**Guidance for Accrediting SEND Mediators**

The forms in this document are intended to be used to support the process of accrediting an SEND mediator. They cover all the necessary requirements to meet the standards laid down by the College of Mediators and the Civil Mediation Council and should be read in conjunction with these standards. They provide a checklist of the skills and knowledge required to be a competent SEND mediator and which need to be demonstrated throughout the practice component of SEND mediation training.

When using these forms, it is helpful to bear in mind the following:

* It is expected that skills and knowledge are acquired over time by mediating in a number of cases and working with different mediators. It may well be that not all the criteria are met within each case, but they should be demonstrated over the whole period. The forms can be used to record skills that are observed and to identify gaps in practice and learning needs. Together, they provide an evidence base.
* They are intended to be used flexibly bearing in mind variations in practice e.g. different providers involve mediators in the preparation and set up of a mediation case to varying degrees. The forms can be adapted to reflect these variations though key mediation skills and contextual knowledge components should remain.
* Practitioners undergoing accreditation will usually be experienced mediators. The main purpose of this process is to assess: knowledge of the SEND context and an ability to apply it; familiarity with service procedures and the model used; advanced mediation skills, particularly working with groups and balancing a wide range of needs and interests.

There are four forms in total:

1. Pre-Mediation Form
2. Mediation Form
3. Post-Mediation Form
4. Accreditation Form

Forms 1 to 3 can be completed by anyone who is working alongside the mediator and observing their practice, or offering support or feedback. This could be a co-mediator, a supervisor, a regional manager or a service director as appropriate.

Form 4 certifies that a mediator has met all the training and practice requirements and can be accredited as an SEND mediator. It should therefore be signed by someone who is themselves an experienced SEND mediator, has observed them at least once, has played a specific role in mentoring the new mediator and supported them to reflect on their practice.

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| FORM 1  **PRE-MEDIATION** | **Mediator:** | | | **Co-mediator / Supervisor /Manager:** | | **Date:**  **1st / 2nd / 3rd Case** |
| **Process Management**  Make initial contact with parties Identify issues for mediation  Screen for safety / suitability  Determine:  - information required from whom  - who should attend the meeting  Ensure child /YP views are incorporated appropriately  Encourage the active participation of the child / YP  Establish informed consent  Ensure compliance with SENCOP timescales  Organise meeting date, time, venue as required by the service  Ensure the mediation is accessible to those with SEND  Inform participants  Prepare for obvious sticking points  Maintain accurate records as required by the service |  | | | | | |
| **Skills and Knowledge**  Engage effectively with all parties  Build trust and rapport  Listen Actively: reflect, summarise, show understanding, clarifying  Explain mediation process, principles, mediator role  Challenge appropriately  Remain impartial  Give information about SEND Tribunal + COP  Signpost where necessary |  | | | | | |
| FORM 2  **MEDIATION** | | | **Mediator:** | | **Co-mediator / Supervisor /Manager:** | **Date:**  **1st / 2nd / 3rd Observation** |
| **Process Management**  Arrive punctually to prepare room  Carry appropriate forms  Conduct pre-meetings as required  Establish arena (incl. ground rules)  Manage introductions  Clarify Confidentiality  Establish issues for each party and agree a mutual agenda  Allow time for issues to be explored  Assist in the identification and evaluation of potential options  Build and secure agreement  Manage time  Offer breaks as appropriate  Use separate meetings effectively  Confirm outcome + next steps  Issue of Mediation Certificate  End mediation when necessary  Close positively | | |  | | | |
| FORM 2  **MEDIATION** | | **Mediator:** | | | **Co-mediator / Supervisor /Manager:** | **Date:**  **1st / 2nd / 3rd Observation** |
| **Skills and Knowledge**  Engage effectively with all parties  Create a safe environment:   * Positive welcome * Offer reassurance * Explain what will happen * Show confidence   Listen Actively: reflect, summarise, show understanding, clarify  Ensure all have opportunity to speak  Ensure the views of the child / YP are considered and understood  Facilitate constructive exchange  Build understanding  Manage interruptions + high conflict  Acknowledge emotion  Address power imbalance  Navigate through the process  Maintain impartiality  Challenge appropriately  Reality test proposals  Apply knowledge of SEND context  Work within an ethical framework  Write clear SMART agreement | |  | | | | |
| FORM 3  **POST-MEDIATION** | | **Mediator:** | | | **Co-mediator / Supervisor /Manager:** | **Date:**  **1st / 2nd / 3rd Observation** |
| **Process Management**  Send out final agreements or other paperwork  Complete case records  Close file | |  | | | | |
| **Skills and Knowledge**  Communicate clearly with all parties  Clear feedback to service  Close case in a timely manner | |  | | | | |
| **De-brief and Supervision**  Key Strengths  Key breakthrough points  Key challenges and learning points  Discussion of outcome  Identification of   * Skills gaps * Knowledge gaps   Plan for meeting learning needs | |  | | | | |

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| FORM 4  **ACCREDITED MEDIATOR**  **Special Educational Needs and Disability** | **Mediator:**  **Supervisor /Manager:**  **Date:** |
| **This is to certify that** *Name of Mediator* **has successfully completed the required training and gained the necessary experience to practice as an SEND Mediator:**  **❒ Foundation Training in Mediation** (minimum 40 hours)  Date of training: Training Provider**:**  **❒ Specialised Training in SEND Mediation** (minimum 12 hours)  Date of training: Training Provider  **❒ Casework** (minimum 12 hours)  Has worked as lead / co-mediator in the following cases  Case 1: *date*  Case 2: *date*  Case 3: *date*  *Name of Mediator* has been observed mediating by *Name of Observer(s)* and has engaged in de-briefing and feedback sessions in order to reflect on and learn from their practice.  I, *Name of Observer,* confirm that *Name of Mediator* has therefore achieved a high standard of practice and has met all the necessary requirements of the College of Mediators and the Civil Mediation Council to be accredited as an SEND Mediator.  **Signed:**  **Manager / Supervisor Mediator** | |