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Can EPs use the principles of consultation to
build effective partnerships with parents?

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Abstract

This paper explores whether the principles of consultation can be applied to broad EP practice, with the aim of building effective partnerships with parents. Parents are an important group of service users for EPs to engage with, as, even though their right to involvement in decision-making regarding their child's education is well documented, this group has been described as remaining on the periphery of decision making. By exploring the various models and definitions of consultation, five key principles of consultation are proposed and evaluated by parents using a rating scale, supplemented with short open-ended questions. The implications for consultation specifically, and EP practice generally, are discussed, particularly in relation to strengthening partnerships between EPs and parents.

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Abbreviations

CBC – conjoint behavioural consultation

ECM – Every Child Matters

EP – educational psychologist

EPS – educational psychology service

LA – local authority

LEA – local education authority

PPS – Parent Partnership Services

SEN – special educational needs

SENCo – special educational needs co-ordinator

SPSS – Statistical Package for the Social Sciences

UK – United Kingdom

USA – United States of America

1. Introduction

1.1. Amplification of title

The current study aims to explore whether the principles of consultation can be applied to the building of effective partnerships between parents and educational psychologists (EPs). In order to explore this, the current study will investigate whether the principles underpinning the practice of consultation are valued by parents; this paper will therefore focus on the process of consultation, rather than the outcome. The current study does not aim to evaluate parents' perceptions of a consultation they have experienced, but rather, to evaluate their perceptions of the principles of consultation and determine whether these principles can be applied to broader EP practice to build effective partnerships with parents.

1.2. Theoretical significance of topic

Key legislation (Department of Education and Science, 1981; Department for Education, 1994; Department for Education and Skills, 2001) highlights the importance of involving parents in decision-making about their child's education particularly in relation to special education needs (SEN) and the statutory assessment process. The term “partnership” is present in the literature, with partnership being conceptualised as parents and professionals working together to meet the needs of the child.

Partnership is based on the principles of equivalent expertise, shared responsibility and active decision-making by all partners (Wolfendale, 1992). Partnership appears to be a more complex construct than the legislation reflects. For example, there is no clear guidance on how to involve parents in decision-making, with legislation merely stating their right to be involved (Dobbins & Abbott, 2010). Other factors affecting partnership between parents and

professionals are the power imbalance when the EP is viewed as a gatekeeper of resources (Pinkus, 2003), the parent's lack of understanding of the school system (Roffey, 2004) and parental lack of resources such as time, money and education (Annan, 2005).

In addition, while there is a range of studies exploring the benefit of parental involvement within the wider education context, including those relating to statutory assessment, there is comparatively little research examining what parents want from EPs. Instead, research has tended to focus on the outcomes of a statutory assessment (Hart, 2011; Hartas, 2008; O'Connor, 2008), parents' relations with school (Dobbins & Abbott, 2010; Shumow, 1997), and parental involvement in a broad context (Anderson & Minke, 2007; Fan & Chen, 2001).

It has been argued that there is no one definition of consultation or a specific procedure to follow as consultation could relate to an individual meeting which is based on some principles of consultation, or a way to gather information about a specific child (Leadbetter, 2006). The range of consultation models in the literature exemplifies this further. This includes models which have developed from mental health (Erchul & Martens, 2006), behavioural psychology (Holcomb-McCoy & Bryan, 2010), and personal construct psychology (Wagner, 2000).

When examining these consultation models, key underlying principles begin to emerge which appear to be present in the dominant models of consultation. Consultation may be best conceptualised as a model of working which is underpinned by a set of key principles. EPs who wish to endorse this way of working, need to have as clear an understanding as possible of the model. It is these key principles that will be explored and presented to parents for evaluation.

1.3. Relevance to the EP profession

Consultation, as a model of service delivery, mirrors some major developments within the EP profession, for example, the shift from a medical model to a more systemic way of working. In addition, consultation is offered as a model of service delivery which demonstrates that the skills of the EP go beyond involvement in the statutory assessment process (Maliphant, 1997), and can show that the EP has the knowledge and skills to engage in joint problem-solving to address a range of SEN (Osborne & Alfano, 2011).

This way of working encourages the EP to address a wider range of factors and look to affect change at a systemic level. This will inevitably involve the EP working with those service users who can affect change at a systemic level. In relation to children in education, EP work focuses on parents and teachers, as these groups have most control over the home and school environment. Engaging these groups in consultation is a way for the EP to move away from focusing on individual children and working systemically.

This represents what has been termed the “paradox of school psychology [in that] to serve children effectively school psychologists must first and foremost concentrate their attention and professional expertise on adults” (Gutkin & Conoley, 1990, p. 203). Within the EP profession there is an emphasis for the EP to work more systemically and engage with schools on a wide range of whole school issues, rather than working with individual children (Department for Education and Employment, 2000). As an example, the EP may help the school develop and implement a behaviour management policy, rather than working with individual children who present with behavioural difficulties.

A sensible starting point may be for EPs to ascertain from parents what their needs are and how best to meet these, in order to consider how to work more closely with parents. Rather than asking parents to reflect on a previous experience of working with an EP, the current study will ask parents to evaluate the principles of consultation. This will help explore whether consultation is a model of service delivery which parents value. If this is the case, applying the principles of consultation to broad EP practice may be a mechanism to strengthen partnerships between EPs and parents.

1.4. Remainder of thesis

This paper will discuss the increasing focus on professionals working in partnership with parents. In addition, the researcher will explore partnership legislation and the research which has looked at how parent-professional partnerships function in practice, as well as how parental involvement in education has been shown to have positive outcomes for children. This will include reference to research which looks at parental involvement in SEN procedures and the wider education system, as well as research which has explored parents' perceptions of working with schools and EPs.

There will be an outline of how consultation has developed as a model of service delivery, with consultation argued to be a flexible model of service delivery which has been adapted to result in various models being developed. There does not appear to be a single way to carry out consultation and models differ in relation to the level of directiveness a consultant should adopt, whether consultants should use social influence during consultation and the psychological theory underpinning the model.

The researcher will examine studies which have looked at the development of consultation while highlighting that these studies are generally outcome based, that is, asking parents to reflect on a previous consultation.

There will be a discussion about the occurrence that these two strands of research appear to be developing in parallel to each other, in that, there is little research exploring whether consultation is a means of developing closer partnerships with parents.

This paper will outline the methodology used to explore parents' perceptions of consultation, specifically the key principles of consultation. This will take the form of a questionnaire which asks participants to rate key principles of consultation as well as discuss one key feature of consultation which they perceive to be most important.

Data analysis will focus on thematic analysis and there will be a discussion of the techniques derived from various models which have been employed in the current study. In addition, there will be a discussion of the implications of using a mixed method approach.

This paper then goes on to discuss the results of the thematic analysis and key themes which have emerged regarding parents' perceptions of the principles of consultation. There will be particular discussion of how not working within these principles can affect how a parent would interact with the EP in future meetings. It is argued that this may have important implications for EP practice and it is proposed that consultation as a model of service delivery may have to be adapted in light of this understanding.

2. Literature Review

2.1. Chapter overview

This chapter outlines the rationale for looking at consultation from a parent's perspective. The literature review is in two sections. The first part of the review will examine the literature, legislation and key research which emphasise the need for professionals to work more closely with parents, particularly in relation to education, decision-making and capacity building. Particular attention is given to the concept of partnership between parents and professionals.

The second part of the review examines the concept of consultation. There is a discussion of how the development of consultation mirrors changes in the EP profession, with reference to key literature which demonstrates this occurrence. Various models of consultation are explored and key principles underlying these models are proposed.

The literature review concludes by arguing that research examining the development of consultation and research examining factors affecting parent-professional partnerships appear to be advancing in parallel to each other. Consultation is presented as an example of service delivery which may enable EPs to build more effective partnerships with parents. This paper proposes that understanding how parents perceive consultation may shed light on factors which could facilitate EPs in working more closely with parents.

2.2. Key sources

The Cardiff University Voyager Library catalogue was used to source key texts. Online databases were used to access electronic journal articles, specifically, the British Education

Index (BEI), Education Resources Information Center (ERIC) and PsycINFO. Key search terms included consultation, parents' attitudes and school consultation.

Journal publications with content that focused on consultation, EP practice and SEN were searched individually. These included Educational Psychology in Practice, the Journal of School Psychology and the Journal of Educational and Psychological Consultation. Where a quote is taken from an American journal, the exact spelling used in the journal will be kept in the current study. In addition, the term school psychologist is used in some American journals. This is not intended to be given as an equivalent term for EPs working in the United Kingdom (UK), but is included when it is the term used in these specific journal articles.

2.3. Parental involvement

2.3.1. Legislation

Key legislation has been put in place which protects the rights of parents, with regards to making decisions about their child's education, as well as outlining the role professionals have to play in working with parents.

The Warnock Report (1978) stated that the "successful education of children with special educational needs is dependent upon the full involvement of their parents" (p. 150). It went further to say that those working with parents need to take account of broader environmental factors, and the impact these could have on that parent's ability to support his/her child (The Warnock Report, 1978). This demonstrates the beginning of the suggestion that professionals, such as EPs, should address a wider range of factors which are impacting on the child, and move away from the medical model which views the difficulty or disability as being linked to within-child factors (Hobbs, Todd & Taylor, 2000).

Subsequent legislation such as the 1981 Education Act (Department of Education and Science, 1981) and the Education Reform Act (Department of Education and Science, 1988) made explicit the rights of parents to be involved in making decisions about their child's education, as well as the role of the local authority (LA) in including parents in decision-making regarding statutory assessment and subsequent provision. Again, attention is given to the role of professionals in supporting parental involvement and decision-making.

The SEN Code of Practice (Department for Education and Skills, 2001) went further to outline how parents and professionals should work in partnership, so that parents are supported and empowered to achieve the following:

- Recognise and fulfil their responsibilities as parents and play an active and valued role in their child's education.
- Have knowledge of their child's entitlement within the SEN framework.
- Make their views known about how their child is educated.
- Have access to information, advice and support during assessment and any related processes about special educational provision (p. 16).

As a result of the SEN Code of Practice (Department for Education, 1994; Department for Education and Skills, 2001) Parent Partnership Services (PPS) were set up with the following aims:

- PPS work directly with parents and the ultimate aim is to make a difference in the lives of, and to improve the outcomes as outlined in ECM, for children or young people who are disabled or have special educational needs. This is achieved by working in partnership with their parents and in conjunction with others involved with the child.

- Confidentiality and impartiality are key to providing services that parents will trust and PPS endeavour to ensure that these are understood and upheld by PPS staff, local authorities and others.
- PPS aim to work primarily in a conciliatory way and are committed to working co-operatively and maintaining good relationships with the broad range of schools, statutory and voluntary agencies that work with parents and families.
- PPS work in a way that acknowledges that parents are responsible for their children and have responsibility for the decisions they make for them.
- PPS staff work in partnership with parents at all times and their work reflects and supports parents in understanding and exercising their rights and responsibilities.
- Parents are acknowledged, respected and valued as having unique knowledge of, and information about, their children and for generally having their child's best interests at heart.
- PPS work seeks to enable all parents to actively participate in their child's education by building on their existing strengths, knowledge and experience (Children's Workforce Development Council, 2010, p. 11).

These working practices describe how PPS intend to work with parents, and are built on the fundamental philosophy of PPS; the welfare of the child is paramount. The aims of PPS recognise that professionals working with children with SEN ought to work closely with their parents, take account of the distinctive understanding parents may have of their child's needs and support parents in being active decision-makers regarding their child's education.

Best practice within PPS has been identified by the National Parent Partnership Network (2010) as the following:

- Parents are able to access support from PPS staff (both paid and voluntary) before, during and after an appeal to the SEN and Disability Tribunal (p. 5).
- PPS is able to support and empower parents in challenging local authority SEN policy and practice (p. 6).
- PPS is able to provide a wide range of information materials in community languages and it is possible to provide translations in other languages on request (p. 9).

The aims of PPS go beyond supplying information to parents, to ensuring that parents are able to use this information to be actively involved in the decision-making process about their child and educational issues.

Every Child Matters (ECM) (Department for Education and Skills, 2004) placed parents at the centre of the model of change (along with children and young people, families and communities) when outlining how increased integration of government and LA strategies and processes were implemented in order to improve outcomes for children and young people. This illustrates that parental involvement is conceptualised as being integral to helping children and young people achieve the five ECM outcomes. Parents are placed alongside the wider family and community context as having an impact on children and young people.

The parents' role was defined in relation to how they could support their child in achieving the five ECM outcomes (Department for Education and Skills, 2004) as outlined below:

1. Be healthy: parents, carers and families promote healthy choices.
2. Stay safe: parents, carers and families provide safe homes and stability.
3. Enjoy and achieve: parents, carers and families support learning.
4. Make a positive contribution: parents, carers and families promote positive behaviour.

5. Achieve economic well-being: parents, carers and families are supported to be economically active.

The scope of the five ECM outcomes extends beyond the individual child, with outcome five focusing on the needs of parents. Parents' role in relation to outcome five is distinct from the other four outcomes, as parents are described as being supported, rather than them being responsible for promoting this outcome in relation to their child. The intention for professionals to work directly with parents, and take account of their needs, is made explicit through outcome five of ECM. The report explained that parents should be supported to help their child achieve outcomes one to four of ECM by having access to support, advice and information as required (Department for Education and Skills, 2004). The role of professionals is outlined as providing support so that parents can help their child achieve outcomes one to four, and working directly with parents to enable them to achieve outcome five of ECM.

The growing trend of parental involvement in their child's education is evident in schools today, as a school's engagement with parents and carers is now evaluated during The Office for Standards in Education, Children's Services and Skills (OFSTED) inspections, and parents are routinely asked to give their views of the school during an OFSTED inspection (The Office for Standards in Education, Children's Services and Skills, 2011).

While the outlined legislation is important in defining the rights of parents, the concept of involving parents appears to be more complex. For example, while every parent has the rights outlined above, it may only be the parents with the time, money, education and information who exercise these rights (Annan, 2005). Thus, having parental rights guaranteed by

legislation may not be enough; parents need to know what these rights are but also be empowered to actively engage in decision-making (Wolfendale, 1992). In addition, this legislation is clear in outlining at what stage of the statutory assessment process parents should be involved, but does not explicitly say what is meant by involvement (Dobbins & Abbott, 2010). This has led to discussions about what is meant by the terms partnership and involvement and the role professionals have in developing this partnership with parents.

2.3.2. The concept of partnership

Key principles of partnership have been outlined by Wolfendale (1992) as follows:

- Being active and central in decision-making and implementation of the decisions made.
- Recognition of equal strengths and equivalent expertise.
- Reciprocal contribution to, and receiving services.
- Shared responsibility and mutual accountability.

In addition, Wolfendale (1992) argued that parents should be engaged in reciprocal reporting where the information they give is complementary to the information contributed by professionals. It follows that professionals working with parents should recognise that information from parents can add another dimension to the discussion, for example, the parent can describe the child's needs in the home context, while school staff can describe the child's needs in the school context. In this way, the information from parents adds to the discussion and provides a more complete understanding of the child's needs.

The notion of equivalent expertise (Wolfendale, 1992) was previously described in The Warnock Report (1978) which put forward that:

Professionals have their own distinctive knowledge and skills to contribute to parents' understanding of how best to help their handicapped child, but these form a part, not the whole, of what is needed. Parents can be effective partners only if professionals take notice of what they say and of how they express their needs, and treat their contribution as intrinsically important. (p. 151).

This extract challenges professionals to consider the interpersonal skills they employ when meeting with parents, such as how they acknowledge the value of what the parent is contributing. Moreover, this extract suggests that if professionals do not take account of information from the parent, there is an incomplete understanding of the child's needs. This is similar to the concept of reciprocal reporting (Wolfendale, 1992), as the information given by parents should be seen as complementary to the information given by professionals.

Pinkus (2003) argued that, in the past, "it has been the low status of parents which has seen them conceived as recipients of professional decisions" (p. 130) whereas legislation (Department for Education, 1994; Department for Education and Skills, 2001) encourages a partnership between parents and professionals. This contrast led to Pinkus (2003) outlining potential barriers to this partnership, such as, how the process of partnership is defined by each partner, whether there is a shared understanding of the roles of each partner and whether accountability is built into the partnership.

As an example, if the parent has defined the role of the EP as a gatekeeper of resources, this could question whether a partnership between the EP and the parent is equal, potentially leading to tension within the partnership (Pinkus, 2003). In addition, if the parent perceived his/her role to be non-voluntary, i.e., s/he felt obligated or pressured to be part of a statutory assessment due to the legal framework, this could question whether the partnership is voluntary (Pinkus, 2003).

Finally, Pinkus (2003) proposed a perhaps cynical viewpoint that local education authorities (LEAs) may not promote the status of parents as eagerly as they could because this may “enable parents to more successfully navigate the special education system, thereby gaining resources for their child at the expense of LEAs” (p. 136). This relates to the earlier point that parents with the time and resources to overcome barriers affecting their involvement may be more empowered to implement their rights (Annan, 2005) and underscores the notion that there is a distinction between having rights and knowing how to exercise these rights (Dobbins & Abbott, 2010).

Partnership has been defined as “mutual understanding and respect, shared aims and objectives, a consensual approach and equality of power as well as knowledge and skill” (Roffey, 2004, p. 95). The type of discourse which parents are faced with may go against this definition of partnership, for example a discourse of “responsibility” or “negativity” is in contrast to the concept of partnership, in that, these discourses may be perceived to place less emphasis on fostering collaboration (Roffey, 2004). This occurrence appears to be increased when children’s needs are related to a behavioural difficulty, as there is the perception that “the “logical” conclusion is that it must be their backgrounds - their families - who are at the root of their difficulties” (Roffey, 2004, p. 96).

Following a review of the literature, Roffey (2004) outlined four key concepts which can affect home school collaboration, and consequently effective partnerships:

1. Definitions: the difference in how the parent and school staff define a behavioural difficulty and who has control of this definition. Tension may arise when schools define the behaviour difficulty in contrast to how the parent has defined it.

2. Attribution: whether the “within-child, medical models” are operating within schools and whether behavioural problems are believed to be caused by home circumstances.
3. Responsibility for action: the parent may feel frustrated by school inaction as a result of schools focusing on punishment and sanctions and involving external agencies prior to the parent being made aware of the issue.
4. Perceived parent apathy: the parent may be viewed as apathetic or disengaged, but in reality his/her involvement is limited by issues such as a lack of confidence or practicalities, for example being unable to get time off work, which school staff may not have considered, or be aware of.

These factors highlight the complexity of partnership as the establishment of trust and the development of a successful partnership can be affected by misunderstandings and diverse constructs which the parent and professional may have regarding the child’s needs (Roffey, 2004).

Roffey (2004) investigated what was perceived to be good practice, in relation to building partnerships between parents and school staff, whilst also exploring influences on the parent’s sense of agency. Parents reported that their constructs of education, schools and teachers heavily influenced their interactions with school staff and drew attention to the difficulty of dealing with negative discourses (Roffey, 2004). More specifically, parents reported that their “perceptions of difficulties need to be given credence. They need individuals in school who will listen without apportioning blame” (Roffey, 2004, p. 100).

Parents highlighted active listening as a central component of partnership, which included reference to the following features:

- Finding out parents' views of their child, not just their behaviour.
- Not fighting for disparate views of the child to be accepted.
- Making decisions together.
- Taking action on the basis of joint decisions.
- Regular review and celebration of joint endeavours (Roffey, 2004, p. 104).

Vulnerability and marginalisation were identified as factors which should be taken into account as affecting partnership and parents reported wanting to see commitment from schools and for staff to adopt a non-judgemental approach (Roffey, 2004). This is illustrated by the following extract:

Where schools communicated that parents must take full responsibility for their child's behaviour they felt both blamed and unsupported. It was often unclear what was expected of them or what they were being asked was beyond their capabilities. Where teachers gave the impression that this was a shared endeavour and approached parents for their parental expertise the outcomes had positive ripple effects. (Roffey, 2004, p. 103).

Partnership emerged as a complex concept, as parents wanted to be involved, without being perceived as a "nuisance" or over assertive, resulting in parents reporting a preference for complying with the school (Roffey, 2004). Partnership should go beyond "simply the involvement of parents to do what the school requests or even to carry out often undefined tasks which will make the "problem" go away" (Roffey, 2004, p. 106). This emphasises that parents should have an active role in the partnership and should be encouraged to be involved without apprehension of being viewed as an annoyance. Roffey (2004) also highlighted the benefit of "sharing the load" (p. 106) particularly in relation to providing emotional support to parents.

Given the feedback from parents, professionals should take account of the impact of factors such as, the number of professionals present in the meeting, the home language of the parent and the parent's understanding of the school system (Roffey, 2004). Without awareness of the impact of these factors, parents can be "edged out of any participatory decision-making. Even when asked for their opinion they may be unable to understand the implications and be silenced by lack of full and accessible information" (Roffey, 2004, p. 103). This emphasises that professionals have a responsibility to support parents in making informed decisions about their child's education, by providing information and ensuring this information is understood.

Hartas (2008) employed a case study methodology to provide a detailed account of parents' perceptions of the statutory assessment process and explored how parents felt their rights were applied during the statutory assessment process, as outlined in the SEN Code of Practice (Department for Education and Skills, 2001). While this research was limited to the responses of one set of parents, Hartas (2008) presented this case study as an opportunity "to build a detailed portrait of parents' views and feelings, with a focus on their involvement in their son's SEN statementing" (p. 141).

The researchers adopted an advocacy framework in relation to the feedback, to demonstrate ways the parents reported feeling they were active advocates in relation to their child's education. In addition, this research examined whether the parents' perceptions of their involvement reflected the principles of effective partnership as outlined by Wolfendale (1992) by examining "the extent to which participation was central and active, and in terms of parents' capacity to build trusting relationships, negotiate, and challenge professional views and practices" (Hartas, 2008, p. 142).

The feedback highlighted several examples of parental behaviour that demonstrated how the parents worked as advocates for their child such as, providing a tape recording of their child speaking at home, as they felt the teacher's report of the child's language skills was not accurate, and sharing reports from their son's paediatrician and speech and language therapist with school staff (Hartas, 2008). The parents also welcomed the opportunity to facilitate communication between their son and professionals during assessments as they felt this helped ensure the validity of the assessment.

The parents reported having open dialogue with teachers to discuss issues from a "bottom up" perspective, so that provision was discussed and "developed "with" the parents, rather than "done to" them" (Hartas, 2008, p. 143). This dialogue was said to be helpful when discussing clashes between home and school provision, as the parents reported feeling able to discuss worries and concerns about strategies being suggested (Hartas, 2008). The parents reported that it was helpful to discuss their concerns about some of the planned school interventions, and felt able to explain why they believed the interventions may not be effective due to their son's linguistic functioning.

The parents were able to share their understanding of their son's abilities and difficulties, even when this seemed contradictory to a professional's opinion. This reflects the notion of equivalent expertise offered by Wolfendale (1992) as the parents were "encouraged to bring equivalent knowledge and expertise regarding their child's needs" (Hartas, 2008, p. 147). Hartas (2008) continued to say that the interaction between parents and professionals involved equality, but in the sense that "equality does not necessarily mean that parents bring equal amounts of specialist knowledge, but that they can bring equivalent perspectives about their child's functioning" (p. 148).

Additional feedback identified good practice as being when professionals triangulated observations and assessments across different settings which helped to provide “an extremely accurate picture of both [their son’s] abilities and disabilities” (Hartas, 2008, p. 144). Suggestions for improved working practices among professionals centred on increasing the amount of information and expertise which professionals shared, which the parents felt would establish a more collective decision-making process.

The active role that parents in this research were able to play in negotiating educational provision was argued to be “a result of a dynamic dialogue and trusting interactions with professionals involved” (Hartas, 2008, p. 147). This research challenges professionals to consider the value they place on the information provided by parents, how they communicate this value and the impact of devaluing this information on the trust between parents and professionals. Further reflections for professionals to consider are the level of collaboration between different professional agencies and the level of collective decision-making which professionals engage in.

O’Connor (2008) defined partnership as “a synthesis of collaborative dialogue and shared expertise, combining the professional insights of teachers, educational psychologists and others with the informed social networks of parents, other family members and associated support groups” (p. 255) and the partnership relationship as “graduating parents from position of clients to partners” (p. 255). To investigate this concept more fully, 20 parents, 10 who expressed satisfaction with their experience of the statutory assessment process in Northern Ireland and 10 who had not, were interviewed. It was intended that by interviewing satisfied and dissatisfied parents the researcher would be able to obtain a cross-section of responses.

Positive feedback related to when parents felt their contribution was “welcomed as a necessary and integral contribution towards knowledge of the whole child” (O’Connor, 2008, p. 258) and when education plan objectives were mutually agreed between parents and school staff. Building trusting relationships appeared key to building effective partnerships which was argued to be facilitated by “reciprocal, supportive and open communication” (O’Connor, 2008, p. 263).

Conversely, minimal communication and perceived professional distance were highlighted as contributing to difficult parent-professional relationships. Additional feedback suggested that some parents felt a lack of partnership between themselves and professionals which was “attributed to inequitable relationships that were described in terms of professional gate-keeping, where limited communication relegated parents to the periphery of decision-making” (O’Connor, 2008, p. 258). The findings also suggested that the range of professional opinions given during the statutory assessment “did little to reassure parents that the singular knowledge and insight they could offer on their child merited equal consideration” (O’Connor, 2008, p. 258).

Given this feedback from parents, partnership appeared to be affected by the interpersonal skills of professionals, with communication being highlighted as a key element in this case. This could impact on the level of equality which parents perceive to exist between themselves and professionals. When working with parents, professionals should reflect on how their behaviour could be facilitating or hindering the development of an effective partnership with parents.

Garbacz, Woods, Swanger-Gagné, Taylor, Black and Sheridan (2008) investigated the impact of applying a partnership orientation when engaging in conjoint behavioural consultation (CBC) (Sheridan, Eagle, Cowan & Mickelson, 2001). Specifically, they defined a partnership orientation as occurring when the professional: focused on strengths; promoted teaming and collaboration; was encouraging; was sensitive and responsive; used effective communication; promoted skill development; and was resourceful and shared information.

The researchers explored whether a partnership orientation used during CBC would predict the case outcome and whether there was a relationship between employing a partnership orientation and implementing CBC. They examined 20 randomly selected consultation cases that took place between 1998 and 2005 in a Midwestern city in the United States of America (USA). The researchers defined the predictor variable as the use of a partnership orientation by the professional leading the consultation, and the outcome variable as parents' and teachers' rating of acceptability, satisfaction and perceptions of effectiveness of the consultation as well as child behaviour outcomes (Garbacz et al., 2008).

It was found that using a partnership orientation during the CBC predicted teachers' acceptability rating and satisfaction rating, but this was not the case for parents' ratings or child outcomes (Garbacz et al., 2008). The researchers concluded that using a partnership orientation may encourage teachers to work with families in a more collaborative context.

The researchers offered the explanation that parents may not have rated their involvement as active, and so a partnership orientation did not predict their satisfaction or acceptability. This led to the researchers concluding that further research should be conducted to look at how parents can be moved from basic to active involvement (Garbacz et al., 2008).

Finally, the results indicated that there was no significant correlation between the integrity of the CBC process and the level of partnership orientation (Garbacz et al., 2008). This was offered as support for the argument that using a partnership orientation does not diminish the integrity of CBC implementation, suggesting that a partnership orientation can be incorporated into CBC. While this research was conducted in the USA, which operates a different SEN system to the UK, EPs can apply the findings of this research to their practice in the UK by considering how building effective partnerships can be incorporated into models of service delivery, for example with CBC.

Dobbins and Abbott (2010) conducted research which looked specifically at parents whose child attended a special school in Northern Ireland, and their perceptions of partnership with the school. Feedback from the interviews and questionnaires showed that parents valued partnership, felt it enhanced their child's experiences, facilitated communication and helped parents feel less isolated (Dobbins & Abbott, 2010). Factors which were felt to inhibit the partnership included: formality or infrequency of professional contact; barriers created by professional language; and fear of not being seen as coping which inhibited asking for advice (Dobbins & Abbott, 2010).

When asked to identify factors which would improve the partnership with school, parents reported that greater partnership in setting and monitoring learning goals, and increased recognition and engagement from professionals regarding the importance of parental views would help to establish more effective partnerships (Dobbins & Abbott, 2010).

By looking at examples of research which have explored the concept of partnership between parents and professionals, it is possible to reflect on findings which point to particular cases

of effective partnership, as well as feedback from parents when partnership was not perceived to be effectively established or maintained. By seeking parental feedback about their experiences of interactions with school staff and other professionals, those working with parents are given the opportunity to reflect on how their practice may be adapted with the intent of building effective partnerships with parents.

2.3.3. Evaluation of previous research

The purpose of the current study is to explore parents' perceptions of EP practice. The previous section has explored the concept of partnership, and has presented examples of research which has looked at parents' perceptions of working in partnership with school staff, EPs and other professionals typically involved with children with SEN.

This paper will now outline research which explores parents' perceptions of working with professionals, extending beyond the concept of partnership by exploring parents' perceptions of their interactions with schools and professionals in SEN procedures and general school life. This is intended to highlight additional feedback from parents which may provide further insight into how parents perceive their interactions with professionals. EPs can build on this feedback to improve their effectiveness in working with parents.

2.3.3.1. Parental involvement in SEN

Research has looked at parents' attitudes about broader SEN procedures. Elkins, van Kraayenoord and Jobling (2003) presented research looking at parents' attitudes to inclusion (that is, the inclusion of their child in a school). The purpose of the research was to explore whether parents' relationships with school staff and professionals working in the school affected the parents' attitudes towards inclusion.

A total of 354 parents, who had a child with a disability attending a mainstream school, a special school, or a specialist class in a mainstream school, participated in the research. A key finding was that “positive attitudes of the principal and teacher, especially attitudes to collaboration with experts, were the most highly supported conditions for successful inclusion” (Elkins et al., 2003, p. 150). It appears that parents want good collaboration with the school and outside agencies. In addition, the research highlights the systemic nature of EP practice, in that, parents' attitudes can be affected by the behaviour of the professionals they are working with.

O'Connor, McConkey and Hartop (2005) put forward the view that, in relation to SEN procedures in Northern Ireland, parents have historically had a “perceived status of dependency and passivity, thereby reducing parents’ capacity to engage in an equal relationship with other professional stake-holders” (p. 253). The researchers developed a questionnaire, based on concepts within the SEN Code of Practice (Department for Education and Skills, 2001), and asked parents to respond to questions which looked at procedures followed during the statutory assessment process, parental satisfaction with the process and any suggestions for improvement.

It is important to bear in mind that this questionnaire asked parents to comment on the statutory assessment process which inevitably involves a number of professionals and LA workers, not just EPs. Thus, some of the findings relate to issues beyond the control of the EP, such as, 35% of parents reported not being assigned a named LA officer, which is the protocol within this particular LA, and 16.6% of parents reported they were not kept informed of the progress being made regarding the statutory assessment which is typically the responsibility of the named LA officer in this particular LA (O'Connor et al., 2005).

However, some findings could pertain to EP practice. For example, parents who were dissatisfied with the statutory assessment process cited that they did not feel the final report accurately reflected their child's needs, and 7.6% of parents reported that they did not feel the statement of SEN was easy to read (O'Connor et al., 2005). It is clear that how EPs communicate their understanding of the child's needs, particularly in written form, is an important factor for parents.

When parents suggested improvements for the statutory assessment process, the main themes which emerged have implications for EPs. These focused on having improved communication between parents and professionals with "greater consideration accorded to parental views" (O'Connor et al., 2005, p. 264), improved clarity of information provided by professionals and increased use of "jargon-free information that is clear, unambiguous and practical" (O'Connor et al., 2005, p. 266).

Hart (2011) also offered an account of parental perceptions of the statutory assessment process, but looked more specifically at paternal involvement with an educational psychology service (EPS) during the statutory assessment process. This research was conducted in response to the judgement that research exploring parental opinions does not take account of the differences between parents, such as mothers and fathers, or resident and non-resident parents (Hart, 2011).

Initially, files were accessed within an EPS to determine which children had been subject to a statutory assessment within the past four months. The researcher took the precaution of excluding any child for whom a statutory assessment began subsequent to the research beginning, to avoid any potential bias occurring. Analysis of the file paperwork (40 files)

revealed some key information about the type of information provided by parents, such as fathers being named in 68% of the files, while mothers were named in 100% of the files. The researcher then conducted interviews with eight of the fathers from the original 40 files.

The interview schedule was based on the theory of planned behaviour (Azjan, 1985, as cited in Armitage & Conner, 2001) which sets out factors influencing behaviour as being: an individual's attitude to the behaviour; the social pressure an individual feels to engage in the behaviour (subjective norms); and the individual's self-efficacy (perceived behaviour control). From the fathers' responses, these three factors appeared to affect their involvement.

The findings of Hart (2011) indicated that fathers were more likely to be involved when they felt their contribution was valued and necessary, and that there would be a positive outcome from their involvement. Subjective norms, such as, fathers feeling their contribution was useful, or conversely that their partner's contribution was more valuable, emerged as a contributing factor to involvement (Hart, 2011). This was related to normative beliefs regarding gender roles, and the perception that fathers should be involved in their child's education, or conversely that schools are a female dominated environment and so mothers are better suited to engage with school staff (Hart, 2011).

2.3.3.2. Parental involvement in schools

While the above research has looked specifically at parents in relation to SEN, research has also explored parental involvement in broader school life. This research provides professionals with an additional insight into parents' reflections of working with school staff and other professionals involved in the SEN process. This can improve EP practice in relation

to their engagement with parents through understanding what parents' perceive to be good practice.

When gaining feedback from parents, it has been argued that researchers should ensure that data are collected from as broad a sample as possible "with the intent of listening to the voices of all parents" (Shumow, 1997, p. 38). Shumow (1997) explored the impact of parents' beliefs and attitudes towards education on the implementation of school reforms. These reforms related to assessment procedures and teacher and parent roles. The researcher intended to gain parents' views about these reforms, as well as explore the beliefs and motives which led to the expression of these views.

The data collection method appeared to be in line with the researcher's above assertion that parents are a heterogeneous group and data should be collected from a range of parents; the parents had a range of level of education, type of employment, and paternal (as well as maternal) feedback was sought. The data were coded independently by two research assistants who were not connected with the families and schools and interrater reliability was high (.89) (Shumow, 1997, p. 41).

Parents reported that their role was primarily to give encouragement and positive feedback in order to support their child (Shumow, 1997). Parents also reported preferring information about the child's well-being to information about his/her academic achievement (Shumow, 1997).

The findings suggested that parents' emotional investment in assuring their child's well-being was perceived to be more important than the child's academic progress. When working with

parents, communicating the importance of this factor to parents is “an important way that schools may involve parents as experts on their children...to elicit and listen to parents’ understanding of how children are faring emotionally with their learning” (Shumow, 1997, p. 47). Professionals working with parents should consider how they elicit information from the parent, how this interaction may affect the parent’s perception of professionals, the parent’s role in the process, and finally how professionals take account of the emotional investment the parent has regarding his/her child’s education.

Fan and Chen (2001) provided a meta-analysis of research exploring the potential link between parental involvement and academic success. The purpose of this research was to endeavour to resolve the inconsistency of findings from previous research, in relation to the link between parental involvement and academic success. Fan and Chen (2001) argued that a potential explanation for these inconsistent findings was that the term academic success has been used to define different aspects of educational outcomes, with some research measuring academic success in relation to standardised test scores, while others define academic success as “students’ academic aspiration and students’ academic self-concept” (Fan & Chen, 2001, p. 4).

A further explanation for the inconsistent findings present in the research was that the research was being conducted in the absence of an underlying theoretical framework. The researchers drew attention to theoretical models of parental involvement which they proposed have the potential to be used as a guiding theoretical framework.

The first is Epstein’s (1992, as cited in Fan & Chen, 2001) typology which outlined that schools could promote parental involvement through: assisting parents in developing child-

rearing skills; communication with parents; involving parents in volunteer schemes; involving parents in home-school learning; having parents contribute to school decision-making; and working with parents to enhance school-community relations.

The Hoover-Dempsey and Sandler model (1995, as cited in Fan & Chen, 2001) was also offered as a framework for conceptualising parental involvement and providing a theoretical structure for researchers in this area. This model describes parental involvement in relation to why the parent has become involved, the type of involvement the parent chooses to use, and why there is a positive outcome from the parental involvement. This model is concerned with looking at the specific type of involvement and the factors which may have led to this involvement, while also exploring the outcomes of this involvement.

Through the meta-analysis Fan and Chen (2001) found that when academic success was defined in general terms, for example in relation to combined scores from different subjects, the correlation between parental involvement and academic success was higher than when academic success was defined in more specific terms, for example in relation to one subject.

They also found that parental involvement characterised by parents supervising homework had a weak relationship with academic success, while parental involvement represented by aspiration and expectation appeared to have the strongest relationship with academic success. The authors went on to say that other factors may account for the variability in predicting parental involvement based on academic success; for example, a student may have increased supervision at home because s/he is already struggling in school, illustrating a negative relationship between parental involvement and academic success (Fan & Chen, 2001).

The findings of this research highlighted that the term academic success has been used to define various aspects of educational outcomes. In addition, the findings demonstrated that the use of the term parental involvement is inconsistent, and it is complex with different types of involvement having different outcomes for children.

Gonzalez-DeHass, Willems and Doan Holbein (2005) defined parental involvement as parental behaviours directed towards children's education, for example, participating in parent-teacher conferences and engaging in activities at home. They presented a review of research which explored the possible impact of parental involvement on student motivation. The authors pointed out that these studies were correlational in nature, which resulted in a number of plausible explanations for the results (Gonzalez-DeHass et al., 2005). In addition, they highlighted that some of the links found between parental involvement and student motivation were circular, in that, a parent may become involved because the child is motivated, and a motivated child may be more likely to seek out parental involvement (Gonzalez-DeHass et al., 2005).

Gonzalez-DeHass et al. (2005) put forward the suggestion that a number of factors contribute to students' motivation in relation to parental involvement, adding weight to the argument that the term parental involvement is multidimensional. The authors concluded that it was the quality of parent-teacher interactions, not the quantity, which affected student motivation (Gonzalez-DeHass et al., 2005), reinforcing the argument that the term parental involvement can mean different things.

Anderson and Minke (2007) argued that, while parental involvement can have positive outcomes for children's education, there needs to be a fuller understanding of factors which

affect a parent's choice or ability to be involved. They conducted a survey with 351 parents, based on the model of parental involvement outlined by Hoover-Dempsey and Sandler (1995, as cited in Anderson & Minke, 2007), which outlines factors affecting parental choice in becoming involved such as self-efficacy, the opportunity to be involved and role constructions.

The questionnaire employed by the researchers adapted the Hoover-Dempsey and Sandler model (1995, as cited Anderson & Minke, 2007) to investigate a potential relationship between parents' role construction, sense of self-efficacy, involvement behaviour, whether this involvement would be mediated by other factors such as time demands, and finally whether there was a similar level of impact of mediating factors on home and school involvement.

They found that parents' self-efficacy had a direct effect on parental involvement at home, but not at school, and parents reported higher levels of home involvement (Anderson & Minke, 2007). A noteworthy finding was that the type of invitation parents received affected their role construction and subsequent involvement in school; in this case, a specific invitation, rather than a general opportunity for involvement, had the strongest relationship with parental involvement behaviours (Anderson & Minke, 2007).

This research has been presented to outline parental feedback in relation to working with schools and other professionals involved in SEN procedures. This research has discussed factors which can inhibit or facilitate partnership between parents and professionals. In addition, research which has explored parental involvement in education and the impact of parental involvement in education, SEN procedures and decision-making about their child's

education has been discussed. The purpose of this section has been to discuss the implications of parental feedback in relation to working with professionals, in terms of specific areas of SEN and partnership development, and more generally in relation to broad educational experiences. Feedback from this research highlights factors which parents have identified as improving partnerships with professionals, as well as providing suggestions for how partnerships could be more effective.

2.4. The changing role of the EP

The focus of this paper is to explore parents' perceptions of EP practice, specifically by exploring parents' perceptions of consultation, with the intention of discussing the implications of the findings in relation to how the EP can build effective partnerships with parents. Before discussing the various models of consultation which are present in current EP practice, it is necessary to first discuss how consultation as a model of service delivery came to be developed.

The increased adoption of consultation as a model of service delivery mirrors broader developments within EP practice. This includes an increasing need for the EP to demonstrate the range of skills s/he can offer, in addition to the traditional skills associated with statutory assessment, which in turn has resulted in more indirect models of service delivery and problem-solving based models of service delivery emerging.

2.4.1. Demonstrating additional skills

It has been emphasised that EPs must demonstrate their contribution to education and show the skills they can offer, rather than rely on legislation to dictate the direction EP practice should take (Maliphant, 1997). Furthermore, while legislation such as the SEN Code of

Practice (Department for Education, 1994; Department for Education and Skills, 2001) ensures that EPs are involved during the assessment and review of children with SEN, it has been argued that this may create a “bureaucracy of legislation that can restrict psychological practice” (Maliphant, 1997, p. 109). It is imperative for EPs to show what they can offer and demonstrate skills which go beyond involvement in the statementing process.

An example of how EPs are demonstrating the range of skills they can offer is the emergence of dynamic assessment. This form of assessment builds on the Vygotskian theory of learning (Urquhart, 2004) and assesses what the child can achieve through scaffolding; that is, when s/he is supported by a more experienced partner. This approach to assessment provides EPs with the opportunity to gain important information about the child’s learning, but also, to go beyond this and apply psychological knowledge about the cognitive, social and emotional factors which may be impacting on that child. Indeed, this demonstrates that “there is considerably more to professional applied psychology than psychometrics” (Stringer, Elliott & Lauchlan, 1997, p. 234).

While dynamic assessment is an example of how EPs are able to use alternative assessment techniques to standard psychometric assessments, Gutkin and Conoley (1990) put forward that improving EP practice does not only depend on improving techniques for assessing children, but rather, the focus should shift from what information EPs communicate, to how this information is communicated. Moreover, Gutkin and Conoley (1990) argued that intervention plans need to take account of environmental factors and involve those adults who have most influence over the environment; the teachers and parents of the child.

This represents what the authors termed the “paradox of school psychology [in that] to serve children effectively school psychologists must first and foremost concentrate their attention and professional expertise on adults” (Gutkin & Conoley, 1990, p. 203). By developing models of service delivery which allow EPs to facilitate change for children indirectly, by working with the adults most involved with that child, EPs are in a position to meet the needs of a larger number of children.

2.4.2. Indirect models of service delivery developing

Gutkin (1999) provided a summary of four key changes within the profession of school psychology, which resulted in an increased emphasis on developing alternative, indirect models of service delivery, as follows:

- There was the realisation that the school psychologist did not have a definite answer to every problem presented, and should not be viewed as the sole provider of a solution.
- While a psychologist may develop an intervention plan, this plan was more likely to be implemented by another adult, such as a teacher. Therefore, working with individual children was not the most efficient use of the psychologist's limited time.
- There was a growing emphasis on providing preventative, rather than remedial, interventions.
- There was the recognition that psychologists needed to involve teachers in supporting children, as teachers have control over environmental factors in the classroom.

Erchul and Martens (2006) highlighted theoretical, professional and pragmatic issues occurring within mental health which resulted in the role of the school psychologist changing to adopt a more “consultant-like” approach, as was the case in mental health consultation.

The authors proposed that theoretical implications were: the increased recognition of the psychosocial nature of mental illness; diminished support for the treatment of mental illness following a medical model paradigm; and the rise of behavioural psychology (Erchul & Martens, 2006). The combination of these theoretical developments led to conceptualising human behaviour in relation to factors outside of the individual and within the environment.

Erchul and Martens (2006) went on to outline professional issues which contributed to the emergence of the consultant role as: the perceived unreliability of diagnosis procedures for psychopathology; the failure of mental health professionals to provide therapeutic goals and programmes following assessment; and the lack of research to add reliability to the reported therapeutic outcomes of some psychotherapies.

Finally, Erchul and Martens (2006) drew attention to pragmatic issues within psychology which impacted on the development of the consultant role as: the inefficient rationale of working on a one-to-one basis with clients to address the issue of mental health; the cultural biases regarding the level of treatment offered; and the growing number of studies which indicated that less trained professionals could successfully implement prevention and treatment programmes.

These developments within mental health led to the realisation that working with a client on a one-to-one basis was not the most efficient and effective use of the consultant’s time. There

was a growing recognition that intervention programmes could be implemented by other professionals who worked more closely with the client, which would allow the consultant to work with a larger number of clients. This indirect way of supporting clients, by working with professionals who are more closely linked with the client, is similar to the concept of the “paradox of school psychology” (Gutkin & Conoley, 1990, p. 203). The development of the consultant role in mental health highlighted how consultants began to work less directly with clients, which in turn resulted in school psychologists (the “consultant”) working less directly with children and young people (the “client”), and increasingly with those who worked with the child or young person (the “consultee”); thus, indirect models of service delivery in relation to SEN, and models of problem-solving, began to emerge.

2.4.3. The emergence of problem-solving and consultation

2.4.3.1. Models of problem-solving

Monsen, Graham, Frederickson and Cameron (1998) proposed that the skill of the EP lies in being able to use psychological knowledge to employ a systematic and holistic approach to problem-solving and outlined their nine step model of problem-solving as follows:

- Clarify the request and check out the need for psychological involvement.
- Negotiate and contract role.
- Guiding hypotheses and information gathering.
- Identify the dimensions of the problem.
- Integration of problem dimensions.
- Feedback, agree problem analysis and devise intervention plan.
- Agree action plan implementation.
- Evaluation of actions.
- Self-reflection and critical evaluation (p. 240).

This model of problem-solving was said to promote accountability, as there are decision points which require the EP to make explicit the choices of psychological theory used to inform decisions (Monsen et al., 1998).

Frederickson and Cline (2002) proposed the Interactive Factors Framework to conceptualise SEN from a biological, cognitive and behavioural level, considered within an environmental context, in order to account for the diversity within SEN. The authors illustrated each level of the framework using the example of literacy difficulties, describing the impact of one level on other levels of the framework as follows (Frederickson & Cline, 2002):

- hearing loss (biological) which can affect;
- phonological processing, auditory memory, and listening skills (cognitive) which can lead to;
- poor concentration and high levels of off task behaviour (behavioural) which may be impacted by;
- medication, limited individualised teaching and ineffective classroom management (environmental).

By using the framework the EP is able to engage in a problem-solving process which addresses a number of factors and explore the impact of the interaction of these different factors. Problem-solving does not focus solely on the individual child, or on an individual factor (e.g., cognition), but rather adopts a more holistic approach.

Another problem-solving model was offered by Gameson, Rhydderch, Ellis and Carroll (2003) titled the Constructionist Model of Informed, Reasoned Action (COMOIRA). This model was developed with the aim of providing a framework which integrated theoretical

approaches in a reflective and reflexive model to “facilitate beneficial change without fostering a dependency on an expert” (Gameson et al., 2003, p. 96). Thus, through the application of COMOIRA, the EP is encouraging the individual s/he is working with to develop strategies to manage the problem, rather than the EP prescribing a solution.

At the core of this model are four essential principles as follows (Gameson et al., 2003):

- Social constructionism: the EP should be aware of the constructions individuals hold, as the “process of change should be implemented within a constructed frame of reference at a level which is specific and local rather than general and universal” (p. 101).
- Systemic thinking: COMOIRA proposes that the discussion should look at the relationships between different people in the system, the beliefs which these people hold, and the impact of these beliefs on behaviour.
- Enabling dialogue: by using dialogue which empowers the individual, the EP can promote self-efficacy within that individual. Therefore, it is the individual who should have ownership of the change process, and not the EP.
- Reasoned action: the EP should remain aware of the choices s/he makes, the impact of his/her actions on others, and on the change process, and the psychology that is informing these actions.

Cameron (2006) argued that the unique skill of the EP is his/her ability to apply psychology to problem-solving, to look at how different factors interact, to reconcile the different perspectives individuals may hold about the situation and to resolve issues which may reduce the individual’s ability to engage in change. It appears that problem-solving is a mechanism for the EP to demonstrate these skills.

2.4.3.2. Consultation as a model of problem-solving

It has been argued that the shift from working with the individual child to adopting a more holistic approach has led to the development of consultation within EP practice (Clarke & Jenner, 2006). The model offered by Wagner (2000) was intended to decrease the EP's role as a gate-keeper of resources by focusing on increasing the capacity of other systems to develop solutions. Similarly, Christie, Hetherington and Parkes (2000) argued that consultation, as a model of service delivery, challenges the view that the EP is the expert who can provide definitive answers, as consultation seeks to establish a sense of shared responsibility.

Around the same time as the introduction of Wagner's (2000) model of consultation, the role of the EP was reviewed (Department for Education and Employment, 2000). In this report, consultation was identified as being a future priority which would allow EPs to shift the balance of their work from a referral system to a model of joint problem-solving. Comments from EPs within the report indicated that even services where consultation was not embraced as a model of service delivery regarded joint problem-solving as a key skill of the EP (Department for Education and Employment, 2000).

In line with conceptualising consultation as a shift away from working with individual children via a referral system, consultation was highlighted as a mechanism by which the EP could contribute to wider school development issues, for example by problem-solving with staff about whole school issues such as school policies, pastoral support or curriculum development (Department for Education and Employment, 2000). This appeared to fit with the figure that "90% of LEA/educational psychology services reported the service had worked with school staff on planning curriculum differentiation for individuals or groups of

pupils including work with very able pupils” (Department for Education and Employment, 2000, p. 35)

More specifically, the report highlighted that EPs could employ consultation as a model of service delivery which would involve the following:

- More use of consultation and solution focused approaches.
- A greater focus on empowering teachers and SEN co-ordinators.
- Opportunities to effect an appropriate balance between individual and wider group work and school work (Department for Education and Employment, 2000, p. 71).

The review of the role of the EP (Department for Education and Employment, 2000) found that “parents value educational psychologists and see them as a key link to schools and other agencies” (p. 6). Providing information to parents about the role of the EP was highlighted as a future priority as the report found that parents did not always understand the role of the EP, but that this misunderstanding was reduced when the EPS worked with the local Parent Partnership Services to provide parent workshops (Department for Education and Employment, 2000). Working with parents was a priority for schools who described the EP as a link between home and school; this was reiterated by health professionals and other LEA workers (Department for Education and Employment, 2000).

Parents reported that they wanted the following actions from the EP (Department for Education and Employment, 2000):

- Clarity on the EP role: information about the role of the EP and how this relates to other services.

- Early intervention: involvement from the EP when the child's needs are first recognised, and the opportunity to meet the EP as early as possible.
- Home-based support: advice on how to manage the child's needs in the home context or reassurance that the strategies in place are appropriate.
- Direct access: being able to contact the EP for an explanation of reports/assessments.
- Continuity: increased continuity assured parents that the EP knew their child and was working in the best interests for the child.
- Parent workshops: parents who attended workshops reported that it helped them understand the role of the EP and how they could support their child's learning and development.
- Access to continuing support and advice: the EP was seen as a link between agencies and within the LEA. Parents commented that having increased support following a statement of SEN being written would be valued. Parents reported wanting specialist advice from the EP, in regards to their child's needs and advice about support groups or voluntary organisations.

Farrell, Woods, Lewis, Rooney, Squires and O'Connor (2006) reported that there were 61 examples of consultation work which was not limited to individual children, which included the following:

- The development of an anti-bullying strategy (Pupil Referral Unit).
- Management and consultation with staff using strategies to improve challenging behaviour or complex difficulties including Autistic Spectrum Disorder (Special School).
- Suggested behaviour strategies for children who are emotionally disturbed (Special School).

- Help on teaching phonics to our diverse population (phonics is an area of specialism of our EP) (Special School).
- Range of projects e.g., dyslexia guidance for local authority; advice and published materials and training on autistic spectrum, anti-bullying etc. (LA Officer).
- Consultation, support and advocacy for looked after children, autism training and system development (Special Education Review Project manager) (p. 29).

This illustrates the potential for the EP to use consultation as an indirect model of service delivery to address a broad range of issues and support schools in supporting children and young people.

Furthermore, Dennis (2004) stated that “in acknowledging a consultation model of service delivery, it is acknowledged that EPs have specialist knowledge and skills, but that these skills are brought to bear in a collaborative way” (p. 18). Dennis (2004) described consultation as a mechanism through which the EP can work more systemically, engage in joint problem-solving, and thus support others in developing strategies to manage situations for themselves. It has been argued that “educational psychologists have the requisite knowledge of factors which support children’s learning and behaviour, as well as an understanding of how to enhance children’s well-being” (Osborne & Alfano, 2011, p. 395). Consultation demonstrates the unique skills of the EP, which addresses the issues raised by Maliphant (1997) and creates the opportunity for the EP to support a larger number of children.

Meyers, Meyers and Grogg (2004) rejected the medical model “which emphasizes dysfunction with the individual child and de-emphasizes contextual and transactional factors

that may influence functioning” (p. 265), arguing that indirect models of service delivery shift the focus from individual children, to working more systemically with a range of consultees. This approach to EP practice has been described as a more socio-cultural framework, which “focuses attention away from the child and on to the major complexities of the system within which the child interacts” (Hobbs et al., 2000, p. 108). Therefore, a more systemic approach to problem-solving is seen to be emerging.

This is illustrated by the following extract:

In essence such work helps to focus EPs’ attention on the system in which children live and work and less on the individual child. Hence effective consultation requires EPs to work with other agencies in developing collaborative problem-solving strategies. (Farrell et al., 2006, p. 15).

In relation to service users’ perceptions of the changing role of the EP, Boyle and Mackay (2007) conducted a survey measuring the satisfaction of primary and secondary schools with their EP, with regards pupil support. A key finding from this survey was that the extent to which the EP was seen to be an integral part of the school’s pupil support strategy was a significant factor in accounting for variance of the school’s perceived value of the EP (Boyle & Mackay, 2007).

In practice, this suggests that schools place most value on services which address whole school, or systemic issues. This provides support for developing the role of the EP by reducing the amount of time spent on individual casework, and increasing ways of supporting children indirectly by working with schools.

The EP role is being expanded to increase joint problem-solving through consultation (Department for Education and Employment, 2000; Farrell et al., 2006). This has been argued

to demonstrate that the EP has the skills to deal with a wide range of SEN and whole school issues and is able to engage with a range of service users.

Consultation has developed alongside other models of problem-solving as an indirect model of service delivery which the EP can use to demonstrate his/her skills in working with a diverse range of children and young people. This has been the result of broader developments, initially in the field of mental health. The following section will explore consultation further by outlining some of the prominent models of consultation, with reference to specific theory underlying these models.

2.5. What is consultation?

Providing a single definition of consultation is a difficult task as there are different descriptions of what is meant by the term consultation, and how this translates into EP practice. Consultation has been defined as “a voluntary, non supervisory, relationship between professionals from differing fields established to aid one on his or her professional functioning” (Conoley & Conoley, 1982, p. 2, as cited in Farouk, 1999, p. 253). This definition pointed to capacity building, specifically the capacity building of another professional, as a central component of consultation. It will be shown that this continues to be a key feature of subsequent definitions of consultation.

Wagner (2000) offered an alternative definition of consultation, specifying its purpose as supporting a system, and its inter-related systems, to develop its functioning. This definition of consultation echoes the capacity building feature of consultation (Conoley & Conoley, 1982, as cited in Farouk, 1999) but goes further to encapsulate the potential systemic nature

of consultation. So, consultation is presented as a mechanism to affect change at a systemic level, providing an alternative to working with an individual child.

Leadbetter (2006) presented three perspectives on consultation, arguing that consultation can be a model of service delivery, a specific meeting which employs some principles of consultation, or a means of gathering or eliciting information about a specific child.

It is clear that within the literature there is no single definition of consultation. This is reflected in the fact that different models of consultation are present in the literature. While these models share some similarities, there are also distinct theoretical bases and procedural mechanisms within the individual models. The following section will outline some of the dominant models of consultation, as well as models which have emerged more recently.

2.6. Models of consultation

2.6.1. Mental health consultation

Erchul and Martens (2006) pointed to the work of Gerald Caplan as the starting point of the development of consultation. As outlined previously, changes in the mental health profession have been associated with the development of consultation. The focus of work began to move towards “consultative activities that improved the functioning of caregivers [as] more clients could be positively affected than was possible through traditional one-to-one therapy” (Erchul & Martens, 2006, p. 4). It appears that this was the beginning of professionals shifting from working with individuals, to working more closely with those professionals who were regularly in contact with these individuals. Erchul and Martens (2006) outlined seven key principles of mental health consultation, informed by Caplan’s work, as follows:

- The consultation process is triadic, as it involves the consultant, the consultee and the client.
- The relationship between the consultant and the consultee should be non-hierarchical.
- The focus of the consultation should be on work related challenges, rather than personal difficulties.
- The responsibility for the client remains with the consultee and not the consultant.
- The consultee should engage in consultation voluntarily.
- It is understood that the consultation is confidential, unless harm will come to any party if confidentiality is maintained.
- Consultation has the aim of supporting the consultee with the current issue and building the consultee's skill in managing similar issues in the future.

While these principles were derived from Caplan's work, which took place during the 1950's, a number of them are still present in current models of consultation, as discussed below.

2.6.2. Wagner's model of consultation

Wagner (2000) argued that some models of consultation, such as the mental health or behavioural models of consultation, do not fit with the complexity of EP work, and put forward a model of consultation which adopts a more interactional approach. This model of consultation is based on four theoretical concepts: symbolic interactionism; social construction theory; personal construct psychology; and systems theory (Wagner, 2000).

2.6.2.1. Symbolic interactionism

Wagner (2000) pointed to symbolic interactionism (Blumer, 1986) as an example of the complex way people engage in meaning making, in that, individuals create meanings which are expressed through, and shaped by, social interaction and language. Following this theoretical framework, the process of consultation should include the EP attending to this social interaction, for example, by taking account of factors within the learning environment which may be impacting on the situation. As this framework proposes that “it is through language that our identities, and our relationships, are built, maintained and challenged” (Macready, 1997, p. 131), the EP should attend to the language used in the consultation, as this may represent meanings held by individuals in the consultation.

2.6.2.2. Social construction theory

Wagner (2000) presented social construction theory as a key concept within consultation. By accepting social construction theory to inform the consultation, the consultant is accepting that neither the view held by the consultant nor the consultee is the true or right perspective, but rather, that each individual brings to the consultation constructed realities which are equally valid (Burr, 1995). The perceived relevance of social construction theory to EP practice is illustrated by the argument that it should inform all aspects of EP practice and should not be limited to consultation (Macready, 1997).

A central argument for the utility of underpinning consultation in reference to social construction theory is that the language used during a consultation provides an insight into how the consultee is constructing meaning about the situation (Macready, 1997). Thus, consultation can be used as a mechanism to explore how consultees perceive the situation. This is important for the EP to be aware of as “the system of meaning which is created will

be experienced as uncoordinated if the participants in the conversation have created different contextual determinants” (Macready, 1997, p. 131). This means that the EP needs to respond to the meanings which consultees hold about the situation and frame the consultation within these parameters.

In addition, it has been argued that the EP can use consultation to create conversations which enable the service user to “develop more adaptable personal constructions” (Christie et al., 2000, p. 42). The EP needs to be aware of the variety of constructions held by consultees, and have an understanding of the different contexts of meaning which the consultees are operating in. With this understanding, the EP is better placed to facilitate change through engaging consultees in conversations which prompt consideration of alternative constructions.

2.6.2.3. Personal construct psychology

Social construction theory is linked with a further tenet of consultation, that is, personal construct psychology (Ravenette, 1997). If the EP is to attend to the constructions of the consultee, it follows that the EP also needs to be skilled in eliciting constructs and the meanings behind them. Therefore, personal construct psychology can draw out constructs held by the consultee, and extend this further by exploring the meaning behind these constructions.

Personal construct psychology was originally proposed by Kelly (1955) who argued that every individual forms theories about his/her world, and uses this information to make predictions and understand his/her world. Kelly (1955) made the distinction between core

constructs, which are stable over time, and less central constructs which change in light of new experiences.

In relation to consultation, personal construct psychology provides a technique to explore the meanings which the consultee has constructed about the situation, develop ways to look at alternative constructs, or adapt current constructions in light of the consultation discussion.

2.6.2.4. Systems theory

Another theoretical foundation of Wagner's (2000) model of consultation is systems theory, which looks at the connections between individuals within the system, and explores the impact of these interactions (Campbell, Coldicott & Kinsella, 1994). This directs the focus of the consultation to looking at circular relationships between beliefs and social contexts and moves the consultation along a paradigm which changes the perspective about the problem “from within the person to something that happens between people” (Wagner, 2000, p. 13).

The EP and the consultee are then engaging in consultation with the perspective that systemic factors may be useful to explore, in order to facilitate change. In addition, by framing the consultation within systems theory, the focus shifts from the individual child to a wider range of factors.

2.6.3. Process/organisational consultation

The process/organisational model of consultation emphasises the link between environmental factors and the impact these factors can have on working practices (Leadbetter, 2006). Thus, process/organisational consultation has been offered as a model of consultation which can

affect change at an organisation level by focusing on environmental factors which are impacting on the situation (Larney, 2003).

It is argued that it is a useful model for the EP to adopt when working in schools, because it facilitates change at a number of levels, directing focus away from the individual child to considering a wider range of factors (Leadbetter, 2006). In addition, it has been argued that, by using process/organisational consultation to affect change at a systemic level, it is possible to have an impact on a larger number of children; thus, an assumption of process/organisational consultation is that the consultation can be preventive (Meyers et al., 2004).

This model of consultation specifies the type of consultees with whom the consultant could work, and sets out consultation as having the goal of affecting systemic change. This is comparable to Caplan's argument that consultation should aim to improve the consultee's ability to manage similar situations in the future (Erchul & Martens, 2006).

2.6.4. Behavioural consultation

Holcomb-McCoy and Bryan (2010) summarised the main principles of behavioural consultation as a problem-solving process, built on behavioural assessment techniques and intervention strategies, with an evaluation of outcomes based on behavioural analysis. This model of consultation centres on social learning theory, and postulates that the role of the consultant is to help the consultee identify problems, and develop strategies to manage them (Larney, 2003). So, the focus of this model of consultation is to work with the consultee, rather than the client, to affect change. Again, the focus is directed away from working with individual children and presents a model of consultation that takes account of a wider range

of factors. It should be noted that this model of consultation has been criticised because it does not make reference to the impact of the consultant-consultee relationship (Larney, 2003).

2.6.5. Knowledge base model of consultation

Miller (2003) outlined the knowledge base model of consultation which was developed by West and Idol (1987, as cited in Miller, 2003). This model of consultation highlights the skills and knowledge which a successful consultant can bring to the process, and refers to two separate bases of knowledge which the consultant operates from. Knowledge base one informs the interaction between the consultant and consultee, such as listening, encouraging and empathising, while knowledge base two focuses on knowledge which the consultant uses when discussing strategies, such as specialist knowledge or experience of previously successful interventions (West & Idol, 1987, as cited in Miller, 2003).

This model is based on the principles that consultation is a problem-solving process which the consultee enters into voluntarily and should focus on a current work related issue (West & Idol, 1987, as cited in Miller, 2003). Once more, there is resonance between the principles presented in this model and Caplan's original beliefs about the purpose and process of consultation (Erchul & Martens, 2006).

2.6.6. Integrated model of school consultation

Erchul and Martens (2006) have offered the integrated model of school consultation, which combines the principles of mental health consultation and behavioural consultation. This model of consultation integrates concepts of social influence with problem-solving and so,

while being guided by research, can act as a model which explores relationships and systemic level issues (Erchul & Martens, 2006).

The authors summarised the process of consultation as follows: “school consultation is a process for providing psychological and educational services in which a specialist (consultant) works collaboratively with a staff member (consultee) to improve the learning and adjustment of a student (client) or group of students” (Erchul & Martens, 2006, p. 14).

This definition of consultation echoes the triadic nature of consultation outlined previously by Caplan (Erchul & Martens, 2006). In addition, the inclusion of the term “collaborative” could be equated to the non-hierarchical relationship between consultant and consultee (Erchul & Martens, 2006). It is notable that the principles outlined in Caplan’s original model of consultation remain fundamental to these more recent models of consultation.

2.6.7. Self-organised learning model

Another example of a variation of the more traditional consultation model is the self-organised learning model, offered by Clarke and Jenner (2006). A central principle underpinning this model is that the consultant should consider the process of change along two dimensions: knowing what should change, but also how best to achieve this (Clarke & Jenner, 2006). This model draws on social construction theory (Burr, 1995) and the authors argued that the consultant needs to engage the consultee in a “learning conversation” (Clarke & Jenner, 2006, p. 188) in order to bring to light and challenge the beliefs the consultee has about the situation and potential action to be taken.

The authors highlighted that a strength of this model is that it can be applied to systemic issues, for example, by exploring how the organisation can change to meet a child's needs, which they argued provides "more opportunities to make sustainable and effective change" (Clarke & Jenner, 2006, p. 195).

This model of consultation could be compared with West and Idol's knowledge base model of consultation (1987, as cited in Miller, 2003) as it draws attention to the skills employed by the consultant. In addition, it presents itself as a model which can achieve systemic change, as with the model of process/organisational consultation (Leadbetter, 2006).

2.6.8. Parental models of consultation

2.6.8.1. Conjoint behavioural consultation

Sheridan et al., (2001) proposed the model of conjoint behavioural consultation (CBC). This model follows similar principles to behavioural consultation, with the extension that it aims to devise complementary strategies to be adopted within the home and school environment. Thus, the aim of CBC is to "engage significant consultees from various systems in a collaborative problem-solving process" (Sheridan et al., 2001, p. 362).

While CBC has unique potential complications, such as the difficulty of conducting a simultaneous consultation with teachers and parents, its strength is that it is a mechanism by which "the least powerful and disenfranchised participants" (Meyers et al., 2004, p. 268) are able to participate more meaningfully in consultation. These authors defined parents alongside other minority groups as having "missing voices" (Meyers et al., 2004, p. 269). This exemplifies the low status of parents.

2.6.8.2. Advocacy and empowerment model of consultation

The importance of working more closely with parents has been maintained by Holcomb-McCoy and Bryan (2010) who argued that the impact of factors such as “family structure, cultural value systems, interactional patterns and adaptive coping strategies” (p. 261) should be considered, particularly when working with families from culturally diverse backgrounds. The authors continued to say that if the consultant works within a framework of information-giving s/he is more likely to overlook the significance of the psychosocial factors described above (Holcomb-McCoy & Bryan, 2010). Additionally, even when the consultant is focused on interpersonal factors, such as the relationship between the consultant and consultee, there is the potential that inaccurate cultural preconceptions, which could affect the quality of the relationship, will not be adequately addressed (Holcomb-McCoy & Bryan, 2010).

In an effort to address this issue, the authors proposed the advocacy and empowerment model of consultation (Holcomb-McCoy & Bryan, 2010) wherein the consultant would make specific reference to the social, historical and cultural contexts which families are operating in, during the consultation. This model of consultation aims to empower families through the application of four key principles, as follows (Holcomb-McCoy & Bryan, 2010):

- Outline a statement of the problem.
- Consider the cultural, family and political factors that are influencing the problem.
- Develop critical consciousness (the ability to reflect and act on one’s socio-political environment).
- Employ problem-solving strategies.

On a similar note, Lott and Rogers (2005) argued that consultation is a mechanism by which school psychologists can address social inequalities which may exist, for example, by giving

marginalised parents the same right to be heard as middle-class, white parents and using consultation to demonstrate to marginalised parents the resources they can bring to schools. Moreover, Lott and Rogers (2005) put forward the idea that consultation could be used to affect change at a more systemic level, in order to create “environments for learning in which diversity in ethnicity, social class, and family background is valued” (p. 9).

2.7. Key principles of consultation

As there is no single definition or specific model of consultation, it may be useful to conceptualise consultation as a model of service delivery which adheres to key principles. Gutkin and Curtis (1982, as cited in Larney, 2003) outlined nine key principles of consultation as follows:

- It is a form of indirect service delivery.
- There should be a trusting relationship between the consultant and the consultee.
- Neither the consultant nor consultee has power over one another.
- The consultee should be actively involved in the consultation process.
- The consultee can accept or reject any suggestions offered by the consultant.
- The relationship between the consultant and consultee is voluntary.
- The consultation should be kept confidential.
- The consultation should focus on a work related issue.
- The consultation has dual goals of remediation and prevention.

Wagner (2000) asserted that consultation should be “a meeting of equals, each with a distinct contribution” (p. 12) as well as being a voluntary and collaborative process, where each individual has an understanding of the purpose of the consultation and the role of the different people contributing to the consultation.

Munro (2000) outlined the key principles which formed the basis for implementing consultation as a model of service delivery in an English EPS. The core principles of consultation, in this particular EPS, promoted consultation as “a purposeful conversation which uses techniques of listening, clarifying, problem-solving, challenging, questioning and reflecting” (Munro, 2000, p. 55). In addition, consultation was described as collaborative, with clear roles for both the consultant and consultee, with the purpose of enabling the consultee to develop the ability to deal with comparable situations in the future (Munro, 2000).

Dickinson (2000) stated that accountability should be a key principle of any work which is carried out by an EPS. In relation to consultation, the author argued that accountability can be achieved if “we are clear about responsibilities and boundaries, and aim to be purposeful in everything we do” (Dickinson, 2000, p. 21). The author was therefore stipulating that before a consultation begins, the consultee needs to be clear about the purpose of the consultation and what the consultant and consultee will be responsible for.

Larney (2003) highlighted significant principles underpinning the consultant-consultee relationship including: the importance of a collegial and collaborative relationship, rather than hierarchical and coercive; a voluntary relationship ideally initiated by the consultee; and active participation of the consultee throughout the consultation process. Larney (2003) also referenced the centrality of both the consultant and consultee contributing to the consultation as “it is the synthesis of these distinct bodies of knowledge that makes consultation a potentially powerful enterprise” (Larney, 2003, p. 11). This calls attention to the idea that both the consultant and consultee can contribute different, but equally valid, information to the consultation process.

2.7.1. Consultation - collaborative or directive?

A key feature of consultation appears to be the collaborative aspect of the process, and the consultant and consultee providing different, but equally important, perspectives and information. The concept of collaboration within consultation has been of particular interest to researchers, and has led to discussions about whether the consultant using social influence to guide the consultation undermines the collaborative principle of consultation.

First, it is useful to describe what is meant by social power, as this features in research looking at the influence of the consultant on the consultee. A typology of power bases which has been used to explore social influence draws from the work of French and Raven (1959, as cited in Erchul & Raven, 1997) which describes six bases of social power, and their implementation, as follows:

- Coercive power (impersonal/personal) exists when a person believes s/he will be punished by the other person if s/he does not comply with him/her.
- Reward power (impersonal/personal) is founded on a person's belief that compliance with another will result in a reward.
- Legitimate power (formal legitimacy/ legitimacy of reciprocity/ legitimacy of equity/legitimacy of dependence) leads to an obligation to comply with another, based on the belief that the person has a legitimate right to have influence over him/her.
- Expert power (positive/negative) is based on a person's belief that the other person has expert knowledge in a specific area.
- Referent power (positive/negative) leads to influence as the person identifies with the influencing agent.
- Informational power (direct/indirect) can lead to influence if a person judges the information provided to be relevant. This type of influence can lead to the changed

behaviour being maintained without continued contact with the influencing agent. In addition, it is distinct from expert power as the individual has made an informed choice based on the information provided, rather than simply accepting the information as truth because it has been provided by an expert. A further distinction is that influence is based on the content of the discussion, rather than the characteristics of the influencing agent.

The information contained in brackets is a summary of how these bases of social power have been expanded further to make distinctions within each power base (Raven, 1992, 1993, as cited in Erchul & Raven, 1997).

Erchul and Raven (1997) provided examples of how a consultant may operate from these different power bases, giving the illustration that using technical language may boost expert power, whereas building a rapport with the consultee could increase referent power. The authors pointed out that these two dimensions of power can appear mutually exclusive, as by enhancing referent power, the consultant may undermine his/her expert power base and vice versa (Erchul & Raven, 1997).

This highlights the complexity of consultation, in that factors such as the relationship between the consultant and the consultee can have an impact on how the consultee perceives the consultant. It also questions whether the consultation is voluntary and collaborative when the consultee perceives the consultant to be operating from a power base such as coercive power.

Gutkin (1999) found that consultant directiveness does not have a negative impact on the consultation process, and the notion that consultants should avoid adopting a leadership role during the consultation is not well supported in the literature. This has been given as an argument to support the notion that while consultants provide direction during consultation, consultees are active participants, rather than passive recipients (Gutkin, 1999).

Gutkin (1999) argued that collaboration could be framed along a continuum of coercive-collaborative behaviours which interact with directive-nondirective behaviours. He provided the illustration that collaborative-directive behaviour would consist of consultants being highly prescriptive while simultaneously being receptive to the consultee, whereas collaborative-nondirective behaviour would consist of the consultant being less directive while helping the consultee to develop his/her own solutions to the issue (Gutkin, 1999).

This way of conceptualising the collaborative principle of consultation addresses the issue highlighted by Erchul and Raven (1997) in relation to a consultant potentially reducing his/her expert power when working from a referent power base, or vice versa. Gutkin (1999) argued that “it is apparent that consultants can be both directive and collaborative at the same time and need not choose between using their expertise and maintaining collaborative relationships between consultees” (p. 180).

Following this argument, it appears that there are times when it is appropriate for the EP to contribute his/her specialist knowledge, and that this may in fact be useful in meeting the overall goal of supporting the child (Monsen et al., 1998).

Erchul, Raven and Whichard (2001) drew attention to the different interpretations of the term collaboration and contrasted two perspectives as “one faction portraying consultation as a collaborative enterprise with social power and influence playing little or no role, and another faction depicting power and influence strategies as important components” (p. 485). With this in mind, the authors conducted research which explored teachers’ perceptions of the use of different social power bases outlined by French and Raven (1959, as cited in Erchul & Raven, 1997) and whether there was a distinction made between the impact of hard (overt) and soft (subtle and non-coercive) power bases.

A total of 118 teachers from a large geographical area (35 USA states) took part in this research. It could be argued that the responses from these teachers are more easily generalised to the wider population because of the large sample size. While school systems and EP practice differ between the USA and the UK, it is still useful to consider these findings in relation to the practice of consultation in the UK.

The results showed that the top four rated power bases were direct informational, positive expert, legitimate dependency and positive referent, and the overall response from teachers indicated that the use of a soft base of power would have more influence than the use of a hard base (Erchul et al., 2001). This adds to the discussion about the interpersonal aspects of consultation and the impact of the power base which the consultee perceives the consultant to be acting from.

Erchul and Martens (2006) described a co-operative consultant relationship which is characterised by consultees actively engaging in the consultation process using a structure which the consultant has put in place. The authors pointed out that when there is an

established relationship of mutual respect, the consultant can employ his/her specialist knowledge of social influence and problem-solving skills within a safe and respectful context (Erchul & Martens, 2006).

With regard to the concept of equality, they argued that as both the consultant and consultee have different knowledge to bring to the consultation, equality should be conceptualised as meaning “giving due consideration” (Erchul & Martens, 2006, p. 25).

Erchul and Martens (2006) posed the question “is the consultee being “deceived” or “manipulated” when the consultant uses power and influence for the good of the client?” (p. 26). They reconciled this issue by arguing that, while any type of influence has the potential to be used unethically, the role of the consultant, and the purpose of consultation, is to empower the consultee to develop solutions to the current situation and then apply this problem-solving skill to future scenarios (Erchul & Martens, 2006). Therefore, the consultant uses social influence, in conjunction with other specialist skills, to enable the consultee to develop these problem-solving skills.

2.7.2. Summary of key principles

Given the literature described above, it appears that the process of consultation centres on the following principles:

- **Understanding:** the consultee should have an understanding of the process and purpose of consultation (Dickinson, 2000; Farouk, 1999; Munro, 2000; Pinkus, 2003; Wagner, 2000).

- **Voluntary:** the consultee should enter into the consultation voluntarily (Erchul & Martens, 2006; Gutkin & Curtis, 1982, as cited in Larney, 2003; Larney, 2003; Wagner, 2000; West & Idol, 1987, as cited in Miller, 2003).
- **Collaborative:** there should be a collaborative relationship between the consultant and consultee with the consultee being actively engaged in the process (Dennis, 2004; Erchul & Martens, 2006; Farrell et al., 2006; Gutkin, 1999; Munro, 2000; Sheridan et al., 2001; Wagner, 2000).
- **Equal:** the consultee and consultant should contribute different, but equally valid, pieces of information; there should be recognition of an equal status between all those involved in the consultation (Conoley & Conoley, 1982, as cited in Farouk, 1999; Erchul & Martens, 2006; Gutkin & Curtis, 1982, as cited in Larney, 2003; Larney, 2003; Wagner, 2000; Wolfendale, 2008).
- **Capacity building:** the purpose of consultation is to enable the consultee to develop strategies to manage this, and future similar situations (Christie et al., 2000; Conoley & Conoley, 1982, as cited in Farouk, 1999; Dennis, 2004; Erchul & Martens, 2006; Larney, 2003; Leadbetter, 2006; Munro, 2000; Wagner, 2000).

2.8. Evaluation of previous research

As consultation and models of indirect service delivery have developed, so too has the research into the effectiveness of these models. An outline of the key studies will now be given.

2.8.1. Consultation and EPs

Farouk (1999) examined whether teachers used the strategies or approaches discussed during the consultation, and defined this as a measure of the effectiveness of the consultation. The

research involved 120 EPs completing a questionnaire which looked at the nature of the consultation, for example, the number of sessions completed, whether the strategies were agreed by the EP and the teacher, whether parents were involved and identifying factors which the EPs felt influenced the uptake of the strategies by the teacher.

A number of findings emerged from the data such as: 46.6% of the EPs reported having two or less consultation sessions; 86.7% reported that the teacher and the EP agreed on the strategies following the consultation; and parents were described as often or almost always involved by 61.1% of the EPs (Farouk, 1999). The factor which the EPs perceived to be most influential in affecting teachers' uptake of the strategies discussed was the "teacher's degree of ownership and commitment [followed by] follow up (in terms of reviews and frequency of follow up contact)" (Farouk, 1999, p. 259). Finally, the responses indicated that the EPs valued a joint problem-solving approach, and identified interpersonal factors, such as the relationship between the EP and the teacher, as affecting the consultation process (Farouk, 1999).

This research was offered as an example of how EPs consult with teachers. It is helpful that the responses were obtained from a large number of EPs (n= 120) working in 30 different EPSs in the UK, and so provided a broad range of responses from a potentially diverse sample. However, the responses represent the perspective of the EPs, and not teachers or parents. When the EPs commented about teachers and the EPs agreeing the strategies, or parents being involved, it is not clear whether teachers or parents agreed with these statements. In addition, the research was only examining factors affecting teachers' uptake of strategies from a consultation, but could have been extended to explore teachers' reasons for deciding, or not deciding, to implement the strategies.

Nevertheless, the findings suggest that the EPs perceived consultation to be a collaborative process with the goal of building relationships with teachers and empowering teachers to develop, and then implement, strategies to support children. This research focuses attention on interpersonal aspects of consultation, particularly the relationship between the EP and the teacher, and the importance of follow up support for the teacher.

Kennedy, Frederickson and Monsen (2008) offered a perspective on the theories which EPs identified as informing their application of the consultation model. Feedback from 17 EPs working in England highlighted that key theories or models identified as informing their work were problem-solving/problem analysis and solution focused approaches, while only one of the EPs specifically referenced Wagner's (2000) model as informing the consultation (Kennedy et al., 2008). Other theories which were put forward as informing the consultation were personal construct psychology, systems theory and social construction theory (Kennedy et al., 2008). This highlights that the EP can draw on a range of psychological theory within the framework of consultation.

2.8.2. Consultation and school staff

Gillies (2000) described the outcome of different workshops held with teachers, led by an EP, with the intention of developing consultation as a model of service delivery. During this workshop the teachers engaged in role play, and responded to each other according to a label they were wearing, for example, "tell me your problems", "judge me" and "give me advice" (Gillies, 2000, p. 33). An effect of the label "give me advice" was that teachers wearing this label reporting feeling "belittled, inadequate and useless, and thought others viewed them as inferior" (Gillies, 2000, p. 33). This has implications for EP practice, as it could suggest that teachers do not want to be in the position of being the recipient of advice, and viewing

teachers in this role could have implications for the interaction between that teacher and the EP. Additional feedback from the teachers showed that, subsequent to completing the workshops, teachers reported changes in their thinking, beliefs about their role and ability to problem-solve (Gillies, 2000).

This article was presented as a summary of the impact of the workshop, not a traditional research paper. This meant that issues such as sampling, how the data were recorded and what analysis was applied to the data were not discussed. However, this paper lends support to the argument that engaging in a consultation can enhance teachers' problem-solving ability in relation to that particular situation. Moreover, by engaging in consultation, there is the potential that teachers will feel more able to apply these new problem-solving skills to other situations.

Dennis (2004) conducted research with the aim of reviewing how consultation had been received in schools since its implementation. A total of 12 special educational needs coordinators (SENCOs) agreed to give feedback about the implementation of consultation.

A potential methodological weakness in the selection of participants was that EPs in the service were asked to recommend schools where the EP felt consultation had been positively received. This may have biased the responses as the participants involved may have been more likely to give positive, rather than negative, feedback. This research may have benefitted from also approaching schools where consultation had not been perceived by EPs to have been positively received, and exploring factors contributing to this.

In spite of this, the case study design of this research allows for the gathering of rich data, providing detailed responses from participants within a real life context (Robson, 2002). This resulted in findings which EPs may consider in relation to consultation. It appears that schools which are more likely to embrace consultation: can be creative with existing resources; recognise the role of the EP as changing from being a gate-keeper of resources; and value the importance of early intervention as opposed to solely focusing on one-to-one support. This highlights factors which facilitate consultation within the school setting. EPs working in schools where consultation does not seem to be valued may wish to consider how staff view the role of the EP and whether this is impacting on the school working within a consultation model.

Further research conducted by Timmins, Bham, McFadyen and Ward (2006) centred on looking at school staff perceptions of consultation and the outcome of consultation (that is, the actions teachers took following consultation). Interviews were conducted via telephone with 16 teachers, two SENCOs and one head teacher who had been identified in the EPS records as having taken part in a consultation. It is of note that EPs identified records of consultations which they felt were successful and not successful (compare with comment made regarding Dennis, 2004).

The researchers drew attention to the potential threats to validity when conducting interviews via telephone, and outlined a number of strategies employed to address this issue, for example, ensuring the participant had a copy of the interview schedule in advance of the interview (Timmins et al., 2006). Such methodological considerations offer weight to the overall findings of the study.

Key findings included: all participants agreed or strongly agreed to feeling involved in the process; 17 participants reported being satisfied with the agreed actions from the consultation; and 12 participants reported that the consultation had enabled them to think differently about the problem (Timmins et al., 2006).

Additional findings revealed that the participants who were most satisfied with the consultation were those who had received information about the process of the consultation prior to the consultation, those who felt the EP was receptive to their needs and those who perceived the interventions to be practical and realistic (Timmins et al., 2006). When applying these findings to EP practice, it seems imperative that those involved may be more satisfied with the consultation when they feel fully informed about the process of consultation prior to it taking place.

2.8.3. Consultation and parents

When writing about how consultation could be used to work more closely with parents, Wolfendale (1992) outlined key principles of the process of consultation as follows:

- There should be mutual ownership of the issues being explored.
- The role of the parent should extend beyond merely giving information.
- All those present in the consultation need to contribute to negotiating and agreeing the outcomes resulting from the consultation.

These principles were outlined before consultation became widely used in the UK, thus, even at this early stage of consultation development, the role of the parent in the consultation is outlined explicitly. Wolfendale (1992) emphatically argued that inclusive education will not progress “without the equal participation of informed parents who understand the philosophy

as well as the practice” (p. 95). Following this description of parental involvement, it is clear that parents should be empowered to contribute to the consultation in a meaningful way, rather than merely being present at the meeting.

The research conducted by Farouk (1999), described previously, made reference to EPs’ perceptions of involving parents in the consultation process as, when EPs were asked to consider how often parents were involved in consultation, 61.1% reported that parents were often or almost always involved. In addition, the researcher reported that “several EPs commented on the importance of involving parents in the consultation process” (Farouk, 1999, p. 258). However, there was no additional data to outline what the EPs regarded as involvement, or whether the parents felt they had been adequately involved in the consultation. In addition, when asked to consider factors which would affect a teacher’s uptake of the strategies discussed during the consultation, 13 out of 589 (2.2%) comments related to parental involvement (Farouk, 1999). This percentage of consideration of the impact of parental involvement could serve as an illustration of the low profile of parental involvement in consultation.

Annan (2005) outlined the impact of a change in service delivery on EP practice within an English EPS which included increased visits to schools and reduced contact with the administration base. This service delivery was the result of the LEA wanting to “meet the complex requirements of customers (i.e. schools) in creative flexible ways” (Annan, 2005, p. 263). The author commented that:

One particularly worrying aspect of the new model was the assertion that it was not necessary for EPs to have the amount of contact with parents/carers that had been a feature of practice in the past...essentially it was the school’s role to liaise with them. (Annan, 2005, p. 265).

This is worrying, as parents were not seen as clients, and did not seem to feature in this particular LEA's priorities when developing a more efficient EPS. It should be noted that this is an example of one LEA, and should not be taken to mean that EPs in this service concurred with this conception of the role of parents. It is noteworthy that the author highlighted the lack of involvement of parents as neglecting the interaction between systemic factors, specifically between the home and school systems, that are impacting on the child (Annan, 2005).

Geffken, Keeley, Kellison, Storch and Rodrigue (2006) argued that it is important to understand factors which facilitate or inhibit parental adherence to strategies recommended following an assessment by a psychologist. While the notion of "recommendations" is not directly in line with the collaborative feature of consultation, there were informative inferences made by Geffken et al. (2006) in relation to their analysis of the research exploring parental adherence.

They claimed that it is important to gain parental perceptions about different recommendations, as these perceptions can impact on adherence to the recommendation (Geffken et al., 2006). They also put forward the idea that adherence to recommendations could be affected by family variables, such as parental motivation, and child variables, for example the child's resistance to adhere to the recommendations the parent implements at home (Geffken et al., 2006).

This article highlights factors which the EP can transfer to consultation, such as the importance of going beyond within-child factors, approaching the situation more systemically and jointly devising strategies which are valued by the parent.

It has been argued that foster carers and adoptive parents are a subgroup of parents who may benefit from consultation (Osborne & Alfano, 2011) as this group of parents are more likely to experience higher levels of stress as a result of their role as a foster carer or adoptive parent (Farmer, Lipscombe & Moyers, 2005). EPs are in the position to work with this group of parents, with the additional benefit that the EP could be viewed as an independent or neutral professional, in contrast to the other professionals who work more closely with the family, for example social workers (Osborne & Alfano, 2011).

Consultation is offered as a model of service delivery which may benefit this subgroup of parents, as it allows for a tailored one-to-one approach, which takes into account the individual situation of each child/family that generic group sessions are unable to do (Osborne & Alfano, 2011).

Osborne and Alfano (2011) explored whether consultation based on Wagner's (2000) model was effective, from the perspective of both EPs and foster carers or adoptive parents. This research explored these perceptions subsequent to a consultation taking place. EPs comments related to the content and process of the session. EPs reported that the information they provided typically consisted of general advice on the area of concern and practical strategies for the foster carers or adoptive parents to employ (Osborne & Alfano, 2011). EPs also "highlighted the importance of providing attendees with specific information about the sessions ahead of the meeting and the need for more regular sessions to follow up on issues" (Osborne & Alfano, 2011, p. 403).

A measure of foster carers' and adoptive parents' concern about the issue and confidence in dealing with the issue were measured before and after the session. The results showed that

concern significantly reduced, while confidence significantly increased (Osborne & Alfano, 2011). Additional feedback indicated that foster carers and adoptive parents valued the emotional support provided by being able to discuss the concern, learning about practical strategies, setting goals and gaining a new insight and understanding of the child's needs (Osborne & Alfano, 2011).

Recommendations from foster carers and adoptive parents were: to have longer and more frequent sessions; follow up sessions; to be provided with additional information prior to the session; and to invite other professionals, for example school staff, to the session (Osborne & Alfano, 2011).

In the context of the principles of consultation (Wagner, 2000), foster carers and adoptive parents in this research valued the concept of understanding the process, collaborating with others in being able to discuss the concern and develop practical strategies, and capacity building, as foster carers and adoptive parents reported having a greater understanding of the child.

2.9. Rationale for present study

2.9.1. Why explore consultation?

Several models of consultation have been outlined in order to demonstrate that there is no single definition of what is meant by consultation. Consultation has been put forward as a model which can focus on the impact of environmental factors (Larney, 2003), use behavioural principles when problem-solving (Holcomb-McCoy & Bryan, 2010), or promote more diverse school communities (Lott & Rogers, 2005).

It appears that consultation, rather than being one specific defined model, has the benefit of being adaptable to fit a range of situations. However, within these different models of consultation are core principles. These include the importance of capacity building (Conoley & Conoley, 1982, as cited in Farouk, 1999; Erchul & Martens, 2006; Wagner, 2000), the relationship between the consultant and consultee being equal (Wagner, 2000), collaboration (Larney, 2003; Munro, 2000) and the consultee entering into the consultation process voluntarily (Gutkin & Curtis, 1982, as cited in Larney, 2003; Larney, 2003) with a clear understanding of the process and purpose of the consultation (Dickinson, 2000; Wagner, 2000).

In relation to EP practice, consultation is a means to work more systemically, focus on preventative work and engage in joint problem-solving where the EP can work with schools to address a broad range of whole school issues. This is in line with other models of problem-solving (Frederickson & Cline, 2002; Gameson et al., 2003) which highlight the importance of accounting for the interaction between environmental factors and the inter-related systems surrounding the child.

Consultation has developed as an indirect model of service delivery to address "the paradox of school psychology" (Gutkin & Conoley, 1990, p. 203) which asserts that professionals working to support children are more likely to work with the adults supporting those children. Arguments have been made that working with individual children is not the most efficient use of EP resources, as by enhancing the capacity of the consultee to manage the situation, there is the potential for the EP to indirectly support a larger number of children (Erchul & Martens, 2006).

The adoption of consultation as a model of service delivery allows the EP to demonstrate a unique understanding of psychological factors impacting on the child (Cameron, 2006; Stringer et al., 1997), while addressing these factors within a more holistic framework (Meyers et al., 2004). It appears that consultation allows the EP to specify what the profession can offer, rather than be limited by legislation specifying the role of the EP with regards to the statutory assessment process (Maliphant, 1997).

Research which has examined consultation has looked at how EPs have reflected on consultations (Farouk, 1999) and how teachers have perceived the consultation (Dennis, 2004; Gillies, 2000; Timmins et al., 2006). A key trend in the research is to evaluate the outcomes of a consultation, or look at factors which have an impact on the consultation process. There is less evidence that the principles of consultation have been examined.

The current study is built on the contention that it is “an imperative for us all to develop our knowledge base in terms of the processes involved in acting as a consultant” (Leadbetter, 2006, p. 25). Given the positive claims for consultation as a model of service delivery, it appears worthwhile to study consultation further, to understand how it can be developed, so that consultation can continue to be a useful approach within EP practice.

2.9.2. Focusing on parents' perspectives

When looking more closely at the different definitions of consultation, it appears that parents are not always seen as the main consultees. In fact, there are numerous definitions of consultation which highlight school staff, rather than parents, as contributing to the process of consultation such as: teachers being described as the “main role partners” (Wagner, 2000, p. 12); “consultation involves the school psychologist working systemically and collaboratively

with school staff to address issues and difficulties affecting several pupils rather than just a small number” (Larney, 2003, p. 9); and the consultant is “aiming to work through teachers to improve children’s progress and learning” (Leadbetter, 2006, p. 20). The definition provided by Conoley and Conoley (1982, as cited in Farouk, 1999) frames consultation as taking place between professionals. Following these definitions of consultation, it could be concluded that consultation occurs only between professionals and school staff, and not parents.

There has been criticism of the lack of attention given to “the contribution of the principal actors, the parents and the families” (Wolfendale, 2008, p. 16) within research which has focused on extending psychological intervention to include a community focus. This has been said to illustrate that the “expert psychologist-passive client mode of casework practice” (Wolfendale, 2008, p. 16) is not being fully addressed.

This contradicts key legislation which highlights the importance of working in partnership with parents. This legislation has stemmed from The Warnock Report (1978) and remains central to outlining the role of the parent in making decisions regarding their child’s education (Department for Education, 1994; Department for Education and Skills, 2001).

Additional research outlines the importance of working with parents within the broader education context (Dobbins & Abbott, 2010; Elkins et al., 2003; Sheridan et al., 2001; Wolfendale, 1992). This relates to the claim that “given the powerful effects of families’ contributions to children’s achievement and educational success, facilitating methods for and promoting family school partnerships remains a high priority” (Garbacz et al., 2008, p. 314).

This has led to discussions about the importance of considering the interaction between home and school factors. This is summarised by Gutkin and Conoley (1990) as follows:

The primary environments within which children function are the home and school setting. The primary persons in control of these environments are parents and teachers. If school psychologists hope to bring about meaningful improvements in the lives of children, they will have to exert meaningful influence on parents and teachers. (p. 209).

As a result, conjoint behavioural consultation has been presented as a model of problem-solving which looks specifically at the interaction between home and school factors (Sheridan et al., 2001). However, broader consultation research appears to focus on feedback from teachers (Gillies, 2000; Timmins et al., 2006) or explores EPs' perceptions of the success of consultations (Dennis, 2004; Farouk, 1999). There is less evidence that parents' views of factors affecting effective consultation have been examined.

The current study aims to provide information which will help EPs understand what parents want from consultation, whether there are barriers to parental involvement, and how this information can be used to improve EP practice. This will feed into a broader discussion about whether consultation is a model of service delivery which can improve partnership with parents. This is to address the issue that research examining consultation and research examining factors affecting partnership are advancing in parallel to each other. By drawing on these aspects of research, the current study intends to explore whether consultation is a model of service delivery which simultaneously meets the needs of parents and informs the development of effective partnerships between EPs and parents.

2.10. Key research questions

It has been stated that it is the responsibility of those working in the EP profession “to carry out research to help determine what is effective within educational and community settings” (Timmins et al., 2006, p. 316). In order to determine what effective consultation means, from the perspective of parents, the current study aims to look at the following three research questions:

1. What are parents’ attitudes towards consultation as a model of service delivery?
2. What do parents’ consider to be the most important dimension of consultation?
3. What can an EP do to implement this dimension in a consultation?

2.11. Chapter summary

This literature review has set out to explain the rationale for the current study and specifically the need to examine consultation from the perspective of parents. The intention of this is to explore whether the principles of consultation could be applied to broad EP practice, with the aim of building more effective partnerships between EPs and parents.

An outline of key legislation which defines parents’ rights, particularly in relation to decision-making regarding their child’s education has been given. In addition, key readings which explore the concept of partnership between parents and professionals have been discussed. Although parents have previously been on the periphery of decision-making (O’Connor, 2008), partnerships between professionals and parents appear to be key when working within a holistic, systemic framework.

A number of changes within the EP profession led to the development of consultation. This was largely due to the recognition that the EP could affect change for a larger number of

children than would be achieved through one-to-one work. Consultation, as an indirect model of service delivery can achieve this.

Key principles of consultation have been identified, which will form the basis of the current study. The intention is to explore whether parents value the principles of consultation. This is part of a wider discussion about whether consultation, as one example of service delivery, is a mechanism which could facilitate partnership building between EPs and parents.

3. Design

3.1. Chapter overview

This chapter will outline the main features of the design used in the current study. There will be reference to the ethical considerations of the current study, including how the researcher gained informed consent and maintained confidentiality and anonymity. It will continue by outlining how participants were chosen, how the questionnaire was developed and how participant responses were recorded.

This chapter will describe the data analysis which will take the form of a mixed method approach, combining statistical analysis with thematic analysis. There will be a discussion of the different approaches available when completing thematic analysis and an explanation of the approach used by the researcher. This will detail how initial codes and subsequent themes representing the data set were generated. Thematic maps illustrating the process of thematic analysis will be presented. The complexity of issues relating to using a mixed method design will be explored.

The methodological approach will be related to the overall research paradigm, in particular the theoretical framework within which the current study will be conducted, as this will inform how the data will be analysed and the direction of the discussion.

An outline of the strengths and weaknesses of the chosen research paradigm will be offered, including a rationale for why the researcher did not use an alternative methodology.

3.2. Ethical issues

Ethical approval for the current study was given by Cardiff University. The researcher referred to the British Psychological Society guidelines on conducting research (British Psychological Society, 2009) to ensure that the research was conducted ethically.

3.2.1. Informed consent

Participants were instructed that returning the questionnaire would indicate giving their consent to participate. The researcher felt that this would reduce the need for participants to sign a consent form. So, using this procedure to gain consent would ensure anonymity and reinforce to participants that the researcher placed a high importance on anonymity.

Each information letter and debrief sheet, sent with the questionnaire (Appendices A, B and C), included contact details for the researcher, the researcher's university supervisor and the Cardiff University School of Psychology Ethics Committee Secretary, should any participant have required further clarification on any issue or wished to make a complaint.

3.2.2. Anonymity and confidentiality

All questions in the questionnaire could be answered anonymously, and participants were instructed not to include any personal details, the name of the school or EP involved in the consultation, or any other information which may identify them. It was anticipated that not collecting any personal information would reinforce to participants that the researcher wanted all data to be anonymous.

The researcher held the names and addresses of participants who had been sent a postal questionnaire pack until the research was completed. This was in case additional postal

questionnaires needed to be sent, and to avoid sending duplicate packs to the same participant. This information was held confidentially by the researcher in a password protected electronic document which was destroyed when the research was completed.

3.3. Sample and participants

Choosing a sample which is representative of the wider population can increase a researcher's confidence when generalising the data to a wider population (McQueen & Knussen, 1999). However, as it has been argued that participants can be resistant to giving personal information (Fife-Schaw, 2000b), participants' age, ethnicity and social class were not recorded as these data were not needed to answer the research questions. While the researcher was aware that this would reduce the potential to generalise the findings, it was hoped that by omitting questions regarding personal information, participants would be more willing to complete the questionnaire.

Questionnaire packs were posted to participants in the same LEA where the researcher was completing a placement as part of an EP doctoral training course. The protocol within the placement EPS was that when an EP has completed a report, s/he would log the name of the child and the date of the report to show the report had been sent. The researcher looked through this log and randomly selected 350 children's names, where the report indicated that these children had been the focus of a consultation between an EP and a parent.

The dates between which these consultations occurred were September 2010 and June 2011. When the names were selected, the researcher was able to access the parent's address using a database system, which administrators in the EPS use when sending reports to parents.

Postal questionnaire packs were sent to 350 participants. This pack included the introduction letter, debrief sheet, questionnaire and an envelope stamped addressed to the researcher. It was hoped that including the stamped addressed envelope would increase the response rate by making it as easy as possible for participants to return the questionnaire.

A potential drawback of using a postal questionnaire is that the response rate can be low if the questionnaire is unexpected and the participant does not feel any connection to the research (McQueen & Knussen, 1999). In an attempt to overcome this, two schools in the same LEA, where the researcher was completing a placement as part of an EP doctoral training course, were approached to send out questionnaire packs.

The same information was sent in the school questionnaire pack as was sent in the postal questionnaire pack (i.e., the introduction letter, debrief sheet and questionnaire), with the minor alteration that the envelope included was labelled “return to class teacher”. Both schools agreed to give the questionnaire packs out, via the class teacher, and notify the researcher when responses were returned.

3.3.1. Exclusion criteria

Prior to the questionnaire packs being posted, the researcher decided that parents who are currently, or have previously been, involved in an SEN and Disability Tribunal case with this LEA would not be sent a questionnaire pack. It is considered by the researcher that involvement in an SEN and Disability Tribunal case could influence the parents’ responses to the questionnaire and may not reflect solely their opinions about consultation.

In addition, if a questionnaire is returned to the researcher containing personal or derogatory comments about an individual EP or school, the researcher will exclude these data, but make reference to it in the discussion section. The rationale for this is related to the hypothetical nature of the questionnaire, in that, participants were instructed to answer the questions without reflecting on a previous consultation they may have attended. A participant who includes information based on a previous consultation would not have completed the questionnaire as instructed and therefore, it would not be appropriate to include these data with the other participants' responses.

3.4. Measures (questionnaire)

3.4.1. Questionnaire clusters

Five key principles of consultation were identified in the literature review (see section 2.7.) which contributed to the structure of the questionnaire. The five key principles were identified as follows:

- **Understanding:** the consultee should have an understanding of the process and purpose of consultation.
- **Voluntary:** the consultee should enter into the consultation voluntarily.
- **Collaborative:** there should be a collaborative relationship between the consultant and consultee with the consultee being actively engaged in the process.
- **Equal:** the consultee and consultant should contribute different, but equally valid, pieces of information; there should be recognition of an equal status between all those involved in the consultation.
- **Capacity building:** the purpose of consultation is to enable the consultee to develop strategies to manage this, and future similar situations.

Each of these five principles of consultation, or clusters, was then expanded by the researcher to include four key dimensions. The researcher reviewed key articles which led to the formulation of the clusters (see section 2.7.) and then created dimensions which appeared to capture the essence of the clusters. This is outlined below, with reference to specific articles to exemplify how the dimensions were formulated as follows:

- **Understanding:** this cluster was expanded based on the argument that consultees should “know what [EPs] are doing and why” (Dickinson, 2000, p. 21) and the claims that consultation may be misunderstood when the EP does not regularly explain the process of consultation (Wagner, 2000) and that the EP ought to “clarify what should happen during the consultation and what each person’s role is” (Farouk, 1999, p. 255). The four dimensions of the understanding cluster are:
 1. I would want to know what would happen during the meeting before going.
 2. I would want to know more about what a consultation meeting was.
 3. I would want someone to contact me before the meeting to explain what the meeting is about.
 4. I understand what an educational psychologist is.

- **Voluntary:** this cluster was expanded based on the occurrence that numerous models of consultation explicitly state that the consultee should be involved in the consultation on a voluntary basis (Erchul & Martens, 2006; Gutkin & Curtis, 1982, as cited in Larney, 2003; Larney, 2003; Wagner, 2000; West & Idol, 1987, as cited in Miller, 2003). In addition, Pinkus (2003) highlighted that there are implicit factors in the statutory assessment process, such as the legal framework necessitating input from parents, which could cause parents to feel obliged to be part of the statutory assessment process. While being involved in consultation is not legally asserted, the

pressure parents feel to be involved may be present; hence, dimensions relate to the voluntary aspect of consultation and the potential for parents to feel obliged to attend.

The four dimensions of the voluntary cluster are:

1. I would feel forced to attend the meeting.
2. I would be happy to attend the meeting.
3. I would choose to attend the meeting.
4. I would attend the meeting even if I didn't want to.

- **Collaborative:** this cluster was expanded based on the arguments that collaboration within consultation is “a fundamental element of this service delivery model” (Gutkin, 1999, p. 161) where “parents, teachers, and other support staff are joined to work together” (Sheridan et al., 2001, p. 362). Dimensions which include reference to working with the EP, and also working with the EP and school staff, are purposely included to explore whether parents would have a preference for working individually with the EP, or jointly with the EP and school staff. The four dimensions of the collaborative cluster are:

1. I would like to work with the educational psychologist.
2. I would want to feel like the educational psychologist, the school and I are a team.
3. I would want to feel like the educational psychologist and I are working together.
4. It would be important for the educational psychologist and I to work together to help my child.

- **Equal:** this cluster was expanded based on the arguments that consultation should feature equivalent expertise (Wolfendale, 1992), a core principle of consultation is that the relationship between those involved in the consultation is non-hierarchical

(Erchul & Martens, 2006) and that each opinion is treated with equity (Wagner, 2000). The four dimensions of the equal cluster are:

1. The educational psychologist should show s/he values my opinion.
2. I wouldn't think I have anything important to say to the educational psychologist.
3. I would feel I could speak openly without judgement.
4. I would feel I have as much to contribute to the meeting as the educational psychologist.

- **Capacity Building:** this cluster was expanded based on the arguments that consultation is a means to support others to “develop appropriate solutions for themselves” (Dennis, 2004, p. 18) and “enhance the problem-solving capacity of the consultee” (Leadbetter, 2006, p. 20). The dimensions explore whether parents would have a preference for being given strategies without engaging in the joint problem-solving process or formulating strategies through discussion with the EP. The four dimensions of the capacity building cluster are:

1. I would like the educational psychologist to tell me how to change things.
2. I would want to talk about how I could make things better for my child in the meeting.
3. I would want the educational psychologist to help me think of different ways I can improve things for my child.
4. The educational psychologist is there to help me make decisions about how to help my child.

While this questionnaire was not piloted with parents, it was read by a number of EPs within the LEA where the researcher was completing the current study. This was done with the intention of highlighting any misleading or ambiguous language in the questionnaire (Fife-

Schaw, 2000b). When reflecting on the feedback from the EPs, amendments were made to some of the language used to define the individual dimensions, such as:

- I would want to know what would happen during the meeting **changed to** I would want to know what would happen during the meeting before going.
- The educational psychologist should contact me before the meeting to explain what the meeting is about **changed to** I would want someone to contact me before the meeting to explain what the meeting is about.
- It is up to me to find out what consultation means **changed to** I understand what an educational psychologist is.
- I would want to feel like the educational psychologist and I are a team **changed to** I would want to feel like the educational psychologist, the school and I are a team.
- It would be important for the educational psychologist and I to work together to change the situation **changed to** it would be important for the educational psychologist and I to work together to help my child.
- I would like the educational psychologist to tell me how to fix the situation **changed to** I would like the educational psychologist to tell me how to change things.
- I would want to develop my ability to change the situation **changed to** I would want to talk about how I could make things better for my child in the meeting.
- I would want to be able to think of different ways I can change the situation **changed to** I would want the educational psychologist to help me think of different ways I can improve things for my child.
- The educational psychologist is there to help me make decisions about the situation **changed to** the educational psychologist is there to help me make decisions about how to help my child.

3.4.2. Questionnaire structure

The questionnaire was comprised of two main sections. The first section of the questionnaire asked participants to rate how strongly they agreed with each of the 20 dimensions of consultation using a Likert scale with 1 meaning strongly agree and 7 meaning strongly disagree. The consultation dimensions were referred to as statements, rather than dimensions, as the researcher felt this was an easier term for participants to understand. For example, the participant was instructed to read the statement “I would want to know what would happen during the meeting before going” and use the Likert scale to rate how strongly s/he agreed with this dimension.

The consultation dimensions were presented in random order, and participants were not given information explaining which cluster each dimension was related to. The researcher felt this level of detail was not necessary for the participant to understand the rationale for the research or facilitate completion of the questionnaire.

The Likert scale represents an ordinal scale, as the numbers go beyond nominal categorisation, providing a scale of importance. The scale is not interval, as the difference between each point of the scale cannot be proved to be equal, for example as with temperature (McQueen & Knussen, 1999). Using a rating scale was intended to elicit detailed information about the participant’s perception of the 20 individual dimensions of consultation.

While participants could have been asked to rank the dimensions, it was felt that this would be time consuming and participants may have been less likely to complete the questionnaire. In addition, ranking the dimensions may have limited the amount of information provided by

participants. It was hoped that asking participants to rate each dimension would provide data representing participants' overall perceptions of consultation.

Participants were asked to state whether they had previously attended a consultation. This information was included so that subsequent analysis could explore any differences between participants who had previously attended a consultation and participants who had not.

This question was included after the dimension rating section, rather than at the beginning of the questionnaire. The purpose of this was that participants who answered "yes" to this question may have been unintentionally prompted to rate the dimensions based on a previous consultation, if this question had been presented at the beginning of the questionnaire. By asking this question after the dimension rating section, it was hoped that participants would be more likely to rate the dimensions hypothetically, rather than based on previous experience.

The first section of the questionnaire provides a broad overview of the participant's perceptions of the dimensions of consultation, while the second section of the questionnaire explores the participant's perception of a particular dimension of consultation more fully. The second section of the questionnaire asked participants to give short answers to the following questions:

1. Which statement do you think is most important and why?
2. What could the educational psychologist do to make you feel this statement was addressed?
3. How would you feel about future meetings if you felt the educational psychologist did not take this statement into account?

These questions were intended to explore a dimension of consultation which the participant perceived to be most important. The objective was to include open-ended questions to provide variety to the responses, and present participants with the opportunity to write about their perceptions of this dimension of consultation more fully.

As open-ended questions can be difficult to analyse, due to the range of possible responses (McQueen & Knussen, 1999), the questions were visually presented in a way that illustrated that responses only needed to be short paragraphs. In addition, the open-ended questions prompted the participant to consider one dimension of consultation in more detail. It was anticipated that this would facilitate analysis, as responses were less likely to be as widely varied than if the questions had been more general.

It was intended that the questionnaire would take approximately 20 minutes to complete, which has been argued to increase response rate (Fife-Schaw, 2000a). The researcher attempted to structure the questionnaire in a way which would facilitate relatively quick completion, for example, by using a rating scale and including boxes to indicate that only short paragraphs were required for the open-ended questions.

3.5. Entering the data

Data from the questionnaire were entered into Statistical Package for the Social Sciences (SPSS). This included whether the participant had attended a consultation, each participant's rating of the twenty dimensions of consultation and each participant's total for each cluster (i.e., summing the participant's rating for each of the four cluster dimensions).

The dimension which the participant identified as being the most important dimension was entered, using the number in the questionnaire to identify the dimension.

Table 1 outlines how each of the dimensions were entered into SPSS. As an example, the dimension “I would want to know what would happen during the meeting before going” appeared as dimension A on the questionnaire. If the participant rated this dimension as the most important dimension of consultation, this was entered into SPSS as “1”. As this dimension is one of the four dimensions relating to the understanding cluster this would form part of the participant’s total for responses related to the understanding cluster.

The dimensions highlighted in bold are negatively worded, so the rating had to be reversed when this item was entered into SPSS. Therefore, if the participant rated the dimension as 1, this was reversed to 7 (and 2 was reversed to 6 etc).

Table 1 includes a description of the cluster which each dimension is part of. Therefore, the dimension “I would want to know what would happen during the meeting before going” is labelled as “understand1” in Table 1, as this is one of the four dimensions of the understanding cluster.

3.5.1. Missing data

Where data were missing, or a participant provided a response of “don’t know”, this was entered in SPSS using a number which was different to the other coding groups (Field, 2009). If a participant did not identify an important dimension, this was entered as 21, as this does not correspond to any of the other coding groups for this variable. If a participant gave multiple responses, this was entered as 22.

Table 1: Explanation of how the data were entered into SPSS

Label to enter the most important dimension in SPSS	Label given to dimension on the questionnaire	Dimension	Cluster
1.	A.	I would want to know what would happen during the meeting before going	Understand1
2.	B.	I would choose to attend the meeting	Voluntary1
3.	C.	I wouldn't think I have anything important to say to the educational psychologist	Equal1
4.	D.	I would like someone to contact me before the meeting to explain what the meeting will be about	Understand2
5.	E.	I would want to talk about how I could make things better for my child in the meeting	Capacity1
6.	F.	I would want to feel like the educational psychologist and I are working together	Collaborative1
7.	G.	I would feel I have as much to contribute to the meeting as the educational psychologist	Equal2
8.	H.	I understand what an educational psychologist is	Understand3
9.	I.	I would want the educational psychologist to help me think of different ways I can improve things for my child	Capacity2
10.	J.	I would feel forced to attend the meeting	Voluntary2
11.	K.	I would like the educational psychologist to tell me how to change things	Capacity3
12.	L.	It would be important for the educational psychologist and I to work together to help my child	Collaborative2
13.	M.	I would want to know more about what a consultation meeting was	Understand4
14.	N.	I would feel I could speak openly without judgement	Equal3
15.	O.	The educational psychologist is there to help me make decisions about how to help my child	Capacity4
16.	P.	The educational psychologist should show s/he values my opinion	Equal4
17.	Q.	I would want to feel like the educational psychologist, the school and I are a team	Collaborative3
18.	R.	I would attend the meeting even if I didn't want to	Voluntary3
19.	S.	I would like to work with the educational psychologist	Collaborative4
20.	T.	I would be happy to attend the meeting	Voluntary4

3.5.2. Open-ended questions

The data from the open-ended questions were converted by the researcher into a word document. Where the participant had misspelt a word, or used a homophone (e.g., there instead of their), this was corrected by the researcher, to facilitate reading the responses. No corrections were made which would alter the meaning of the sentence. In addition, the researcher inputted abbreviations in the responses (e.g., substituting EP for educational psychologist), again, to make the responses easier to read.

3.6. Quantitative data analysis

3.6.1. Reliability and validity

Cronbach's alpha was used to analyse the content validity of each cluster (Field, 2009). The results of this, and the subsequent analysis of the dimension ratings, are presented in the results section.

3.7. Qualitative data analysis

3.7.1. Models of thematic analysis

Various models of thematic analysis exist in the literature. The following section will outline principal models of thematic analysis while exploring adapted models of thematic analysis including saliency analysis and thematic synthesis. This is offered to exemplify key aspects of thematic analysis that the researcher will use when analysing the data.

3.7.1.1. Braun and Clarke's model of thematic analysis

Braun and Clarke (2006) outlined their model of thematic analysis as follows:

- Phase one: become familiar with the data. This step involves the researcher reading and re-reading the data, making initial notes and ideas regarding coding. While it may

seem time consuming, it is emphasised that the researcher must spend time becoming familiar with the data, as this step is the “bedrock for the rest of the analysis” (p. 17).

- Phase two: begin initial coding. The researcher will identify features of the data which have relevance to the research. These initial codes could represent semantic or latent features of the data. At this stage, the researcher is not identifying themes, but rather, is beginning to think about themes and patterns in the data. This phase can be structured by the researcher’s decision to use theory driven or data driven codes. Braun and Clarke (2006) advised that researchers “code for as many themes as possible” (p. 19) to ensure that no content is lost. This highlights that at this stage the researcher is not attempting to produce the finished thematic map, but rather, is still becoming familiar with the data and making initial codes which will be reviewed as the process continues.
- Phase three: sorting codes into themes. The researcher will analyse the codes from phase two and begin to consider how the codes fit into an overall theme. It may be helpful to draw a thematic map to sort the codes into themes or sub-themes. At this point, the analysis becomes more focused, as the researcher is considering themes at a broader level, rather than examining individual codes. In addition, the researcher begins to think about “the relationship between the codes, between themes, and between different levels of the themes” (p. 20). Braun and Clarke (2006) also highlighted that this is a useful phase to introduce a miscellaneous theme, for data which do not appear to fit into other themes.
- Phase four: reviewing the themes. The researcher will spend time checking whether the data extracts in each theme are meaningful (level one review) and then whether the theme is relevant to the entire data set (level two review). At this stage, the researcher may wish to recode some missed data, or alter the theme in light of

reflections. This phase may make it apparent that particular themes do not have enough data to establish a theme, or particular themes may be so similar they actually represent one theme. By reviewing the themes, the researcher can ensure that the theme represents the data accurately, and there is a clear distinction between themes. The different themes will represent different pieces of the data set while, at the same time, fit together to tell an overall story. This will form the structure of the thematic map, which seeks to illustrate how the themes represent the entire data set.

- Phase five: define and name themes. Undertaking the previous phases should establish a coherent thematic map at this point. The data extracts should demonstrate why the theme is distinct and what aspect of the data it captures. The researcher should outline how the theme fits into the broader context of the research, how it relates to the research question(s) and why it is distinct from other themes. The key function of this explanation is to go beyond summarising and describing the data, instead, identifying why the particular data are appealing to the researcher.
- Phase six: report writing. The researcher should describe the themes, using data extracts which particularly demonstrate the themes' relation to the research. This phase makes explicit the researcher's decisions throughout the process which can demonstrate the validity of the codes and subsequent themes. Again, this is not meant to provide a summary of the data, but rather, an argument about how the data relate to the research question(s).

This model of thematic analysis was offered as a flexible framework for data analysis. Braun and Clarke (2006) do not appear to offer a strict explanation of precise steps the researcher must take to complete the data analysis. Instead, the phases are described in general terms, to

guide the researcher through the process, rather than prescribe it. This flexibility is argued to be a key benefit of thematic analysis (Braun & Clarke, 2006).

3.7.1.2. Fereday and Muir-Cochrane's model of thematic analysis

Fereday and Muir-Cochrane (2006) offered a variation on the procedures involved in thematic analysis, as summarised below.

- Step one: developing the manual code. This involves determining which broad categories will form the codes used to organise sections of data. These codes should be based on the research question(s), or the theoretical concepts underpinning the research. It has been argued that relating the codes to the research question(s) and theoretical underpinnings of the research adds “a clear trail of evidence for the credibility of the study” (p. 84). It could be argued that the manual codes, or deductive codes, are best described as “theory driven codes” as they have been formulated before the data coding has begun.
- Step two: testing the reliability of codes. This stage of data coding looks at how well the manual codes from step 1 can be applied to the data. The authors give the example of using test material to explore the applicability of the code. This process can be repeated by another researcher and the outcomes and reflections compared. The process of having the codes tested and verified by separate researchers appeals, as it reduces the potential for researcher bias. In addition, this step highlights the importance of reviewing the previous stage of the data coding before continuing onto the next stage.
- Step three: summarising data and identifying initial themes. This part of the data coding process focuses on looking at the data as a whole, reading and re-reading to become as familiar as possible with the data. During this step, the researcher can

make initial notes about different themes emerging, and begin to organise the data, for example in relation to particular research question(s). The authors highlighted a key theoretical underpinning of their thematic analysis which makes it distinct from content analysis; a single comment was given as much attention as repeated comments, or comments agreed by a number of participants.

- Step four: applying a template of codes and additional coding. The process now focuses on using the manual codes to begin to organise the data more meaningfully. The authors gave the example of using computer programmes, such as N-Vivo, to aid coding large amounts of text and data from different sources. It is important to make clear that the authors do not intend this step of the data coding to be limited to the manual codes. In fact, they highlighted the importance of inductive codes which relate to new, emerging themes, which can be additional to, or expand, the manual codes. It could be argued that these inductive codes are best described as “data driven codes” as they have become apparent through reading the data, and are not pre-determined at the beginning of the data coding.
- Step five: connecting the codes and identifying themes. By connecting the codes, themes and overarching patterns in the data, the coding can occur within a more structured framework. Themes in the data may relate to similarities or differences between participants, or groups of participants, of particular demographics. Therefore, this step in the data coding can be used to compare different data sets, and may lead to a theme which describes the different data collected from these groups. Additionally, this step can be applied to code data within one group of participants, but also highlight similarities or differences between participants within that group.
- Step six: corroborating and legitimising coded themes. The authors emphasised the importance of verifying the data, and avoiding unintentionally reporting themes

which have emerged due to researcher bias. This relates to the authors' previous stipulation that the data coding process is not linear, and each stage can be reviewed before progressing onto the next. This involves returning to the raw data, and ensuring that the codes, and subsequent themes, represent the original data. This final step in the data coding may lead to researchers identifying overarching themes, which contain a number of subthemes.

A strength of this method of data analysis is that it is framed within the premise that thematic analysis should be continually reflexive (Fereday & Muir-Cochrane, 2006). Just as Braun and Clarke (2006) introduced the concept of reviewing the codes, Fereday and Muir-Cochrane (2006) highlighted the importance of continually re-reading previous stages of the analysis "to ensure that the developing themes [are] grounded in the original data" (p. 83).

This draws the researcher's attention to the importance of being aware of the meaning given to codes, and subsequent themes, and ensuring that these themes are a true representation of the data. The researcher is prompted to be aware of the potential to ascribe meaning based on bias, or other influences. By remaining reflexive throughout the coding process, and explicitly relating the codes and themes to the data, the researcher can present an analysis which is as accurate as possible.

Fereday and Muir-Cochrane (2006) drew the important distinction that thematic analysis does not derive codes, and subsequent themes, simply by looking at participant responses that occur most frequently. Instead, they propose the concept that a single comment can be as important as a response repeated by several participants. This echoes Braun and Clarke's

(2006) suggestion that a miscellaneous theme may be useful in capturing data which do not fit into a theme, but are nonetheless relevant to the research question(s).

3.7.1.3. Saliency analysis

This argument is also proposed by Buetow (2010) who put forward the concept of saliency analysis, to complement thematic analysis. This is in response to the description of thematic analysis as being a method of building codes, and building these codes into themes, based on reoccurrence or patterns within the data (Buetow, 2010). In contrast, saliency analysis is offered as a method of data analysis that “highlights which units of meaning are salient at the data surface (primary salience) while also exposing the salience of latent messages (secondary salience)” (Buetow, 2010, p. 123).

Further explanation is given to the potential interaction between recurrence and importance, with four potential combinations of these two factors given as:

1. highly important and recurrent;
2. highly important but not recurrent;
3. not highly important but recurrent; or,
4. not highly important and not recurrent (Buetow, 2010, p. 124).

When determining whether data are important, the researcher ought to consider whether the data advance understanding, relate to the research question(s), or represent a new finding (Buetow, 2010).

Saliency analysis can be used to look at the codes within point 1 and point 3, to determine whether there are possible themes among these codes (Buetow, 2010). More significantly,

point 2 acts as a mechanism to include codes which do not fit into a theme, but are nonetheless considered to be important (Buetow, 2010). Therefore, thematic analysis which includes elements of saliency analysis is offered as a methodology which includes codes which combine to form overarching themes and codes which do not (Buetow, 2010). This is argued to address the criticism that “thematic analysis is a commonplace but poorly defined and incomplete route to understanding the importance of coded excerpts” (Buetow, 2010, p. 124).

3.7.1.4. Thematic synthesis

Other research has taken thematic analysis a step further to describe how it can be used to synthesise qualitative data from a number of studies. Thomas and Harden (2008) put forward that while there is the argument that qualitative data cannot be generalised beyond the specific group of participants in that particular study, applying a thematic synthesis can address this issue. Thomas and Harden (2008) outlined the concept of “translation” where concepts may appear in data from different studies, even if expressed differently. The key aspect of thematic synthesis is using these concepts to develop an overall line of argument. Thus, the synthesis goes beyond presenting a summary of the data and identifies broad themes which exist across the different data sets.

A summary of the process of thematic synthesis is offered below (Thomas & Harden, 2008):

- Deciding which articles to include in the synthesis. The authors argued that using database search engines may not be sufficient, and researchers may need to use this technique in conjunction with looking at book chapters and contacting relevant authors for advice on which particular research papers may be useful to include.

- **Quality assessment.** In relation to this synthesis example, the authors looked for quality in relation to the study aims, the reliability and validity of the research and the appropriateness of the data collection methods. However, other researchers may need to define their own measures of quality assurance, in relation to the particular synthesis they are conducting.
- **Extracting data.** This may be in the form of quotes included in the research paper. It may be difficult to identify key concepts and themes if the research paper has limited its findings to merely providing a summary of the data.
- **Thematic synthesis.** This is the aspect of the analysis which draws most heavily from thematic analysis, and consists of three main stages:
 1. **Coding text:** this involves line by line coding of the data to begin to identify codes which translate between the different data sets. These codes can then be grouped into a hierarchical tree structure, and revised to determine whether additional codes need to be created in order to group initial codes.
 2. **Developing descriptive themes:** this step explains the grouping of the hierarchical codes, the themes which have emerged from this process and the relationships between themes. This stage could be described as inductive coding, as the researcher is generating a theme from a range of data examples.
 3. **Generating analytical themes:** this step uses the inductive codes from step two, and applies the research question(s), which are the basis of the synthesis, to generate analytical themes.

Each of the models described above highlight the flexibility of thematic analysis, as it can be applied to one data set, data from different groups of participants and data collected from

different research. It may be that this level of flexibility has led to thematic analysis being viewed as a methodology which is poorly understood (Braun & Clarke, 2006).

While each model of thematic analysis described above uses various techniques to analyse the data, elements of inductive coding or deductive coding are present in each. That is, researchers can use these models to identify themes which summarise the data by using pre-determined codes derived from the theoretical underpinning of the research, or codes which become apparent through reading the data. In addition, these models prompt researchers to go beyond these codes, and clarify the underlying practical or theoretical implications of these codes.

A further key tenet of each of these models of thematic analysis is the notion that researchers must ensure the codes and themes are representative of the data. The different authors describe techniques to ensure this is the case, such as remaining reflexive throughout the process (Fereday & Muir-Cochrane, 2006) and reviewing the codes and themes before continuing to subsequent stages of the analysis (Braun & Clarke, 2006).

3.7.2. Thematic analysis used in this study

The second part of the questionnaire (the open-ended questions) was analysed using thematic analysis as outlined by Braun and Clarke (2006). In addition, the researcher drew on elements of the other models of thematic analysis described above, in particular, using saliency analysis to ensure that data which are important (i.e., data which are unrelated to the research questions but nonetheless add to the understanding of the overall research discussion), but not recurring, are included in the generation of codes and themes (Buetow, 2010) and remaining reflexive throughout the data coding process (Fereday & Muir-Cochrane, 2006).

For the purpose of the current study, the researcher is not working with a predefined theory, and so analysis of the qualitative data was not framed within a specific theory. Thus, deductive codes will not be predetermined to guide the initial coding of the data (Fereday & Muir-Cochrane, 2006). It is anticipated that themes relating to the principles of consultation are likely to emerge, as these have been identified in the literature and used to structure the questionnaire. However, the researcher will not use these themes as deductive codes to guide the analysis.

Rather, thematic analysis will be carried out at an inductive level. It may be that a theme will emerge that relates to a particular research question, but the researcher will not code data according to a specific research question. For example, partnership may emerge as a theme, but the researcher will not begin by deliberately looking for data extracts which support the presence of the theme partnership. This follows the definition of thematic analysis as being a methodology which looks for patterns within data “where emerging themes become the categories for analysis” (Fereday & Muir-Cochrane, 2006, p. 82).

3.7.2.1. Phase one

The initial ideas which emerged from reading through the data included:

- Support.
- EP knowing the child.
- Interpersonal factors.
- Written communication.
- Equal contribution.
- Parents being taken seriously.
- Understanding purpose of the meeting.

- Knowing what would happen in the meeting.
- Agreed actions and goals.
- Follow up and review.
- Acting on agreed actions.
- Monitoring.
- Reassurance.
- Clear roles.
- Giving information.
- Joint work.
- Active listening.
- Parental knowledge of the child.
- Home school link.

There were particular codes which related to question three in the questionnaire (how would you feel about future meetings, if you felt the educational psychologist did not take this statement into account?). Initial codes from data relating to this question were:

- Missed opportunity.
- Not moving forward.
- Hopeless.
- Not respected.
- Less confidence.
- Opinion not valued.

3.7.2.2. Phase two

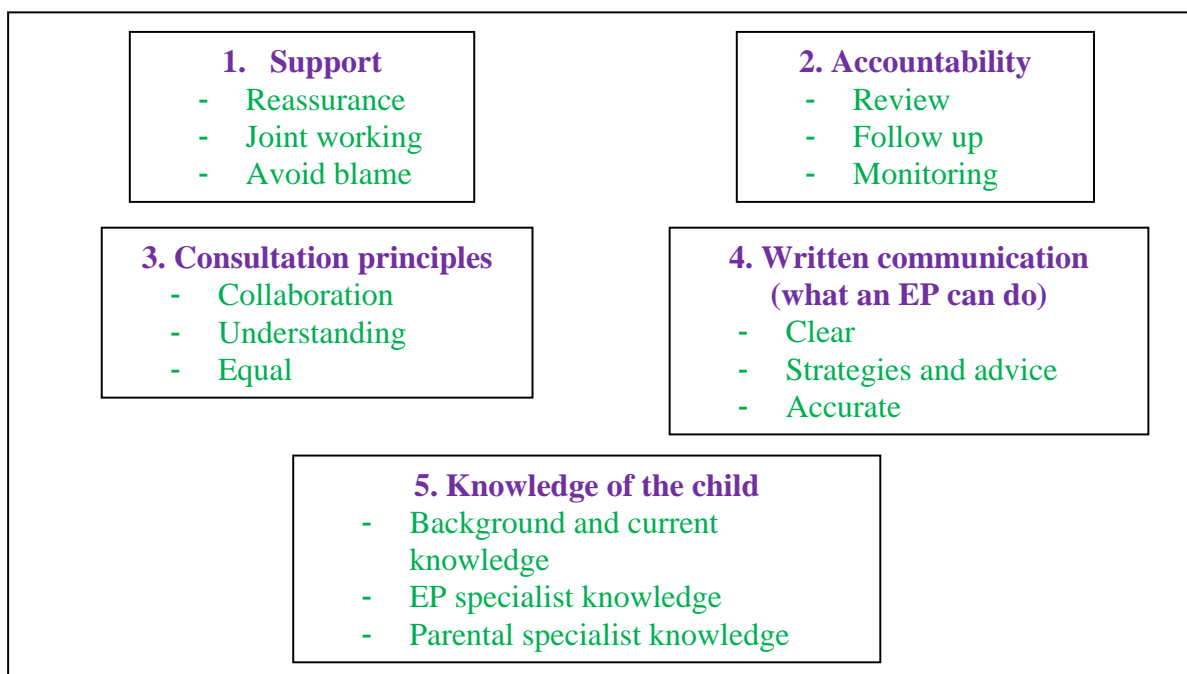
By relating these initial codes to the research questions, patterns were emerging which structured the initial codes in a more meaningful way. A selection of these patterns included:

- What parents wanted to gain from consultation.
- What parents valued from a consultation.
- Skills the EP could employ to achieve a successful consultation.
- Factors relating to the five clusters of consultation which parents perceived to be of particular importance.
- What negative impact might result from the EP not conducting the consultation in a way which the parent perceives to be important?

3.7.2.3. Phase three

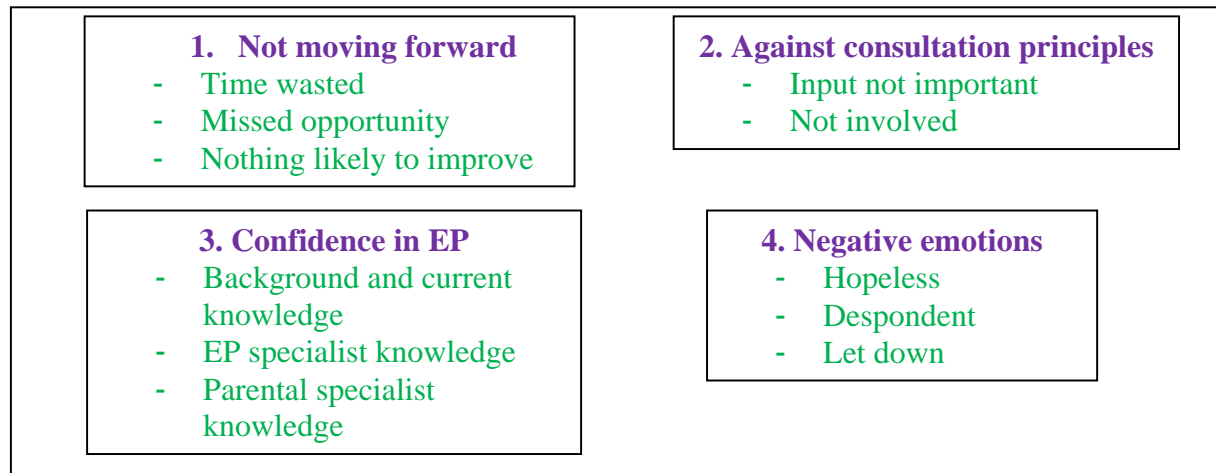
Phase one and phase two produced an extensive list of potential codes. Therefore, phase three was undertaken to arrange the codes into potential themes (shown in purple) and sub themes (shown in green) (Figure 1).

Figure 1: Initial thematic map



The responses for question three appeared to be providing data which were distinct from the rest of the data set; this data were arranged into separate themes and subthemes (Figure 2).

Figure 2: Thematic map in relation to Q3 on the questionnaire



3.7.2.4. Phase four

The researcher began to review the themes and reflect on whether the data in each theme were meaningful, and whether the themes related to the entire data set. During this review, the researcher noted that there was overlap between some of the themes. For example, *understanding* linked with *clear communication*, *support* linked with *follow up* and *joint working* linked with *strategies and advice*.

At this point, the researcher felt it was important to conduct a saliency analysis (Buetow, 2010) to ensure that data which did not reoccur, but which were still important, were included as a theme. These data were coded as a miscellaneous theme (Braun & Clarke, 2006), as the researcher continued to reflect on how the themes represented the data, and related to the research questions.

3.7.2.5. Phase five

Following the review during phase four of the thematic analysis, a final thematic map was produced (Figure 3, section 4.4.). This is presented in the results section with data illustrating the theme and how each theme relates to the research questions.

Phase six of the thematic analysis will be presented in the discussion section, when the researcher will take the opportunity to expand on how each theme is related to the broader context of the research.

3.8. Chosen research paradigm

Thematic analysis can be applied to research which is operating within the framework of different research paradigms (Braun & Clarke, 2006). However, a researcher should make explicit the paradigm directing the research, as this will impact on the type of data collected, subsequent analysis and conclusions drawn. This is particularly relevant when employing a mixed method design.

3.8.1. Mixed method design

Leech and Onwuegbuzie (2009) described mixed method designs as being “still in its adolescence, and thus, is still relatively unknown and confusing to many researchers” (p. 266). They continued to argue that the variety of mixed method designs available has led to over simplistic or inconsistent use of mixed method design.

To address this issue, Leech and Onwuegbuzie (2009) put forward a typology of mixed method designs, which is based on three key principles, as follows:

1. Level of mixing: This point refers to the extent to which the research is mixed, i.e., whether the design follows a fully mixed method (where quantitative and qualitative methods are mixed within stages of the study) or a partially mixed method (where quantitative and qualitative methods are not mixed within stages of the study, until the interpretation stage).
2. Time orientation: This point refers to whether the quantitative and qualitative data collections occur concurrently or sequentially.
3. Emphasis of approach: This point challenges the researcher to identify whether one of the data collection techniques will have a greater emphasis with regards to the research question(s).

There are eight possible combinations using the above typology, which Leech and Onwuegbuzie (2009) argued will:

- Provide an organised and flexible structure for researchers to work within.
- Add credibility to the research field by demonstrating examples of mixed method designs which are alternative to monomethod designs.
- Make possible the use of shared language among mixed method researchers.
- Provide a framework for mixed method researchers to work within.
- Contribute to the teaching of mixed method designs.

Leech and Onwuegbuzie (2009) constructed this typology to address some of the complexity associated with mixed method designs. By using this typology, the researcher can make explicit the process for collecting qualitative and quantitative data.

Hanson, Creswell, Plano Clark, Petska and Creswell (2005) offered a process by which the researcher can better understand the subtle complexities of mixed method designs, by considering the following aspects of mixed method research:

1. The theoretical lens. At this point, the researcher is prompted to consider the theoretical or philosophical basis for the research. This is important to make explicit as it will influence the research question(s), type of data collected and method of data collection.
2. Implementation and priority of data collection. The data could be collected concurrently or sequentially (implementation), with qualitative or quantitative data having an equal or non-equal emphasis (priority).
3. Data analysis and integration. The data may be analysed separately and then compared in the discussion section, or transformed and analysed together in the results section. An example of data integration is transforming themes from qualitative data into ratings or counts to compare with a quantitative survey.

Each of these typologies (Hanson et al., 2005; Leech & Onwuegbuzie, 2009) highlight the importance of making explicit how the different types of data will be collected, whether one of the approaches will have a particular emphasis or if the research design will follow a fully mixed method approach.

However, both examples of typology do not discuss a fundamental criticism of mixed method designs, which is that quantitative and qualitative data collection methods do not measure the same phenomena (Sale, Lohfeld & Brazil, 2002). This is based on the argument that qualitative and quantitative data collection methods are based on distinct theoretical paradigms, where qualitative methodologies are based on a constructionist or interpretative

paradigm and quantitative data collection methods are based on a positivist paradigm (Sale et al., 2002).

Therefore, a positivist researcher is seeking a measurable and objective truth, while the constructivist researcher seeks to explore the number of realities which different participants experience. By thinking about these contrasting philosophies, the researcher is challenged to consider the appropriateness of using a mixed method design when, ultimately, these theoretical paradigms appear incongruent.

Additional confusion may arise from mixed method studies reporting findings which appear to be complementary. This should not be theoretically possible given the above assertion that quantitative and qualitative data collection methods are based on distinct theoretical assumptions which, therefore, cannot be a measure of the same phenomena. This confusion has been attributed to some researchers presenting the frequency of responses in an open-ended questionnaire as qualitative analysis, rather than quantitative, or data being simplified to the extent that differences between the quantitative and qualitative data are not reported (Sale et al., 2002). It is clear that how data in a mixed method design are synthesized and reported are important aspects of mixed method design research.

The differences in the underlying assumptions and philosophies of these distinct paradigms can be subtle. Sale et al. (2002) explained that the term “validity”, in regards to quantitative analysis, refers to how the results correspond with reality in the wider population, whereas “validity”, in regards to qualitative analysis, refers to agreement of the interpretation of the data. In light of this argument, a researcher could be led to believe that a mixed method design is not plausible, as the distinct theoretical paradigms are incongruent.

In contrast, it has been proposed that using a mixed method design goes against the argument that quantitative and qualitative methods are mutually exclusive (Burke Johnson & Onwuegbuzie, 2004) and using a mixed method design enables the researcher to take on a broader focus, in contrast to being confined to a particular approach (Burke Johnson & Onwuegbuzie, 2004). Moreover, a mixed method design has been said to provide methodological pluralism which can lead to more effective research by providing “stronger evidence for a conclusion through convergence and corroboration of findings” (Burke Johnson & Onwuegbuzie, 2004, p. 21).

This is echoed by Hanson et al. (2005) who put forward that a concurrent mixed method design is “useful for attempting to confirm, cross-validate, and corroborate study findings” (p. 229). In addition, a mixed method design has been argued to provide the researcher with the opportunity to “simultaneously generalize results from a sample to a population and to gain a deeper understanding of the phenomenon of interest” (Hanson et al., 2005, p. 224).

This is in contrast to the argument that, if the researcher acknowledges that qualitative and quantitative data do not measure the same phenomenon, using a mixed method design for the purpose of cross-validation, or providing a stronger conclusion, is not theoretically viable (Sale et al. 2002).

In order to provide a solution to these contrasting arguments, Sale et al. (2002) argued that researchers can use a mixed method design, if they acknowledge the paradigm differences of these distinct approaches. This is illustrated with the example that a researcher may collect a measure of workplace performance, as well as interviewing employees about their experience of working in the factory (Sale et al., 2002). The positivist paradigm would assert that the

measure of workplace performance would represent the reality of work in the factory, while the interpretivist researcher would use the interviews to show that there may exist a number of realities in relation to work in the factory.

By making these distinctions explicit, the researcher can employ a mixed method design and label the phenomena which each aspect of the methodology is measuring. In this sense, the data can be additive, where the data are collected sequentially or simultaneously in the research (Sale et al., 2002). The key tenet appears to be the researcher's acknowledgement that quantitative and qualitative data are measuring different phenomena, and that different assumptions relate to the interpretation of these phenomena.

3.8.2. Researcher's standpoint

The current study is not operating within the traditional positivist approach, which argues that there is a scientific truth waiting to be discovered. A positivist perspective would involve studying social experience in the same way as a physical phenomenon, in that the researcher would make observations as a neutral observer and draw definite answers to testable hypotheses (Breakwell & Rose, 2000).

It follows then that the current study is adopting a more constructionist approach, maintaining that there is no definite answer to be found, by using an inductive way of thinking (Breakwell & Rose, 2000), and seeking to use specific instances of behaviour to predict general rules (Burke Johnson & Onwuegbuzie, 2004). In addition, a constructivist approach accepts that there are multiple possible realities that exist, instead of a single truth (Leech & Onwuegbuzie, 2009).

As the current study is looking at the process of consultation, which has social construction theory as a key feature (Wagner, 2000), it follows that the method of data collection and analysis should also be framed within the constructivist perspective. This line of thinking will also be framed within social phenomenology, which puts forward that individuals attribute different meanings to everyday events (Fereday & Muir-Cochrane, 2006). The current study will therefore be looking at the meaning participants are attributing to consultation.

The qualitative data in the current study have a greater emphasis than the quantitative data (Leech & Onwuegbuzie, 2009) as the research is framed within a constructionist stance; therefore, this would be the theoretical lens through which the data are viewed (Hanson et al., 2005). In addition, the time orientation is concurrent, rather than sequential (Leech & Onwuegbuzie, 2009). The qualitative and quantitative data were not be integrated during the data collection stage (Hanson et al., 2005). Instead, the two sets of data will be analysed separately, and the implication of these findings discussed in subsequent sections. This recognises that quantitative and qualitative data collection methods are not measuring the same phenomena (Sale et al., 2002).

However, it was intended that the qualitative data may “clarify or illustrate the results of a statistical analysis” (McQueen & Knussen, 1999, p. 222). By using both quantitative and qualitative data collection methods, the researcher intended to collect data which provide an overall measure of participants’ perceptions of the principles of consultation, as well as more individual information about each participant’s perception of a specific aspect of consultation.

3.9. Strengths and weaknesses of chosen design

A potential drawback of using a questionnaire methodology is illustrated in Bowling's (2005) description of questionnaires as demanding that "respondents are literate in reading the language/s of the survey, that they do not have any visual impairments and have the dexterity (e.g., of wrist and fingers) to complete the questions" (p. 282). Following this description, an interview could be argued to be a methodology which is less likely to be impacted by these barriers and allow for data collection from a wider sample of the population.

However, the researcher considered that having direct contact with participants may have limited how openly participants answered the questions. It has been argued that social desirability bias (participants answering questions to appear favourable to others) is lower, and willingness to disclose sensitive information is higher, when a questionnaire methodology is employed (Bowling, 2005). The researcher decided that participants may be more honest when answering questions in a questionnaire, rather than a face-to-face interview.

There was a concern that participants would feel pressured to give more positive responses, with the view that negative responses may impact on an EP's attitude towards them or their child in future meetings. A postal questionnaire emphasised the researcher's intention to collect anonymous data. In addition, the benefit of using a questionnaire is that it can be administered to a larger sample than may be possible through focus groups or interviews.

An alternative design could have been used in order to overcome some of the limitations of using a questionnaire design, such as an experimental design. Following this, the design would have focused on manipulating one variable and measuring any effects on another

variable. As the current study was looking at parents' perceptions of the principles of consultation, it is arguable that participants could have been assigned to groups which experienced different approaches to consultation, and their attitudes following this measured. This may have been a useful method to explore some of the different approaches to consultation, as outlined in the previous sections.

This was not thought to be a suitable research design as it may have had future ethical implications for that participant when working with an EP. For instance, if the participant was assigned to a group which experienced an approach to consultation s/he perceived to be negative, this participant may have been less likely to engage with an EP in future real life situations.

In addition, the focus of the current study was on whether parents valued the central principles of consultation, not whether they were satisfied with the consultation process; assigning participants to groups where approaches to consultation were manipulated may not have collected sufficient data about the principles of consultation.

Other data collection measures could have been employed, such as the use of a focus group or face-to-face interviews. The benefit of conducting an interview, in contrast to a questionnaire, is that an interview requires the participant to use basic listening and verbal skills, while a questionnaire requires the participant to have a full understanding of the language used in the instructions and the questions (Bowling, 2005).

In addition, using an interview method provides the opportunity for the participant to ask clarifying questions or for the interviewer to explain any ambiguous terms (Bowling, 2005).

Collecting data using an interview methodology may result in an increased likelihood that the data collected will be more accurate, as the participant will have the opportunity to ask questions when completing the interview.

This may be particularly relevant if the sample includes participants for whom English is an additional language, as the interviewer would be able to answer questions, which would not be possible if the participant was completing a questionnaire. However, this creates the potential for interviewer bias, as the interviewer may offer different prompts and explanations to different participants, which could impact on the type of data collected.

3.10. Chapter summary

This chapter has outlined the approach taken to contact participants and the information sent to participants in line with ethical guidelines (British Psychological Society, 2009). It has described the methods used to ensure that the participants' responses remained anonymous throughout the process. In addition, there has been an explanation of how the questionnaire was constructed and which open-ended questions were asked. Particular attention has been given to how the five key clusters were formed and then expanded using individual dimensions. There followed a discussion of the type of analysis used, in particular thematic analysis, and how this is framed within an overall constructivist perspective.

4. Findings

4.1. Chapter overview

This chapter will begin by providing a summary of the number of postal and school questionnaires sent out and received by the researcher.

An outline the main findings of the data analysis will be presented. This will begin with analysis of the construct validity of each of the five consultation clusters, using Cronbach's alpha test. Further analysis will examine participants' rating of each of the 20 individual dimensions of consultation. Particular analysis will focus on whether there was a difference between participants who had previously attended a consultation, and participants who had not.

The remainder of this chapter will describe the findings of the thematic analysis. The final thematic map will be presented, exemplified with data extracts, and discussed in relation to the research questions.

4.2. Summary of response rate

School One sent home 200 questionnaire packs and only two were returned. School Two sent home 150 questionnaire packs and 12 were returned. This was a disappointing response rate, which may have been related to the fact that the school questionnaire packs were sent out in the penultimate week of the summer term, and so may not have been a priority for the schools and parents at this time.

In summary, of the 350 postal questionnaires sent, 30 were returned. Of the 350 school questionnaires sent, 14 were returned; thus the total number of participants was 44. Of this total, 28 participants indicated having previously attended a consultation, 13 participants indicated they had not attended a consultation, and 3 participants did not provide a response.

4.3. Quantitative analysis

4.3.1. Construct validity

The construct validity of each cluster was tested using Cronbach’s alpha. This test would determine whether the four individual dimensions of a cluster were an accurate measure of the same general construct. For example, the four individual dimensions of the understanding cluster were analysed to measure the construct validity of the understanding cluster. A summary of these results is presented in Table 2.

Construct validity was met for the collaborative, voluntary and understanding clusters. Construct validity was not met for the capacity cluster, although the alpha value is approaching the psychological standard of .7. In addition, construct validity was not met for the equal cluster. The construct validity of the equal cluster may have been affected by the excluded cases in this cluster, as data were missing from a participant on two of the dimensions of the equal cluster.

Table 2: Construct validity analysis

Cluster	Cronbach’s Alpha	N of items	Valid Cases	Excluded Cases
Collaborative	.805*	4	44	0
Voluntary	.717*	4	44	0
Understanding	.703*	4	44	0
Capacity	.636**	4	44	0
Equal	.574**	4	42	2

*alpha reliability coefficient > .7; **alpha reliability coefficient < .7

4.3.2. Most important dimension

Although 44 participants completed the questionnaire, some participants did not answer the question asking them to identify the most important dimension from the questionnaire. Five did not complete this part of the questionnaire, 3 identified multiple dimensions, and 1 did not identify a dimension from the questionnaire. Of the 35 participants who identified one dimension, 20 participants identified the most important dimension as: I would want to feel like the educational psychologist, the school and I are a team (marked as collaborative3 in Table 1; the third dimension of the collaborative cluster).

Graph 1 illustrates that this dimension was identified as being the most important dimension by both groups of participants, i.e., those who had previously attended a consultation (n=23) and those who had not (n=12). The dimension labels on the graph indicate which cluster the dimension is part of, as shown in Table 1.

Graph 1: Most frequently chosen dimensions as being of most importance

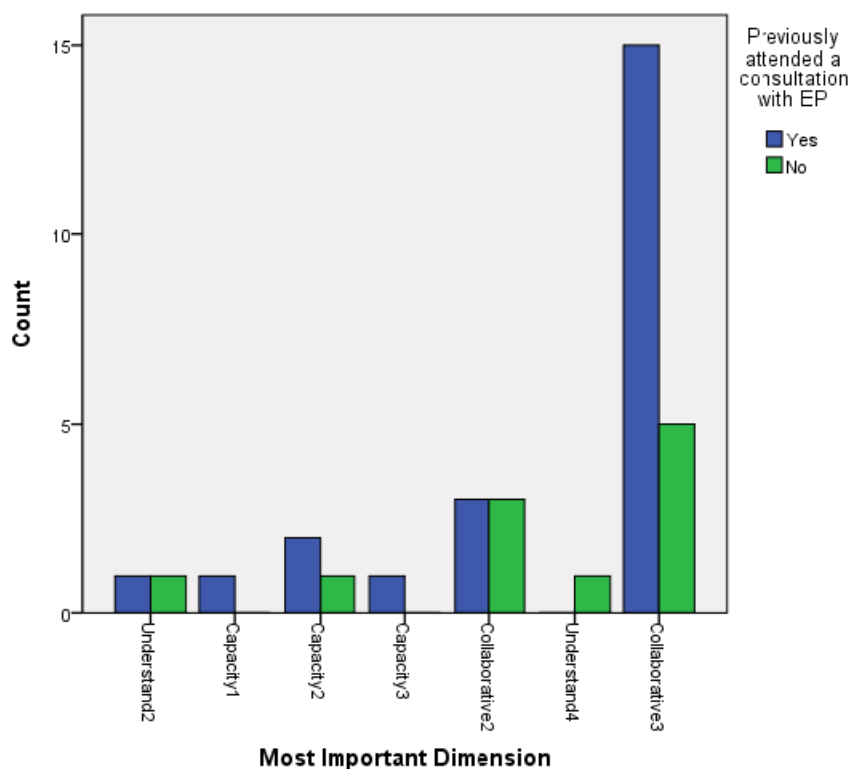


Table 3 illustrates the percentage of participants who identified particular dimensions as being the most important in relation to consultation. This table further highlights the perceived importance of the collaborative cluster, from the perspective of the participants, as the cumulative percentage of participants who rated either the dimension “it would be important for the educational psychologist and I to work together to help my child” (collaborative2) or “I would want to feel like the educational psychologist, the school and I are a team” (collaborative3) as being the most important dimension of consultation accounts for 74.2% of participant responses.

No participant rated any of the equal cluster dimensions or voluntary cluster dimensions as one of the most important dimensions of consultation.

Table 3: Percentage of participants who rated particular dimensions as being most important

		No of participants (n=)	Percent	Valid Percent	Cumulative Percent
Valid	Understand2	2	4.5	5.7	5.7
	Capacity1	1	2.3	2.9	8.6
	Collaborative1	1	2.3	2.9	11.4
	Capacity2	3	6.8	8.6	20.0
	Capacity3	1	2.3	2.9	22.9
	Collaborative2	6	13.6	17.1	40.0
	Understand4	1	2.3	2.9	42.9
	Collaborative3	20	45.5	57.1	100.0
	Total	35	79.5	100.0	
Missing	No Response	5	11.4		
	Multiple	3	6.8		
	Own Statement	1	2.3		
	Total	9	20.5		
Total		44	100.0		

4.3.3. Difference between having attended/not attended a consultation

An independent samples t-test was conducted to determine whether there was a difference in responses based on parents having previously attended (n=28), or not attended (n=13) a consultation. The results indicate that there was a significant difference in relation to the understanding cluster (Table 4).

Table 4: Summary of significant difference on the understanding cluster

		Levene's Test for Equality of Variances		t-test for Equality of Means		
		F	Sig.	t	df	Sig. (2-tailed)
Understanding	Equal variances assumed	4.172	.048	2.173	39	.036
	Equal variances not assumed			2.828	38.889	.007*

* $p < .01$

Further analysis shows that that parents who previously attended a consultation had a higher mean response on the understanding cluster, than parents who had not (Table 5).

Table 5: Difference between parents who had previously attended a consultation and who had not

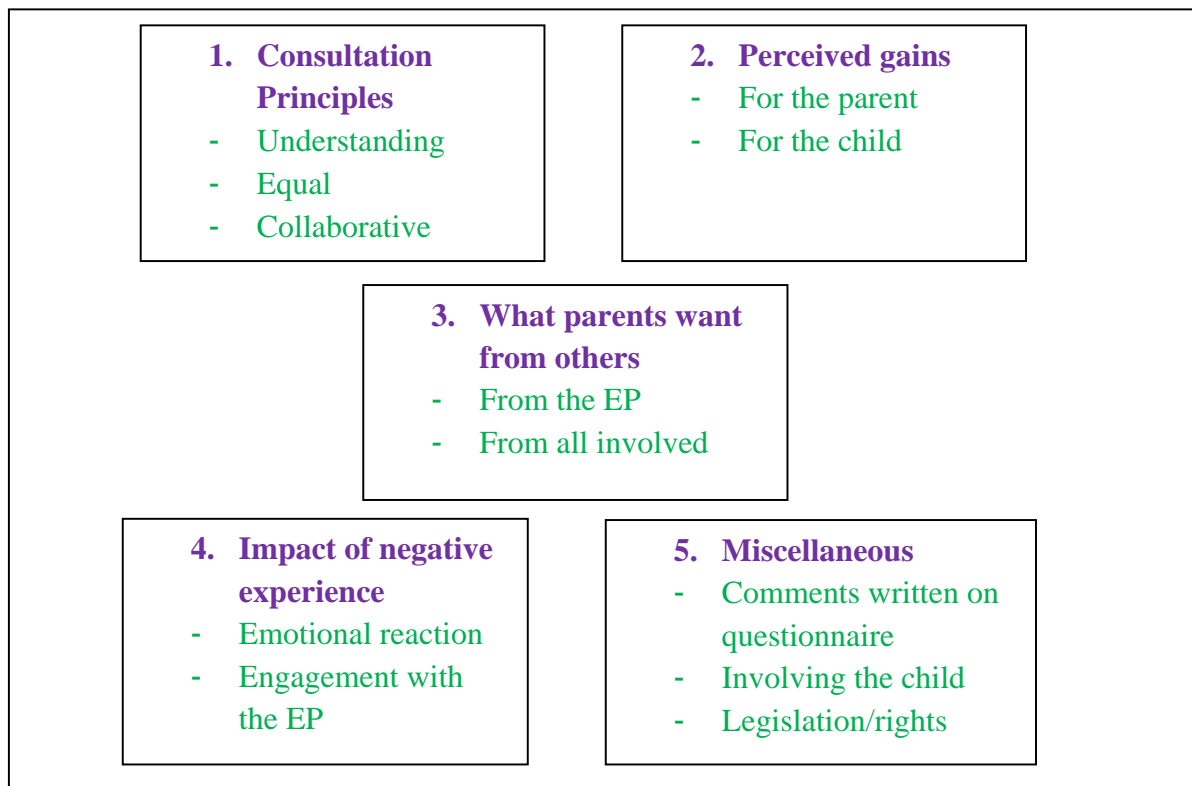
	Previously attended a consultation with EP	N	Mean	Std. Deviation	Std. Error
					Mean
Understanding	Yes	28	9.96	4.940	.934
	No	13	6.85	2.115	.587

This suggests that parents who had previously attended a consultation did not agree with the four understanding cluster dimensions as strongly as parents who had not previously attended a consultation. This finding will be considered further in the discussion section.

4.4. Quantitative analysis

The final thematic map (Figure 3) was produced using the framework outlined by Braun and Clarke (2006) with additional elements from alternative models of thematic analysis (Buetow, 2010; Fereday & Muir-Cochrane, 2006).

Figure 3: Final Thematic Map



There are five broad themes which contain individual subthemes. Each subtheme is expanded with data to demonstrate how the subtheme relates to the data set and the research questions.

4.5. Themes relating to the research questions

This section will now outline how the data analysis relates to the research questions.

4.5.1. Research question one: What are parents' attitudes towards consultation as a model of service delivery?

Parents identified that consultation was a way for them to learn more about their child's needs and find out about strategies which they could implement at home. In addition, parents perceived consultation to be beneficial for the child. This is represented by the theme *perceived gains* (theme two). Feedback showed that parents made the distinction between what they could gain from the consultation for themselves and how the consultation could benefit the child.

- For the parent (theme two, subtheme one): it was identified that parents could learn more about their child's needs and potential strategies to implement at home through consultation. This is summarised below.
 1. Increased understanding of the child's needs: parents wanted to understand more about their child's needs and consider what they could do to support their child as "it would be a great help if EPs etc could help to find other ways for helping the child and parents carers etc to share ideas of how they cope and understand the child's needs" (participant twenty five).
 2. Home strategies: parents expressed wanting to find out more about what they could do at home to support their child because "as a parent to be included means you can reinforce any recommendations at home and help your child more" (participant thirteen). When parents did not feel that the consultation helped them to implement home strategies, this was perceived as a negative outcome with one parent stating "I only got sent the report and was not advised to do/try anything at home and I did state in "my comments" that I would do whatever I could to assist" (participant nine).

- For the child (theme two, subtheme two): parents viewed consultation as a way to support the child “because by working together the chances of improving the outcome for my child are increased” (participant forty one). Consultation appeared to be a means “to ensure my child has the best opportunity to improve” (participant thirty six).

Consultation appeared to be perceived as a way for EPs to share their specialist knowledge and professional opinion. Additional feedback highlighted that parents wanted to see commitment from all those involved in the consultation and for there to be a mechanism to monitor progress over time. This is represented by the theme *what parents want from others* (theme three). Theme three relates to parents identifying what they want the EP to do during the consultation, as well as what they expect from others attending the consultation.

- From the EP (theme three, subtheme one):
 1. Specialist knowledge: parents agreed that EPs should use the consultation to share their specialist knowledge about the child’s needs as “the EP can provide evidence based specialist advice as a professional” (participant twenty nine). This was seen as a positive aspect of consultation with one parent stating “we need some professional input to help work out why behaviours happen and how to cope with them” (participant thirty seven).
- From all those involved (theme three, subtheme two): in addition to identifying what parents wanted from EPs during a consultation, feedback also highlighted parents’ expectations from all those attending the consultation. This included the following points.
 1. Joint approach to support each other: this relates to feedback which suggested that parents wanted those involved to work together as “one would hope that a

mutually supportive approach would best support the child” (participant one). Having professionals in the consultation who aim “to walk with us not over us” (participant twelve) appeared to provide emotional support, with one parent stating “it is all too easy for a parent to feel overwhelmed by guilt and blame. The sense of working as a team provides great relief” (participant twenty three).

2. Commitment over time: this point relates to feedback which showed that parents wanted those involved to commit to the process over time and for there to be “follow up assessments or reviews of my child’s progress...regular contact with the school” (participant twenty nine) and “follow up and follow through of actions promised” (participant forty one).

4.5.2. Research question two: What do parents’ consider to be the most important dimension of consultation?

Twenty participants specifically identified the most important dimension as: I would want to feel like the educational psychologist, the school and I are a team. This is part of the collaboration cluster.

In addition to this specific identification of the most important dimension of consultation, the thematic analysis highlighted that parents also valued the consultation principles of equality, collaboration and understanding the process of consultation. This is represented by the theme *consultation principles* (theme one). This theme contains three subthemes; understanding, equal and collaborative.

- Understanding (theme one, subtheme one): this subtheme relates to parents “wanting someone to explain about the meeting beforehand as it can be very worrying to a

parent if they're not sure about what is going to happen and what exactly is going to be discussed" (participant twenty eight), in addition to feedback relating to there being a "clear understanding of roles and responsibilities" (participant forty one).

- Equal (theme one, subtheme two): feedback from parents highlighted the importance of feeling their contribution was equal as participants stated that they wanted the EP to "take my views seriously" (participant three) and "ensure that all parties feel they are an equal part of the team" (participant seven). If equality was not recognised, this could impact on the parent's level of involvement, for example, one parent stated that "I would feel that my input was not really of importance and I wouldn't feel fully involved" (participant thirteen).
- Collaborative (theme one, subtheme three): the feedback suggested that parents valued working as part of a team as "by working as a team I really believe more can be gained" (participant thirteen). Feedback related to the EP, parents and school working together as "it is when different groups pull in different directions that you really start to despair as a parent. It is so important that you feel there is a shared vision for how best to move forward" (participant thirty nine).

4.5.3. Research question three: What can an EP do to implement this dimension in a consultation?

Parents' feedback pointed to a number of skills perceived to be important for EPs to employ, such as communication, active listening and demonstrating that they have a full understanding of the child's needs (theme three, subtheme one).

1. Communication: this point relates to the type of information parents wanted to be communicated as well as how parents wanted this information to be communicated. This relates to feedback from parents which stated that they

wanted EPs to “clearly explain and discuss the implications of the assessment” (participant twenty seven), “explain fully the outcome of the assessment done as the letters you receive afterwards are very confusing with all the scales and scores” (participant twenty eight) and “engage parents in discussions and share assessments/goals – not just in written correspondence” (participant thirty three).

2. Demonstrate an understanding the child: parents wanted EPs to show that they knew about the child’s background as well as the current situations. This is related to feedback from parents which stated that EPs should “have a full detailed background report of my child’s needs” (participant sixteen) and “needs to have worked with the child, spoken to teaching staff and parent(s). This would ensure that a clear understanding of the child’s needs...were understood” (participant twenty six).
3. Interpersonal skills: parents identified specific interpersonal skills they wanted EPs to employ, such as “show a caring attitude towards trying to be of help” (participant sixteen), “listen actively” (participant twenty two) and “demonstrating respect for me as a parent” (participant forty one).

The theme *impact of negative experience* (theme four) emerged as relating to how a parent would feel if his/her needs were not met during the consultation. This theme is an extension of research question three, as it demonstrates the impact of the EP not implementing the important dimensions of consultation, from the perspective of the parent.

- Emotional reaction (theme four, subtheme one): the emotional impact of a negative consultation experience is exemplified by the following quotes: “despondent!” (participant seven); “very unsatisfied” (participant nine); “extremely disappointed”

(participant eighteen); “frustrated” (participant twenty two) and (participant forty one); and “hopeless” (participant forty two).

- Engagement with the EP (theme four, subtheme two): this subtheme relates to the impact of having a negative consultation experience on further involvement with EPs. One parent stated that “I would request an alternative psychologist to deal with us” (participant twenty one) while another felt that “it would not be worth attending” (participant thirty three). Feedback also related to how the parent would feel in future consultations, for example one parent stated that “I would feel less confident to attend the meetings” (participant six) while another commented that s/he would feel “maybe uncomfortable as if my opinion wasn’t valued or important” (participant twenty three).

4.5.4. Additional themes

The theme *miscellaneous* (theme five) was included as a result of the saliency analysis (Buetow, 2010) as the researcher felt these data were important, even though they were non-recurrent. These data also highlighted potential flaws in the questionnaire, as the researcher was made aware of some confusing wording of individual cluster dimensions.

- Comments written on questionnaire (theme five, subtheme one):
 1. Participant twelve commented that the title “parent questionnaire” should be changed to include “guardian/kindred carer”.
 2. Participant fourteen commented that dimension K (I would like the educational psychologist to tell me how to change things) and dimension O (the educational psychologist is there to help me make decisions about how to help my child) should be reworded as “advise me”.

3. Participant nineteen also commented that dimension K should be reworded to “help me” instead of “tell me”.
4. Participant forty one commented that they rated dimension K as 7 (strongly disagree) because of the wording “tell me”.
5. Participant forty three did not rate dimension N (I would feel I could speak openly without judgement) and commented that it was unclear whether this meant “being judged? or keeping an open mind myself” (participant forty three).
 - Involving the child (theme five, subtheme two):
 1. “Parents...should have the opportunity to write their comments alongside; so also should the child in some format” (participant thirty three).
 - Legislation/rights (theme five, subtheme three):
 1. “I would meet whenever and whomsoever, to ensure my child had all the support due, under their human rights, and a right to education is one of them” (participant twelve).
 2. “It is important for parents to be engaged in supporting their child for the benefit of both child and parents and because parents have a legal duty to look after their child. This would lead to a more productive outcome, whilst recognising that the child has the right to a confidential meeting” (participant thirty three).

4.6. Chapter summary

This chapter has outlined the main findings of the current study. This has included an explanation of the construct validity of the questionnaire, as well as a description of the key findings from the statistical analysis. The final thematic map was presented which identified 5 main themes (including a miscellaneous theme). Each theme was then related to the research questions.

5. Discussion

5.1. Chapter overview

This chapter will expand on the findings from the previous section. This will begin with a discussion of the quantitative analysis, in particular the impact of the tests of construct validity of the dimensions of consultation and the difference in responses between participants who had previously attended a consultation and participants who had not.

The chapter will discuss the dimension of consultation which was most frequently rated as being the most important aspect of consultation. The chapter will outline the five themes from the thematic analysis and discuss how each theme relates to the research questions.

There will be a discussion of how the findings relate to the research presented in the literature review. The chapter will conclude by outlining the limitations of the current study and suggesting how alternative research methods could have reduced or avoided these limitations occurring.

5.2. Discussion of the findings

5.2.1. Quantitative analysis

Construct validity was established for the clusters understanding, collaborative and voluntary. Construct validity for the capacity cluster was not met, although the alpha value was approaching the .07 standard ($\alpha = .636$). A number of participants reported that the wording for one of the dimensions of the capacity cluster (dimension K - I would like the educational psychologist to tell me how to change things) should have been reworded to include the phrase "advise me". One participant commented that telling a parent to act in a particular way

would make them feel defensive, whereas advising a parent about strategies would facilitate engagement.

Participants may have rated this dimension as “strongly disagree” as they did not appreciate the connotation of being instructed to do something. If the dimension had been worded as “advise me” participants may have rated this dimension differently. The confusing wording of this dimension may have impacted on how participants rated this dimension, resulting in the overall construct validity of the cluster being diminished.

Construct validity was not established for the equal cluster ($\alpha = .574$). This means that some of the dimensions on this cluster do not capture the essence of equality. This may have been due to dimensions of this cluster having incomplete responses from participants or the researcher not defining the dimensions of this cluster appropriately.

The results of the statistical analysis (independent t-test) indicated a significant difference in the mean scores of parents who had previously attended a consultation, when compared with parents who had not, in relation to the understanding cluster. Parents who had previously attended a consultation had a higher mean score than parents who had not attended a consultation. This suggests that parents who had previously attended a consultation did not rate the importance of the four understanding cluster dimensions as highly as parents who had not previously attended a consultation. Parent responses, in the form of the open-ended questions, did not indicate why this difference had occurred.

This was the only cluster which showed a significant difference in mean scores, in relation to parents who had/had not previously attended a consultation, suggesting that participants rated

the remaining four clusters similarly. This suggests that there was no significant difference arising from having previously attended a consultation. This may be due to the fact that as parents were rating the principles of consultation, having attended a consultation previously did not have an impact on parents' responses. It may be evidence that having attended a consultation, or not having attended a consultation, does not alter a parent's perception of the principles of consultation.

The results of the quantitative analysis need to be interpreted with caution. The construct validity of some aspects of the questionnaire was not established, as the alpha level for the capacity cluster and equal cluster was below the recommended .7 level (Field, 2009). However, as alpha was met for the understanding, voluntary and collaborative clusters, the results of the t-test could still be interpreted with confidence for this aspect of the questionnaire which was shown to be valid.

The dimension identified by parents to be most important was "I would want to feel like the educational psychologist, the school and I are part of a team". This was rated by 20 out of 35 participants as being the most important dimension of consultation. This was the dimension chosen most frequently regardless of whether the parent had previously attended a consultation or not. The second most frequently rated dimension was "it would be important for the educational psychologist and I to work together to help my child". Each of these dimensions are part of the collaboration cluster, thus, collaboration represents the most important aspect of consultation for parents in the current study.

No parent chose any of the dimensions relating to the equal cluster or the voluntary cluster as being the most important aspect of consultation. This suggests that these clusters were not as

relevant to parents in the current study in relation to identifying one key aspect of consultation.

5.2.2. Qualitative analysis

5.2.2.1. Theme one: consultation principles

Responses indicated that the principles of consultation were important to parents in the current study. The principles of having an understanding of the consultation process, feeling like an equal and valued member of the process, and working as part of a team emerged as important aspects of consultation for parents. This offers support that these principles of consultation, which have been defined and implemented by researchers and EPs (Clarke & Jenner, 2006; Erchul & Martens, 2006; Larney, 2003), should continue to be adhered to by EPs, as they are valued by parents. This is an indication that consultation is a model of service delivery which meets the needs of parents, and that parents value the principles of consultation as when these principles are not met, parents experience a negative reaction. Responses suggested that the EP can use skills to ensure these principles are adhered to, for example providing information to parents before the consultation takes place.

5.2.2.2. Theme two: perceived gains

Parents identified that they wanted to benefit from engaging in the consultation process, in terms of learning and understanding more about their child's needs and viewed consultation as a way to enhance their understanding of their child and gain a better insight into their child's needs. In addition, parents reported wanting to be able to implement strategies at home which could build on the strategies being used in school. This emphasises that parents wanted to work alongside other professionals in order to achieve a consistent approach to supporting their child. This suggests that parents would attend the consultation with the

motivation to be engaged in the process and take something from it; they would want their participation to be meaningful.

Parents were clear that parents and professionals should be working together to benefit the child. When this need was not met, parents reported feeling frustrated, disappointed and let down by the system. In the current study, parents were motivated to find ways of improving things for their child. This is indicated by the emergence of this theme, which shows that parents viewed consultation as providing gains for parents while also enabling professionals and parents to work together with the aim of meeting the child's needs. The EP can contribute to this by recognising that the parent wants to gain a better understanding of how to support his/her child, building this discussion into the consultation and ensuring that this need is met for parents.

5.2.2.3. Theme three: what parents want from others

There was the recognition that the EP could share his/her specialist knowledge, or use of psychometric tests, to develop a better understanding of the child's needs. This was expressed positively by parents. There was no reference to parents not wanting to engage with EPs or not seeing the value of working with the EP; the EPs' input was valued. In addition, parents wanted information from the EP to be communicated to them in a clear and jargon-free manner. Parents reported a preference for having a discussion with the EP, rather than receiving a written report after the assessment had occurred, so that there was the opportunity for parents to ask questions or comment on the assessment or work carried out by the EP. This illustrates that parents wanted to be actively involved in the process and not rely solely on written information from the EP.

Parents felt it was important that the EP had a complete understanding of the child's background and current situation, as this would demonstrate that the EP was committed to meeting the needs of the child. Interpersonal skills such as good listening and demonstrating respect were highlighted as being important qualities in the EP. It was appreciated when the EP demonstrated an open, friendly approach, while also presenting realistic and honest feedback. It is clear that it is not only what the EP communicates which is important to parents, but also how this information is communicated.

Parents commented on what they wanted to see from everyone involved in the consultation process. Commitment was valued by parents, which was said to be demonstrated by continued and ongoing support and reviews of the child's progress. Parents reported that if everyone involved was committed to the consultation process, there was an increased likelihood that the situation would be changed or improved. This suggests that parents recognised that each individual involved in the consultation had a role to play in ensuring the consultation was effective. This may explain why it was important to parents that actions were agreed by everyone and then followed through. Parents included themselves in the discussion of agreeing and implementing actions, indicating that they recognised that they had a role to play in the process. In addition, parents valued the emotional support that being part of a team provided, with one parent expressing that it provided a sense of relief.

Consultation can be a mechanism to provide emotional support, share EP specialist knowledge about SEN or other issues with parents, and plan strategies to manage the situation.

5.2.2.4. Theme four: impact of negative experience

Not surprisingly, parents feeling that the consultation had not met their needs, or their child's needs, led to a variety of negative emotions. These emotions were reported to potentially lead to feelings of mistrust towards the EP, disengagement from future consultations and feeling undervalued. Some parents reported that they would request a change of EP if they felt the consultation was not meeting their needs. This highlights that the behaviour of the EP can have a major impact on parents' engagement in the consultation process. It is essential that EPs understand what parents want from a consultation and reflect on how these needs can be met, in order to sustain parental engagement in consultation.

5.2.2.5. Theme five: miscellaneous

Data in this theme relate to individual comments written on the questionnaire. As discussed above, these comments related to the confusing phrasing of some of the individual dimensions of consultation in the questionnaire. This was useful feedback from participants as it highlighted ambiguous language in the questionnaire and prompted the researcher to reflect on the impact this may have had on participants' responses. It also allowed the researcher to consider this as a possible explanation for some of the findings, in particular, the low construct validity of two of the consultation clusters.

Data in this theme made reference to the legal duty of parents to meet the educational needs of the child and a child's legal entitlement to education. While this response was not recurrent, the researcher felt it was important to include, given the wealth of literature and legislation relating to the rights of parents to be involved in decision-making about their child (Department for Education and Skills, 2004; Wolfendale, 1992). It is surprising however that only one parent made a tentative reference to this.

5.3. Discussion of findings in relation to previous research

Collaboration between EPs, school and parents was highlighted as the most important aspect of consultation. This dimension of consultation was chosen more frequently than the dimension describing a partnership solely between EPs and parents. Parents valued the interaction between EPs, schools and themselves over a dual relationship with EPs. Parents' preference for the triadic relationship may demonstrate their recognition that there needs to be an understanding of a range of factors affecting the child (Frederickson & Cline, 2002), an understanding of the different systems the child is operating in (Campbell et al., 1994), with the EP acting as the link between home and school (Department for Education and Employment, 2000). Parents in the current study may be communicating that they see the benefit of working with a range of professionals in order to meet the needs of their child, rather than working individually with one agency.

Aspects of the five thematic analysis themes and subthemes are present in the literature. Consultation principles which are present in various models of consultation (Clarke & Jenner, 2006; Larney, 2003; Wagner, 2000) were identified by parents in the current study as being important (theme one). It is likely that the structure of the questionnaire, which asked parents to comment on a number of dimensions related to five key principles of consultation, resulted in consultation principles emerging as a key theme. Although the researcher did not use predefined codes to create this theme, the purpose of the current study was to explore the principles of consultation. The emergence of this theme, in hindsight, should have been anticipated.

Data supporting this theme demonstrated why this theme was relevant to parents in the current study. This is welcomed as the purpose of the current study was to explore parents'

perceptions of the principles of consultation; obtaining feedback about specific aspects of consultation will achieve this purpose.

Parents valued understanding the process and purpose of the consultation prior to attending the consultation. This is a key principle of consultation models (Dickinson, 2000; Erchul & Martens, 2006; Larney, 2003; Wagner, 2000). Dickinson (2000) argued that by having a clear outline of the roles and responsibilities of all those involved in the consultation process, there is a greater understanding of the process of consultation. Wagner (2000) echoed this by arguing that individuals involved in consultation need to have an understanding of the purpose of the consultation, as well as the role of each person involved in the process.

Understanding is not restricted to understanding the process of consultation, but should be expanded to include an explanation of the role of the EP. Defining the role of the EP has been highlighted as an issue which is being addressed through EPSs working alongside Parent Partnership Services in order to communicate what the function of the EP is and how the EP contributes to the wider SEN systems and procedures (Department for Education and Employment, 2000).

The principle of collaboration emerged as the most important aspect of consultation. It appears that parents wanted to have a collaborative relationship with the EP but recognised that the EP may have knowledge which helps the parent to develop strategies. This could be related to the collaborative-directive continuum (Gutkin, 1999) as parents valued working with the EP but realised that at times the EP will guide part of the consultation. No parent made reference to this being a negative aspect of consultation in the current study, offering support to the claim that being directive does not damage the consultation process.

While partnership did not emerge as a theme, elements of partnership were valued by parents in the current study. Parents reported wanting to feel that their opinion was valued and that their understanding of the child's needs would provide the EP with a complete picture of the child. This echoes the argument in the Warnock Report (1978) that a professional's understanding of the needs of the child is only part of the picture, and so professionals must liaise with parents in order to form a complete understanding of the child. This is in line with the principles of partnership which outline that the equivalent expertise of parents should be recognised (Wolfendale, 1992). The notion of parental expertise appears in other research, where parents reported wanting to feel their opinion was purposefully being sought (Roffey, 2004).

Hartas (2008) outlined that information from parents should be viewed as equivalent, rather than equal, which emphasises that each individual brings different but equally relevant information to the consultation process. This is similar to the equality principle of consultation (Erchul & Martens, 2006; Larney, 2003) where the information given by the parent or the professional should be viewed as equally valid and relevant.

Parental gains (theme two) were defined as parents gaining an insight into the child's needs and development. This relates to the aim of several models of consultation including the mental health model (Erchul & Martens, 2006), behavioural consultation (Holcomb-McCoy & Bryan, 2010) and the self organised learning model of consultation (Clarke & Jenner, 2006). Parents put their views forward in a way that suggested they valued a joined-up approach to consultation. The parents in this study were not passive recipients of information (O'Connor, 2008) but rather, were actively seeking to work in conjunction with the school and the EP in order to learn more about their child's needs.

Parents reported wanting to see their child benefit from the consultation. This may relate to evidence that parents have an emotional investment in their child and place a higher importance on issues related to the child's well being over their academic achievement (Shumow, 1997). If the consultation focuses on the impact of the SEN on the child's academic progress, this could affect the parent's perception of the consultation. This also highlights that parents want to consider a wider range of factors, in relation to their child, rather than solely focusing on academic progress.

Parents in the current study commented on what they wanted to see from others involved in the consultation (theme three). Parents recognised the benefit of the EP sharing his/her specialist knowledge about their child, supporting the argument that consultation can be a way for EPs to demonstrate the range of knowledge and skills they have (Dennis, 2004; Monsen et al., 1998; Osborne & Alfano, 2011).

Parents recognised that the EP does not have a full understanding of the child if s/he does not take account of the parent's views. Parents acknowledged their equivalent expertise (Wolfendale, 1992) and wanted to receive expert advice from the EP while at the same time contribute meaningfully to the discussion. This supports the systemic nature of consultation (Christie et al., 2000; Gameson et al., 2003; Wagner, 2000) as parents recognised that the child is part of a school system and home system, and factors at both these levels need to be considered for there to be a complete understanding of the child's needs.

Parents reported interpersonal skills which could be demonstrated by the EP, such as showing a caring attitude and engaging in active listening. This is consistent with research which demonstrates that parents value active listening, specifically when the EP asks parents for

their opinions about the child's needs as opposed to a summary of the child's needs (Roffey, 2004).

An open dialogue between parents and school staff has been highlighted as a facilitating factor when developing home-school partnerships (Hartas, 2008). So, the EP can develop a more effective partnership in the consultation by taking account of the parent's views and maintaining an open dialogue with parents.

Models of consultation which do not take account of interpersonal factors, for example process consultation (Leadbetter, 2006), may be underestimating the potential impact of these factors. The importance of these interpersonal factors is recognised in other models of consultation, such as the West and Idol knowledge base model of consultation (West & Idol, 1987, as cited in Miller, 2003), which highlighted the importance of skills including listening and empathising. This appears to be an important aspect of consultation which should not be overlooked.

Communication which is clear and easy to understand was favoured by parents in the current study, as well as in previous research (Hart, 2011; Hartas, 2008; O'Connor et al., 2005). In addition, parents wanted the report to be accurate and truly reflect their child's needs, as with Holcomb-McCoy and Bryan (2010).

The concept of emotional support was identified by parents. This relates to previous research which identified apportioning blame and negative discourses as factors which can negatively affect partnership between parents and professionals (Roffey, 2004). Conversely, teamwork

can be a way to enable parents to feel supported and able to “share the load” (Roffey, 2004, p. 106).

This relates to the argument that shared responsibility is a key feature of consultation (Christie et al., 2000). The concept of shared responsibility is also a key feature of parent-professional partnerships (Wolfendale, 1992). It may be that the sense of sharing responsibility reduces parents’ feelings of the issue being attributed to home factors (Roffey, 2004).

A commitment from others over time is a theme which was perceived to be important in the current study and previous research (Osborne & Alfano, 2011; Roffey, 2004). Commitment from school staff and the amount of follow up support has been shown to influence teacher’s implementation of consultation strategies (Farouk, 1999). This is a key factor to consider when devising consultation strategies with parents, as the strategies may be more likely to be implemented if the parent perceives the EP to be committed to the case development.

Legislation stipulates that parents should have “access to information, advice and support during assessment and any related processes about special educational provision” (Department for Education and Skills, 2004, p. 16). This suggests that the EP must provide ongoing support to parents, particularly during the statutory process, but also in relation to decision-making about educational provision. This educational provision could be interpreted to mean the strategies developed during a consultation. Further legislation (Department for Education and Skills, 2004) has outlined that professionals have a responsibility to support parents in supporting their children. This should prompt the EP to consider the amount of ongoing support that is currently available to parents.

This is similar to the concept of accountability in consultation (Dickinson, 2000; Wolfendale, 1992). Although accountability was not a subtheme of the current study, features of accountability are present in parents' responses. It appears that parents in the current study valued a system where there is monitoring of the goals set, and follow up reviews as needed; they wanted to see that an action is followed through when it has been agreed. Whether accountability is built into the partnership has been argued to be an influencing factor on the development of effective partnerships (Pinkus, 2003). Therefore, accountability may be a principle of consultation which merits further investigation.

The importance of the consultant-consultee relationship has been highlighted, particularly in relation to trust (Larney, 2003), interpersonal skills of the EP (Farouk, 1999), and the parent's perception of the role of the EP as a gate-keeper of resources (Dennis, 2004). This was reflected in the parents' responses in the current study, as an EP not meeting the needs of a parent could lead to feelings of mistrust. In addition, the relationship appeared to be negatively affected by the EP not meeting the parent's need, to the extent that some parents reported they would request an alternative EP to take over the case.

Key legislation has outlined the rights for parents to be involved in decision-making about their child's education (Department for Education and Science, 1981; The Warnock Report, 1978). More recent legislation has outlined parents' rights in relation to the statutory assessment process (Department for Education and Skills, 2004). Professionals are charged with the responsibility of ensuring that parents understand these rights and are supported in implementing them (Department of Education and Science, 1998). As a result Parent Partnership Services have been established to provide impartial advice to parents regarding

their rights in decision-making, to provide support during an SEN and Disability Tribunal and to empower parents in challenging LA policies (National Parent Partnership Network, 2010).

Given the amount of legislation and policy which outline parents' rights, it is surprising that so little reference was made to this in the parents' responses (see theme five: miscellaneous). This may be an indication that parents are unsure of their rights and how to exercise them, highlighting the responsibility of professionals to support parents in understanding and exercising their rights (Annan, 2005; Wolfendale, 1992).

5.4. Discussion of research questions

5.4.1. Research question one: What are parents' attitudes towards consultation as a model of service delivery?

Feedback from parents offered support to the continued use of consultation as a model of service delivery, as parents were positive about the potential for consultation to allow them to learn more about their child's needs, think of ways to support their child in the home context, while also highlighting the resulting benefit for the child.

In addition, the feedback suggested that parents were keen to learn from the specialist knowledge of the EP, and recognised that it would be useful to have the EP share his/her professional opinion and insight.

Parents identified good practice in terms of how consultation could be more effective, including having accountability built into the consultation. This would involve setting agreed strategies, but also ensuring that these strategies were reviewed and monitored over time. In addition, parents placed a value on ongoing support and commitment from others over time.

This has implications for how EPs engage in consultation, particularly in relation to the amount of time available for regular consultation, follow up and review.

There was recognition of the benefit of establishing a joint approach which was said to help parents feel supported, rather than blamed.

5.4.2. Research question two: What do parents' consider to be the most important dimension of consultation?

The quantitative analysis indicated that the collaborative aspect of consultation was regarded as the most important dimension. This was also reflected in the thematic analysis as parents highlighted the value of working together, and the emotional support this could provide.

The thematic analysis also highlighted that parents valued the consultation principles of equality, collaboration and understanding the process of consultation (theme one). This offers support for the continued use of consultation as a model of service delivery, with additional implications for how EPs build partnerships with parents.

5.4.3. Research question three: What can an EP do to implement this dimension in a consultation?

Parents identified a number of interpersonal skills they wanted the EP to demonstrate, which focused on how the EP communicated with parents and also how the EP listened to parents. There were implications about how parents would feel or react to the EP not meeting their needs in a consultation, including a range of negative emotions as well as potential disengagement from further consultations.

5.5. Limitations of the research

The results of the current study are affected by the lack of construct validity of two of the consultation clusters. This may have been related to the confusing phrasing of some of the individual dimensions. To overcome this, the researcher could have employed an interview method, in addition to the questionnaire, so that participants could have clarified their understanding of these dimensions. While other EPs gave feedback about the wording of the questionnaire, it may have been helpful to obtain feedback from other professionals or parents to ensure that the wording was as clear as possible.

The small sample size meant that it was not possible to carry out a more sophisticated statistical analysis, such as a factor analysis. This may have helped correct the lack of construct validity. In addition, conducting a pilot study may have revealed the lack of construct validity at an earlier stage and provided the researcher with the opportunity to amend the questionnaire and improve its construct validity before sending it to all participants.

Additional information from parents may have proved useful, such as the number of consultations they had attended or who was present at the consultation. As the findings indicated that parents valued ongoing support, it may have been helpful to gain parents' views about the level of support they perceived consultation provides.

As no demographic information was collected, the current study is limited as it does not take account of: differences between parents in relation to ethnicity or the type of SEN their child has; parents' age, ethnicity, level of education; or whether the questionnaire was completed by a mother or father. The findings of this study cannot be generalised to the wider

population, as there is no way to determine whether the sample is representative of the general population.

Conducting interviews or a focus group may have provided additional data which would have expanded the thematic analysis. By using questionnaires, there was no opportunity to interact with participants and follow up on responses as they were given, as would have been possible in an interview or focus group. The discussion generated in a focus group may have provided richer data, such as why the collaborative dimension of consultation was rated as being the most important aspect of consultation. Using the interview or focus group data to complement the questionnaire data would have provided additional data and so have compensated for the low questionnaire response rate.

An interview or focus group method would have given the researcher the opportunity to explore the difference between groups in relation to the understanding cluster, by asking parents who had previously attended a consultation why they had rated the importance of this cluster less highly than parents who had not. By exploring these views further, a greater understanding of parents' perceptions of the principles of consultation would have been achieved.

5.6. Chapter summary

This chapter has discussed the main findings of the current study and outlined how each of the themes identified in the thematic analysis relate to previous research. This has intended to show that parental responses in the current study are comparable to findings in previous research. The implications of the findings on EP practice will be discussed in the following section.

6. Conclusion

6.1. Consultation theory in light of the findings

Consultation has been argued to originate from mental health consultation during the 1960's (Erchul & Martens, 2006). This model of service delivery has developed in response to the need for EPs to engage in indirect models of service delivery, in order to meet the needs of a wider range of children (Gutkin, 1999).

It seems that consultation will be a model of service delivery for EPs for the foreseeable future, due to its growing popularity and applicability to a wide range of EP practice (Farrell et al., 2006), whether it informs a whole service approach or is a set of principles that is applied to individual consultation meetings (Leadbetter, 2006). Consultation is not a specific model of service delivery and various models of consultation are present in the literature. These models are based on distinct theoretical assumptions, such as systems theory (Larney, 2003), behavioural psychology (Holcomb-McCoy & Bryan, 2010), and social construction theory (Burr, 1995; Wagner, 2000).

Underpinning these various models is a set of key principles that consistently appear in the different approaches to consultation. The current study explored five key principles of consultation and has gone a little way to showing that the principles of collaboration, equality and understanding are of particular relevance to parents in the current study. Parents' comments related to wanting to develop strategies to use at home while working as part of a team, feeling that their opinion was valued and wanting to understand the process of consultation.

The principle of collaboration was highlighted as being the most important aspect of consultation. However, parents in the current study highlighted that a benefit of joined-up working was the emotional support which this provided. This has not been identified as a key feature of the model of consultation outlined by Wagner (2000), which is the model most used by EPs in the UK (Department for Education and Employment, 2000).

An additional concept expressed by parents to be important in relation to consultation, was commitment over time, as this was said to demonstrate that the EP was genuinely working to support the child.

In light of the current study's findings, Wagner's (2000) model of consultation may need to be adapted in order to accommodate these concepts further. For example, there may need to be a clearer understanding of commitment within consultation, particularly in relation to monitoring whether actions have been implemented and the amount of follow up support available to parents. In addition, there may need to be increased recognition of the credibility of the EP, and how actions during consultation can increase or diminish the consultees' confidence in the EP.

Consultation has been offered as a model of problem-solving where the EP engages with parents or staff in order to develop a shared understanding of the situation, and implement strategies to manage the situation. Other models of problem-solving exist in the literature, such as the approach outlined by Monsen et al. (1998), the Interactive Factors Framework (Frederickson & Cline, 2002) and COMOIRA (Gameson et al., 2003).

Aspects of consultation are present within these models, for example, in the Monsen et al. (1998) problem-solving model, key steps include clarifying the role of the EP. This is comparable to the understanding principle present in Wagner's (2000) model of consultation. Frederickson and Cline (2002) discussed the importance of exploring environmental factors in relation to the child's need, which is similar to the principle of systemic thinking in Wagner's (2000) model, and process consultation (Leadbetter, 2006). Systemic thinking is also present in COMOIRA (Gameson et al., 2003).

While consultation may be seen as separate to these models of problem-solving, there is clearly overlap between the principles underlying consultation and other methods of problem-solving. Therefore, it may be necessary to draw on these models of problem-solving when engaging in consultation, a skill which allows the EP to address a wide range of SEN issues (Cameron, 2006). Consultation has been highlighted as a model of service delivery which allows the EP to engage in a wide variety of problem-solving (Farrell et al., 2006). It seems that exploring how consultation principles could be combined with other models of problem-solving may be a useful endeavour.

6.2. Suggestions for further research

While the current study has attempted to expand the research looking at consultation, there are a number of potential research questions which could further the understanding of this topic.

There was a difference on the understanding cluster between parents who had previously attended a consultation and parents who had not, with parents who had previously attended a consultation rating this cluster as less important than parents who had not. Further research

could explore the factors influencing this finding. This study found that parents valued receiving information about the consultation prior to it taking place. However, other factors may affect how parents' understanding of consultation is developed, such as previous experience of working with an EP. Future research could examine the type of information parents find helpful when engaging in the process of consultation, in order for EPs to understand parents' perceptions of this principle more fully.

As collaboration was highlighted as the most important dimension of consultation in the current study, it follows that further research in this area would be of benefit. There has already been discussion of the interaction between working collaboratively with an EP, while the EP is also directing the consultation, and the impact of this (Gutkin, 1999). Future research may wish to explore when EP directiveness becomes coercion, and what level of directiveness is optimal for consultation, from the perspective of parents.

As the findings indicated a lack of confidence in the EP if the EP did not meet the parent's need, future research could explore this finding further, for example, by investigating whether parents would be less likely to implement strategies devised during consultation with an EP who had not met their needs. It may be that there are further implications of not meeting a parent's need which future research could uncover.

Employing a joined-up approach involving the EP, school and parent was valued by parents in the current study. However conducting a consultation with parents and teachers simultaneously may prove to be a more complicated process; research into the dynamics of this triadic relationship and the process of conjoint behavioural consultation would prove useful as it may uncover potential skills the EP could employ to ensure that all parties feel

included and their opinion is valued. In addition, further research could compare the views of parents and teachers regarding the principles of consultation, to establish whether consultation is a generic model of service delivery, or whether it needs to be adapted depending on the service user. This paper has offered the suggestion that the concept of commitment may need to be more explicitly implemented into the process of consultation. Further research could establish whether this would increase the effectiveness of consultation.

6.3. Practical implications for educational psychology

The findings of the current study have some key implications for EP practice. In particular, there are implications for how EPs communicate with parents. The preference is for reports which are straight forward and uncomplicated, which would allow parents to have a better understanding of their child's needs and how the actions will help their child to progress. In addition, parents prefer having discussions with EPs about the assessments to receiving a written report.

Themes which did not emerge from the data, which appear in other research relate to practical issues, such as when meetings are held (Dobbins & Abbott, 2010; Hart, 2011), the type of invitation parents receive (Anderson & Minke, 2007), and confusion arising from the amount of professional opinions available to parents (O'Connor, 2008). While these may appear to be minor details, they are important for the EP to be aware of due to their impact on parents' willingness or ability to engage with EPs.

There are also implications for how EPs view the length of the consultation process. Parents expressed a preference for having a clear monitoring process, where goals are reviewed and progress is evaluated. It is not known how different EPs in the UK employ consultation, and

whether the time constraints allow for such ongoing work. The profession may have to consider whether a one off consultation is effective in developing the capacity of the consultee.

Parents expressed the belief that working with schools was the way to achieve a more holistic understanding of the child. In addition, parents reported that they wanted to develop strategies which would help their child at home. EPs should not consider school staff as the main role partners in consultation, but rather, need to recognise the importance of parents in the consultation process and begin to consider how to engage in consultation with parents and school staff simultaneously.

Consultation has been presented as one model of service delivery. The principles of consultation, as identified in the current study, have implications for how EPs endeavour to build effective partnerships with parents. This paper proposes that EPs should apply the principles of consultation to their general practice; that is to say EPs should ensure that the purpose of their involvement is clear, the parent feels his/her contribution is equally valued, involvement is voluntary, there is a collaborative approach and the parent is able to play an active role in the process.

The five principles of consultation identified in the current study should not be limited to consultation, but should prompt the EP to reflect on how s/he applies these principles to all interactions with parents. By achieving this, EPs are going some way to ensuring that effective partnerships with parents are established and the rights of parents to be empowered to make decisions about their child's education are not only known, but also exercised.

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Appendix A: Parents' information letter

School of Psychology

Tower Building

Park Place

Cardiff

CF10 3AT

Date

Dear Parent,

I am a Year Two trainee educational psychologist in the School of Psychology, Cardiff University. As part of my degree I am carrying out a study about parents' perceptions of consultation. This is a type of meeting educational psychologists have when working with parents and teachers. Consultation aims to help everyone involved come up with ways to help make things better for the child involved.

This research aims to get parents opinions about this way of working.

This will involve you completing the enclosed questionnaire. It will not be necessary to include any personal details, such as your name or address. Therefore, all responses are anonymous.

If you are happy to complete the questionnaire, please return it in the envelope provided.

This research will be supervised by my university supervisor, Simon Griffey, (contact details given below). Should you have any complaints about this research, at any stage, please contact the Psychology Ethics Committee Secretary at the address below. Please contact me if you have any questions or require any further information about this research.

Many Thanks,

Ruth Conroy

Trainee Educational Psychologist

Important Contact Details		
Ruth Conroy	Simon Griffey	Dominique Mortlock
Trainee Educational Psychologist	Research Director, DEdPsy Cardiff University	Psychology Ethics Committee Secretary
School of Psychology Tower Building Park Place Cardiff CF10 3AT 029 2087 4007	School of Psychology Tower Building Park Place Cardiff CF10 3AT 029 2087 5393	School of Psychology Tower Building Park Place Cardiff CF10 3AT 029 2087 4007
conroyr1@cardiff.ac.uk	Griffeys3@cardiff.ac.uk	psychethics@cf.ac.uk

I understand my participation in this research will involve completing a questionnaire.

I understand that all responses I give will be anonymous. I do not need to include any personal details, the name of the educational psychologist I was working with or the school my child attends.

I understand I am free to ask any questions, or discuss any concerns, at any time with the researcher, Ruth Conroy, the university supervisor, Simon Griffey and the Psychology Ethics Committee Secretary, Dominique Mortlock (contact details given above).

I understand participation in this research is entirely voluntary and I can omit any questions I do not want to answer.

I understand the information I give in the questionnaire will be held anonymously by the researcher. No other person will have access to this information.

I understand a report will be written when the research is completed. I understand any reference in this report to the information I have given in my questionnaire will be anonymous.

I understand that by returning this questionnaire I have given consent for my responses to be included in this project.

Appendix B: Parents' debrief sheet

Thank you for participating in this research.

This research is entitled “which aspects of consultation are important to parents”. Consultation is a way EPs work with parents and teachers. The aim of this research is to explore how parents feel about engaging in consultation. The feedback from this research is intended to help educational psychologists understand what parents want from meetings with the educational psychologist.

All questionnaire responses will be held anonymously by the researcher and no other person will have access to this information. The researcher has no record of any personal details or the name of the school or educational psychologist you have been involved with.

If you have any complaints or queries about this research, please contact the Psychology Ethics Committee Secretary at the below address.

Important Contact Details		
Ruth Conroy	Simon Griffey	Dominique Mortlock
Trainee Educational Psychologist	Research Director, DEdPsy Cardiff University	Psychology Ethics Committee Secretary
School of Psychology Tower Building Park Place Cardiff CF10 3AT 029 2087 4007 conroyr1@cardiff.ac.uk	School of Psychology Tower Building Park Place Cardiff CF10 3AT 029 2087 5393 Griffeys3@cardiff.ac.uk	School of Psychology Tower Building Park Place Cardiff CF10 3AT 029 2087 4007 psychethics@cf.ac.uk

Appendix C: Parents' questionnaire

The statements below outline some of the characteristics of consultation. Please think about how you would rate these statements if you were asked to attend a consultation meeting with an educational psychologist. Please read each statement and rate how much you agree or disagree with it. One means strongly agree and seven means strongly disagree. You can choose any number between one and seven to show your opinion and write the number in each individual box.

	1-----7 Strongly Agree → Strongly Disagree	
A.	I would want to know what would happen during the meeting before going	
B.	I would choose to attend the meeting	
C.	I wouldn't think I have anything important to say to the educational psychologist	
D.	I would like someone to contact me before the meeting to explain what the meeting will be about	
E.	I would want to talk about how I could make things better for my child in the meeting	
F.	I would want to feel like the educational psychologist and I are working together	
G.	I would feel I have as much to contribute to the meeting as the educational psychologist	
H.	I understand what an educational psychologist is	
I.	I would want the educational psychologist to help me think of different ways I can improve things for my child	
J.	I would feel forced to attend the meeting	
K.	I would like the educational psychologist to tell me how to change things	
L.	It would be important for the educational psychologist and I to work together to help my child	
M.	I would want to know more about what a consultation meeting was	
N.	I would feel I could speak openly without judgement	
O.	The educational psychologist is there to help me make decisions about how to help my child	
P.	The educational psychologist should show s/he values my opinion	
Q.	I would want to feel like the educational psychologist, the school and I are a team	
R.	I would attend the meeting even if I didn't want to	
S.	I would like to work with the educational psychologist	
T.	I would be happy to attend the meeting	

Have you even been to a consultation with an educational psychologist?
(Please circle)

YES

NO

Now please answer the following questions.

Which statement do you think is most important and why?

What could the educational psychologist do to make you feel this statement was addressed?

How would you feel about future meetings, if you felt the educational psychologist did not take this statement into account?

Appendix D: Raw data – parents’ ratings of the consultation dimensions

Participant	Dimensions of consultation as labelled on questionnaire (rated 1-7, X indicates no response)																				Previous Consultation	Most Important Dimension
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T		
1	1	1	7	1	1	1	2	2	1	7	3	1	2	2	3	1	1	1	1	7	No	L
2	1	1	7	1	1	1	1	3	1	5	3	1	1	3	3	1	1	1	1	3	No	D
3	1	1	5	1	1	1	1	5	5	5	3	1	1	1	1	1	1	1	1	1	No	Q
4	1	1	7	3	1	1	2	1	2	7	5	1	3	2	4	3	1	1	1	1	No	Q
5	1	4	1	1	1	1	2	4	4	2	1	1	1	5	4	1	1	4	4	4	No	M
6	1	6	4	1	4	2	2	4	2	6	4	2	1	2	2	1	2	6	2	2	No	A
7	2	1	7	1	1	1	3	3	1	6	2	1	3	2	1	1	1	2	1	2	No	Q
8	1	1	7	1	1	1	1	3	1	7	1	1	1	1	1	1	1	7	1	1	No	L
9	1	1	5	1	1	1	5	1	1	7	1	1	1	1	7	7	1	1	1	1	No	E, K, L, Q
10	1	1	7	1	1	1	1	3	1	3	3	1	1	1	4	1	1	1	1	1	No	I
11	2	1	7	2	1	1	1	1	1	7	1	1	1	3	1	1	1	1	1	1	No	L
12	1	1	7	1	1	1	1	1	1	7	1	1	1	3	3	1	1	1	1	1	No	Q
13	4	1	7	4	1	1	2	1	1	7	2	1	3	1	3	3	1	3	1	1	No	Q
14	7	1	6	1	1	1	1	3	1	2	7	1	1	1	7	1	1	1	3	1	Yes	K and O
15	1	1	5	1	1	1	4	2	2	6	4	1	3	6	3	4	2	1	2	1	Yes	Q
16	2	1	7	2	2	1	2	4	1	3	5	1	1	1	1	1	1	1	1	1	Yes	Q

17	2	1	7	1	1	1	5	1	1	7	4	1	1	3	4	1	1	1	1	1	Yes	Q
18	2	1	7	2	1	1	2	3	1	7	2	1	2	2	2	1	1	2	2	2	Yes	L
19	1	1	7	1	1	1	1	3	1	7	2	1	1	1	1	1	1	2	1	1	Yes	I
20	1	1	7	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Yes	Q
21	1	1	7	1	1	1	1	1	1	7	1	1	3	1	2	2	1	1	1	1	Yes	Q
22	3	1	7	2	1	1	1	1	1	7	3	1	4	2	1	2	1	1	1	1	Yes	Q
23	5	1	7	4	1	1	1	1	1	7	3	1	5	1	1	1	1	1	1	1	Yes	Q
24	3	1	1	1	1	1	1	1	1	7	1	1	1	1	1	1	1	1	1	1	Yes	X
25	3	1	5	1	1	1	2	3	1	7	4	1	3	1	1	1	1	2	1	1	Yes	Own answer
26	1	1	6	2	1	1	2	2	1	7	5	1	5	2	1	1	1	1	1	1	Yes	I
27	1	1	7	4	1	1	1	1	1	7	7	1	6	1	6	2	1	1	3	1	Yes	E
28	7	7	5	7	7	7	X	6	7	1	7	7	7	6	6	7	7	7	7	7	Yes	A and D
29	3	1	7	3	1	1	3	2	1	6	1	1	5	1	1	1	1	1	1	1	Yes	L
30	2	1	2	4	2	2	5	2	6	6	3	3	4	3	6	3	1	2	2	1	Yes	X
31	2	1	7	2	1	1	1	2	1	6	5	1	1	6	3	1	1	1	1	1	Yes	Q
32	2	1	7	2	1	1	1	1	1	7	1	1	3	1	1	1	1	1	1	1	Yes	Q
33	1	1	7	1	1	1	1	3	1	7	2	1	1	3	1	1	1	1	1	1	Yes	L
34	1	1	7	1	1	1	1	1	1	7	1	1	4	1	1	1	1	1	1	1	Yes	Q
35	4	1	7	4	1	1	1	4	1	7	2	1	5	1	1	1	1	1	1	1	Yes	Q
36	1	1	7	2	1	1	2	5	1	7	1	1	1	1	1	2	1	1	1	1	Yes	Q
37	5	1	7	5	2	1	1	4	2	5	2	1	5	3	6	2	1	1	2	2	Yes	K

38	1	1	7	2	1	1	1	1	1	7	3	1	7	2	6	1	1	1	1	1	Yes	Q
39	1	1	7	3	1	1	2	2	1	7	1	1	1	1	1	1	1	1	1	1	Yes	Q
40	4	1	7	4	1	1	1	1	1	7	3	1	4	1	3	1	3	1	1	1	Yes	X
41	1	1	7	1	1	1	1	5	1	7	7	1	1	1	1	1	1	1	1	1	Yes	Q
42	1	4	7	1	1	1	3	1	1	7	1	1	1	4	1	1	1	1	1	1	X	F
43	1	1	7	1	1	1	1	2	1	7	7	1	1	X	1	1	1	7	1	1	X	X
44	2	2	7	2	3	2	3	2	2	6	2	1	2	2	2	2	2	1	1	1	X	X

Appendix E: Raw data – parents’ responses relating to open-ended questions

1. Which statement do you think is most important and why?
2. What could the educational psychologist do to make you feel this statement was addressed?
3. How would you feel about future meetings, if you felt that educational psychologist did not take this statement into account?

Participant One

1. L: by working together to reach a mutually agreed target or goal I feel we would be best placed to mutually support my child.
2. Frequent reviews and clear and concise goals and objectives. Open and direct approach. Clarity at all times.
3. Reluctant. One would hope that a mutually supportive approach would best support the child.

Participant Two

1. Statement D is crucial to ensure all parties “buy in” to the meeting before hand and to allay any misconceptions.
2. Set protocols of how a meeting is conducted. Reassure the parent/carer concerned and perhaps send some information in a written format or email about the meeting, who they are and what is hoped to be achieved by the meeting as telephone contact may be jarring to an individual.
3. It could cause distrust and develop a less open arena for discussion.

Participant Three

1. Q: the EP the school and the parent should all work as a team.
2. Take my views seriously and act upon any decisions we agreed.
3. Would not feel the EP had much to offer my child, if they couldn’t respect my feelings unlikely to respect my child’s.

Participant Four

1. Q: I would like to feel the school, the EP and I are a team.
2. Ensure that all parties understand the consultation process, contribute equally or as required, receive appropriate feedback and action plans and are supported to follow these through.
3. I would not feel so positive.

Participant Five

1. M: I am not sure if this is standard procedure and would need to know reasons if not.
2. Explain fully.
3. Unacceptable.

Participant Six

1. A: what would happen during the meeting and what the consultation meeting was all about. It will give an insight about what to expect and how much help I would gain from this meeting. Make me understand the purpose of the meeting.
2. Let me know of everything I need to know good or bad, give out as much information as possible.
3. I would feel less confident to attend the meetings.

Participant Seven

1. Q: because if everybody works as a team, the chances of success are higher.
2. Ensure that all parties feel they are an equal part of the team.
3. Despondent!

Participant Eight

1. L: it would be important for the educational psychologist and I to work together to help my child.
2. I feel that as I am [child's name] parent that my opinion and my relationship with [child's name] would help the educational psychologist.
3. As the educational psychologist does not know [child's name] I feel that it would help to have a better understanding of [child's name] and what her behaviour is like.

Participant Nine

1. E, K, L and Q: because the child learns lots at home as well as school and we would want to ensure we did our very best to help our child at home as well as school.
2. I could of been invited to the meeting or had some contact via phone or in person to inform me of what would happen or the outcome. I only got sent the report and was not advised to do/try anything to help at home and I did state in "my comments" that I would do whatever I could to assist.
3. Very unsatisfied.

Participant Ten

1. I: because if it is necessary to involve a psychologist then clearly a parent needs fresh ideas to help their child.
2. Provide objective assessments and strategies for improvement.

3. Then it would be a waste of time as nothing is likely to improve.

Participant Eleven

1. L: I need the best solutions to help my child reach his potential.
2. Discuss fully the best ways I, the school, and the EP could help my child.
3. I would ask for another EP to help my child if I wasn't satisfied with the help and advice given as I am just as important as the educational professionals, as I know my child the best.

Participant Twelve

1. Q: everyone should only be working towards one aim, to support the child to achieve their full potential and to have confidence and self worth.
2. To walk with us not over us. We can all have valuable input for the benefit of the child.
3. I would meet whenever and whomsoever, to ensure my child had all the support due, under their human rights, and a right to education is one of them.

Participant Thirteen

1. Q: I would want to feel like the EP, the school and I are a team. I believe this statement to be important as by working as a team the child will receive help from all sides of the same nature. By working as a team I really believe more can be gained.
2. By regular meetings being held which involve all parties, to discuss any actions or recommendations. As a parent to be included means you can reinforce any recommendations at home and help your child more.
3. I would feel that my input was not really of importance and I wouldn't feel fully involved. I would continue to attend when invited to do so.

Participant Fourteen

1. K and O: I don't think any person should be told what to do with their own child! You should only advise people what to do it has the same meaning only given differently.
2. Reassess her wording.
3. If someone told me to do something it would get my defences up straight away. If they advised me to do something you tend to take more notice.

Participant Fifteen

1. Q: the school, parent and EP should work as a team.
2. Help with ideas for home and school.
3. They were uninterested.

Participant Sixteen

1. Q: because all 3 need to work together to understand the needs of the child.
2. Have a full detailed background report of my child's needs and show a caring attitude towards trying to be of help.
3. Disappointed and let down by the system.

Participant Seventeen

1. Q: holistic approach to helping the child.
2. Active listening, pro-active approach, non-negative management of the situation, realistic goals and set targets.
3. Future meetings in my experience are few and far between, so wouldn't be a problem. Difficult enough to get one meeting.

Participant Eighteen

1. L: a balanced approach from all parties would result in the best outcome for my child.
2. As active, as opposed to passive approach, would be appreciated as the onus would not only be on me as a parent.
3. I would be extremely disappointed and I would feel my child would be let down by the education service.

Participant Nineteen

1. I: I would like the psychologist help me to improve things for my daughter as there are some things everyone that could do with i.e. suggestions or advice and it feels like I'm being supported in what I'm already doing.
2. For us to have a meeting and explain why he's {the EP} involved etc and suggest ways to improve our situation.
3. Unless we work together how can we improve things, we need to understand what we are both talking about to improve things. A parent's input is valuable as I'm the full time carer and need to know everything about my child.

Participant Twenty

1. Q: we should all be working together to improve my child's educational needs.
2. Make sure they are on top of the facts throughout and I/ the pupil don't just become another statistic.
3. I wouldn't hesitate to contact them and tell them to sort it out.

Participant Twenty One

1. Q: the school/home balance is essential when trying to improve a child's environment.

2. Communicate at “every” level.
3. I would request an alternative psychologist to deal with us.

Participant Twenty Two

1. Q: the EP, the school and myself are a team.
2. Listen actively, agree goals, ensure agreements/goals written up for everyone to comment and then agree.
3. Frustrated. Undervalued as a parent.

Participant Twenty Three

1. Q: I think it is very important for the parent of a child with any issues to feel supported and not victimised. It is all too easy for a parent to feel overwhelmed by guilt and blame. The sense of working as a team provides great relief.
2. To assure the parent at the start that they wish to help for the best interest of the child to support the parents in finding solutions.
3. Maybe uncomfortable as if my opinion wasn't valued or important.

Participant Twenty Four

No response.

Participant Twenty Five

1. I think it is important for parents, schools, psychologists to keep in touch regularly, all will know what is happening or about to happen.
2. It would be a great help if EPs etc could help to find other ways for helping the child and parents carers etc to share ideas of how they cope and understand the child's needs.

Participant Twenty Six

1. I: I would want the EP to help me think of different ways to help my child. In order to achieve this statement there already needs to be a clear understanding of a child's needs and collaboration between all parties.
2. The EP needs to have worked with the child, spoken to teaching staff and parent(s). This would ensure that a clear understanding of the child's needs coupled with the concerns and constraints of parents and teachers were understood. This would form the basis of the way forward.
3. If the above statement is not taken into account then the child's needs are not being fully addressed. There needs to be a partnership between home, school and EP.

Participant Twenty Seven

1. E: I have two children with a complex range of special needs. As a mother it is important to understand how to support them on a practical daily basis.

2. Clearly explain and discuss the implications of the assessment i.e. what does it mean to my children in terms of their daily lives and development when they have learning disabilities/severe dyslexia/ADHD/ODD.
3. I would still consider the meeting to be important but would feel that there were missed opportunities in terms of developing insight into how to fully support my children.

Participant Twenty Eight

1. A and D: wanting someone to explain about the meeting beforehand as it can be very worrying to a parent if they're not sure about what is going to happen and what exactly is going to be discussed about the child concerned. Also to explain things in simple terms to parents so as they have a good understanding.
2. Make the contact beforehand either by phone/letter with regards to putting the parent at ease before the meeting! Also explain fully the outcome of assessment done as the letters you receive afterwards are very confusing with all the scales and scores.
3. Future meetings would be easier for parent as by then they would know what to expect, but it would be nice if the parent did have a clearer understanding as these meeting can be overwhelming and too much for a parent to take in all the information that is discussed.

Participant Twenty Nine

1. L: it would be important for the EP and I to work together to help my child. The EP can provide evidence based specialist advice as a professional. As a parent I can teach and instil the advice at home.
2. Follow up assessments or reviews of my child's progress. Written reports and advice. Regular contact with the school. Meetings with ourselves.
3. I would feel that I would not know what was being done to help my child.

Participant Thirty

No Response.

Participant Thirty One

1. Q: teamwork and communication are essential, vital and necessary for effective results.
2. Discuss it, reflect and evaluate. A follow up letter is essential too so we all understand the consultations.
3. Reluctant.

Participant Thirty Two

1. Q: I would want the EP, the school and I to work together to get the best educational needs for my child to enable him to be able to feel part of his class and be able to read and spell.

2. After the EP has done an assessment to arrange a meeting to discuss it further and explain fully the results.
3. I feel more than happy to keep in constant meetings about the progress of my son's learning.

Participant Thirty Three

1. L: it would be important for the EP to work together with me to help my child. It is important for parents to be engaged in supporting their child for the benefit of both child and parents and because parents have a legal duty to look after their child. This would lead to a more productive outcome, whilst recognising that a child has the right to a confidential meeting and the right to discuss things without the parents being present. However, we all live as one family - productive outcomes require joint working.
2. Engage parents in discussions and share assessments/goals – not just in the written correspondence. I disagreed with the psychologist's written assessment to the school but was given no option to add my views of the meeting. His perceptions of the meeting were very different to mine and there was no formal redress to this. Parents, as with clients in other areas, should have the opportunity to write their comments alongside; so also should the child in some format.
3. It would not be worth attending.

Participant Thirty Four

1. Q: we all are there for the same target.
2. They are doing their best already.
3. I'm very happy with everything until now.

Participant Thirty Five

1. Q: with everyone working together a consistent approach can be implemented. With everyone onside a solution would be easier to find.
2. Good communication and interdepartmental co-operation.
3. It would be time wasted.

Participant Thirty Six

1. Q: I would like to feel that the EP, the school and I are a team. To ensure my child has the best opportunity to improve.
2. Have more contact with child or follow up progress.
3. I would be more determined to help my child on my own or with school.

Participant Thirty Seven

1. K
2. They need to have spent time with the child before and after the consultation so they can take the parents' information into account when assessing the child. There needs to be follow through. We have met an EP once (at least I think that's what she was).
3. The meetings are of no value if it is just us telling the professional how the child behaves. We need some professional input to help work out why behaviours happen and how to cope with them – develop strategies.

Participant Thirty Eight

1. Q: I think it's important for everyone involved to be working together for the best outcome for my child.
2. Listen to my opinions, ask pertinent questions about my child's experience, do some research about my child's progress at school (e.g., talk to teachers, observe a lesson).
3. The meetings were irrelevant.

Participant Thirty Nine

1. I would want to feel like the EP, the school and I are a team. It is when different groups pull in different directions that you start to really despair as a parent. It is so important that you feel there is a shared vision for how best to move forward.
2. I feel the EP does not spend nearly enough time at the school doing assessments. We have had 2 hour meetings based on 30 minute assessments. Unless there are repeated visits of a significant length I do not feel the assessment can be very rigorous or reliable.
3. I'm sure the EP would want to do more assessments, but is unable to due to funding issues.

Participant Forty

No Response

Participant Forty One

1. Q: because by working together the chances of improving the outcome for my child are increased.
2. Well prepared (all concerned); Good notice of meetings and documents shared (logistics); Clear understanding of roles and responsibilities; Demonstrating respect for me as a parent and me doing likewise; Follow up and follow through of actions promised; No false expectations – honesty and open feedback about future progress and potential and help and support to be provided and impact that may have on developmental progress
3. Disappointed but even more frustrated that opportunities had been missed. Time passes all too quickly for children, time is not on their side, so need to intervene in a

timely way - otherwise opportunities are lost and it is more difficult to make up for such delays in development in adult life.

Participant Forty Two

1. F
2. Listening and reflecting back accurately what I had said and to state clearly and in informed way why they agree or disagree about what I said and why or why not there is help for my child.
3. Hopeless.

Participant Forty Three

No Response.

Participant Forty Four

No Response.