

Submitted to SEND reform: education otherwise than at school
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Glossary and key terms

Comparison of EOTAS Special educational provision and alternative provision

Introduction

About this consultation

Who this is for

Chapter 1: Reforming education otherwise than at school

How our proposed SEND reforms can better meet the needs of children and young people

A reformed approach to EOTAS within the context of specialist provision packages

1 How can we best support the needs of children and young people who are not eligible for a Specialist Provision Package but are unable to continue their education in a formal setting?

Provide any information you consider helpful (optional, up to 250 words):.

HPCI is the parent carer forum for Hertfordshire. In September 2026, we ran three online parent carer sessions to help families understand the proposals and to inform this response.

Q1. How can we best support the needs of children and young people who are not eligible for a Specialist Provision Package but are unable to continue their education in a formal setting?

Ask them! Engaging with children and their families to understand the barriers to school is key.

Children in this situation often require highly personalised provision that does not assume school is always the right place. Parents repeatedly emphasised that the current system often treats the child as the problem rather than the environment.

Support should include:

- Early access to co-ordinated specialist advice (EPs, CAMHS, therapists) and alternative settings.
- Flexible blended provision, including home tuition, online learning, therapeutic input, vocational options, part-time timetable or gradually increasing learning.
- Relationship based practice, recognising that many children need months of consistency and trust building before learning can begin, particularly if the health needs relate to mental health.
- Moving at the correct pace for the child or young person and not expecting immediate return to a full school timetable. Schools supported to allow for this rather than punished for poor attendance.
- Clear routes to specialist provision where needed, without long waits or gatekeeping.
- Continued social connection if desired by the child or young person.

Identification and management of EOTAS arrangements from 2030

2 Which approach to commissioning and overseeing EOTAS arrangements do you think would work best?

Another approach (please specify)

Please provide reasons for your answer (optional, up to 250 words):

Parents strongly rejected the idea that schools should decide or manage EOTAS. Schools are already overstretched and often lack the specialist commissioning, therapeutic, and contract management skills required. It is also unclear how a school (particularly one the child has never attended or where relationships have broken down) could commission or oversee a highly individual package from an up-to-date understanding of need.

Preferred approach:

A specialist commissioning function within the local authority, working in partnership with:

- parents and young people
- health professionals
- specialist SEND teams
- alternative provision experts

This avoids conflicts of interest and ensures decisions are made by people who understand complex needs.

Where EOTAS is used in combination with school attendance, parents supported the school and alternative provision provider working in partnership if this was in the best interests of the child or young person.

3 Under your preferred approach, what support, capacity or safeguards would be needed to enable the named school or further education setting and/or local authority to undertake their roles effectively?

Please provide reasons for your answer (optional, up to 250 words):

Parents identified the following requirements:

- Specialist commissioning expertise (SEND, trauma, therapeutic practice, contract management).
- Adequate funding so decisions are not distorted by cost pressures.
- Clear accountability and independent oversight.
- Access to multi disciplinary advice (EPs, CAMHS, OTs, SALT).
- Time and staffing capacity to monitor provision quality.
- Consistency across the county, not school by school variation.
- Protection against schools shifting children out because they cannot meet need.

There also needs to be sufficient time to put all these requirements in place before changes can safely be made.

4 What safeguards should be in place to support consistent, needs-led decisions about when Education Otherwise Than At School (EOTAS) is the most appropriate way to meet a child or young person's needs, including where suitable school or further education provision may be limited or unavailable?

Provide any information you consider helpful (optional, up to 250 words):

Safeguards should include:

- Independent multi disciplinary assessment by qualified professionals, not solely school led.
- Clear criteria that recognise trauma, sensory needs, and mental health, not just academic ability.
- Evidence from families, who understand the child's lived experience.
- Recognition that lack of suitable school places is a legitimate reason for EOTAS (with consideration given to developing schools that might meet those needs).
- No assumption that school is always the default, if this is not in the best interest of the child or young person.
- Protection against forced reintegration driven by attendance targets or funding.

Appropriate transition into and out of school or further education setting from 2029/30

5 What factors are important for effective reintegration planning for children and young people receiving EOTAS provision?

Provide any information you consider helpful (optional, up to 250 words):

6 What safeguards are needed to ensure reintegration planning best supports progress and the child or young person's long-term outcomes?

Provide any information you consider helpful (optional, up to 250 words):

- No forced reintegration; only when the child chooses and is ready.
- Clear criteria for readiness, including mental health stability. Consistent good practices in all schools.
- Protection against sudden withdrawal of EOTAS if progress is slow.
- Monitoring by an independent body, not solely the school.
- Schools not penalised for lower attendance if there is just cause
- Continuity of relationships (same tutor/therapist where possible).
- Ability to pause or reverse reintegration if it harms wellbeing.
- Listening to the child or young person and their parent carer and taking appropriate action LA tracking and overseeing progress and long-term outcomes to inform future practice
- Decisions made based on need rather than budget constraints

Appealing decisions regarding EOTAS arrangements

7 What arrangements are needed to provide parents with a clear route to resolve disputes if decisions are made: about whether new EOTAS provision should be put in place; or to change or cease EOTAS provision that has already been put in place?

Provide any information you consider helpful (optional, up to 250 words):

The Hertfordshire parents we spoke to were clear: removing SEND Tribunal rights is not the right course of action.

Parents want the updated system to avoid the need for SEND tribunal and/or complaints and proactively support children and young people without parents having to fight.

Dispute resolution must include:

- Retaining full SEND Tribunal rights, including appeals about EOTAS decisions.
- A properly resourced Tribunal system to reduce delays and associated harm to the child.
- Independent legal mediation, not school based complaints panels.
- Clear separation between the body delivering provision and the body hearing complaints.
- Timely and transparent decision making with written rationales.

Quality assurance and regulation of EOTAS provision

Quality assurance of EOTAS provision for young people over the age of 16

8 Do you agree or disagree that non-school alternative provision delivering EOTAS special educational provision to children of compulsory school age should be required to comply with new national regulatory standards?

Yes, I agree for children and young people on new and existing arrangements

Provide any additional information you consider helpful (optional, up to 250 words) :

Parents supported minimum national safeguarding and quality standards, but with:

- A phased implementation period and proportionate requirements, so small, effective providers are not lost.
- Support to meet standards, not punitive exclusion.
- Flexibility for therapeutic or niche providers.

9 Do you agree or disagree that local authorities should be responsible for quality assuring non-school alternative provision delivering special educational provision EOTAS for children of compulsory school age?

Yes, I agree for children and young people on new and existing arrangements

Provide any additional information you consider helpful (optional, up to 250 words) :

Yes—provided the LA has the expertise, capacity and independence to do this well and their QA is subject to external oversight.

Parents emphasised that:

- Schools should not “mark their own homework”.
- Quality assurance must include parent and child feedback and progress and outcome measures (where appropriate), not just provider self reporting.

10 For young people aged 16-25, should quality assurance and oversight arrangements of EOTAS provision align with the approach proposed for children of compulsory school age?

Yes, I agree

Provide any additional information you consider helpful (optional, up to 250 words):

Yes. Safeguarding and quality expectations should not drop at 16.

Chapter 2: Supporting children and young people on existing EOTAS arrangements

11 When should assessment take place, if at all, for children and young people on existing EOTAS arrangements?

A different approach should be taken (please specify)

Provide any additional information you consider helpful (optional, up to 250 words):

Parents strongly opposed automatic reassessment at the end of primary because

- Assessment should be individualised, not tied to age or phase.
- Primary and secondary environments, routines, practices and expectations are radically different; coping in one does not predict coping in the other.
- Many children on EOTAS have profound trauma, making reassessment destabilising.
- Hertfordshire has some areas with three-tier systems, and it is unclear how that would work in those areas.

12 If a needs assessment takes place and a child of primary age is assessed as eligible for an EHCP, do you agree that they should move onto a Specialist Provision Package, with any EOTAS arrangements managed in line with the proposals set out in Chapter 1?

Neither agree nor disagree

Provide any information you consider helpful (optional, up to 250 words):

Only if the family agrees and the provision genuinely meets need.

Concerns raised:

- The proposed SPP model is untested.

- It is unclear where EOTAS would sit within SPPs.
- Families fear losing bespoke provision that works.
- Staff at the school the child is registered at may not know the child well enough to draw up their Individual Support Plan if all provision has previously been EOTAS

13 If a need assessment takes place, what should be the next step for those who are not eligible for an EHCP?

A flexible, case by case approach

Provide any additional information you consider helpful (optional, up to 250 words):

Parents found this scenario unrealistic. However, if it occurs there should be:

- A bespoke transition plan.
- Access to AP, therapeutic and mental health support, and flexible arrangements.
- No sudden removal of EOTAS.
- Clear evidence explaining why needs have changed.
- Right to appeal

14 Which factors best support stable transitions and progression for children receiving EOTAS, including return to education where appropriate?

Provide any information you consider helpful (optional, up to 250 words):

- Child led pacing and decision making
- Continuity of trusted relationships
- Flexible blended provision
- Avoiding forced reintegration
- Regular multi disciplinary review by qualified professionals including education and wellbeing
- Environmental adjustments
- Respect for the child's trauma history

Quality assurance for existing EOTAS provision

Chapter 3: Children receiving alternative provision because their health needs cannot be met in school

Improving the suitability of provision

The role of schools and system coherence

15 How effective is the current system in enabling schools to put in place early support for children whose health needs affect their participation in education, before requiring the local authority to arrange alternative provision?

Somewhat ineffective

Provide any additional information you consider helpful (optional, up to 250 words):

Parents' discussion focused on mental health needs and the current Children and Young People Mental Health System, which was described as fragmented and inconsistent.

Improvements needed:

- Clear national guidance defining roles, responsibility and accountability of schools, LAs, CAMHS, ESMA, and AP.
- Proactive, preventative measures to avoid declining mental health.
- Clear and transparent referral criteria for support services.
- A single coordinating team for supporting children and young people with emotionally based school non-attendance and mental health needs and their families which can be accessed by professionals and families.
- Early intervention pathways, not crisis driven responses.
- Shared responsibility and accountability, not passing the child between services.
- Timely access to support, assessment and treatment (where required).

16 How could roles and responsibilities between schools, local authorities and health services be clarified to support more timely and effective support for children who are unable to attend school due to health reasons and require alternative provision?

Provide any information you consider helpful (optional, up to 250 words):

- Early, effective mental health intervention, not multi year CAMHS waits.
- Flexible timetabling, including part time attendance.
- Avoiding punitive attendance approaches
- Blended learning, including high-quality online options if appropriate.
- Families not left to fend for themselves

- Co-ordinated working and consistent communication between school, AP, health, and family.

17 Where an alternative provision placement is required to meet health needs, how can children be better supported to transition back into a school?

Provide any information you consider helpful (optional, up to 250 words):

- Health led decision making, not attendance led.
- Clear reintegration plans co produced with families.
- Settings working together in the best interest of the child or young person.
- Ability to pause or reverse reintegration.
- Environmental and logistical adaptations and reasonable adjustments (quiet spaces, sensory supports etc).

Chapter 4: Children receiving alternative provision from accredited online education providers

18 What approach, if any, should be taken to the duration of placements for children receiving alternative provision through Online Education Accredited Providers?

Placements should not be time limited

Provide any additional information you consider helpful (optional, up to 250 words):

19 Should children receiving alternative provision through Online Education Accredited Providers remain on the admission register of a school?

It should depend on individual circumstances

Provide any additional information you consider helpful (optional, up to 250 words):

About you

20 What is your name?

Name:

Kate Hudson

21 What is your email address?

Email address:

kate@hertsparentcarers.org.uk

22 Are you happy to be contacted directly about your response?

Yes

23 Would you like us to keep your response confidential?

No

24 Are you responding as an individual or on behalf of an organisation?

Organisation

Organisation

26 If you are responding on behalf of an organisation, which of the following best describes who/which part of the sector your organisation represents?

representative organisation

If Other, please specify::

27 What is the name of your organisation?

Type below:

Herts Parent Carer Involvement (PCF for Hertfordshire)

28 What is your role within the organisation?

Parent or carer

If Other, please specify::

Appendix 1 – supporting children with health needs

Appendix 2- alternative provision 3 tier model