

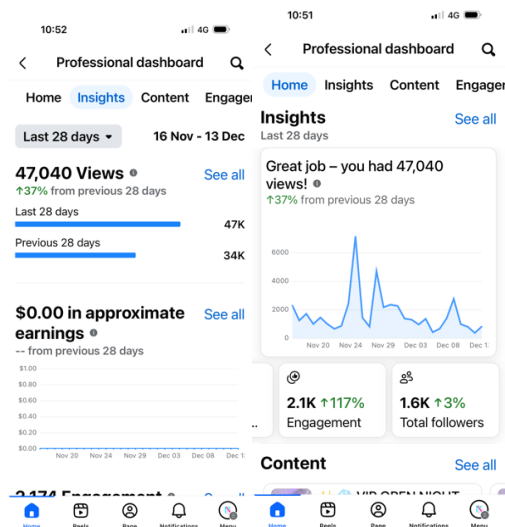


NPCV report to SAIB December 2025

1083 members (up 14 from Nov 25)

1605 face book followers (up 40 from Nov 25) (+ 399 from other platforms like Linked in & Instagram)

Increase in following and engagement :-



1. Key Updates

Team capacity and development

We continue to grow our representative and engagement capacity. A new parent carer representative with an interest in strategic work is currently completing induction and will be ready to attend meetings in the New Year; partners are asked to extend a warm welcome. We have also welcomed a new team member responsible for producing our monthly newsletter. This growth reflects NPCV's increasing credibility and the value parent carers place on being involved, while strengthening capacity and breadth of lived experience within the Forum.

Engagement activity

We completed our programme of SEND workshops / SEND meet the teams and there's a comprehensive report and recommendations later in this document. Total of 114 attendees (43 parent carers) from 212 bookings. A big thank you to NNC's two team members, Karen and Bridette, for their support and assistance with planning, hosting and delivering these workshops and to all the services that attended and supported the event.

Our engagement team has been actively attending a wide range of face to face parent group meetings and festive celebrations hosted by other support organisations. They also hosted a **Christmas lunch** attended by **16 parent carers**, providing an opportunity to connect, celebrate and reduce isolation. Planning for next year's engagement calendar is underway, with a full programme of activities and opportunities expected. Online engagement remains strong in facebook forums and on our Padlets. We have had feedback contributions to key documents from our wider representative team too.



Team wellbeing

This reporting period has highlighted significant pressures on our volunteer workforce. Many of our representatives are neurodivergent parent carers and have found sustained engagement in aspirational strategic discussions challenging due to the ongoing disconnect between system-level ambitions and the lived reality for SEND families in Northamptonshire, including their own. The cumulative emotional impact of carrying family experiences, alongside hearing repeated accounts of unmet need, has affected wellbeing and resilience across the team. As an organisation, we are therefore prioritising the introduction of reflective supervision delivered by a specialist provider to support emotional wellbeing, manage the demands of the role, and promote sustainability. This approach is central to workforce retention, safeguarding a stable and experienced volunteer base, and maintaining the benefits of a neurodiverse and representative workforce, which strengthens the authenticity, quality and effectiveness of our contribution to the Local Area Partnership.

LAP Governance - Stakeholder Board

This aspect of LAP Governance remains on hold whilst we continue to work through difficulties. We hope to have more productive meetings this week enabling a review of terms of reference with the Board early in the new year followed swiftly by re-commencing of meetings.

Commissioning and procurement

We are working with commissioners on an initiative to inform and contribute to future procurement planning.

2. Partnership for Inclusion of Neurodiversity in Schools (PINS)

Engagement in schools is progressing well. We have visited all schools within the North programme and are building relationships to support inclusion and co-production within primary settings. Our parent carer training calendar for this project is nearly finalised, with full details to be shared with members shortly.

Parent carer feedback from the programme indicates a material and escalating risk to sustainable mainstream inclusion. Inconsistent inclusive practice across schools, coupled with variable staff skills, confidence and understanding of neurodiversity, is being compounded by behaviour and attendance policies that are insufficiently adapted to neurodivergent need. These policies are frequently experienced as punitive and inflexible, exacerbating difficulties rather than mitigating them.

Current progress and attainment frameworks often fail to recognise or value the smaller, incremental gains essential for neurodivergent learners, undermining parental confidence in mainstream provision.

In addition, reports of exclusionary or hostile attitudes from some parents of neurotypical pupils present a further cultural barrier to inclusion.

Collectively, these factors significantly increase the risk of isolation, suspension, exclusion and emotionally based school refusal, with potential longer-term consequences including disengagement from education, deteriorating mental health, and increased demand for specialist provision.



From our experiences in schools from last year and this year we feel this **risk has been underestimated to date and requires urgent strategic recognition and mitigation to prevent avoidable escalation across the system**. Even more so with the current push into mainstream locally and nationally.

Commissioning and procurement

We are working with commissioners on an initiative to inform and contribute to future procurement planning.

3. SEND Workshop outcomes

Full report here :-

[News | Northamptonshire Parent Carer Voices](#)

A link to Our **Workshop Report** is included and outlines next steps. A key recommendation is the **development of a co-production framework and assessment tool**. Adoption of this by the Local Area Partnership would:

- Embed co-production as a consistent **way of working**, rather than a tick-box exercise
- Provide a **shared understanding** of what meaningful co-production looks like
- Enable the partnership to **measure how well co-production is being implemented**
- Support continuous improvement by identifying strengths and areas for development Increase trust, transparency and accountability with parent carers

4. Transparency and feedback

As previously committed (Nov 25 SAIB), we have launched a **Padlet** to increase transparency around parent carer feedback. The link has been shared to enable partners to view what families say is working well and where further improvement is needed.

<https://padlet.com/enquiries188/share-your-experience-qu9lmsxwff0rrn5u>

Thematic Analysis of Padlet Feedback - Headline Themes

1. EHCP PROCESS: inconsistency, delay, and lack of transparency

Most frequent issue across all sections

- Significant delays in needs assessments, plan drafting, and annual reviews.
- Parents report having to “fight” for provision and frequently self-advocating due to poor communication from the LA.
- Inconsistent quality of EHCPs: lack of specificity, outdated information, or missing professional input (particularly SALT and OT).
- Seemingly unlawful decision making
- Positive experiences are linked to individual staff members rather than the system—suggesting structural inconsistency, not systemic reliability.

Implication for the Board: This area represents the highest-impact risk to statutory compliance and family confidence.



2. SCHOOL SUPPORT & MAINSTREAM INCLUSION: inconsistent reasonable adjustments and SEND expertise

Parents repeatedly highlight:

- Insufficient understanding of neurodiversity, sensory needs, PDA, SEMH, and anxiety-based school avoidance.
- Uniform policies, behaviour policies, and punitive approaches being applied without reasonable adjustments.
- Lack of proactive SEND support before crisis, leading to exclusion, reduced timetables, or EOTAS requests.
- Good practice exists but is inconsistent and relies heavily on specific staff.

Implication for the Board: **OAP (Ordinarily Available Provision) design and embedding remains a critical development area**; gaps highlight the need for consistent SEND practice and workforce training.

3. HEALTH INPUT (SALT, CAMHS, OT, Paediatrics): delays and limited access

Frequent concerns around:

- Long waiting lists for SALT assessments and therapy / no SALT provision for EHCPs
- Lack of joined-up approaches between education and health—especially for CYP with complex needs.
- CAMHS thresholds perceived as too high, leaving families unsupported in crisis.
- Delayed medical appointments causing knock-on educational impacts.

Implication for the Board: **Health contribution to SEND pathways still needs strengthened integration, clearer expectations, and more responsive provision.**

4. COMMUNICATION & NAVIGATION OF THE SYSTEM: “We don’t know what’s happening or who to talk to.”

Parents describe:

- Confusion around processes, criteria, and terminology.
- Difficulty accessing the right person or team; inconsistent responses.
- Feeling “out of the loop”, especially during transitions.
- A lack of written guidance and proactive updates from LA and schools.

Positive notes emphasise:

- When communication *is* clear, timely, and respectful, families report high satisfaction even if the outcome is difficult.

Implication for the Board: **Improving communication** could have immediate, high-impact benefits with minimal cost (“quick win”).

5. PARENT-CARER VOICE & CO-PRODUCTION: desire is strong but practice is inconsistent

Parents express:

- Appreciation for opportunities such as SEND workshops, “meet the teams,” and NPCV involvement.
- But co-production is inconsistently applied and it’s more often consultation than genuine partnership.
- Families still want to see evidence of “you said, we did.”



Implication for the Board: Developing a **co-production framework and assessment tool and embedding practice** (not just documents) is key to rebuilding trust.

6. ALTERNATIVE PROVISION / EOTAS: driven by breakdown rather than planned choice

Themes include:

- Parents turning to EOTAS because mainstream has failed to meet needs.
- Positive experiences when specialist tutors/therapists are engaged, but systems feel reactive and crisis-driven.
- Shortage of appropriate specialist placements locally.

Implication for the Board: There is further strong evidence of this from the EBSA working group (currently paused unfortunately). **A broader strategic approach to AP / EOTAS** is required, focusing on prevention, earlier intervention, and quality assurance. **A list of approved providers needs to be published urgently.**