing but felt this would not be possible without more staffing provision.

The same proportion (25%) also volunteered that staffing restrictions meant that they could not increase their caseload. All of these respondents said they felt it more important to have a manageable caseload and respond to enquiries quickly rather than a larger caseload with a long waiting time. An illustration of this was one PPO, who described publicity as: ‘a double edged sword because we have an obligation to publicise the service, but you don’t want to set expectations that you can’t meet’. There was widespread agreement that parents usually found out about the PPS through ‘word of mouth’ and a concern that increasing their caseload would lead to a longer waiting time for parents which would have a detrimental effect on the reputation of the service.

The size of the PPS did not necessarily affect time management, There was evidence to suggest that some PPS were better at managing their work effectively and examples of smaller PPS making very efficient use of limited resources, and larger PPS struggling to find an effective way of dividing their time. Around half of those interviewed had devised effective ways for dividing their work, with various workers having specific areas of expertise and clearly designated tasks. Where PPS were more actively engaged in strategic work, it was usually the responsibility of a designated individual, normally the PPO (senior manager). This tended to work most efficiently where there were more than two workers,
so that one individual could take responsibility for the strategic work, leaving other staff to deal with casework.

The ability to invest sufficient time and resources also influenced the extent to which PPS were able to ensure that IPSs, once initially trained, could be appropriately supervised, given ongoing training and development, and more easily retained. This in turn shaped attitudes towards the usefulness and ‘value for money’ of IPSs (see section 5.2.).

4.3. Maturity of service
Information on the length of time the service had been running was estimated from the benchmarking data. One possible indicator for length (maturity) of service was the proportion of IPSs reported as being newly trained to the total number of IPSs in the 2004 benchmarking data (although it was considered unlikely that IPSs have been trained at exactly the same rate throughout the lifespan of the PPS). The results from this are shown Table 4.3. This value could only be calculated for the 47 PPS that provided data of the appropriate kind. From this relatively small number of PPS, the data suggested that the more mature services were likely to report more referrals and more parent or carer service users.

Table 4.3. Total number of IPSs as a multiple of the number newly trained in 2003-2004

<table>
<thead>
<tr>
<th>Total IPS per newly trained IPS</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4-7</th>
<th>8-11</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of PPS</td>
<td>15</td>
<td>8</td>
<td>15</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Proportion of responding PPS</td>
<td>32%</td>
<td>17%</td>
<td>32%</td>
<td>11%</td>
<td>11%</td>
</tr>
</tbody>
</table>

From this data, there was evidence that more mature PPS were more likely to be involved with parent forums, to provide downloadable copies of information leaflets and to have produced a newsletter.

Information on the length (or maturity) of service was also available from 24 of those PPS who had been selected for telephone interview and case study. Amongst those, there was a wide variation between the lengths of time the services had been running, varying between little more than two years and as many 26 (one PPS stated that there had been some form of Parent Partnership in operation in the area for as many as 26 years). Eleven of the 24 PPS had been running for exactly 11 years, nine had been running for between six and 10 years and three had been running for less than five years.

Correlations were then made between the length of time the services had been running and the evaluative scores given to them by the evaluation team. It might have been expected that the more mature services would receive a higher score but there was no correlation between the maturity of the service and the scores given for any of the themes (networks, monitoring, impact, training, IPSs and publicity).

This suggests that maturity of service is not a good indicator of the performance of the individual PPS. Instead, qualitative data suggests that a better indicator is the personality and strengths of the individuals most directly involved with the service because this impacts on the way the PPS is managed and the way it operates with other agencies. Qualitative interviews demonstrated how, in spite of financial and time constraints, some individuals
were highly pro-active and skilled in exploring new funding alternatives and constantly searching out alternative ways of ensuring effectiveness. These individuals tended to have highly developed managerial, problem solving and team building skills. The strength of evidence (taken from the qualitative interviews and data analysis) supporting this suggests room for a further exploration of the importance of leadership and management qualities in the recruitment of PPOs.

4.4. In-house, out-sourced or mixed
Of the 105 PPS responding to the 2004 benchmarking question about the nature of their service, 72% stated that they were in-house LA services; 18% that they were out-sourced and 10% that the service was mixed provision. A large majority of these (81%) reported providing a service for ages 0 to 25 and only a few (7%) reported serving only people between five and 19. There was no evidence of any association between the type of service arrangement and the age range served. The benchmarking also suggested that out-sourced PPS tend to receive the lowest funding. From the data available, the mean budget for mixed services was £109,000, £104,000 for in-house, and £65,000 for out-sourced services, reflecting one of the additional problems out-sourced services face. However, data here is incomplete and these proportions may only apply to the responding PPS.

4.5. Accessibility of PPS
In this context accessibility refers to the ease with which parents can find out about the PPS and access its services. The evaluation team examined the Ofsted reports on the 53 LAs where the PPS was used for a case study or telephone interview. Comments on the PPS are only a sentence or two so little mention is made of accessibility but comments include:

‘The LA also arranges for translation, interpretation or signing support if necessary. Information to parents has been limited but parent partnership is about to publish a range of information on SEN for parents. The LA intends to increase the information on the council website to support this development’.

‘It provides information to parents on various aspects of SEN provision which are instructive but not always user-friendly …’

‘The information about SEN available on the LA website is wide-ranging and includes relevant and clear details about specific and graduated provision for pupils with a wide range of needs. However, there is currently no PPS web link accessible through the county website’.

One PPS mentioned being criticised for their lack of publicity; Ofsted inspectors had said that parents who had used the service were very pleased with it, but few parents knew about it. Some PPS are linked into the Regional Partnership website. More discussion of websites can be found below.

a. Websites, benchmarking data (2004) and website audit
Table 4.4. summarises the data on webpage provision given by respondents to the 2004 benchmarking survey. These figures suggest that approximately 75% of PPS have some form of website, generally providing contact details and information about the services available, usually as part of the LA site. 48% of responding LAs provide downloadable
information leaflets. Estimated proportions of all PPS given in the table are based on the assumption that PPS not responding are likely to be those with less to report.

### Table 4.4. Website provision as reported in the 2004 benchmarking data

<table>
<thead>
<tr>
<th>Website provision:</th>
<th>Number of LAs</th>
<th>Proportion of Responding LAs</th>
<th>Estimated Proportion of all LAs</th>
</tr>
</thead>
<tbody>
<tr>
<td>LA website</td>
<td>76</td>
<td>84%</td>
<td>67%</td>
</tr>
<tr>
<td>PPS website</td>
<td>27</td>
<td>30%</td>
<td>24%</td>
</tr>
<tr>
<td>Either</td>
<td>83</td>
<td>95%</td>
<td>73%</td>
</tr>
</tbody>
</table>

#### Website contents:

| Contact details            | 82            | 91%                          | 73%                            |
| Range of services provided | 76            | 84%                          | 67%                            |
| Downloadable information Leaflets | 44 | 48%                          | 39%                            |
| Discussion forum           | 7             | 8%                           | 6%                             |
| Other information about services | 20 | 22%                          | 18%                            |

The evaluation team’s website audit and benchmarking data create rather different pictures, perhaps suggesting that progress has been made since the benchmarking data was collected or some websites were not included in the audit. The latter would mean that the websites were not easy to access. Eight LAs had no website in the benchmarking data but five of these appear in the audit as having an independent of LA supported webpage, suggesting they have made recent progress in developing their websites.

Of the 76 LAs where the PPS stated that it was part of the LA website and also had an independent webpage, the audit found no information for five of these and 11 had only a brief mention on the LA webpage. Thus more than one in five of these PPS were not as accessible as the benchmarking data might suggest. This might indicate a need for more ICT support and resources. Only 54 (71%) had an LA supported webpage and 37% of LAs in which the PPS reported an ‘own service’ website had no such site (as defined in the audit).

### Table 4.5. Website provision in the website audit and in the benchmarking data

<table>
<thead>
<tr>
<th>Status indicated in Benchmarking Data</th>
<th>No website</th>
<th>Part of LA Website</th>
<th>Independent Website</th>
<th>LA and Independent Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of LAs</td>
<td>8</td>
<td>56</td>
<td>7</td>
<td>20</td>
</tr>
<tr>
<td>LAs with no website found in the search</td>
<td>1</td>
<td>5</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>LAs with only brief mention on LA website</td>
<td>2</td>
<td>10</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>LAs with brief mention on LA website</td>
<td>2</td>
<td>13</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Websites independent of LAs</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>PPS webpage supported by the LA</td>
<td>4</td>
<td>39</td>
<td>3</td>
<td>15</td>
</tr>
</tbody>
</table>
At the time of the website audit, PPS with better ratings for the use of IPSs were more likely to have an independent website. Those with good ratings for evidence of impact were less likely to have just a brief mention on an LA webpage or a page on the LA website.

**b. Websites, case studies and telephone interviews**

Several PPS had very well developed websites and it was clear that a great deal of thought and care had gone into their development. One PPS had a particularly detailed and accessible website which was being used as a useful and effective tool for signposting. This particular PPS received emails on a daily basis from a wide range of people from across the country requesting information on how to find their local PPS. They also produced a directory, which was on the website and included links to other organisations, so that information that parents of children with SEN may want to know is easily available.

**c. Other routes for enquiries**

The 2004 benchmarking questionnaire sought information about other routes by which parents could access the PPS. Table 4.6. shows the proportion of PPS reporting the use of different routes for enquiries. Almost all made use of telephone, answer phone and e-mail, but fewer than one in three had a dedicated telephone line.

<table>
<thead>
<tr>
<th>Percentage of responding LAs</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Dedicated telephone helpline</td>
<td>31%</td>
</tr>
<tr>
<td>Phone during office hours</td>
<td>89%</td>
</tr>
<tr>
<td>Answer phone when staff are unavailable</td>
<td>93%</td>
</tr>
<tr>
<td>E-mail</td>
<td>88%</td>
</tr>
<tr>
<td>Other</td>
<td>61%</td>
</tr>
</tbody>
</table>

There does not appear to be any pattern in the use of different routes for enquiries but statistical analysis reveals an overall picture. At one extreme some PPS had many staff, many referrals and used the phone during office hours, but no dedicated helpline and probably did not use an answer phone, e-mail or other routes for enquiries. At the other extreme the opposite was true. Differences may be more a matter of recording than of practicalities but it is notable that counties and those providing support for the full age range (up to 25) tend towards the former extreme and unitary authorities and PPS only supporting those up to age 19 towards the latter.

A rough access score was calculated from the number of options mentioned by each PPS combining responses for the website and other means of access. Figure 4.1. shows the outcome. The maximum possible score was 15. Higher numbers of IPSs were closely associated with higher access scores. PPS providing a year-long service had higher average scores (8.5) than those breaking for annual leave (7.4) and much higher than those providing a term-time only service (5.8). Those with parents on the management or steering group had higher average scores (8.5) than those that do not (7.2). Those that monitor three ‘hard’ aspects have higher average scores (9.0) than those monitoring two (8.1), one (7.8) or none (6.9). Average scores were lower for London Boroughs (6.8) and Metropolitan Boroughs (7.2) than for unitary authorities (9.2), new counties (9.40) or old counties (8.6).
In the case studies and telephone interviews, three PPS mentioned ways in which their service was accessible to parents. One remarked that their building was very central, with very convenient public transport services. Two PPS said that they have out of hours help lines as ‘problems don’t only happen during office hours’. One PPS said they have a policy of equal access for all parents. They do not encourage parents to visit as it is difficult for some parents to get to the office. They go to parents but this could mean a motorway journey of 45 minutes each way and so is not a good use of resources.

PPOs were aware of the problem with accessing the hard to reach groups, in particular ethnic minorities groups, asylum seekers, parents with SEN, and parents with mental health issues. PPS mentioned that occasionally Social Services or schools contact them requesting support for parents, but frequently parents either do not want support, or the support they do want is different from that envisaged by schools or social services. This was one of the reasons why the PPS were invariably keen to maintain the self-referral mechanism.

4.6. Publicity

Table 4.7 summarises the 2004 benchmarking data on the circulation of news about the PPS and the use of community languages and publicity formats suitable for people with disabilities. Estimated proportions of all PPS given in the table are based on the assumption that PPS not responding are likely to be those with less to report.
Table 4.7. PPS strategies for community languages and for publicity

<table>
<thead>
<tr>
<th>Community languages in Leaflets:</th>
<th>Number of LAs</th>
<th>Proportion of Responding LAs</th>
<th>Estimated Proportion of all LAs</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>33</td>
<td>47%</td>
<td>61%</td>
</tr>
<tr>
<td>Some</td>
<td>26</td>
<td>37%</td>
<td>27%</td>
</tr>
<tr>
<td>Most</td>
<td>11</td>
<td>16%</td>
<td>12%</td>
</tr>
<tr>
<td>Translation on request</td>
<td>63</td>
<td>69%</td>
<td>56%</td>
</tr>
<tr>
<td>Interpreter available</td>
<td>66</td>
<td>73%</td>
<td>58%</td>
</tr>
<tr>
<td>Formats used:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tape</td>
<td>19</td>
<td>21%</td>
<td>17%</td>
</tr>
<tr>
<td>Large print</td>
<td>18</td>
<td>20%</td>
<td>16%</td>
</tr>
<tr>
<td>Braille</td>
<td>13</td>
<td>14%</td>
<td>12%</td>
</tr>
<tr>
<td>Other</td>
<td>21</td>
<td>23%</td>
<td>19%</td>
</tr>
<tr>
<td>Any</td>
<td>47</td>
<td>52%</td>
<td>42%</td>
</tr>
<tr>
<td>All</td>
<td>12</td>
<td>13%</td>
<td>11%</td>
</tr>
<tr>
<td>Newsletter</td>
<td>50</td>
<td>54%</td>
<td>44%</td>
</tr>
<tr>
<td>Features in other local publications</td>
<td>56</td>
<td>61%</td>
<td>49%</td>
</tr>
</tbody>
</table>

Using the data above as a basis for estimating the situation across all PPS suggests that probably:

- less than half of PPS use community languages in their publicity
- more than half offer translation on request or make interpreters available, but this does not address the problem of making initial contact with parents who do not have a good grasp of English
- less than half of PPS use any publicity format aimed at people with visual impairment
- about one PPS in nine uses all the listed formats (Braille, large print and audio tape)
- less than half of PPS distributed newsletters and had news articles in local media.

Good evaluative ratings given for publicity, made on the basis of case study and interview evidence were associated with fuller use of community languages on leaflets and providing of information for news articles. This suggests that the correlation between the evaluative ratings and the benchmarking data that forms the basis for Table 4.7. was fairly robust.

b. Case studies and telephone interviews

There is wide variation in the way PPS publicise their services. The most common pattern is to have leaflets distributed to schools, libraries, health centres and doctors’ surgeries, supplemented by information in parish newspapers and newsletters from other agencies, and on LA and PPS websites. Information is also given to educational psychologists and SENCOs for them to pass on to parents. Five PPS mentioned building up a database or register of local agencies to provide easy access to information. Seven PPS reported having
a great deal of publicity, and it was obvious that they put careful thought into being proactive and finding inventive ways to advertise their services. PPS and SEN related materials were also included in the area, with the hope that a variety of people would then have access to them.

One PPS described setting up an area in a library devoted to information and resources for parents, such as how to host a children’s birthday party. PPS and SEN related materials were also included in the area, with the hope that a variety of people would then have access to them. One PPS advertise in the programme of the local football team, and another on the sides of buses. Another described the care they took in developing their website in terms of wanting to provide useful information, without overloading parents. One PPS does not have any publicity and seven PPS have only limited publicity, putting information about the PPS into local newsletters or folders produced by other agencies.

All PPS had a large amount of literature mostly, though not always, without the LA logo, which is a feature of the PPS operating ‘at arm’s length’ from the LA. Some LAs were comfortable with PPS removing the LA logo from their literature, which reflected their commitment to promoting and supporting PPS independence. The literature includes leaflets outlining the PPS as well as leaflets explaining exclusion, School Action and School Action Plus, statutory assessments, annual reviews, statements, transition, IPGs, ‘jargon busters’ and lists of other agencies. A small number of these leaflets were written by parents or SENCOs. PPS generally do their own publicity but often have a reciprocal arrangement with local voluntary organisations to share newsletters, or put each other’s information into their own publicity material. Several LAs automatically send out leaflets about the PPS or mention the PPS in letters regarding statutory assessment.

It was generally recognised that parents usually found out about the PPS through friends and family. Sending information directly to schools was usually the main tool for publicity, but almost all PPS expressed concern that the information was frequently not passed through the chains of communication within the school. A small but increasing number of schools issue leaflets to parents of children with SEN and approximately half of these display leaflets in the school. At the other end of the scale, one head teacher said the PPS termly newsletter is always really good, always focused on a particular topic, that they photocopy articles and distribute them to the staff and use the newsletter for training teaching assistants and for finding names and contacts.

When parents were asked about publicity, almost all expressed concern that there were parents who could benefit from support from the PPS, but who probably were unaware of them. This was seen to depend on what school the child went to. Parents suggested that although their child’s school was aware of PPS, this was usually because they had been informed by the parent - only in a couple of cases had the parent been made aware of PPS by the school. However, this seemed to be improving, with schools now often informing parents of PPS in correspondence or through a notice board. Although some PPOs had explained that they displayed leaflets in libraries, clinics, health centres, etc, parents often claimed not to have seen them.

To enhance the findings of the evaluation, parents at a large village primary school were also asked what they knew about PPS. The abilities of the children at the school range across the spectrum, and the percentage of children at the school with SEN is in line with
the national average. The school has had a limited but positive relationship with PPS in the past.

The researcher spoke to parents at the school gates during the morning and afternoon school runs over a two-week period. Of thirty-five parents, only four had any knowledge of PPS. One of the four is an SEN teacher at another school and one an SEN school governor. Both knew of PPS, but did not know about the organisation in detail and had not had any involvement with them. The other two parents both had children with SEN. One of these mothers reported that she was only vaguely aware of PPS. The other mother had extensive knowledge about and involvement with the local PPS. She reported asking the school SENCO for the contact details for the PPS, as she was aware of but unable to find them on her own. This mother noted that it was initially difficult to make contact with anyone in the PPS office, but that when she was finally able to do so, they were tremendously supportive and helpful. She felt that it would be useful to include a PPS leaflet when the school first writes to parents to inform them of their child’s SEN.

One PPS’s referral form lets them know where people learn about them, and the majority of people who call have information from a support service or volunteer organisation they have been working with, although some obtain information from libraries or other sources.

Comments made by PPS regarding publicity were that it can be time-consuming and expensive to produce leaflets and other forms of publicity, and that there is a real risk of over publicising. One PPS who felt their publicity had been too successful explained how on one day they had received as many as 36 telephone calls. As illustrated in 4.2, given the significance of personal recommendations and ‘word of mouth’, PPS were quite aware of the need for effective management of publicity.

PPS who try to publicise their services through a range of media said they are concerned that there are still people who do not know about them. One PPS which has a range of publicity activities, including giving talks to other groups, contributing to newsletters, joining in events (Connexions events for example) and going to parents evenings said they are aware that they are not reaching everybody – they hear this from parents, that parents learn about PPS from another parent. Some schools and SENCOs pass on information but the latter are not always aware of PPS.

Making their publicity material accessible to ‘hard to reach’ families was a particular concern for some PPS. Three PPS spoke in detail about the need for publicity and information in community languages. One PPS provides information in six languages, available both in print and audiotape (with written transcript) and is now producing versions in large print and Braille.

One PPS had leaflets translated into Punjabi, Bengali and Cantonese, and also have them on CDs for those who prefer listening to reading. Another PPS reported that they have information on their website in English and eight community languages so people can download information quite easily, and that people have commented about how easy and useful the website is. Another PPS told us they had leaflets translated using funding from the Children’s Fund into the two most used community languages, and are working with other multicultural groups ‘…to find out how we can make sure that we reach those families’. Wherever there was a perceived need from the community PPS had their
publicity translated into other languages but assessment of the effectiveness of translations and accessing ‘hard to reach’ families was generally anecdotal.

All except one (with a new PPO) of the PPS carry out some form of evaluation of their publicity or are planning to do so. One PPS said that part of their evaluation of their publicity was to go into libraries and other locations, see whether their leaflets have been taken and replace them. Several PPS mentioned that they review the effectiveness of their publicity on an ongoing basis. One example, was changing the format of their newsletters to an information booklet.

One PPS said that they knew how many ‘hits’ there had been on their website and had recently undertaken a survey of SENCOs, educational psychologists and others to ask what they know about the PPS, whether they use it and so on. Another PPS had commissioned a charity to survey parents. Another monitored on a monthly basis, looking at the number of telephone calls and referral forms by ethnicity, language and gender. One PPS said they review their leaflets annually, usually during July and August ‘as that is PPS’s quiet time and we update anything that needs updating’.

4.7. Role of NPPN, Napps, Regional Groups

Although some PPS were aware of the NPPN monitoring and evaluation guidelines, most did not make active use of them. Also, from the interviews, very little mention was made by PPOs of the role of Napps. However, several PPS felt that the NPPN provided them with a great deal of valuable information and they found the NPPN Website to be a useful source of information on new legislation.

It was also noted that some staff, particularly those newer to their posts found the NPPN E-forum to be an excellent source of information and ‘moral support’. Some PPS had used it as a tool for linking in with other PPS and sharing knowledge about topical issues, including feedback on how to address problems. This moral support was considered particularly useful given the absence of a close local support network or regular supervision. For example, a significant number of PPS appeared to have very limited support from the LA in terms of supervision, information sharing, monitoring and improving relationships with other agencies (20%). There was a consensus that they were largely ‘left to their own devises’, and although this meant they had significant flexibility in how they managed their time and resources, they sometimes felt isolated and relatively unsupported by their LA. The E-Forum played a valuable role in minimising this.

PPS tended to look to the Regional Parent Partnership Groups for moral or practical support (these groups have Napps, NPPN and some SENRPs representatives). It was often commented that PPOs got most of their support from ‘each other’. Regional meetings were considered an ideal opportunity for sharing information and ideas. PPOs felt that the meetings enabled them to develop a wider perspective in that they allowed them to see how their PPS compared to others, which helped them to become more reflective. One PPO commented that they acted almost as a pressure group.

PPOs often explained that they felt isolated in their role, and there was a sense that in terms of tackling isolation, more support could be gained from local or regional networks rather than national.
There were some concerns that there was less support available for more experienced PPOs and much of the support and advice available was aimed more at newer employees. This also extended to career progression and one PPO was concerned that limited opportunities for career progression ran a risk of ‘losing’ strong individuals to other agencies.

4.8. LA arrangements for meeting the expectations for PPS (2.18 of the SEN CofP)
Section 2.18 of the SEN Code of Practice sets out the responsibilities of the LA for ensuring the effective delivery of PPS. These include setting out funding and budgeting plans for the service, ensuring appropriate management structures, and ensuring the service is provided with accurate information on SEN processes. Some of the key responsibilities of the LA are summarised below, although they are also covered in more detail in Chapter 4.

a. Funding arrangements
Of the 102 LAs providing adequate data for analysis, 88 said all funding came from the LA; seven said more than two-thirds of spending came from the LA and the rest from other sources; four said less than two-thirds came from the LA and the rest from other sources; only three mentioned contributions from health or Social Services. However, this may not represent the situation in non-responding LAs.

None of the PPS or LAs selected for case study or telephone interview said that the LA had an explicit formula for calculating budgets for PPS. PPS monitoring did not appear to be linked to budgeting for SEN in general and there was no evidence of a coherent national LA system for calculating budget allocations. All the PPOs felt that they had sufficient autonomy over how they managed their budget, most of which was taken up with staffing costs.

b. Development plans
Although the SEN Code of Practice states that LAs are expected to ensure that PPS have a development plan, data from interviews with LAs and PPOs suggested that the design of the development plan was generally very much the responsibility of the PPS, often with little involvement from the LA.

Two indications of the compatibility between PPS and other local services is the extent to which other local plans and strategies contributed to the creation of the PPS development plan and the extent to which other local services are represented on the management or steering groups of the PPS. The large majority of responding PPS reported that they did have development plans. Probably such plans exist in about 74% of LAs and in a slight majority of all LAs working parties were used to create these plans (58%) and SEN Plans were taken into account (54%).

Estimated proportions of all PPS given in Table 4.8. are based on the assumption that PPS not responding are likely to be those with less to report. There was no evidence of any relationship between having development plans and having a management or steering group. There was some evidence to suggest that PPS with parents on the management or steering group (58%) were more likely to use working groups for development plans than those that did not have parent representatives (39%).
Table 4.8. Existence of and contributions to development plans

<table>
<thead>
<tr>
<th>Contributing factors:</th>
<th>Number of LAs</th>
<th>Proportion of Responding LAs</th>
<th>Estimated Proportion of all LAs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Development plans</td>
<td>84</td>
<td>91%</td>
<td>74%</td>
</tr>
<tr>
<td>Contributing factors:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behaviour Support Plan</td>
<td>27</td>
<td>29%</td>
<td>24%</td>
</tr>
<tr>
<td>Children's Services Plan</td>
<td>23</td>
<td>28%</td>
<td>23%</td>
</tr>
<tr>
<td>Connexions Plan</td>
<td>5</td>
<td>5%</td>
<td>4%</td>
</tr>
<tr>
<td>Early Years and Childcare Development Plan</td>
<td>41</td>
<td>45%</td>
<td>36%</td>
</tr>
<tr>
<td>EDP planning/consultation</td>
<td>38</td>
<td>41%</td>
<td>33%</td>
</tr>
<tr>
<td>SEN Plan</td>
<td>61</td>
<td>66%</td>
<td>54%</td>
</tr>
<tr>
<td>Other</td>
<td>19</td>
<td>21%</td>
<td>17%</td>
</tr>
<tr>
<td>Working Parties</td>
<td>66</td>
<td>72%</td>
<td>58%</td>
</tr>
<tr>
<td>Panels</td>
<td>27</td>
<td>29%</td>
<td>24%</td>
</tr>
<tr>
<td>Consultations</td>
<td>45</td>
<td>49%</td>
<td>40%</td>
</tr>
</tbody>
</table>

This table suggests room for a more joint up approach to writing development plans as it indicates that PPS development plans are not closely correlated to other plans, such as Behaviour Support Plans, Early Years and Childcare Development Plans or SEN Plans.

c. Management structures
The LAs tended to meet with the PPOs between every three weeks to once a term for management or supervision purposes. Although it should be standard practice, this was not recognised in all LAs and some LAs interviewed for case study did not have a service level agreement or any clear targets for the PPS. PPS were very much expected to take the lead on the design of their development plan, often with little active contribution from the LA.

From the benchmarking data, PPS in 54 LAs reported having a management or steering group (59% of respondents) There was some evidence that services that were either outsourced or mixed were more likely to have management or steering groups than in-house services: 77% of the former and 53% of the latter stated that they had such groups. All those who reported having management or steering groups also indicated that the group included LA representatives. However, this data is derived from those who responded to Form 2 of the benchmarking data and is probably optimistic.

Data from the benchmarking exercise suggested that almost all management or steering groups, where they existed, included parents, voluntary organisations and LA representatives. About half include Health, Social Services and Schools representatives. Few include Advisory teachers but hardly any include young people.
Table 4.9. Existence and composition of management or steering groups

<table>
<thead>
<tr>
<th>Management or steering groups</th>
<th>Number of LAs</th>
<th>Proportion of Responding LAs</th>
<th>Estimated Proportion of all LAs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stakeholders represented:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parent</td>
<td>48</td>
<td>52%</td>
<td>42%</td>
</tr>
<tr>
<td>LA Officer</td>
<td>52</td>
<td>57%</td>
<td>46%</td>
</tr>
<tr>
<td>Health</td>
<td>31</td>
<td>34%</td>
<td>27%</td>
</tr>
<tr>
<td>SSD</td>
<td>30</td>
<td>33%</td>
<td>26%</td>
</tr>
<tr>
<td>Schools</td>
<td>30</td>
<td>33%</td>
<td>26%</td>
</tr>
<tr>
<td>EP Service</td>
<td>25</td>
<td>27%</td>
<td>22%</td>
</tr>
<tr>
<td>Advisory Teacher</td>
<td>11</td>
<td>12%</td>
<td>10%</td>
</tr>
<tr>
<td>Early Years and Childcare Partnership</td>
<td>25</td>
<td>27%</td>
<td>22%</td>
</tr>
<tr>
<td>Young people</td>
<td>2</td>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>Voluntary organisations</td>
<td>47</td>
<td>51%</td>
<td>41%</td>
</tr>
</tbody>
</table>

Figure 4.2. below illustrates the number of responding PPS reporting different numbers of types of representative on their management or steering groups. Of the three PPS with only two types of representative, one in-house service mentioned LA officers and voluntary organisations, one mentioned LA officers and social services, and one out-sourced service mentioned parents and voluntary organisations. Taking the 11 PPS with seven types of stakeholder representative as doing reasonably well in this respect, it is worth noting that all included parents, LA officers and voluntary organisations; one included young people; none included the Advisory Teacher Service; and a large majority include the remaining types. Although this is only an indication rather than conclusive proof, it does suggest (using the estimation procedure described above) that something like 17% of PPS are doing a fairly good job of forming partnerships, particularly between parents, LAs and voluntary organisations.

Figure 4.2. Number of types of stakeholder represented on PPS management or steering groups
d. Provision of accurate information on SEN

Qualitative interview data suggested that information sharing between the LA and PPS was problematic for the majority of PPS. Approximately half the PPS interviewed at case study level and over the telephone stated that they had experienced some problems getting information from the LA and around 20% expressed major concerns with communication and information sharing with the LA. Over 20% complained that the LA frequently did not keep them informed about changes to policy, training opportunities or relevant information on specific cases. PPS sometimes stated that they did not feel ‘part of consultations’ and five PPS (out of 20 case studies) stated that they tended to find out about policy changes through their own reading, parents, support groups, or the newspaper rather than through their LA. One of these stated: ‘lots of our work is done in the dark’. When asked what they would like to see as a result of the evaluation, the same PPO stated that they wanted to see a national directive that required ‘the LA to ensure that PPS were more involved and consulted’.

In a small number of PPS the relationship with the LA was seen to be highly problematic. In one particular instance the LA appeared to have a very tight control over the activities of the PPS. Explaining their understanding of the role of PPS, this particular LA stated:

‘No partnership is independent of the LA... I don’t want [the PPS] to try to excuse the LA or anything that’s not their role. Their role is very much to listen to the parents’ issues and to act as a mediator in some respects but not, I think, to act against the LA in any way’.

Another LA officer reported that PPS would never be able to facilitate collaboration between parents, schools and the LA because the structures and policies inevitably gave rise to conflict. It was felt that without changing these structures, disagreements would continue and PPS would be unable successfully to engender a culture of collaboration.

There was a perception by PPOs that communication difficulties were more apparent when the PPS was out-sourced even though out-sourced PPS were more likely to have a management group. This suggests that PPS with management or steering groups could benefit from monitoring their effect on communication. Other factors considered to contribute to communication problems were where the PPS was geographically separate from the LA, or more often where there were specific individuals in the LA who were not considered to be supportive or sympathetic to the role of PPS. The majority of PPS felt that their relationships with the LA were improving, but that they could be improved further.

A smaller number of those interviewed were very keen to emphasise the strengths of their relationship with the LA. Strong relationships and good levels of communication were found where there were supportive individuals in the LA, but also where the PPS had strong, determined personalities with developed managerial and problem solving skills (see 4.4.). In these circumstances, LA officers spoke very highly of the PPS casework but also of the insights, vision and practical contributions that PPS were able to make to broader strategic developments within the authority.
One PPO explained that they:

‘…have very, very supportive colleagues. We bear in mind that the LA are very supportive to us and therefore stay very much within the strategy unit, and I think it is very easy for us to do that because we are playing fair with people who are playing fair with us and that’s the bottom line’.

In one PPS, there were very strong links with the LA, with the LA inviting PPOs onto the interview panel for key posts in education. It was felt that this was very positive as it enabled the PPO to play a key role in ensuring that the post is given to somebody who is capable of relating to parents and appreciative of the aims and objectives of PPS. This same PPO stated that it is essential that PPS operates in a climate where they are accepted by the LA, are seen as being an important contributor and where they are referred to for support. Another nine PPOs reported their contributions to or participation in the work of local strategic bodies both within and outside the Education departments. The role the PPS can play in influencing policy and practice was very much recognised by both the PPS and the LA.
Contextual Information

Key Findings

Budget
- Wide variation in budget between and within regions
- Evidence that *overall* budget rather than spend per pupil on roll has more impact on the effectiveness of the PPS, suggesting that PPS in smaller LAs may need external support if they are to deliver the range of services available in larger areas
- Lack of a clear formula for calculating budgets or linking budget to SEN in general and room for developing a more coherent, systematic way of calculating budget

Staffing
- Wide variation in levels of staffing for PPS
- Administrative support plays significant role in enhancing impact of PPS
- PPS have effective ways of dividing workloads, with workers having specific tasks and areas of expertise
- Mixed views about the role of IPSs
- Evidence that individual personalities of PPOs very significant in determining impact of PPS
- Variation in staffing levels more significant within GOs than between them

Maturity of service
- More mature services are likely to report more referrals, have more parent or carer service users involved with parent forums
- However, no clear correlation between maturity of service and evaluative ratings for Networks; Monitoring; Impact; Training; IPSs or Publicity. This suggests that maturity of service is not a good indicator of the performance of the individual PPS or strategic work

Accessibility / Publicity
- PPS tend to use a wide range of methods for distributing their publicity and have extremely good publicity material
- Approximately 75% of PPS have some form of website
- There are problems with schools not distributing PPS leaflets, and posters are considered a useful additional way of publicising the PPS
- More could be done by the LA to actively publicise and promote the PPS
- Large number of potential users who are still unaware of PPS

Role of NPPN, Regional Groups
- NPPN are a valuable source of practical information on new legislation
- Not all PPS claim to be aware of the monitoring guidelines that were drawn up by NPPCG, ratified by Napps and NPPN and circulted to all PPS in November 2004
- E-Forum and Regional Parent Partnership Groups (supported by Napps and NPPN representatives) considered useful in providing moral and practical support. Especially valuable given that many PPOs feel relatively unsupported by their LA
- Potential for providing more support for more experienced PPOs and exploring opportunities for career progression within PPS
Information sharing

- Some PPS experience little information from the LA
- Problems with LA are often with specific individuals or personalities
- Not all LAs fully appreciate the value of PPS and this is reflected in the diversity in the quality of information sharing between LAs and PPS
5. PROCESSES

<table>
<thead>
<tr>
<th>Content Summary</th>
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<tbody>
<tr>
<td><strong>Training</strong></td>
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<td><strong>Use of IPSs</strong></td>
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<tr>
<td><strong>Workload</strong></td>
</tr>
<tr>
<td><strong>Networking</strong></td>
</tr>
<tr>
<td><strong>Impact on Parents</strong></td>
</tr>
<tr>
<td><strong>Monitoring</strong></td>
</tr>
</tbody>
</table>

5.1. Training

The majority of PPS were committed to the idea of training. Almost all the PPS were involved with training and not only trained IPSs, but also offered training to a wide range of people, including parents, LSAs, teachers, SENCOs, governors, community groups, education officers, welfare officers and educational psychologists. Only two out of the 52 PPS interviewed stated that they had not done any training and only eight of those interviewed had only trained IPSs. One PPS mentioned buying in training from other agencies. The data suggested that anything up to 72% may be providing training for a range of people as well as IPSs. However, although a small number of PPS had well established training and staff development programmes, most training was ad hoc, with PPOs often responding to invitations to talk on a particular subject. There is potential for PPS to develop a more strategic approach to training.

PPS generally offered training to a wide range of people, with almost half the PPS who responded to the benchmarking data stated that they devoted between 10% and 20% of their time to training. The overall mean was 9.7%. There was also evidence that employed staff in PPS with more IPSs spent a greater proportion of their time in training.

Nearly all the PPS said that training was an important part of their work and that they would like to have the time to do more. One exceptional PPS interpreted their role in a very strategic way in that they did not do any casework and was only engaged in training. However, a significant number of PPOs (22) stated that training (in particular of IPSs) was too time consuming and they would prefer to devote more time to casework. This was often because of the length of time taken to plan and run the training courses, supervise volunteers and then sometimes counsel them out of continuing because of suitability issues.
Those who were most concerned about the use of IPSs were often, although not exclusively, likely to stress the importance of casework over strategic work.

Of the 90 LAs that gave information about whether the IPS training was accredited, 12% mentioned accredited training and 53% mentioned some form of training. This suggests that about 42% of all LAs have training for IPSs and about 10% have accredited training. There was strong evidence of systematic differences between GOs, with no accredited training reported in the North-East, East of England, South-East or London. Those with accredited training reported on average 12% of time spent on training, those with non-accredited training 11% and those with no training for IPSs 7.5%. Significantly, there is evidence that accredited training is more likely to be provided in PPS with a larger overall spend rather than relative spend per pupil on roll. This supports comments made in Chapter 3 concerning the impact that overall budget (rather than relative budget) may have over the service the PPS can provide.

PPS were generally very good at monitoring their training through issuing satisfaction questionnaires to those attending sessions. Although problematic within existing resource and time constraints, it would be beneficial for PPS to explore the possibility of developing a more systematic way of monitoring the impact of their training as this would provide a basis for a more strategic approach to training and support them in capacity building and targeting their training more effectively.

### 5.2. Use of Independent Parental Supporters (IPSs)

It is clear from the 2004 benchmarking data illustrated in Table 5.1. that PPS in different types of LA are likely to have very different numbers of IPSs, though there is a great deal of variety within each type of LA. London Boroughs tend to have relatively few. Unitary authorities and old counties tend to have relatively high numbers.

<table>
<thead>
<tr>
<th>Table 5.1. Mean numbers of IPSs by type of LA</th>
</tr>
</thead>
<tbody>
<tr>
<td>London Boroughs</td>
</tr>
<tr>
<td>Metropolitan Boroughs</td>
</tr>
<tr>
<td>Unitary Authorities</td>
</tr>
<tr>
<td>New counties</td>
</tr>
<tr>
<td>Old counties</td>
</tr>
<tr>
<td>Overall</td>
</tr>
</tbody>
</table>

There was also strong evidence for differences between GOs. PPS in the North East and East Midlands tended to have very high numbers of IPSs in relation to reported caseload.

There is also very strong evidence for a positive relationship between the number of IPSs and the overall spend of the PPS rather than the relative spend per pupil on roll. Again, this supports the suggestion that in smaller LAs, the PPS may need more external support in order to deliver the range of services that are possible in larger areas.

Significantly, better evaluative ratings for Impact were closely associated with numbers of IPSs reported in the 2004 benchmarking data. This applies whether regard is given to total numbers, numbers active on 1.7.04 or numbers newly trained. However, impact ratings were not linked to IPS numbers considered in proportion to population. Good ratings for
IPSs were also associated with numbers of active IPSs, but not total numbers or numbers of new IPSs. Good use of IPSs was also associated with numbers per pupil on roll, numbers per referral and numbers per service user.

From the benchmarking data proportions of time spent on direct work with parents varied greatly, as shown in Table 5.2. The mean is 62%, indicating that the balance of work is weighted towards direct working with parents. Higher proportions of time spent by paid staff with parents was also strongly associated with low numbers of IPSs (in particular number of IPSs per parent/carer service user). This is because PPS with low numbers of IPSs were having to devote more time to casework. Conversely, those with higher numbers of IPSs were able to devote more time to strategic work, enhancing their long term impact. This indicates that IPSs are making a real contribution in taking the pressure of direct work with parents away from PPOs and emphasises the importance of IPSs in determining the nature of work done by a PPS (see 5.1., 5.3 and 5.4. for discussion of involvement in strategic work).

Table 5.2. PPS percentage of time spent by employed staff working directly with parents

<table>
<thead>
<tr>
<th>Number of LAs</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>under 20%</td>
<td>1</td>
</tr>
<tr>
<td>20-29%</td>
<td>3</td>
</tr>
<tr>
<td>30-39%</td>
<td>7</td>
</tr>
<tr>
<td>40-49%</td>
<td>10</td>
</tr>
<tr>
<td>50-59%</td>
<td>11</td>
</tr>
<tr>
<td>60-69%</td>
<td>22</td>
</tr>
<tr>
<td>70-79%</td>
<td>27</td>
</tr>
<tr>
<td>80-89%</td>
<td>14</td>
</tr>
<tr>
<td>90 plus</td>
<td>5</td>
</tr>
</tbody>
</table>

From the qualitative data, opinions concerning IPSs were very divided and split between around half feeling very positive towards them, and the other half, although valuing their contribution, also having some reservations concerning how their skills and experience could best be utilised. PPOs were extremely grateful of the efforts and sacrifices made by IPSs and it was accepted that their role was often very challenging. Most PPS were using IPSs as and when required to cover different cases and respond to specific queries but a smaller number would hand over cases to IPSs that they would then take responsibility for. Where IPSs were discussed most favourably it was generally where PPS had recruited exceptional, dedicated and committed individuals. Where PPOs were using IPSs extensively, they were seen to be invaluable.

40% of the PPOs from the telephone interviews and case studies (16 out of 42) expressed some reservations about how IPSs could best be used. Most of the concerns related to the costs of recruiting, training and supervising IPSs, or IPSs not being available when needed. A few PPOs also mentioned that occasionally they get volunteers who may want to become IPSs for the ‘wrong reasons’ in that they have personal problems, and one felt there was a risk that using volunteers made the service look ‘unprofessional’. Five of the 42 said that they did not use IPSs at all and a further four expressed concern that the demands placed on IPSs were unfair, given that they are volunteers.
Where PPOs were most comfortable with IPSs, they tended to have them working on less complicated casework or managing the helpline, although a few (3) stated that the IPSs managed most of the casework. A small number of PPS were starting to think about using IPSs less on casework, and getting them more actively involved with other areas, such as organising publicity so that it would free up staff to concentrate on casework and strategic work. In one particular PPS, this policy seemed to work very well.

There was a positive correlation between the number of paid staff and the time spent on training. However, the relationship with staffing levels and IPSs is more complex. Concern about the benefits of IPSs did not appear to directly relate to funding levels and there were a number of well funded PPS with good staffing provision that were still sceptical about the use of IPSs. This weight of opinion regarding the use of IPSs suggests that their role could be reviewed in order to make best use of expertise and support of IPSs (to the benefit of PPOs, IPSs and the local community). Although progress has been made with the publication of the IPS Pack (CDC & ACE 2005), there remains a lack of consensus regarding the utility of IPSs and there is further scope for strong guidance on how IPSs could be best utilised and for closer monitoring of the role of IPSs.

The use of IPSs also has funding implications as a significant number of PPOs had trained very good, committed and dedicated IPSs who had gone on to obtain paid employment. Although this was not always cited as a problem, (many PPOs were actually comfortable that their trainees were having a positive influence in other areas) there was sometimes a sense that the ‘volunteer’ element of being an IPS occasionally had an influence over the dedication of the staff. It is important that the skills and experience of IPSs are used to inform service development so that they can have an enhancing rather than compensatory role. There are obvious funding implications if IPSs are to continue to engage in casework and if PPSs are to appreciate the full value of IPSs, they will need to be equipped with the resources to provide appropriate training.

5.3. Workload
From the benchmarking data, the mean time spent on strategic work was 14%. Fifty seven respondents gave figures between 10% and 20%: that is, between half a day and one day per week. Twenty seven reported lower proportions of time and twenty reported higher proportions. Of the 53 responding PPS, 85% claimed to deal with 90% of their referrals within one or two days. Only 2% reported taking five or more days. Better ratings for networks were also associated with longer times to respond to 90% of referrals.

The level of workload for PPS is unclear, as this was an area that respondents to the 2004 benchmarking questionnaire found difficult. However, high numbers of referrals reported for 2003-2004 were closely associated with evaluative ratings for Impact in the case study and telephone interview PPS. Higher proportions of involvement in appeals lodged with SEN and Disability tribunals were associated with better overall ratings.

The majority of PPS gave examples of effective networking with local or regional statutory and voluntary bodies as evidence of their strategic work with only two feeling that they worked exclusively on casework. Around 25% considered strategic work as essential as casework, although these tended to be where staffing levels enabled them to have one worker almost as a designated 'strategic worker'.
An estimated 76% of all PPS provide a service to parents of children excluded from school (based on 95% of responding PPS reporting such a service). Only one PPS stated explicitly that they would only work with cases concerned with education, although most reported that while their remit was strictly education, the holistic perspective of a child’s needs meant that professional boundaries were frequently blurred. Concern was often expressed about the difficulty of identifying issues relating to SEN. For example, children may be excluded due to behaviour problems but may have unrecognised or undiagnosed SEN. All the PPS explained that they would not turn people away, but would attempt to ascertain the problem and refer them to an appropriate agency. It was also noted that are occasions when there is enormous stress for parents of children without SEN, and authorities ask PPS for support and this has to be managed carefully.

However, where a case was clearly outside the remit of the PPS, they would refer the parent onto another agency. One PPS outlined what they saw as best practice in making referrals in that they would always speak to the relevant agency and explain the situation on the parent’s behalf and then follow up the referral to ensure the parent had received the right support. A small proportion said that they always follow up referrals, and some said that they would like to if they had more resources. Most felt that it was not necessary as they were generally still involved with the case.

None of the PPS described directing parents to a local disagreement service, and they all stated that as far as they were aware, parents in the area had had little or no involvement with disagreement resolution service. There was a general consensus that this was due to the intervention and mediation role played by the PPS in that many parents now have the opportunity for early PPS support. There was evidence that this role of PPS was also acknowledged by the disagreement service in that PPS often said that their local disagreement service routinely ask parents who have been referred to them whether they have had contact with PPS.

Evaluative ratings given to case studies and interviews for Impact were associated with total spend on disagreement resolution. The size of the 2004 budget for disagreement resolution was associated with better ratings for networking, training and IPSs. Ratings for training and use of IPSs was even more closely associated with spend per statement of SEN.

5.4. Networking

Fewer than half PPS appear to organise or participate in parent carer forums. Of responding PPS 47% did so. This may indicate that about 40% of all PPS do so. LAs in which the PPS participated in a parent carer forum were more likely to fit the profile of having many staff, many referrals and using the phone during office hours, but not having a dedicated helpline and probably not having and answer phone, using e-mail or other routes for enquiries. They tended to be higher spending, with higher reported volumes of business, more time spent on strategic work and less time spent by staff working directly with parents. Speaking specifically of challenges facing voluntary agencies, Rochester recognises that: ‘Maintaining contact with other agencies, the statutory sector and funders is a time-consuming activity that must often take second place to delivering services’ (Rochester 1999). A study of multi-agency partnerships in services for disabled children found that although there was wide spread multi-agency working, there was wide variation in the way it operated and the extent of its effectiveness. It was found that this was largely affected by
levels of funding, management, good communication, information sharing and issues of confidentiality, and also different values and working practices between agencies (DfES 2005). Similarly, Every Child Matters website states: ‘Multi-agency working is easier where the aims of the various agencies coincide and where their targets are mutually consistent’ (ECM 2005).

This value and importance of establishing good working relationships with other agencies was recognised by all PPOs. Typical PPO comments included: ‘when we work together we are so much more effective’ and ‘the more we can work together, the better the outcome for children and their families’.

All of the PPS signposted parents to LAs, health and social services, other PPS, voluntary services and community organisations. One exceptional PPS focusing exclusively on strategic work did not conduct any casework and signposted all enquiries. Other agencies to which parents were signposted were mainly local branches of voluntary agencies or local parent support groups for specific disabilities or aspects of SEN.

In all but one of PPS most of the work was also conducted with and through schools. The PPS all had regular contact with other groups and teams such as SEN Teams, Educational Welfare Services, Sure Start, voluntary organisations, Pupil Entitlement Support Officers, Exclusion Teams, Educational Psychology Service, Health Service, SEN Forum, and Children’s Trusts. In one case, the PPO was the Chair of the Regional Mediation Group. Management Groups were seen as an essential tool for information sharing and knowledge transfer.

When discussing the barrier to multi-agency working and networking, PPOs generally outlined three specific areas: time constraints, personalities, and a lack of understanding of the role of PPS. PPOs invariably referred to the length of time needed to establish good working relationships. Where PPOs had been in post for some time, and/or had previously held other roles within the LA, they were more likely to have a positive impact on developing relationships and breaking down barriers. There was also felt to be a lack of understanding of the role of the PPS, with defensiveness and mistrust on the part of professionals and particularly, schools. LAs have an important role to play in ensuring that schools fully understand the role and benefits of PPS.

All the PPS referred to problems with some schools but it was felt that once contact had been made PPS were very good at developing relationships with schools and persuading them of the benefits they (PPS) can offer. Nearly all PPS stated that their communication difficulties tended to be in specific schools, rather than across the board. Around half the PPS said that an increasing number of schools were contacting them directly for advice.

A small number of schools routinely invite the PPS to School Open Days and SENCOs inductions. Around 20% of PPS felt they were sufficiently well known in the local area that they tended to be contacted by either the school or parents in the very early stages, whilst communication was still relatively good between the school and parent. However, in a small number of cases, either due to ineffective publicity or poor relations with schools, the PPS appeared to be contacted much later on in the process, often only after a conflict between the school and the parent. There was a sense that many of the PPS were only reacting to individual cases and referrals and consequently were led by client demand. As
such, there is the potential for PPS to develop a more proactive approach with schools and others agencies.

**Hard to reach**
A small number of PPS said they felt they were *aware* of the hard to reach groups they were not accessing; but only one was actually monitoring whether they were accessing hard to reach groups. This particular PPS had performed a risk analysis, which demonstrated that they were not accessing the local Somali population. Problems of accessing the hard to reach groups were often cited, in particular in relation to appropriate publicity and recruiting IPSs from a range of communities.

To see if the extent to which the PPS are accessing special schools, telephone contact was made with special schools in 18 of the areas included in the case studies. All but two of the schools contacted teach both younger and older children (from preschool to 19) and two teach only children between ages 11 and 19. Most taught children with a range of severe, profound and multiple learning difficulties and autism.

Schools were asked whether they or their parents had any knowledge of or involvement with PPS. Generally, where the school had an active relationship with PPS, parents were also aware of PPS, and in some cases were actively involved. Five schools reported that some parents may have or have had some awareness or involvement with PPS and four reported having no knowledge or relationship with PPS. A further eight schools reported some awareness or involvement with PPS. Relationships here included the having PPS leaflets in school, having some limited communication with PPS, being in the process of setting up a relationship with the local PPS and the PPS using the schools for meetings. Six schools reported having considerable involvement with PPS, and were very positive and enthusiastic about PPS and its role in the school and in supporting parents.

**5.5. Impact on Parents**
Twenty three parents were interviewed through the case studies and nine responded through satisfaction questionnaires or by contacting the evaluation team directly. Interviews with parents tended to be less structured than those with PPOs or other staff so that parents could be more comfortable in talking about their own experiences of PPS. Standard prompts were used, but responses were very varied so it is not always possible to quantify the responses.

The response from each of the case study interviews was very similar and overwhelmingly positive. Parents primarily mentioned the role of PPS in terms of increasing their awareness of SEN, empowerment and providing emotional and moral support.

**a. Increased awareness**
The 23 interviewed parents felt that the PPS was neutral and not acting on behalf of the LA and had increased their knowledge about SEN. One parent was keen to comment that although the felt the PPS was neutral, and fully supporting the parents, they provided a balanced, informed perspective. This parent explained:

‘I think they try to act all around, they don’t take sides, they try to make sure things are going right they don’t just think right we’re fighting for a parent… they know what’s right and what’s not right’.
Another key benefit discussed by parents was the role of the PPS in ensuring that parents were fully informed of their rights and responsibilities, and making them aware of the processes. One parent explained that:

‘Parents are expected to enter this, sort of bureaucratic system and understand all these forms, and understand that this affects your child’s education, but with no knowledge. You are given no warning about the processes’.

All parents interviewed mentioned how they were now much more knowledgeable about the processes - many of them had gone on to complete training offered by the PPS. (A small proportion of the IPSs interviewed during the case studies had initially been users of the PPS.)

b. Empowerment
Parents also thought that the PPS played a key role in empowering parents, providing emotional support and keeping parents informed and sharing information. One parent explained how they were much more confident and needed less support from PPS, stating: ‘now I’ve got more involved in that kind of thing, I don’t quite need [as much support]. Every now and then I might ring her up for a bit of advice on something, she’s more there for advice now’. When asked whether the result may have been different if PPS had not have been involved, the parent commented:

‘I don’t think [my child] would have been statemented…Me and [PPO] went and met the head teacher and got things rolling, but I think if I had done it as me on my own, no way! Or it would have been a longer process, definitely, because I didn’t know where to go, and I didn’t have the confidence to go knocking on the headmaster’s door. [The PPO] said what rights I had as a parent, and what rights the school had. Very level headed’.

They went on to say that they felt the school treated them more positively now because the schools appreciates that they are more aware of their child’s needs and consequently treat them with more ‘respect’.

c. Emotional support
Another parent commented that: ‘Cos it’s your own child, you sort of lose it. And if you do get somebody else you’re a lot more confident, I suppose’. It was acknowledged that when parents contact the PPS for the first time, or attend meetings with the school or LA, they are often very emotional and not always capable of remaining calm. One parent stated:

‘I was just crying, you know, I was in such a stressful struggle, but just being able to talk to somebody and have them understand what you’re going through. [the PPO] was saying ‘OK, I know’”.

Another parent explained: ‘They just really supported us, for they know, I mean they know what it’s like, so it was really, really helpful to have [PPO] with us. Parents often commented on the importance of having an individual who could support them emotionally, and be able to offer moral and qualified support at meetings. They commented on the value of feeling that they were not alone.'
d. Evaluative comments on PPS
All parents who were asked said that they would recommend PPS to friends or family – more than half had already recommended PPS to people who had gone on to seek support from them.

All parents explained that the PPS had been very supportive and helpful to them, and that they perform an invaluable job. One commented that they felt the PPS were under funded, explaining: ‘PPS need more funding so they can help more people. PPS is essential. Some parents are not in a position to deal with these things themselves’. Three other parents explained that they felt the staffing of the PPS may be insufficient to manage the workload. Common statements around this included:

‘We understand how busy they are, but I think if anything I think they should have someone just to man the phone and say they’ll try to get somebody back to you… I think that would be more positive than just getting no where at all, or just an answering machine and still not getting any feedback’.

‘It was very slow in getting a response and I left a load of messages on the machine’.

‘It’s just that you know, and that happens in all offices. You know you tend to get so overwhelmed with workload, that you do get answering machines and so on. You know, it happens in all offices. You have to understand that, but when you know, you’re so frustrated with other things and then it’s not you, it’s your child that you’re trying to shield’.

Interviewed parents were overwhelmingly positive in their description of PPS, often commenting on how the involvement of PPS had had a positive impact on the outcome. This was also reflected in satisfaction questionnaires returned to PPS.

Five parents contacted the evaluation team independently. Three of these offered a more critical perspective on two particular PPS. Two parents from the same Authority were concerned that the PPS had not been ‘neutral’ but had sided with the LA.

However, the other two parents who contacted the evaluation team offered a very positive assessment of their experiences with the PPS. One parent commented that they had ‘found the Parent Partnership to be very approachable, and whilst clearly happy to support and advise, your case is never ‘taken over’. On the independence and neutrality of PPS, they went on to comment: ‘I feel that [my PPS] has achieved a good balance in providing a professional working relationship with the LA and schools. In my view [my PPS] comes in the top 5% of Parent Partnership services within [my Region]’.

Satisfaction questionnaires were also issued to parents. From the four who returned the questionnaire, two found out about the PPS through a local support group, one through the internet and one found out through their employment at the LA. The questionnaire asked whether they felt the information provided was neutral, accurate and knowledgeable. Two of these felt the information provided was neutral, one felt it was not, and one did not answer. Two felt it was accurate, one said it was not accurate, and one declined to answer.
When asked whether they felt the information provided was knowledgeable, two said no, one said yes, and one did not respond.

Some respondents to the satisfaction questionnaires (three out of four) expressed concerns that the relationship between the LA and PPS deterred some parents from contacting them, stating: ‘Because PPS are seen to be ‘part of the LA set-up’ many parents are wary of using them as they do not believe they are truly impartial’. Another parent felt that ‘PPS became the buffer for the LA and schools, against parents’ complaints and wish for involvement in the SEN processes regarding their children’.

A third parent who responded to the satisfaction survey mentioned that they felt their PPS was inadequately funded, stating: ‘although [the PPO] is making a good effort in difficult circumstances, the LA makes no attempt whatsoever to expand and indeed is falling short of the requirements in the SEN CoP by a long margin’.

There was an imbalance between the overwhelmingly positive comments by the parents interviewed and the more critical comments expressed by those who contacted the evaluation team independently. It is not unusual or unreasonable to expect parents selected for interview by PPOs to be those with a good relationship with the PPO, or for those who voluntarily respond to be more likely to have concerns or complaints. These responses are mostly useful when considered in isolation, as both methods of selection have generated too small a sample to be able to draw any significant conclusions on the overall parental view of PPS.

There is further scope for developing a more systematic way of gathering parental satisfaction data and monitoring the impact and actions of individual PPS. There is currently a risk that parental satisfaction data gathered through questionnaires is a measure of parents’ personal experience of the PPS more than an evaluation of the PPS itself. Parents’ responses are likely to be a reflection of how satisfied they are with the outcome of their involvement with PPS and the decision made by the school or LA, which is not necessarily an accurate measure of the actions or professionalism of the PPS.

5.6. Monitoring

Although some PPOs stated the importance of feeding back evidence from monitoring and evaluation to the LA, there did not appear to be a clear chain whereby the monitoring given to the LA influenced funding, policy or future targets. Instead, results from satisfaction surveys were primarily used to help inform individual PPS about where they were most successful and where they could improve. Although a useful tool, these surveys were not considered be a rigorous measure of impact. However, all PPS stressed how difficult it was to measure impact given the nature of the work they do.

Seven of the PPS stated that they were struggling with monitoring. They were aware of the need to monitor their work and assess impact, but were unsure how to do this. Evidence gathered through interviews suggested that many PPS were not aware of the NPPN monitoring guidelines. One PPO stated:

‘I don’t think I am adequately supported. I don’t think we monitor adequately… I think that we could do a lot more but I think it would be very, very useful to have some guidance on monitoring and evaluation’.
Interviews with PPOs and LAs suggested that although monitoring of the PPS by the LA was varied it was very much considered the responsibility of the PPO. PPS appeared to have little ownership over the annual monitoring forms sent to the LA. When asked about monitoring and impact in terms of reductions in tribunals, three PPS were unaware of the figures, and commented that only the LA would have access to that information. The LA generally seemed to offer little feedback on the monitoring information passed to them from the PPS.

All the LAs emphasised the ‘arms length’ approach to the management and monitoring of the PPS. Four of the LAs interviewed did not have a service level agreement or any clear targets for the PPS. The LAs tended to meet with the PPOs between every three weeks to and once a term. Although as already mentioned PPOs generally appreciated having autonomy over their budget, over half of those interviewed appeared to have very limited support from the LA in terms of supervision and monitoring. A typical PPO response was ‘I don’t have a line manager who I can go to very often to discuss things with... I am very much left to get on with it’.

The 2004 benchmarking questionnaire sought information about six aspects of PPS that might be monitored. Table 5.3. shows the proportions of the 105 responding PPS that reported monitoring each one. Five PPS report no monitoring and the average over all aspects is 67%. However, a closer look at what is being monitored gives a less positive picture. The aspects listed in Table 5.3. can be roughly divided into straightforward (client satisfaction, source of information, support offered) and challenging (for example, complaints and response times). Far fewer PPS reported monitoring the challenging aspects (53% on average) than the straightforward aspects (82% on average). Evidence for the importance of this distinction came from the evaluative ratings given to case study and telephone interview PPS for Networks.

Good ratings for Networking were associated with monitoring challenging aspects of performance but not with monitoring straightforward aspects. Those with good ratings were particularly more likely to monitor response times to enquiries.

<table>
<thead>
<tr>
<th>Aspect of performance</th>
<th>Percentage monitoring</th>
<th>Average percentage monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client satisfaction</td>
<td>88%</td>
<td>82%</td>
</tr>
<tr>
<td>Source of parent info</td>
<td>83%</td>
<td></td>
</tr>
<tr>
<td>Type of support given</td>
<td>74%</td>
<td></td>
</tr>
<tr>
<td>Complaints about PPS</td>
<td>70%</td>
<td></td>
</tr>
<tr>
<td>Response time</td>
<td>50%</td>
<td>53%</td>
</tr>
<tr>
<td>Other aspects</td>
<td>43%</td>
<td></td>
</tr>
</tbody>
</table>

Of the 105 responding PPS, 73 reported evaluating effectiveness through a termly meeting or report, 22 through an LA questionnaire and 39 through some other means. Five LAs selected all three options and ten reported no evaluation of impact and effectiveness at all. PPS with good evaluative scores for networks were less likely to monitor using termly meetings.

PPS with better evaluative ratings for training reported using more means for monitoring performance and were more likely to monitor using a questionnaire and those with better
evaluative ratings for IPSs were more likely to monitor using termly meetings, but less likely to monitor by means other than those listed in the benchmarking questionnaire.

By far the most popular method of monitoring was satisfaction questionnaires issued to parents, used by just under half (24) of the PPS interviewed. Most of these would also routinely follow up any negative feedback. A much smaller number issued questionnaires to schools or other agencies. Within the benchmarking, monitoring client satisfaction was reported by 88% of responding PPS, but monitoring of complaints by only 70%. There were very few examples of where PPS regularly fed back monitoring data to schools. In the examples where this did occur, it was thought to be a very effective mechanism for building on existing relationships with schools and working more towards partnership.

These monitoring findings cast doubt on the extent to which LAs are monitoring the cost effectiveness of PPS spending. LAs need to clearly outline the purpose of monitoring to PPS and be far more accountable for the accurate monitoring of impact and use of funds.
Processes  
Key Findings  

Training  
- PPOs consider the training they offer IPSs and others to be a central part of their work  
- Training provided by PPS is often less strategic than reactive  
- Consensus that training is very time consuming and difficult to devote sufficient time to it given casework responsibilities  
- Accredited training more likely to be provided in PPS with larger overall spend rather than relative spend  
- Room for monitoring impact of training with a view to supporting capacity building  

Independent Parental Supporters  
- Positive relationship between number of IPSs and overall spend of the PPS rather than the relative spend per pupil on roll  
- Although PPOs value the contributions of IPSs there remains a lack of consensus regarding how their skills can best be utilised to be benefit of PPS, IPSs and the local community  
- PPOs often more comfortable with IPSs fulfilling less demanding roles  

Workload  
- Many PPS have established a working balance between casework and strategic work, but there is room for developing strategic work further  
- Recognition of the fact that PPS often work outside their remit  

Networking  
- PPOs recognise the value of relationships with other agencies and professionals  
- Barriers to working relationships are primarily:  
  - Time constraints  
  - Personalities  
  - Lack of understanding of the role of PPS  
- Although progress is being made, some PPS still experiencing significant communication difficulties with schools  
- Potential for some PPS to develop more strategic approach in building relationships with school  

Impact on Parents  
- Overall positive views by parents of PPS  
- PPS considered to play a key role in:  
  - Informing parents of their rights and responsibilities  
  - Educating parents about SEN  
  - Empowering parents  
- Most parents found out about PPS through ‘word of mouth’  
- PPS need to consider a more systematic way of gathering parental satisfaction data and measuring impact
Monitoring

- No clear chain whereby monitoring given to LA influences funding, policy or future targets
- Need to have better communication of monitoring and evaluation findings in order to fully monitor impact
- Need to fully outline the *purpose* of monitoring, and create a clear line of sight from data entry to final application
- Monitoring guidelines are available through NPPN and they could further enhance this service by providing models of good practice and explicit training materials
- LAs need to monitor the cost effectiveness of PPS spending
6. IMPACT, EFFECTIVENESS AND STRATEGIC OVERVIEW

6.1. Impact
The evaluation found that PPS with greater overall spend was strongly associated with higher levels of impact and effectiveness. Staffing levels affected the nature and extent of services offered, as PPS with fewer staff tended to focus their efforts more on casework rather than strategic work, which had a negative effect on their long term impact. This reflects some of the difficulties faced by PPS with smaller budgets and suggests that in smaller LAs the PPS may need more external support in order to deliver the range of services that are possible in larger areas.

There is some evidence that it takes time for people working in PPS to become effective. Services where a greater proportion of IPSs were not newly trained were likely to report higher caseloads. On the other hand there was no evidence that PPS that had been established longer were being more effective. A more important factor seemed to be the personalities and strengths of the individuals most directly involved with the service, particularly in relation to their ability to seek out alternative funding possibilities, manage their workload effectively and build strong working relationships with other agencies.

a. Publicity
There was much variation in the quality and format of publicity for PPS. Some PPOs referred to the efficacy of publicity in reaching parents and pointed to examples where word of mouth had been successful. There was a dilemma for some PPS in on the one hand seeking to improve publicity while on the other trying to avoid creating a level of demand that could not be met efficiently. It seems likely that there is much latent demand for PPS support that is going undetected and, therefore, scope for even the most successful PPS to have even more impact.

Some PPS were able to report very successful use of websites as means of promoting the service. However, it is estimated that about a quarter of PPS have no internet presence at all and the use to which websites are put is sometimes very limited. Discrepancies between the website audit for this study and the benchmarking survey indicate that things may be changing. However, there is still scope for improvement in the use of this type of outreach (benchmarking data dated up to April 2004 and interviews were conducted in Summer 2005). It would be wrong, however, to judge the extent to which PPS make themselves accessible to the public simply in terms of their internet presence, particularly as many parents do not have easy access to the internet. There does appear to be a link between the nature of the websites promoting a PPS and the ratings received for impact.

b. Accessibility
Accessibility, as indicated in the benchmarking data, was related to higher numbers of IPSs, the inclusion of parents on the management or steering group and more extensive monitoring of PPS’ effectiveness. PPS vary in the degree to which their publicity reaches out to disadvantaged groups. Based on the benchmarking data, it is estimated that up to 50% use a wide range of community languages in their publicity, which leaves scope for targeting those who fall short of the minimum standard. It is estimated that up to half offer translation on request or make interpreters available, but this does not address the problem of making initial contact with parents without a good grasp of English and up to half of PPS use any publicity format aimed at people with visual impairment but probably about one
PPS in nine uses all the listed formats (Braille, large print and audio tape). PPOs interviewed were aware of the difficulties in making contact with parents who were disadvantaged (members of minority ethnic groups, asylum seekers, parents who themselves have SEN or mental health issues). The fact that the PPS depends on parents seeking support themselves, which sometimes made this problem more difficult, self-referral was seen as a desirable aspect of current practice.

c. Networking
In some services there was effective networking between the PPS, LA and other agencies. Strong relationships and good levels of communication were found where there were supportive individuals in the LA, but also where there were strong, determined and experienced personalities working within the PPS. In these circumstances, LA officers spoke very highly of the PPS casework and also of the insights, vision and practical contributions that PPS were able to make to broader strategic developments within the Authority. However, approximately half of the PPS interviewed had experienced some problems in obtaining information from the LA and one in five expressed major concerns with this. This places a limitation on the impact that a PPS can have, and is not a problem that the PPS alone can solve.

All PPOs saw the value and importance of establishing good working relationships with other agencies and all signposted parents to LAs, health and Social Services, other PPS, voluntary services and community organisations, including local parent support groups for specific disorders. In all but one of PPS most of the work was also conducted with and through schools. However, there were some examples of defensiveness and mistrust towards the PPS on the part of professionals, and particularly schools. All the PPS referred to problems with some schools; but thought that over time PPS could make initial contact, explain what they have to offer and form good relationships. A few schools routinely invite the PPS to School Open Days and SENCOs inductions. One in five of PPS interviewed were sufficiently well known locally to be contacted by schools or parents in the very early stages, whilst communication was still relatively good between the school and parent.

d. Training
Training is an important part of the work of a PPS and provides an indicator of potential for having longer-term impact. One exceptional PPS did not do any casework and was only engaged in training. From the benchmarking data an estimated two in five LAs have training for IPSs and one in ten have accredited training. Four in five of those interviewed had engaged in training more people than their IPSs: parents, LSAs, teachers, SENCOs, governors, community groups, education officers, welfare officers and educational psychologists. A small number of these were located within well established training and staff development programmes, the majority largely consisted of ad hoc training schemes. Benchmarking data suggested that slightly less than half the PPS who responded devoted more than 10% of their time to training, however, there is potential for PPS to develop a more strategic approach to training.
e. IPSs
In view of staffing limitations and because of the nature of the work done by PPS, the effective use of IPSs is an important indicator of potential for long term impact. Judgements on the effectiveness of their use are, however, subject to the same difficulties as those that relate to judging the long term impact of PPS. About half the PPS interviewed had very positive feelings towards IPSs, and the other half, although valuing the contribution made by IPSs, had some reservations concerning their purpose and usefulness. Most PPS were using IPSs to cover cases when necessary and to respond to specific queries. A smaller number hand over cases for IPSs to take responsibility. Where PPOs were most comfortable with IPSs, they tended to have them working on less complicated casework or managing the helpline.

f. Monitoring
A further indicator of potential for PPS impact is the nature of monitoring and feedback of information. All PPS interviewed stressed how difficult it was to measure impact given the nature of the work they do. Instead impact monitoring tended to consist mostly of satisfaction surveys which were primarily used to help inform the individual PPS where they were most successful and where they could improve. Nearly all PPS responding to the benchmarking survey reported monitoring client satisfaction and just under half the PPS interviewed said they routinely monitored their progress by issuing satisfaction questionnaires to parents.

There was no evidence of clear chains along which the monitoring information given to the LA influenced funding, policy or future targets. Over half of those interviewed appeared to have very limited support from the LA in terms of supervision and monitoring, with little ownership over the annual monitoring forms sent to the LA. LAs generally seemed to offer little feedback on the monitoring information passed to them from the PPS. Instead monitoring was largely used summatively rather than formatively and data collected for LAs was driven by summative assessment of minimum standards outputs rather than impact measures. In order for impact monitoring to develop, LAs need to clearly outline the purpose of monitoring and play an active role in ensuring that PPS are fully supported and informed in how to monitor impact.

g. Workload
A final proxy measure for the impact of each PPS is the workload. Clearly, casework does not always result in a desirable outcome, but the number of cases does give an idea of the potential for achieving the intended results. High numbers of referrals reported for 2003-2004 were closely associated with evaluative ratings for impact. An estimated 76% of all PPS provide a service to parents of children excluded from school. Under fives were also served by 81% and the whole age range up to 25 by 12%. Only one PPS stated explicitly that they would only work with cases concerned with education, although most reported that while their remit was strictly education, the holistic perspective of a child’s needs (where health, social and educational needs were often inseparable) meant that professional boundaries were frequently blurred. Where a case was clearly outside the remit of the PPS, they would refer the parent onto another agency.
6.2. Framework for Evaluation

One aspect of the evaluation was to find examples of good practice and models of the ways in which PPS work. In order to do this, and to provide a foundation for the evaluation, a framework was devised using the minimum standards for PPS (Table 3.1.). One difficulty with the existing minimum standards (SEN Code of Practice, paragraph 2.21, DfES 2001) is that rather than outlining clear minimum standards, they are a description of what the PPS should do. As an example, taking the first two ‘minimum standards’:

‘An effective parent partnership service is expected to meet the following minimum standards and ensure:

- ‘the provision of a range of flexible services including using their best endeavours to provide access to an Independent Parental Supporter for all parents who want one’
- ‘that practical support is offered to parents, either individually or in groups, to help them in their discussions with schools, LAs and other statutory agencies’

This is a definition of the tasks and roles a PPS is expected to undertake. However, there is no quantification or quality assessment, and no way in which performance could be measured. Instead, they describe what PPS’s are required to do, rather than outline the performance standard they should achieve, and some PPS’s may undertake additional tasks. This was illustrated through qualitative interviews where although generally all the PPS were meeting the minimum standards, they were providing completely different levels of service and it was not possible to use the standards as a measure of performance or level of engagement.

As an example, a minimum standard might state how many hours per week the helpline should operate, or the sort of training that should be undertaken, in which case it would be possible to say whether a PPS had met, not met or exceeded the standard.

The evaluation team used the minimum standards framework as a basis for devising a more detailed coding scheme (Table 3.1.) in order to make evaluative judgements on the activities of the PPS. Where possible, the evaluation team made assessments of all of the PPS selected for case study and telephone interview in relation to each of the following themes:

- Training
- IPSs
- Networking
- Impact
- Publicity
- Monitoring

The rating given to each theme ranged from 1 = best practice, 2 = good practice, 3 = minimum. Although a valuable evaluative tool, it is important to recognise that PPS did not score equally throughout each of the themes and none of the PPS scored the same for all themes. This preliminary rating score was primarily used as an evaluative technique to compare effectives of PPS with national PPS benchmarking variables.
The range of data from case studies and interviews were located within this framework providing descriptors against the six areas of activity prescribed by the minimum standards for PPS. Table 6.1. details how these descriptors from practice have been synthesised against the six areas of activity.

Using this data synthesis the team identified three levels of practice against which any PPS might evaluate their current stage of development.
## Table 6.1. Framework data synthesis

<table>
<thead>
<tr>
<th>Composite Criterion</th>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
</tr>
</thead>
</table>
| **Input Variables** | • Funding levels mean that the PPS is innovative and creative, with a pro-active advice and guidance service  
• Experienced staff with transferable skills and knowledge are able to find new solutions to problems  
• Work is at a strategic level, with effective management and monitoring systems and action taken on feedback | • Funding allows the PPS to cover casework and some strategic work but the latter is given less priority in busy periods  
• Staff have been able to build good relationships with some agencies and schools but this tends to be reactive  
• Limited resources tend to restrict the work of the PPS | • Limited funding so little long term investment or strategic planning  
• Caring staff support parents and carers but in general can only address immediate problems and react to given situations |
| **Training / IPSs** | • Provides needs-led training, designs and runs courses for parents, schools, LA staff and other agencies, often by invitation  
• Transfer of policy and practice knowledge to parents and professionals  
• Effective deployment of skills of IPSs, ongoing training programmes | • Training courses offered to parents, IPSs, some front-line workers  
• Increased knowledge about SEN for parents and others  
• Some use of IPSs | • Limited or no involvement in training, mainly training for IPSs  
• Some increase in knowledge, mainly for IPSs  
• Little or no use of IPSs |
| **Networking – other agencies** | • Pro-active, understand the importance of close relationships with other agencies and work to foster and maintain these  
• Play a key role, sitting on major boards and steering committees  
• Culture of collaboration and partnership with the PPS involved in policy and decision-making | • Have built good relationships with some organisations which enables the PPS to provide a wider service to parents  
• Relationships may still be being developed  
• Some involvement in policy and decision-making, attending some steering group meetings | • Staff know where to signpost parents to but lack of resources makes it difficult to build close relationships  
• Some collaboration with certain organisations |
| **Networking – schools** | • Staff work in both a reactive and pro-active way with schools, building effective and supportive relationships  
• PPS facilitates a culture of co-operation which reduces the need for tribunals  
• Schools routinely invite PPS to SENCO and governor training, transition meetings, open days | • Tend to be reactive but the PPS is able to work well with some schools to help them improve their relationships with parents  
• The number of tribunals is likely to be reduced through co-operation in the early stages of a dispute | • Relationships tend to be based on individual cases, with limited referrals from some schools |
| **Impact – parents** | • PPS work to support individual parents but also to empower parents as a group, by helping them to sit on steering groups and influence policy  
• Seek out and participate in parents’ groups | • Mainly work with parents on an individual basis, but some involvement with parents groups | • Provide support for parents on an individual basis |
| **Publicity and accessibility** | • Funding and staffing levels/experience permit good publicity including websites etc  
• Needs-led up-to-date leaflets and flexible approach to publication and information sharing | • Produce and issue informative leaflets and other forms of publicity to schools and other locations  
• Staff consider the most effective way to publicise the service | • Produce and issue information leaflets and other forms of publicity to schools and other locations but with limited attention to their effectiveness or distribution |
| **Monitoring** | • Actively seek feedback from parents, schools and professionals  
• Feedback informs LA policy, decision making and PPS practice | • Obtain parental feedback, perhaps on a sample basis, and use it to inform PPS practice | • Gather some evaluation data, eg by issuing a limited number of satisfaction questionnaires |
Although only three specific levels of functioning have been outlined, it must be stressed that no one PPS was operating purely within one of these models, as there was frequently overlap in terms of their strengths and weaknesses.

Using this model developmentally it could be said that a PPS operating mainly at level 3 would be largely reactive, providing an advice and support service to parents, whereas a PPS operating mainly at level 1 would additionally be operating more proactively, thinking strategically, providing training for and working closely with schools and other agencies. Some PPS are currently operating at level 1 in some aspects of their work.

The primary reason for the differential ways of working was considered to be funding. PPS which operate on a very small scale, perhaps with just one member of staff working part-time, only have the time and resources to deal with parents’ concerns on a day to day basis. In addition it seems clear that PPS with a very experienced (in SEN) and long-serving PPO operate in a different way, with good local networks and the ability to work closely with, and perhaps influence, the LA.

A summary of a PPS operating within the confines of one of the three cluster models is:

**Cluster Model 1** – the PPS has a wide-ranging remit with the Local Authority, schools and other agencies, as well as providing advice and support for parents.

**Cluster Model 2** – the PPS provides an advice and support service for parents and carers and has a clear role within schools and with other agencies.

**Cluster Model 3** – the PPS provides an advice and support service for parents and carers.

This cluster analysis modelling presents opportunities for individual PPS to locate their practice relative to that of the national picture for PPS functioning. In so doing they can identify their areas of strength and identify areas for improvement. This will allow PPS who have limited resources to carry out ipsative rather than normative assessments of their progress and allow them to improve from their baselines and within the realities of their funding, resources and location. Such a framework will also allow them to identify where their areas of good practice can be used to support local groups in building capacity within the Every Child Matter’s agenda and where they might also seek to further community strategic support to enhance their impact.
<table>
<thead>
<tr>
<th>Input Variables</th>
<th>Procedures</th>
<th>Processes</th>
<th>Impact</th>
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<tbody>
<tr>
<td><strong>Cluster 1</strong></td>
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<tr>
<td>• Funding levels mean that the PPS is innovative and creative, with a pro-active advice and guidance service</td>
<td>Producing leaflets</td>
<td>• Provides needs-led training, designs and runs courses for parents, schools, L(E)A staff and other agencies</td>
<td>• Transfer of policy and practice knowledge to parents and professionals, often by invitation but also with clear training programme and objectives</td>
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<td>• Experienced staff with transferable skills and knowledge are able to find new solutions to problems</td>
<td>Respond to telephone enquiries</td>
<td>• Pro-active, understand the importance of close relationships with other agencies and work to foster and maintain these</td>
<td>• Culture of collaboration and partnership with the PPS involved in policy and decision-making</td>
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<tr>
<td>• Work is at a strategic level, with effective management and monitoring systems and action taken on feedback</td>
<td></td>
<td>• Play a key role, sitting on major boards and steering committees</td>
<td>• PPS facilitates a culture of co-operation which reduces the need for tribunals</td>
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<td></td>
<td></td>
<td>• Staff work in both a reactive and pro-active way with schools, building effective and supportive relationships</td>
<td>• Feedback is used to inform LA policy and decision making and PPS practice</td>
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<td></td>
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<td>• Schools routinely invite PPS to SENCO and governor training, transition meetings, open days</td>
<td>• Publicity which informs parents and others about the work of the PPS and also fosters relationships with other agencies</td>
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<td></td>
<td></td>
<td>• PPS work to support individual parents but also to empower parents as a group, by helping them to sit on steering groups and influence policy</td>
<td>• Some evaluation data is available to inform policy and practice</td>
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<td></td>
<td></td>
<td>• Seek out and participate in parents’ groups</td>
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<td></td>
<td>• Actively seek feedback from parents, schools and professionals</td>
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<td>• Funding and staffing levels/experience permit good publicity including websites etc</td>
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<td>• Needs-led up-to-date leaflets and flexible approach to publication and information sharing</td>
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<td>• Transfer of policy and practice knowledge to parents and professionals, often by invitation but also with clear training programme and objectives</td>
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<td>• Increased knowledge about SEN for parents and others</td>
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<td>• Relationships enable the PPS to provide a wider service to parents</td>
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<td>• Some involvement in policy and decision-making</td>
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<td>• The number of tribunals is likely to be reduced through co-operation in the early stages of a dispute</td>
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<td></td>
<td>• Staff consider the most effective way to publicise the service</td>
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<td><strong>Cluster 2</strong></td>
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<tr>
<td>• Funding allows the PPS to cover casework and some strategic work but the latter is given less priority in busy periods</td>
<td>Attend meetings with schools, LAs, parents and carers, others</td>
<td>• Training courses offered to parents, IPSs, some front-line workers</td>
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<tr>
<td>• Staff have been able to build good relationships with some agencies and schools but this tends to be reactive</td>
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<td>• Have built good relationships with some organisations</td>
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<tr>
<td>• Limited resources tend to restrict the work of the PPS</td>
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<td>• Relationships may still be being developed</td>
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<td></td>
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<td>• Some involvement in policy and decision-making, attending some steering group meetings</td>
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<td>• Tend to be reactive but the PPS is able to work well with some schools to help them improve their relationships with parents</td>
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<td>• Mainly work with parents on an individual basis, but some involvement with parents groups</td>
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<td>• Obtain parental feedback, perhaps on a sample basis, and use it to inform PPS practice</td>
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<td>• Produce and issue informative leaflets and other publicity to schools and other locations</td>
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<td></td>
<td></td>
<td>• Staff consider the most effective way to publicise the service</td>
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<td><strong>Cluster 3</strong></td>
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<tr>
<td>• Limited funding so little long term investment or strategic planning</td>
<td>Facilitate or Organise training</td>
<td>• Limited or no involvement in training, mainly training for IPSs</td>
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<tr>
<td>• Caring staff support parents and carers but in general can only address immediate problems and react to given situations</td>
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<td>• Staff know where to signpost parents to but lack of resources makes it difficult to build close relationships</td>
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<td>• Relationships tend to be based on individual cases</td>
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<td>• Provide support for parents on an individual basis</td>
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<td>• Gather some evaluation data, eg by issuing a limited number of satisfaction questionnaires</td>
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<td></td>
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<td>• Produce and issue information leaflets and other forms of publicity to schools and other locations but with limited attention to their effectiveness or distribution</td>
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<td></td>
<td></td>
<td>• Limited referrals from some schools</td>
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<td>• Publicity material is available to schools and others</td>
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7. DISCUSSION AND CONCLUSIONS

This evaluation has enabled a mapping of the varying levels of practice evident with the representative sample of PPS. These findings have been synthesised to provide cluster models of working referenced to the minimum standards against which individual PPS can locate their progress and plan their future development. Variability between PPS has been consistently reported as has the finding that PPS are generally well regarded and valued by users but that they are only accessing a limited number of their target group. It is timely, in the wake of Every Child Matters (DfES 2004a) to reflect upon progress made by PPS and examine how best they might develop in order to improve educational, employment and social outcomes for individual children with SEN within the context of increased inclusion for all children.

This evaluation reflects that PPS have retained their values and beliefs in relation to the importance of parental partnership and the provision of impartial advice in supporting parents in making educational decisions for their children. Additionally they have continued to deliver a service, often within funding and staffing constraints, and within a culture of accountability that is largely valued by stakeholders. Training, networking, parent satisfaction, publicity and monitoring have been areas for development within PPS due to the influence of the minimum standards. There is strong evidence that overall spend is strongly linked to staffing and measures of effectiveness used by the evaluation team. Given the reality that PPS impact and effectiveness cannot simply be addressed by increased funding it is useful to consider how analysis of findings within a framework of Theory of Change can support the continued development and enhancement of PPS.

7.1. Theory of change: synthesis of findings within theory of change

Learning from evaluation is an essential component of policy and practice development and has been supported by developments in studies of theories of change (TOC), (Weiss 1997, Forss 2002). It is perhaps true to say that ‘theory’ within these developments has been less well developed than the production of models for change. Within health and education contexts these models typically seek to map and explore national or local policy and process that are designed to bring about pre-planned changes for individuals. In the case of PPS initiatives the planned change is for better outcomes for pupils with SEN through the positive involvement of parents in their child’s education.

Applying theory of change to PPS initiatives

Theory of change (TOC) typically maps out an initiative through 5 stages:

- Identifying long term goals and the assumptions behind them;
- Backwards mapping and connecting the preconditions or requirements necessary to achieve these goals;
- Identifying the interventions (processes) that the initiative will implement in order to create the desired change;
- Developing indicators to measure the outcome and thus assess the effectiveness of the initiative;
- Writing a narrative to explain logic of initiative.
Diagram 7.1. Model for Parent Partnership Services drawn from the Minimum Standards

**Inputs**
- Funding
- Staff with relevant skills, knowledge and resources
- Support from NAPPS, NPPN, SEN Regional Partnerships
- Support from: LAs, DfES

**Procedures**
- Producing publicity and websites
- Monitoring
- Seeking views of children
- Providing access routes for parents
- Arranging meetings with: Schools, Parents, LAs and voluntary agencies
- Organising training

**Processes**
- Feedback. Consultations with clients, LAs and other stakeholders. Planning

**Outputs**
- Caseload dealt with by PPS
- Network building

**Outcomes**
- Convergence of aims
- Reduced conflict & more collaboration
- Children dealt with by most appropriate agencies

- Improved awareness in parents
- Improved awareness in schools etc

Better educational and social outcomes
The TOC process requires definition of all necessary and sufficient conditions required to bring about the long term outcomes. TOC uses backward mapping to think in backward steps from the long term goal to the intermediate and early-term changes that would be required to cause the ultimate desired change. This creates a set of connected outcomes known as ‘pathway of change’. A pathway of change graphically represents the change process as it is understood by the initiative planners and is the skeleton around which the other elements of the theory are developed.

In applying TOC to Parent Partnership Services the model described in diagram 7.1. shows:

a. **Long term goals and the assumptions behind them**

The original assumption driving the development of PPS was that the successful education of children and young people with SEN is dependent upon the full involvement of their parents/carers (HMSO 1978).

The longer term aim was to promote better educational outcomes for pupils with SEN within a context of increasing integration.

These assumptions concerning the importance of the role of parents have remained a stable feature of policy and are retained in the current climate of ‘Every Child Matters’ (DfES 2004a).

The longer term aims for better outcomes for SEN pupils have also remained consistent as prescribed in ‘Excellence for Children’ (DfES 1997 and Removing Barriers to Achievement (DfES 2004b). This aim has been developed by the Audit Commission (2001) to include a reduction in the variability in SEN provision observed between schools and across regions. Removing Barriers to Achievement has to address this concern and in so doing improve outcomes for all SEN pupils.

The model above cites ‘better educational outcomes’ and ‘convergence of aims’ as the durable long term goals to be secured by PPS.

b. **Backwards mapping and connecting the preconditions or requirements necessary to achieve these goals**

Backward mapping examines the requirements considered necessary to achieve these aims. For PPS these requirements have been:

- The provision of a stronger right for children with SEN to be educated at a mainstream school:
  - A new right for schools and relevant nursery providers to request a statutory assessment for a child
  - New duties on LAs to arrange for parents of children with SEN to be provided with services offering advice and information and a means of resolving disputes
  - A new duty on schools and relevant nursery education providers to tell parents when they are making special educational provision for their child
c. Identify the interventions (processes) that the initiative will implement in order to create the desired change

The interventions that had to be implemented are intrinsically linked to the ‘national’ requirement set out by the Code of Practice and referred to as minimum standards for PPS services. The diagram below describes how the 16 minimum standards can be grouped. In our evaluation they were grouped into 6 themes i.e. training, IPS, networking, impact, publicity and monitoring.

d. Develop indicators to measure the outcome and thus assess the effectiveness of the initiative

These indicators are linked to identify desirable service outcomes that contribute to the longer term goals. In the case of PPS service indicators are logically linked to Code of Practice minimum standards and need to include:

- Access and take up of services
- Satisfaction
- Impact

Critical evaluation of the logic of this initiative and the long term goals and assumptions behind them

The overall long term goal is to improve educational and social outcomes for children with SEN. This has remained a necessary goal since the inception of Parent Partnerships Services. SEN pupils are still vulnerable to underachievement (Audit Commission 2001), variation in provision and exclusion (Wilkin 2005).

Warnock’s (HMSO 1978) trigger for a focus on parental involvement in improving educational outcomes for SEN pupils has considerable face validity and is supported by research on the link between parental involvement and educational outcomes for their children. There is evidence from early intervention studies (Headstart) that parental involvement is a component of enhanced progress, at least in the initial terms of schooling. Portage is also based on evidence that agreeing specific time framed goals with parents of SEN children so that ‘effort’ is harnessed and focused by all involved also provides support for the efficacy of promoting a culture for ‘convergence of aims’ between education, health and home.

The evidence base for the link between ‘parental involvement’ and enhanced outcomes for SEN pupils is not sufficiently robust to inform the functional mechanisms involved. While we know that intensive interaction activities (Kellett and Nind 2003) that can impact on pupil engagement and participation in SEN children we cannot assume that an interpretable construct such as ‘parental involvement’ with its social, emotional and cognitive parameters can be effectively applied to produce specific pre-defined outputs.
Within the model described in Diagram 7.1. in there is recognition of the various routes to securing parental involvement i.e. information sharing, relationship building, etc but there is insufficient detail in the planning as to how these mechanisms could or should be systematically linked to improving outcomes for individual SEN children. As an obvious example a ‘reduction in conflict’ and associated measures may be a measure of effectiveness for a LA and or PPS but may not result in a longer term enhanced outcomes for the individual child concerned. Similarly a ‘convergence of aims’ (i.e. agreement about inclusion) may not result in improved outcomes for individual learners.

This leaves the initiative open to interpretation by deliverers as to how linkages between procedures, processes and goals should be enacted and evaluated. In defence of the model there is limited evidence as to what type of provision results in improved outcomes for SEN children. There is as yet no hard evidence to support links between settings i.e. segregation, integration or inclusion or processes (i.e. specialist teaching approaches) and enhanced outcomes for individual pupils (Florian and Davies 2004). Thus while the model can be seen to be limited in relation to linkages between structure, processes and longer term goals, evaluation data based on this model may serve to add to the understanding we have concerning the parameters of parental involvement and the mapping of interactions that may result in action that impacts positively upon educational outcomes for individuals. Clearly subsequent evaluations, both internal and external need to have sharpened focus on impact measures and processes linked to the longer term goals of the PPS initiative.

Clearly impact assessment is an area for development as PPS prepares for the Every Child Matters agenda given the emphasis on improved outcomes for individual children through a more proactive stance, early intervention stance for parental involvement and multi-agency working. If evaluations of nationally given locally driven initiatives are to reflect progress made then two areas of planning within Theory of Change need greater specificity. These are:

- Examining the assumptions behind the long term goals
- Developing indicators to measure effectiveness of the initiative

7.2. What can be learned about progress and efficacy of the model from the evaluation?
Vulnerability and resilience within nationally given, locally driven models of change:
As can be seen from the above model in diagram 7.1. the overall aim is to secure the involvement of parents in the education of their child by developing a culture for parental partnership that is characterised by reciprocity and respect leading to a convergence of home and school aims for children. The mechanism for change is one that is nationally prescribed but locally interpreted and driven. This affords a universality and consistency of procedures led by national policy and monitored through inspection, while at the same time allowing different processes to be developed that are responsive to local and regional variation in need.

The policy context in which change is discussed is one in which there is national requirement to improve provision and outcomes for pupils with SEN, within the context of inclusion (DfES 2001, 2004b). There have also been policy initiatives to improve outcomes for specific, vulnerable groups who may or may not have SEN (e.g. pupils with behavioural difficulties (DfES 2003, Key Stage 3 National Strategy, Behaviour and Attendance Materials).
This combination of universal and targeted approaches has become enmeshed within a second policy stream concerned with locating children’s services in the context of universal provision that links services for health and education. This requires those concerned with the education of children and young people to underpin and sustain a holistic service context by via promoting collaboration and integration between agencies in the provision of preventative strategies.

Within a context of this ‘nationally given locally driven’ agenda the programme pathway designed for the nationally given agenda will strategically be strengthened by national prescriptions that are protected locally by legal requirements (Children Act 2004) and supported by national inspection requirements (eg Ofsted). At national level the political influence that is brought to bear during the period of planned change will also either strengthen or interrupt the original pathway of change.

Emerging from this evaluation and indeed consistently supported by previous evaluations is the observed variation in structure, process and impact between PPS’s. This variability has limited the extent to which PPS overall can be said to have been a success or otherwise. What can be said is that ‘some PPS achieve this….others are working towards etc’. Such descriptors characterise this report and resonate with other evaluations.

The significance of this variation can be examined in relation to both vulnerability and resilience to the original goals of the initiative.

At local level variables that have been identified during this evaluation that influence the pathway of change include:

- Social features: the nature of personal relationships, expectations of socio-economic group, gender, access to knowledge, information etc
- Cultural features: expectations and attitudes to parental partnership endeavours
- Political context: the coexistence of policies for inclusion, standards raising and SEN and emerging emphasis on outcomes for individual children
- Resource features: human, financial, material resources, community knowledge and skills. In this study supportive networks identified were NPPN, Napps and SENRPs.

The model has proved resilient in that measurable indicators of ‘parental involvement’ prescribed by the Code of Practice minimum standards have remained a durable driver for development – irrespective of start date, size, funding or location. However what we have identified is local interpretation of minimum standards and associated monitoring arrangements that have limited use for service improvement.

This is expected given external monitoring and inspection. What we see from the evaluation and the PPS benchmarking is an emphasis on developing procedures and processes to secure these minimum standards. These have also provided a focus for monitoring, designing data collection schedules, development plans and provision of national support materials, guidance and training (Stone 2004).

Another area of resilience is in the beliefs surrounding practice in relation to:
- The importance of parent partnership in educational settings;
• The need to promote the view and ‘voice’ of the parent;
• The need to offer ‘independent’ advice;
• The importance of balancing strategic and ‘reactive’ case work aspects of PPS work i.e. that both are necessary conditions for achieving change;
• The belief in the importance of training.
• Recognition of the effectiveness of interagency and multi-disciplinary working.

Variability between PPS in relation to the following factors identified from the evaluation include:

Social factors:
• Personality and self belief of staff involved have a powerful influence on progression and direction of service.
• The importance of relationships as a powerful determinate of outcomes.
• In relation to position and gender it is interesting to note that unpaid ‘volunteers’ are considered to be particularly appropriate for services for parents. This may be linked to underlying beliefs about the nature of parenting with a focus on ‘mothers’. Such a belief, and subsequent staffing may be linked to funding and recruitment issues but may serve to undermine recognition of the importance of the PPS initiative.
• Gender and power issues appear to be an important variable within PPS services-though quite how they result in variability is not evidenced from the data.
• Which people within the service can access information form LA and other data bases is noted as a barrier to effective practice and will be even more important within ECM agenda.

Cultural features include:
• Whether the cultures of the community services by PPS are understood and represented by the staff and agencies involved. It is interesting to note that PPS have had less success in securing parental involvement in ethnic minority groups and ‘hard to reach’ parent groups. This may be attributed to different cultural beliefs and values about the role of some parents in their child’s education that may not be shared by the intention and processes of a national PPS initiative.
• This also applies to school cultures in relation to the value and role of parents. A revision of the Training and Development Agency, Qualified Teacher Status national standards for SEN, IPS pack and recent initiatives to enhance Initial teacher Education for SEN may serve to change culture in schools and subsequently facilitate greater impact of PPS initiatives.
• Culture of LA is another important variable cited in this evaluation. Positive links with the LA, involvement in planning and contribution to policy are all considered to support capacity for effective PPS services.

Resource features:
• Human, financial, material resources, community knowledge and skills, ‘items for exchange/pockets of expertise’. This study identified support from peers and other regions via NPPN, Napps and SENRPs.

The influence of these resource features, as documented within the main text has significant influence of the way services were implemented and evaluated.
Political factors:
Changing policy initiatives throughout the development of PPS services and associated LA and school activity influenced the direction and development plans of local services. The ‘interpretation’ of policy differs within and between educational agencies and led to individual variation in practice.

This application of programme theory to PPS provides useful information to policy makers about what can be learned from this evaluation in terms of promoting the continued development of PPS and planning how best they may be incorporated into planning for Every Child Matters. The evaluation team suggest the following recommendations:
RECOMMENDATIONS

1) PPS located in smaller LAs either need additional funding or need to work more collaboratively with other agencies in order to deliver the range of services possible in larger LAs.

2) Consideration should be given to staffing levels within PPS with the minimum recommendation of a strategic worker, caseworker and administrative support.

3) Impact monitoring needs to be strengthened if PPS are to build on and develop their practices.

4) LAs need to work collaboratively with PPS to enhance the value and efficacy of monitoring data.

5) The current minimum standards are definitions of role rather than measures of performance. Supplementary guidance should be issued so that it is possible to monitor the extent to which PPS meet these minimum standards.

6) LAs need to take more account of value for money when monitoring the impact of PPS.

7) It is important to reconsider the role, strategic use of time, and opportunities for development of IPSs in a way that enhances cost effectiveness, recruitment and retention.

8) PPS need to be afforded every opportunity to play an active role and fully contribute to the Every Child Matters agenda.

9) Recruitment and retention could be enhanced through career progression opportunities within PPS.

10) LAs need to take more responsibility for ensuring that PPS are provided with up to date information on SEN policy and processes.
EFFECTIVE PRACTICE FROM INTERVIEW DATA

- Responding to parents in a timely manner. Not just giving parents another number to call, but calling the number and following it up.
- Running training for voluntary organisations, schools and LA.
- Not ‘re-inventing the wheel’ in terms of sharing and adapting materials.
- Putting up posters as well as distributing leaflets.
- Publicising in a wide range of areas, such as football grounds or buses.
- Having the school teaching staff on the Parent Partnership Management Group.
- Being routinely invited to SENCO inductions.
- Being invited by the LA to be on the interview panel for key posts in education.
- Offering training to a very wide range of people, including voluntary agencies, school staff and LAs.

Collaborative Working
‘The local authority just sees us as a very necessary component. It needs us as an impartial group. It involves us in things like the guidance documents that are produced around exclusions. We are built in at every stage’ (PPO – Case Studies).

‘The nice thing about PPS is that I have not come across any PPS that have not been prepared to share information with others – people are never protective of their information’ (PPO – Telephone Interviews).

Strategic Working
‘Whilst you can do casework until the cows come home, eventually, you need to be affecting the policy and practice of the LA to make a real difference. Casework has increased and increased and increased, and you can’t do that forever’ (PPO – Case Studies).

Impact on Parents
‘Successful and effective practice is where the systems that are set up and the information that you have mean that at the end of involvement with a parent the parent feels they have understood the system, they have been listened to, their views have been seriously considered, and they have been dealt with in a way that respects them’ (PPO – Case Studies).

‘You were the first person who didn’t judge me, who actually listened to us, who actually asked what we need rather than being told what we need’ (Parent - Satisfaction questionnaires).
REFERENCES


Booth, T. and Ainscow (2004 edition) The Index for Inclusion; Developing learning, Participation and Play in Early Years and Child Care, Bristol, Centre for Studies on Inclusive Education.


Department for Education and Skills (2003), Key Stage 3 National Strategy, Behaviour and Attendance Materials.


Preamble
Introduce yourself. Hand out evaluation info sheet (same as that for PPOs). Explain that we are doing research for the Department for Education and Skills, trying to find out what kinds of work the Parent Partnership Services are doing across England, and what effect this work has.

1. What made them want to be an IPS?
2. What is their background?
3. When recruited?
4. Do you have a ‘job’ description? From whom?
5. Are you paid or voluntary?
6. What is your remit? Do you work on a regular basis or just when you are needed?
7. What do you NOT do and why?
8. Is there anything that the terms of your ‘employment’ prevent you from doing (and what effect does this have)?
9. Do you deal with/advise on issues above and beyond educational ones? (What? This may have been covered by question 5).
10. What helps/would help you to do their work effectively?
11. What makes it difficult for you to work effectively?
12. What training have you had? Is it accredited? By whom?
13. How useful was/is this training? What more could be covered?
14. What professional development is available to you? (is it linked to supervision or monitoring of your work?)
15. Who manages or supervises your work? How?
16. Are there minimum standards for the service you provide?
17. How many parents do you work with at any one time?
18. Has this number increased or decreased and why?
19. What is the impact of your work? (Evidence available?)
20. What would be the effect on parents/schools/the LEA if there were no IPSs?
21. Does the service have other paid/voluntary IPS/caseworkers? (How) does their work differ from yours?)
22. FOR unpaid IPS only: Do you see yourself continuing to be a volunteer or would you like to move into paid employment? (or something else about the future of their work and their role)

Many thanks for taking part.
Are they willing to give us a contact number in case we need to ask them anything else? .................................................................
Discussions with Parents – Discussion Prompts / Topics

PPS Area ..............................................................................................................................
Interviewer .........................................................................................................................
Date ........................................................ Number of Parents .................................

Preamble
Introduce yourself. Hand out evaluation info sheet (same as that for PPOs). Explain that we are
doing research for the Department for Education and Skills, trying to find out what kinds of
work the Parent Partnership Services are doing across England, and what effect this work has.
Explain we need consent. Ask all parents for verbal consent to continue. Ask them to tick and
sign a consent form (see below), talking them through each point listed. Collect the forms.

1. Please can you tell me what your experiences of the parent partnership service(s) have
been?
2. How did you find out about the PPS?
3. Did they increase your knowledge about your rights and responsibilities?
4. Did they provide you with information that you found easy to read and that answered your
questions?
5. Did they talk to you and answer questions you may have had?
6. Did they help you to find out about other people or organisations that you didn’t know
about beforehand?
7. Was all the information they gave you accurate?
8. Did you feel as though they were acting on behalf of anybody else? Did you feel that they
were separate from the LEA?
9. How many times did you have contact with the PPS? Over what period of time?
10. On a scale of 1-10, how satisfied were you with the service that they provided over this
period of time?
11. What do the PPS do best?
12. Is there anything that they don’t do very well?
13. Would you recommend the PPS to other parents who might need help or advice about
SEN?
14. If you hadn’t had contact with the PPS, what do you think would have happened?
15. Is there anybody else who can help parents like the PPS can? (If yes – Who? If you had
used them instead of PPS, would the outcome have been better/worse/the same? Why?)
16. Is there anything else you would like to tell us?

Thank you for taking part in this discussion. Your views are very important and we are grateful
that you have spared the time to see us. If, in future, you think of anything else you would like
to say, or have any questions about the evaluation, please get in touch with a member of the
evaluation team at CCCUC/DfES (see info sheet).
PPO Interview Prompts

PPS Area ..............................................................................................................................
Interviewer ..............................................................................................................................
PPO ........................................................................................................................................
Date ........................................................................................................................................

PREAMBLE
Introduce yourself. Hand out evaluation info sheet (same as that for PPOs). Explain that we are
doing research for the Department for Education and Skills, trying to find out what kinds of
work the Parent Partnership Services are doing across England, and what effect this work has.

Section 1: Remit of PPS
1. Please describe the different responsibilities or functions that this PP fulfils (differentiating
   between frequently or infrequently carried out tasks)
2. How is this work shared between you and your staff / volunteers?
3. How has the remit of your service changed in the last 2 years?
4. Do you envisage changes in the future? What changes?
5. How have or will any changes impact upon you and your staff/volunteers?
6. Do you have any autonomy in how you spend your budget?

Section 2: Code of Practice

Section 3: Teams and Networks
1. Can you tell me with which individuals or organisations you have regular contact?
2. What is the purpose of the contact with each?
3. Which networks help or support your work the most?
4. What does the word ‘partnership’ mean to you in relation to your work? Can you give an
   example of this partnership in action? Is anyone else involved in this partnership?

Section 4: Outcomes
1. Can you tell me the real or potential outcomes (positive and negative) of your work in
   relation to each of the functions you described earlier
2. In which area do you feel your service is most successful and why?
3. In future, do you think you will see different outcomes from changes to your remit? What
   will these outcomes be?

Section 5: Impact
1. In addition to outcomes you have already mentioned, can you describe the direct or indirect
   impact of your work in relation to different responsibilities?
2. What is the impact on:
   a. Parents
   b. Children
   c. Schools
   d. Other professionals
   e. Others mentioned among those forming networks
   f. Policy (development and delivery) locally, regionally and nationally
Section 6: Monitoring and Evidence
1. Can you describe how you monitor the outcomes and impact of your work in relation to the different functions your service fulfils?
2. What evidence can you provide to substantiate the impact that you described earlier in relation to different individuals or groups?
3. For which area(s) of your work (e.g., fewer disagreements/appeals/tribunals; more children appropriately placed; fewer referrals to PPS because more school staff trained in partnership with parents etc etc) can you provide hard evidence of impact?
4. What happens with any monitoring data you collect?
5. Does analysis of your monitoring data inform the development of your service? How?
6. Does this information have a wider influence in shaping policy or practice beyond your PP service (e.g., in schools, in the LEA, in the SENRP, other)?

Section 7: (As appropriate) Disagreement Resolution
1. Please can you describe how DR work is carried out within the LEA, and explain any responsibilities or input your Service has?
2. What is the effect of your service’s involvement in DR?
3. Do you have any evidence to support this?

Section 8: (As appropriate) Multidisciplinary Work / Children’s Trusts
1. Do you work with parents on behalf of statutory services other than Education? Which services?
2. What do you do?
3. What work do you do with voluntary organisations?
4. What is the effect of your involvement?
5. Do you have any evidence to support this view?
6. Do you see this work increasing in the future?
7. With what effect on:
   a. PPS
   b. Services themselves
   c. Parents
   d. Children
   e. Children’s Trusts
8. Do you know of any individuals or organisations who are working collaboratively to ensure that parents receive a single, coherent overview of what is available in terms of support, (rather than information coming from lots of different sources with potentially mixed messages?)

Section 9: ‘Bridges and Barriers’
1. Can you tell me what/who, if anything, helps, guides or supports you and your colleagues in your work (referring to different responsibilities)?
2. Can you tell me what, if anything, makes it (more) difficult for you to carry out various aspects of your role (and that of colleagues)?
3. Can you think of (practical) ways of improving this situation? What stops this from happening?
4. Are there any developments regionally or nationally that have helped you in your work? What are they?
5. Are there any developments regionally or nationally that make your work (more) difficult to accomplish or carry out successfully?
Section 10: ‘Good Practice’
1. Can you give me an example of good practice in the work of your service? (What are the outcomes?)
2. Do you know of other services that work in the same way and achieve the same outcomes?
3. Do you know of other services who present examples of good practice in different areas of PPS work? Who are they? What do they do? What is the outcome?
4. What evidence do you / they have to support this?

Section 11: Evaluation
1. What do you hope to see as a result of this evaluation?
2. Do you have any additional comments you would like to make?

Thank you for taking part in this interview. You have provided us with a lot of valuable information. If we discover that there are additional issues that we have not covered in this interview, would it be possible for us to telephone you to follow these up?
Yes / No

(Please feel free to contact us if you think of anything else that you think we should know).
Discussions with SENCO/headteacher – Discussion Prompts / Topics

PPS Area ........................................................................................................................................
Interviewer .........................................................................................................................................
SENCO/headteacher............................................................................................................................
School ................................................................................................................................................
Date ...................................................................................................................................................

PREAMBLE
Introduce yourself. Hand out evaluation info sheet (same as that for PPOs). Explain that we are
doing research for the Department for Education and Skills, trying to find out what kinds of
work the Parent Partnership Services are doing across England, and what effect this work has.

Amount of Contact
1. How much contact have you had with the PPS – do you ever contact them?
2. How frequent is your involvement with the parent partnership service?
3. Do you tell parents about them?
4. Please can you tell me what your experiences of the parent partnership service(s) have
been?

Publicity and Communication
1. Does the service provide you with up to date leaflets to distribute to parents?
2. Are the leaflets displayed in a prominent position in the school?
3. Has the service provided you with other information eg a toolbox of useful leaflets?
4. Was all the information they gave you accurate?

Type of Support
1. Have the PPS offered practical support to parents either as individuals or in groups?
2. Would you say the wishes of the child have been taken into account, where appropriate and
   in conjunction with their parents?
3. Do you think they help improve relationships between parents, schools and LEAs?
4. Do they help to empower parents?
5. Did they talk to you and answer questions you may have had?
6. Did they help you to find out about other people or organisations that you didn’t know
   about beforehand?
7. Is there anybody else who can help parents like the PPS can? (If yes – Who? If you had
   used them instead of PPS, would the outcome have been better/worse/the same? Why?) Do
   they have contact with vol/comms that provide similar support or advice for parents?

Impact of PPS in School
1. Do the PPOs or IPS attend in-school annual review meetings or transitional reviews?
2. Do the PPOs advise or participate in decisions about SA and SA+ and with impact?
3. What positive and negative outcomes have resulted from the involvement of PPS? (eg does
   the school budget have to stretch further to cover the cost of support because PPOs have
   advised parents about their children’s rights?)
4. To what extent can any outcomes be directly and definitively attributed to the existence and
   work of the PPS (so that the impact is isolated to PPS rather than a combination of potential
   factors?)
5. Can you give any examples of where PPS has had a direct positive impact over:
a. improved attendance of particular children?
b. providing children with support they didn’t have before?
c. improved attainment of particular children?
d. parents who are more involved and less dissatisfied? (ie how has PPS involvement affected home-school relations/partnerships?)
e. children in appropriate educational placements (has this affected their SEN register?)

Are you ever asked (formally or informally) to provide the PPS or LEA with comments or feedback on the service provided?
If so, have you any evidence that any suggestions or comments have been actioned?

Organisation of PPS
1. Do you think they have active (positive) links with other agencies and voluntary bodies?
2. Did you feel as though they were acting on behalf of anybody else?
3. Did you feel that they were separate from the LEA?
4. In your experience has the PPS promoted a culture of co-operation between you, parents, the LEA and others enabling pupils to achieve their potential by meeting or exceeding the standards for supporting parents as described in the SEN Code of Practice?
5. Has the PPS offered you training? (explain)

Satisfaction with PPS
1. Overall, have your experiences of the parent partnership service been positive or negative? (explain)
2. On a scale of 1-10, how satisfied were you with the service that they provided?
3. What do the PPS do best?
4. Is there anything that they don’t do very well?
5. If you hadn’t had contact with the PPS, what do you think would have happened?
6. Is there anything else you would like to tell us?

Thank you for taking part in this discussion. Your views are very important and we are grateful that you have spared the time to see us. If, in future, you think of anything else you would like to say, or have any questions about the evaluation, please get in touch with a member of the evaluation team at CCCUC/DfES (see info sheet).
Discussions with LA – Discussion Prompts / Topics

PPS Area …………………………………………………………………………
Interviewer …………………………………………………………………………
LA …………………………………………………………………………
Date …………………………………………………………………………

Aims and rationale
1. Please can you outline the PPS (short, medium and long term) aims/targets?
2. How does the LEA communicate these to PPS?
3. (How) do these aims reflect local needs? (Are they part of a wider strategy e.g. for SEN and/or inclusion?)

(It would be most helpful for us to see copies of Service Level Agreements, Development Plans, Annual Reports, reports on monitoring carried out recently etc., if possible.)

Budget and Resourcing
1. Please can you talk about how decisions are made in relation to setting the annual budget for the PPS. To what extent is the budget delegated to the PPS?
2. What is your involvement in determining the way in which the PPS is staffed and resourced?
3. What are the reasons for these decisions?
4. How does the LEA monitor that staffing is adequate to meet local needs?
5. Does the budget include an amount for items such as rent of rooms, printing and reprographics, utilities?

Management and Support
1. Please can you tell me about any management and supervision arrangements the LEA makes for PPS staff (and volunteers).
2. How does the LEA ensure that PPS staff and volunteers have up-to-date information about relevant policies and laws?
3. In what ways does the LEA provide professional support for PPS staff and volunteers (supervision, training)?
4. Do you have access to information about good / best practice for PPS work? How is this passed onto the PPS?

Publicising the PPS
1. How does the LEA publicise the PPS?
2. Are there any parents who are ‘hard to reach’? Who are they? How do you try to reach them?
3. Does the LEA target particular groups as potential service users? Why? Why not others?

Links and Networks
1. Where does parent partnership work sit within the overall structures of the LEA (ie is it part of Children and Families, SEN, separate)?
2. How do you promote parent partnership within the LEA?
3. How does the LEA promote and/or facilitate arrangements for the PPS to work in partnership with other agencies such as health and social services (local planning structures such as the Education Development Plan, Early Years Development and Childcare Plan, Connexions Plan and Children’s Service Plan.)
4. Can you describe any arrangements for encouraging that the PPS and other parent support organisations work effectively side by side?

**Monitoring and Evaluating PPS activities**
1. How does the LA monitor the activities of the PPS?
2. How does the LEA ensure that the PPS adheres to minimum standards, and meets the aims set out by the LEA?
3. What happens to any monitoring/evaluation data? (Does this data or other information from PPS inform local policies and decision-making about SEN and about partnership with parents?)
4. When and how are targets reviewed?
5. What evaluation measures are in place? How are they managed?

**Impact**
1. How does the LEA assess the impact of the PPS on: parents, children, schools, strategic planning at local and regional level (incl multi-professional work)?
2. What is the impact?
3. What evidence is there to substantiate this?
4. What impact does the work of the PPS have in relation to local and regional policies and strategies?

**Future**
1. Please can you describe any plans for PPS in the future that will differ from existing aims and arrangements?
2. What are the reasons for these changes?
3. If the PPS ceased to exist, what would be the effect?

Is there anything else that you would like to tell us?

Thank you for taking part in this evaluation. (Please feel free to contact us if you think of anything else that you think we should know).
Effective Signposting / Links with other Services/agencies
1. Do you signpost service users to any of the following?
   - Schools, LEAS, Health, Social Services, or other PPSs
   - Voluntary Services or community organisations
2. What types of other services / organisations do you make specific referrals to?
3. Do you ever follow up these referrals by contacting the service you made the referral to?
4. How would you describe the strength of your relationships and links with these referral sites?
   - What have been your main barriers?
   - What are the strengths?
5. Are there any:
   - Formal structures between partners?
   - Specific protocols in place?
   - Service level agreements between services?
6. To what extent are you able to share publicity information, leaflets, notice boards, meetings, etc?
7. Have any of these been changed recently, or been recently formed?

Nature of Contact
1. Do you work with:
   - Parents who are concerned their child may have SEN?
   - Parents of children supported by SA and/or SA+?
   - Parents of children who have previously been issued with a statement?
   - Parents of a child undergoing statutory assessment procedures?
   - Parents of children with no SEN?
   - Parents of children (without or without SEN) who are at risk of exclusion?
2. Which of these represents the group (or groups) that your Service works with most frequently?
3. Is this significantly more than work with the other groups?
4. Roughly what percentage of parents you support are ‘long term’ users of your service (ie ‘a referral that is followed up and has ongoing support during a twelve month period’)
5. Roughly what percentage of parents are ‘short term’ users of your service (ie new and one-off demands for support, such as those asking for leaflets in a 12 month period).
6. Do you use IPSs? (if yes, see Q.7 below)
7. Roughly what percentage of your service users have contact with an IPS?
Other Activities - Training and Evaluation

1. Approximately what involvement have you had in training other people, or other groups?
2. Approximately how much of your time would you say is spent on this?
3. What sort of publicity or community awareness strategies does your LEA use to promote your service? Do you do any publicity yourselves? (What?)
4. How successful have these been? (for the LEA/PPS)
5. What have been the key challenges? (for the PPS/LEA)
6. Do you have any procedures in place for monitoring the services provided?
   - Evaluation activity?
   - Publicity information?
   - Community awareness activities?

Best Practice

1. Do you have any success stories or good practice examples of where PSS (directly or indirectly) has led to the successful empowerment of parents? What have been the effects of this?
2. What are your views on the impact of the service on:
   - Parents
   - Schools
   - Statutory and voluntary services
   - Others
3. Are there any procedures for reporting on best practice, or information sharing with other PPS services?
   - What have been your experiences of this?
   - Would this be something you would find useful?
4. Have you come across examples of sharing best practice through PPS regional groups or through the NPPN or napps?
5. Do you use the NPPN monitoring and evaluation guidelines? How?
6. What are your views on the regional work and the national development work?
7. What are your views on what constitutes successful and/or effective practice?
   8. What are your views on factors that facilitate or inhibit effective practice?
RESPECTIBILITY OF THE LEA FOR THE PARENT PARTNERSHIP SERVICE

The Special Educational Needs Code of Practice specifies what LEAs are expected to do to deliver effective parent partnership services.

LEAs are expected to:

- take responsibility for setting and monitoring the overall standard of the service and ensure it is subject to Best Value principles;
- set out their funding and budgeting plans for the service (where appropriate the budget should be delegated to the parent partnership service);
- ensure adequate resources and staffing to meet the needs of the parents in their area;
- ensure appropriate management structures for the service;
- ensure that the service has a development plan which sets out clear targets and is regularly reviewed; such plans should specify short, medium and long term strategies and arrangements for evaluation and quality assurance;
- ensure that the service is flexible and responsive to local changes;
- ensure that parents and schools are provided with clear information about the parent partnership services, and about the various other sources of support in their area, including statutory and voluntary agencies;
- ensure that the service is provided with accurate information on all SEN processes as set out in the Education Act 1996, relevant Regulations, and the SEN Code of Practice and relevant information about the Disability Discrimination Act 1995;
- ensure, where the service is provided in-house, that the staff receive appropriate initial and ongoing training and development to enable them to carry out their role effectively;
- establish, where the service is outsourced either wholly or partially, a service level agreement for delivering the service which ensures sufficient levels of resources and training, and clearly set out the quality standards expected of, and the responsibilities delegated to, the provider;
- have, irrespective of whether it is outsourced or provided in-house, appropriate arrangements for overseeing, regularly monitoring and reviewing the service, taking account of best practice both locally and nationally;
- develop co-operative arrangements with the voluntary sector to ensure the mutual exchange of information and expertise;
- promote and facilitate arrangements for the service to work in partnership with other agencies such as health and social services, using local planning structures such as the Education Development Plan, Early Years Development and Childcare Plan, Connexions Plan and Children’s Services Plan. Provisions under the Health Act 1999 allow LEAs and health and social services to pool budgetary and management resources, such arrangements might therefore include the provision of joint information services;
- actively seek feedback from the service and service users to inform and influence decisions on SEN policies, procedures and practices in order to improve communications and minimise the potential for misunderstandings and disagreements.

(SEN Code of Practice – DfES, 2001)
**MINIMUM STANDARDS FOR PARENT PARTNERSHIP SERVICES**

The Special Educational Needs Code of Practice specifies the minimum standards to be met in providing a parent partnership service. An effective Parent Partnership Service is expected to meet the following minimum standards and ensure:

- the provision of a range of flexible services including using their best endeavours to provide access to an Independent Parental Supporter for all parents who want one;
- that practical support is offered to parents, either individually or in groups, to help them in their discussions with schools, LEAs and other statutory agencies;
- that parents (including all those with parental responsibility for the child) are provided with accurate neutral information on their rights, roles and responsibilities within the SEN process, and on the wide range of options that are available for their children’s education;
- that parents are informed about other agencies, such as Health Services, Social Services and voluntary organisations, which can offer information and advice about their child’s particular SEN. This may be particularly important at the time the LEA issues a proposed Statement;
- that where appropriate and in conjunction with their parents, the ascertainable views and wishes of the child are sought and taken into consideration;
- that information about the available services is publicised widely in the area using a variety of means;
- the provision of neutral, accurate information for parents on all SEN procedures as set out in SEN legislation and the SEN Code of Practice;
- the interpretation of information published by schools, LEAs and other bodies interested in SEN;
- that a wide range of information for parents is available in community languages, and to parents who may not be able to gain access to information through conventional means;
- that advice on special educational needs procedures is made available to parents through information, support and training;
- they use their best endeavours to recruit sufficient Independent Parental Supporters to meet the needs of parents in their area, including arrangements for appropriate training, ensuring that they are kept up to date with all relevant aspects of SEN policy and procedures so that they can fulfil their role effectively;
- that training on good communication and relationships with parents is made available to teachers, governors and staff in SEN sections of the LEA;
- they work with schools, LEA officers and other agencies to help them develop positive relationships with parents;
- they establish and maintain links with voluntary organisations;
- that parents’ views are heard and understood, and inform and influence the development of local SEN policy and practice;
- the regular review of the effectiveness of the service they provide, for instance by seeking feedback from users.

Table 9.1. Rating levels for clusters identified in the 13 PPS supporting full analysis

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OVERVIEW OF SAMPLING

The team agreed with the DfES Steering Group that it was unnecessary to involve all PPS in survey or interview work because the Benchmarking Exercise had already provided an opportunity for all PPS to report various features of their service, and the response rate had been high, yielding a good amount of data with which to work. Consequently, it was agreed that a sample of PPS would be asked to participate in specific evaluation enquiries.

Sixty (40%) PPS were included in the original sampling for the evaluation enquiries, either for telephone interviews or for case study work. The sample included PPS that had and had not returned completed benchmarking forms, in order that non-response did not preclude involvement in the evaluation. The evaluation team received completed Benchmarking Forms for 103 PPS, leaving 44 ‘non-respondents’. Equal proportions of each were invited to take part in the evaluation; this equated to 42 respondents and 18 non-respondents (40% of the total in both cases)\(^1\).

Of the 60 PPS included in the original sampling, 38 were asked to take part in telephone interviews (as a follow-up to the Benchmarking Exercise), and 22 were asked to take part in case study work. In practice, eight services from the original sample did not take part in telephone interviews – this was because the researchers were unable to make contact with the Parent Partnership Officer, despite several attempts by telephone and email. Two PPS were not included in the case study work because the team ran out of time to carry out all 22 case studies (as a result of delays beyond the control of the team or Steering Group).

All nine PPS regions were represented in both telephone interview and case study samples. Within each region, an equal proportion (around 40%) of the total regional number of services was identified for the sample and asked to participate in the telephone or case study enquiries. This meant that regions with larger numbers of PPS (such as London) were represented by larger numbers in the sample compared with regions with comparatively small numbers of PPS (such as the East Midlands), as shown in Table 9.1. below.

---

\(^1\) The actual (achieved sample) included 16 non-respondents and 34 respondents, being 36% and 41% respectively.
Table 9.2. Regional numbers and % of PPS identified for proposed evaluation sample (with achieved numbers in final sample in brackets)

<table>
<thead>
<tr>
<th>Region</th>
<th>Total number of PPS in region</th>
<th>Number of PPS in region selected for telephone interviews</th>
<th>Number of PPS in region selected for case studies</th>
<th>Total number of PPS in region involved in evaluation</th>
<th>PPS involved in evaluation as % of regional total of PPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>South East</td>
<td>19</td>
<td>5 (5)</td>
<td>3 (3)</td>
<td>8 (8)</td>
<td>42 (42)</td>
</tr>
<tr>
<td>South West</td>
<td>16</td>
<td>4 (2)</td>
<td>2 (1)</td>
<td>6 (3)</td>
<td>38 (19)</td>
</tr>
<tr>
<td>West Midlands</td>
<td>13</td>
<td>3 (3)</td>
<td>2 (2)</td>
<td>5 (5)</td>
<td>38 (38)</td>
</tr>
<tr>
<td>Yorks-Humberside</td>
<td>15</td>
<td>4 (3)</td>
<td>2 (2)</td>
<td>6 (5)</td>
<td>40 (33)</td>
</tr>
<tr>
<td>Eastern</td>
<td>10</td>
<td>2 (2)</td>
<td>2 (2)</td>
<td>4 (4)</td>
<td>40 (40)</td>
</tr>
<tr>
<td>East Midlands</td>
<td>7</td>
<td>1 (0)</td>
<td>2 (2)</td>
<td>3 (2)</td>
<td>43 (29)</td>
</tr>
<tr>
<td>London</td>
<td>33</td>
<td>10 (9)</td>
<td>4 (3)</td>
<td>14 (12)</td>
<td>42 (36)</td>
</tr>
<tr>
<td>North East</td>
<td>12</td>
<td>3 (2)</td>
<td>2 (2)</td>
<td>5 (4)</td>
<td>42 (33)</td>
</tr>
<tr>
<td>North West</td>
<td>22</td>
<td>6 (4)</td>
<td>3 (3)</td>
<td>9 (7)</td>
<td>41 (32)</td>
</tr>
<tr>
<td>Total overall</td>
<td>147</td>
<td>38 (30)</td>
<td>22 (20)</td>
<td>60 (50)</td>
<td>41 (34)</td>
</tr>
</tbody>
</table>

The sample also included a geographical spread of PPS that did and did not respond to the Benchmarking Exercise. In some regions, however, there had been a 100% response rate and so sampling non-respondents was not applicable in those regions, as can be seen in Table 9.2.

Table 9.3. Benchmarking respondents and non-respondents per region involved in evaluation enquiries with proposed samples (and actual samples in brackets)

<table>
<thead>
<tr>
<th>Region</th>
<th>SE</th>
<th>SW</th>
<th>WMid</th>
<th>Y&amp;H</th>
<th>East</th>
<th>EMid</th>
<th>Lond</th>
<th>NE</th>
<th>NW</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-resp</td>
<td>3</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>7</td>
<td>2</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(3)</td>
</tr>
<tr>
<td>Resp</td>
<td>5</td>
<td>6</td>
<td>4</td>
<td>4</td>
<td>3</td>
<td>3</td>
<td>7</td>
<td>3</td>
<td>7</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(5)</td>
</tr>
<tr>
<td>Total</td>
<td>8</td>
<td>6</td>
<td>5</td>
<td>6</td>
<td>4</td>
<td>3</td>
<td>14</td>
<td>5</td>
<td>9</td>
<td>60</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(8)</td>
</tr>
</tbody>
</table>

After sorting the PPS according to whether or not they had responded to the Benchmarking and by region, those PPS that had responded to the Benchmarking were sorted into three service ‘types’: LA in-house (provided by the LA, with staff employed directly by the LA - except for any volunteers), Mixed (includes both in-house and out-sourced provision – e.g. a part-time Parent Partnership Officer employed by the LA who has responsibility for liaison with an independent provider), and Out-Sourced (independent of the LA, although commissioned by the LA).

The services that were selected for case study work included at least two of these three types of service per region. In total, of the Benchmarking respondents, 74 services reported that they were in-house, 19 were out-sourced and 10 were mixed. These represented 71.8%, 18.4% and

1 Formerly South East and South Central
2 Although the South West region links with PPS in Wales, the scope of this evaluation did not cover Welsh services, and they are not included in any of the figures in this report.
9.7% of the total numbers of respondents. Given the relatively small numbers per region, it was not feasible for the sampling to be proportionate to the types of services per region. However, the sampling included more in-house PPS than other types, and more out-sourced than mixed and the numbers of each type were matched as closely as possible to the overall proportions for all respondents together.

The numbers of participants by type are shown in Table 9.3., which also provides information about the nature of the participation (face-to-face interviews during visits to PPS areas, or telephone interviews / written information supplied at a later date).

Table 9.4. Numbers of participants by type and by method of participation

<table>
<thead>
<tr>
<th></th>
<th>PPS Staff</th>
<th>IPS</th>
<th>Parents</th>
<th>School Staff</th>
<th>LA Staff</th>
<th>Other</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Face-to-face interview</td>
<td>54</td>
<td>12</td>
<td>24</td>
<td>24</td>
<td>13</td>
<td>8</td>
<td>138</td>
</tr>
<tr>
<td>Written evidence</td>
<td>0</td>
<td>0</td>
<td>7</td>
<td>10</td>
<td>2</td>
<td>0</td>
<td>19</td>
</tr>
<tr>
<td>Telephone Interviews</td>
<td>31</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>31</td>
</tr>
<tr>
<td>Total</td>
<td>85</td>
<td>12</td>
<td>33</td>
<td>34</td>
<td>15</td>
<td>9</td>
<td>188</td>
</tr>
</tbody>
</table>

Among the 33 parents who provided evidence, 24 had been ‘recruited’ by the PPS, and nine had not; 26 had used their local PPS at some time and seven had not; all had at least one child with SEN. School staff were represented by head teachers (21), SENCOs (11) and specialist teaching assistants (2). All the LA officers who participated were currently, had recently been, or were about to be directly responsible for line managing the PPS.

In the ‘other’ category, three participants were members of PPS advisory boards or management groups, and six were representatives of local organisations with whom the PPS worked closely.

Of the IPS interviewed, all had received training of some kind, and seven had taken a course that was accredited by the Open College Network.

Among the PPS staff interviewed, some worked full-time and others part-time, and they varied in the length of service. Together they fulfilled a range of duties, some covering general casework with parents; others being responsible for training (parents and / or schools) or liaison (with particular community groups); others coordinating IPS recruitment, training and supervision; others taking on a range of responsibilities; and some having overall managerial roles and responsibilities for strategic work.

The school staff who contributed their views worked in a range of educational settings – early years (1), infant (1), junior (1), primary (13), middle (2), secondary (11) and special schools (5) covering a broad age range of 2 to 19 years.

LA staff interviewed worked in SEN divisions of education departments, such as Educational Psychology, Assessment, Inclusion and SEN. None of the line managers worked in a health or social care context, although some reported that their Authority was making plans for working

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1 It should be noted that this does not necessarily mean that these proportions are relevant to all PPS as no information was available at the time about the service types of non-respondents.
as a Children’s Trust and, as such, their collaboration with colleagues in other disciplines was increasing.

Parents who participated represented both PPS users and users of other forms of support for parents of children with SEN/disabilities (such as local ASD, ADHD support groups or networks).
Literature Review Methods

The review of literature comprising policy documentation and evidence from research and professional books and journal articles had two overall aims, which were:

- to locate the mapping (and impact) of PPS work within a framework of current policy requirements and government guidelines
- to detail what is known from research and practice about ‘what works’ in partnerships between statutory and voluntary/community bodies and (schools and) parents, especially where work relates to children with special or additional educational needs.

The review was also intended to help build a picture of what constitutes ‘good practice’ in partnership with parents to guide the development of Theory of Change models (to explore processes and identify effectiveness) during the case study work in the next phase of the evaluation, and to make recommendations for possible service developments in the future.

Given the national context of PPS work, it was decided to focus on recent UK policy documentation and research reports. Although there may be useful and pertinent policy documents and research evidence from outside the UK, these are believed to be beyond the scope of this evaluation.

It was also decided that the review’s searches would be limited to texts published since the introduction of the National Curriculum, and policy documents published since the introduction of (but including) the 2001 SEN Code of Practice.

Searches of electronic library databases, such as the British Education Index, were not limited by age categories or school types (it is possible to search, for example, ONLY for reports relating to primary school). This was because the PPS remit can cover children and young people from pre-school up to higher education, or from birth to 25 (although predominantly it applies to people aged from 2 to 19 years).

Electronic and manual searches were made of lists of journal articles, books, policy documents, and conference proceedings.

Basic search terms used in preliminary searches were: parents, partnership, SEN, home-school, assessment (as well as combinations of these terms).

Yields were relatively low (and therefore manageable). For example, a search of library catalogues using the combined Boolean search string ‘parents AND partnership AND SEN’ yielded just 133 results, and the majority of these texts were excluded on the basis of various criteria (see below).

Inclusion criteria were:
- about partnerships (or liaison) between parents and schools, or parents and statutory agencies, or schools and statutory agencies;
- about SEN, AEN, disabilities;
- about British educational contexts or address British educational issues
- published post-1998
Exclusion criteria were:

- Not with a focus on, merely make brief references to, parent partnership work;
- Published pre-1998
- Concerned with educational contexts/issues outside the UK (e.g. USA)

Research reports (that met inclusion criteria) were included regardless of whether they were based on first-hand empirical work, were reviews of others’ empirical work, or were theoretical pieces.

To ensure a systematic approach to the reviewing of texts by a team of reviewers\(^1\), it was decided that a proforma should be used to record salient details of texts (see Appendices). The proforma was based on one that was developed and successfully used in a previous review for the DfES carried out by CCCUC and Manchester Metropolitan University (David, Gououch, Powell and Abbott, 2003).

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\(^1\) EPPI-Centre procedures for systematic reviewing of research reports demand that all (or a significant proportion of all) texts are subject to review by more than one person to minimise potential bias. The time limits of this review were such that a small sample of texts were subject to paired reviewing, but the review team as a whole discussed all texts following ‘data extraction’.
## Appendix 5

### Table 9.5. Service types, budgets, and staffing of case study and telephone interview PPS

<table>
<thead>
<tr>
<th>PPS</th>
<th>Service Type</th>
<th>% LEA funded</th>
<th>Paid Staff 2004</th>
<th>Admin Staff 2004</th>
<th>FTE Staff excl admin</th>
<th>Opening</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Studies</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>In house</td>
<td>100</td>
<td>3 PT</td>
<td>1 FT</td>
<td>2</td>
<td>All year</td>
</tr>
<tr>
<td>2</td>
<td>In house</td>
<td>100</td>
<td>3 PT</td>
<td>1 PT</td>
<td>2</td>
<td>All year</td>
</tr>
<tr>
<td>3</td>
<td>In house</td>
<td>100</td>
<td>5 FT, 3 PT</td>
<td>1 FT, 1 PT</td>
<td>6.4</td>
<td>All year</td>
</tr>
<tr>
<td>4</td>
<td>In house</td>
<td>100</td>
<td>1 PT</td>
<td>1 PT</td>
<td>0.5</td>
<td>Except during leave</td>
</tr>
<tr>
<td>5</td>
<td>In house</td>
<td>100</td>
<td>2 PT</td>
<td>None</td>
<td>1.1</td>
<td>Except during leave</td>
</tr>
<tr>
<td>6</td>
<td>Out sourced</td>
<td>100</td>
<td>3 PT</td>
<td>1 PT</td>
<td>2.1</td>
<td>Except during leave</td>
</tr>
<tr>
<td>7</td>
<td>Out sourced</td>
<td>100</td>
<td>1 FT, 3 PT</td>
<td>2 PT</td>
<td>2.9</td>
<td>During term</td>
</tr>
<tr>
<td>8</td>
<td>In house</td>
<td>96</td>
<td>2 FT, 8 PT</td>
<td>2 FT</td>
<td>6.4</td>
<td>All year</td>
</tr>
<tr>
<td>9</td>
<td>In house</td>
<td>97</td>
<td>2 FT</td>
<td>None</td>
<td>2</td>
<td>Except during leave</td>
</tr>
<tr>
<td>10</td>
<td>In house</td>
<td>100</td>
<td>5 FT</td>
<td>1 FT</td>
<td>5</td>
<td>All year</td>
</tr>
<tr>
<td>11</td>
<td>In house</td>
<td>100</td>
<td>2 PT</td>
<td>1 FT</td>
<td>2</td>
<td>All year</td>
</tr>
<tr>
<td>12</td>
<td>In house</td>
<td>100</td>
<td>1 FT</td>
<td>None</td>
<td>1</td>
<td>Except during leave</td>
</tr>
<tr>
<td>13</td>
<td>In house</td>
<td>77</td>
<td>1 FT, 2 PT</td>
<td>1 PT</td>
<td>2.4</td>
<td>All year</td>
</tr>
<tr>
<td>14</td>
<td>Mixed</td>
<td>100</td>
<td>11 FT</td>
<td>2 FT</td>
<td>11</td>
<td>All year</td>
</tr>
<tr>
<td>15</td>
<td>Out sourced</td>
<td>55</td>
<td>3 PT</td>
<td>1 PT</td>
<td>1.92</td>
<td>All year</td>
</tr>
<tr>
<td>16</td>
<td>Out sourced</td>
<td>55</td>
<td>5 PT</td>
<td>1 PT</td>
<td>2.6</td>
<td>All year</td>
</tr>
<tr>
<td>17</td>
<td>Mixed</td>
<td>100</td>
<td>1 FT, 6 PT</td>
<td>1 FT, 1 PT</td>
<td>4.8</td>
<td>All year</td>
</tr>
<tr>
<td>18</td>
<td>Out sourced</td>
<td>100</td>
<td>3 PT</td>
<td>None</td>
<td>0.8</td>
<td>Except during leave</td>
</tr>
<tr>
<td>19</td>
<td>In house</td>
<td>100</td>
<td>6 FT, 1 PT</td>
<td>2 PT</td>
<td>6.5</td>
<td>All year</td>
</tr>
<tr>
<td>20</td>
<td>Out sourced</td>
<td>30</td>
<td>4 FT, 3 PT</td>
<td>2 FT</td>
<td>5.4</td>
<td>All year</td>
</tr>
<tr>
<td>Telephone Interviews</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>In house</td>
<td>100</td>
<td>1 FT</td>
<td>1 PT</td>
<td>1.20</td>
<td>Except during leave</td>
</tr>
<tr>
<td>2</td>
<td>In house</td>
<td>100</td>
<td>2 PT</td>
<td>None</td>
<td>1.17</td>
<td>All year</td>
</tr>
<tr>
<td>3</td>
<td>In house</td>
<td>100</td>
<td>1 PT</td>
<td>None</td>
<td>0.2</td>
<td>All year</td>
</tr>
<tr>
<td>4</td>
<td>In house</td>
<td>100</td>
<td>4 FT</td>
<td>3 PT</td>
<td>5.90</td>
<td>All year</td>
</tr>
<tr>
<td>5</td>
<td>In house</td>
<td>100</td>
<td>3 FT, 2 PT</td>
<td>1 FT, 1 PT</td>
<td>5.31</td>
<td>All year</td>
</tr>
<tr>
<td>6</td>
<td>In house</td>
<td>100</td>
<td>3 PT</td>
<td>1 PT</td>
<td>2.14</td>
<td>Except during leave</td>
</tr>
<tr>
<td>7</td>
<td>In house</td>
<td>100</td>
<td>1 PT</td>
<td>None</td>
<td>0.85</td>
<td>Term time only</td>
</tr>
<tr>
<td>8</td>
<td>In house</td>
<td>66</td>
<td>5 PT, 1 FT</td>
<td>2 PT</td>
<td>4.99</td>
<td>Term time only</td>
</tr>
<tr>
<td>9</td>
<td>In house</td>
<td>100</td>
<td>2 FT, 1 PT</td>
<td>None</td>
<td>2.00</td>
<td>All year</td>
</tr>
<tr>
<td>10</td>
<td>In house</td>
<td>100</td>
<td>2 PT</td>
<td>1 PT</td>
<td>1.50</td>
<td>Except during leave</td>
</tr>
<tr>
<td>11</td>
<td>In house</td>
<td>100</td>
<td>1 FT, 2 PT</td>
<td>1 PT</td>
<td>2.66</td>
<td>Except during leave</td>
</tr>
<tr>
<td>12</td>
<td>Out sourced</td>
<td>100</td>
<td>1 PT</td>
<td>None</td>
<td>.30</td>
<td>Except during leave</td>
</tr>
<tr>
<td>13</td>
<td>In house</td>
<td>100</td>
<td>3 PT</td>
<td>1 PT</td>
<td>2.30</td>
<td>All year</td>
</tr>
<tr>
<td>14</td>
<td>Out sourced</td>
<td>100</td>
<td>1 PT</td>
<td>1 PT</td>
<td>1.00</td>
<td>All year</td>
</tr>
<tr>
<td>15</td>
<td>In house</td>
<td>100</td>
<td>2 PT, 2 FT</td>
<td>None</td>
<td>2.80</td>
<td>All year</td>
</tr>
<tr>
<td>16</td>
<td>Out sourced</td>
<td>100</td>
<td>2 FT, 2 PT</td>
<td>1 PT</td>
<td>3.50</td>
<td>Except during leave</td>
</tr>
<tr>
<td>17</td>
<td>In house</td>
<td>100</td>
<td>2 PT</td>
<td>None</td>
<td>1.35</td>
<td>Except during leave</td>
</tr>
<tr>
<td>18</td>
<td>In house</td>
<td>100</td>
<td>11 FT, 1 PT</td>
<td>1 FT</td>
<td>12.60</td>
<td>All year</td>
</tr>
</tbody>
</table>