



Stoke on Trent High Needs Survey

(Parents and carers of children and young people with SEND)

Let us know your views by filling out this survey. If you would prefer to give your views without filling in the survey, please email localoffer@stoke.gov.uk

We will be collecting feedback until **Friday 4th May 2018**

Section 1 – About Educational provision for children and young people with SEND.

1. Mainstream settings, such as nurseries, schools/academies and colleges, are the best place for my child to make good progress with their learning and development (Please tick ✓one box only)

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Please tell us the reason for your choice.</i>				

2. My child has opportunities to develop their independence and make friends at their school or setting (Please tick ✓one box only)

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Please tell us the reason for your choice</i>				

3. My child is fully included in their school or setting and the setting is accessible (Please tick ✓one box only)

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree

Please tell us the reason for your score

4. My child is making progress at school. (Please tick ✓one box only)

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree

Please tell us the reason for your score

5. Is there anything you would change in order to improve the education provided for children and young people with SEND

Yes No

If yes, please tell us what the improvements would be:

6. Are there any changes that you would make to develop/ increase the education provision for children and young people with SEND.

Yes No

If yes, please tell us what these are

Section 2 – About You (Please fill in as much as possible to help with the survey. All surveys will be accepted even if this section is not completed.)

8. Are you? (Please tick ✓one box only)

A parent

Other carer (please state)

.....

9. What age group is your child or young person? (Please tick ✓one box only)

0 – 4

5 - 10

11 - 16

16+

10. Which of the following relates to where your child or young person is educated? (Please tick ✓one box only)

Nursery, playgroup, childminder etc.		Mainstream school	
School – with additional specialist resource		Home Educated	
College / Further education		Special School	
Special College		Other (Please state)	

11. Does your child or young person have? (Please tick ✓)

Education, Health and Care Plan		SEN support in mainstream school	
In process of being assessed		None	
Other (Please state)...			

12. Does your child or young person have a special educational need and/or disability?

Yes No

13. If yes, which out of the following? (Please tick ✓)

Specific Learning Difficulty (SPLD)		Visual Impairment (VI)	
Moderate Learning Difficulty (MLD)		Multi- Sensory Impairment (MSI)	
Severe Learning Difficulty (SLD)		Physical Disability (PD)	
Profound & Multiple Learning Difficulty (PMLD)		Autistic Spectrum Disorder (ASD)	
Social, Emotional and Mental Health (SEMH)		No special educational need or disability	
Speech, Language and Communication Needs (SLCN)		Other (Please state)...	
Hearing Impairment (HI)			

Thank you for completing the feedback questionnaire.

Please return any completed questionnaires by:

1. Emailing it back to localoffer@stoke.gov.uk
2. Posting your response to Mrs J Lomas, Strategic Manager Inclusion, Stoke on Trent City Council, Civic Centre, Glebe Street, Stoke on Trent ST4 1HH

If you don't want to complete a questionnaire you can still have your say by sending your comments in the post or by email to: localoffer@stoke.gov.uk

If you need any assistance completing this questionnaire please call 01782 233358 (Please note this is for administration/ technical queries)