

## RESPONDENT INFORMATION FORM

**Please Note** this form must be returned with your response to ensure that we handle your response appropriately

### 1. Name/Organisation

Organisation Name

Down's Syndrome Scotland

Title Mr  Ms  Mrs  Miss  Dr  *Please tick as appropriate*

Surname

Le Noan

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**Individual**

Please tick as appropriate

**(a)** Do you agree to your response being made available to the public (in Scottish Government library and/or on the Scottish Government web site)?

Please tick as appropriate

**(c)** The name and address of your organisation will be made available to the public (in the Scottish Government library and/or on the Scottish Government web site).

**(b)** Where confidentiality is not requested, we will make your responses available to the public on the following basis

Please tick ONE of the following boxes:

Yes, make my response, name and address all available

Yes, make my response available, but not my name and address

Yes, make my response and name available, but not my address

Are you content for your response to be made available?

Please tick as appropriate  **Yes**  **No**

**(d)** We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

Please tick as appropriate  **Yes**  **No**

## **CONSULTATION QUESTIONS**

### **1. Is the draft guidance clear and does it contain enough detail?**

The draft guidance is very clear and is at the correct level of detail to provide understanding and the call for action. Down's Syndrome Scotland also welcomes the fact that the guidance is updating policy and legislative changes which have taken place since 2012.

Overall we believe the guidance is comprehensive. We particularly welcome the emphasis on collaboration and the need for local authorities to work in partnership with other agencies (including third sector organisations) and to seek the views of parents and pupils with and without disabilities with regard to any proposed changes.

Consulting with key stakeholders is also essential for authorities to establish relevant accessibility strategies and we particularly support the involvement of Allied Health Professionals (AHPs) in such process as recommended on page 49.

### **2. Is the structure of the guidance appropriate?**

The structure of the guidance is appropriate and the list of contents gives an excellent guide. The identification of the meaning of disability, comprising physical as well as mental impairments, is welcome and the reemphasis on the planning duties within the strategy is well considered.

### **3. Are there any areas which you feel need clarification? (please include chapter and paragraph number where possible).**

Firstly, in Chapter 2, paragraph 9 (page 28), the guidance indicates that 'responsible bodies are obliged to have regard to this guidance'. Down's Syndrome Scotland would welcome clarification as to what this precisely entails in terms of the duty of local authorities to implement the guidance. Is there a monitoring process in place to ensure that all 32 councils are consistent with the guidance when revising or establishing accessibility strategies? And what are the mechanisms in place if an authority does not have regard for the guidance?

In Chapter 2 in the section 'Making strategies available' (page 29), Down's Syndrome Scotland also argues that there should be a more rigorous system requiring that strategies be made available (for example, through the government or a requirement that the strategy be posted on the local

authority website).

In the same section Down's Syndrome Scotland would welcome clarification regarding 'making the strategy available in an alternative form' as to why a reference to 'improving the accessibility of language, e.g. easy read or simplified text' is not mentioned in Chapter 2 when it is referred to in Chapter section 42, page 44.

Then, with regard to Chapter 3, in paragraph 7, we would welcome advice as to whether partnership centres are included in the 'providers' referred to in this paragraph.

In Chapter 3, paragraph 11 (page 34), some of our members have suggested to remove 'with print disabilities' at the end of the paragraph because children with a lot of different needs can actually benefit from access to electronic materials.

Furthermore, in Chapter 3, paragraph 14 (page 34), one of our member parents rightly points out that this section should refer to children with significant health, education and/or social needs like in Section 13 as the involvement of third sector organisations, professionals and social workers is relevant to all children with disabilities and not only to the ones with significant health needs.

Finally, in Chapter 3, paragraph 27 (page 39), Down's Syndrome Scotland would like to focus on the issue of building schools that are 'fit for purpose'. With regard to the design and layout of schools, we would like to emphasise that open-plan spaces within schools are not the most suitable environments for children with additional support needs. Open-plan spaces are often very noisy and children with Down's syndrome may have more difficulties hearing and concentrating in such environments, which is then detrimental to their education.

#### **4. Is there information missing? Or is the guidance comprehensive enough?**

The guidance is very comprehensive.

Nevertheless, some additions would be helpful:

- More information could be provided in relation to the Curriculum for Excellence. What is new in the new curriculum is not answered in relation to accessibility strategies.
- Moreover the constraints on local authority finance are not acknowledged. These constraints can have an impact on building and on ICT provision.
- We noted that no mention is made of non-curricular activities in after school provision.

- It would also be good to get an example of an actual outcome or a real evidence-based imperative
- In Chapter 3, paragraph 15 (page 35), one of our members rightly suggested to add a point focusing on the general day-to-day life of the school outwith the classroom (e.g. corridors, break times). In fact as our member argues "these non-structured parts of the day are often some of the hardest to include children in and meet their support needs."
- Finally, in Chapter 3, paragraph 33 (page 42), Down's Syndrome Scotland is of the view that this section should also clearly outline the importance for responsible bodies to work on following-up information given to children when pupils might have difficulties understanding the information when it is delivered. One of our members believes that "it is often necessary for a child to have information consolidated, explained differently or repeated by a familiar adult who knows their level of understanding and how best to communicate with them. For example a child with a learning difficulty might listen to an assembly about sanctions for unacceptable behaviour in the dinner hall and mistakenly think that they are in trouble for misbehaving".

## **5. Any other comments?**

After over 10 years of legislative and policy statements, it is disappointing that guidance is still needed to improve and ensure access to education for pupils with disabilities. Down's Syndrome Scotland therefore hopes that this guidance will be promptly and consistently implemented by all education authorities across Scotland.