

# Special Educational Needs and Disabilities (SEND)

JSNA deep dive review: Full report

May 2025

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# Introduction

Healthy problem solving, emotional regulation skills, school readiness, good communication skills, healthy social relationships and a sense of belonging are all important factors in promoting good health and wellbeing throughout life<sup>1</sup>.

“Special educational needs and disabilities (SEND) can affect a child or young person’s ability to learn”<sup>2</sup>. This may include their<sup>1</sup>:

- “Behaviour or ability to socialise, for example struggling to make friends”
- “Reading and writing, for example because they have dyslexia”
- “Ability to understand things”
- “Concentration levels, for example because they have attention deficit hyperactivity disorder (ADHD)”
- “Physical ability”

Optimising outcomes, independence and support for our children and young people with SEND is a core priority for the Health and Wellbeing Board, Cheshire East Council, the NHS and our community organisations.

A Joint Strategic Needs Assessment (JSNA) review into SEND across Cheshire East was published in 2017. Since this publication, there have been shifts in national developments and also the emergence of the COVID-19 pandemic. The Cheshire East JSNA steering group therefore highlighted the need to undertake an updated review as a priority for the local area. This document summarises the findings of this latest review.

1. Gov.UK Children with special educational needs and disabilities (SEND). Available from: <https://www.gov.uk/children-with-special-educational-needs> (Accessed 9 May 2023).

2. Office for Health Improvement and Disparities (2022) [Vulnerabilities: applying All Our Health - GOV.UK \(www.gov.uk\)](#) (Accessed 10/5/23)

What is the take home message from this review?

## All children and young people have strengths, and all can and do achieve.



- This review outlines the need for a fundamental shift in culture.
- **Inclusion is everyone's business** and SEND affects a significant proportion of the population.

There are many dedicated and passionate people working to support our children and young people with SEND across Cheshire East place, including their families and people working in many different organisations. There is also evidence of the positive impacts that they have had. We need to further galvanise this and continue to work more closely together.

We need to support our **families holistically**- for every interaction we need to think: physical, emotional, educational and social wellbeing, and recognise achievements and successes in relation to all of these aspects of life.

We need an approach that is **person-focused and strength-based** rather than problem-focused.

**We need a whole community approach to SEND and inclusion that empowers our children and young people and families to**

- Connect with support at the earliest opportunity and as part of inclusive wider community life
- Recognise achievements and success
- Recognise they are not alone but part of a community of experts by experience, and seek resilience within this, and the wider community.

# Overarching recommendations summary

According to data available as at November 2024, in Cheshire East there were an estimated 10,482 children and young people with special educational needs and disability being supported in education or training. This includes 5,906<sup>1</sup> with an SEN support plan and 4,576<sup>2</sup> with Education, Health and Care Plans (EHCPs).

It is estimated that over 13,000 households (7.5%) may be affected by SEND (either living with someone with SEND or having SEND themselves, this equates to potentially 41,800 individuals (10.6% of the population).

Across Cheshire East we need to:

1. Provide inclusive information, be proactive and intervene early
2. Think holistically: education, health and wellbeing, and care
3. Recognise complex risk factors early, including where there has been childhood trauma
4. Increase capacity to ensure that a child's education needs are met in the best setting so that the child is not disadvantaged
5. Ensure timely and consistent NHS provision of support and advice in relation to Autism, Attention Deficit Hyperactivity Disorder and therapies such as speech and language, physiotherapy, occupational therapy and sensory processing
6. Communicate clearly, proactively, consistently, transparently, and through a person-centred approach
7. Empower children, young people, families and professionals to look towards and plan for the future



1. Special Educational Needs in England 2023/24 academic year available from [Special educational needs in England, Academic year 2023/24 -](#)

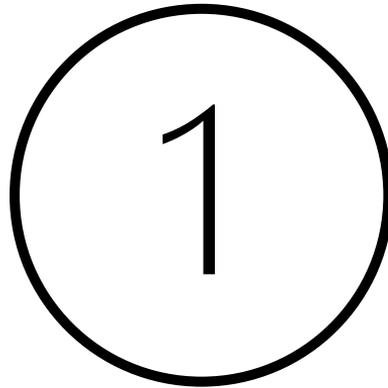
[Explore education statistics - GOV.UK](#) (Accessed 30.07.24)

2. Education, health and care plans England 2024 available from [Information taken from Education, health and care plans: England 2024 - GOV.UK](#) (accessed 27.11.24)

# Preface



**Please read the preface in advance of the other sections of this review to gain a good understanding of the purpose, approach and breadth of the review.**



## Why was this review undertaken when there has already been so much work on SEND across Cheshire East?

- In short, there is more to do. This is acknowledged locally, but also nationally.
- Optimising outcomes, independence and support for our children and young people with SEND is a core priority for the Health and Wellbeing Board, Cheshire East Council, the NHS and our community organisations.
- There has been lots of work on SEND across Cheshire East, led by different organisations including the Council, the NHS and the Voluntary, Community, Faith and Social Enterprise sector and by residents themselves. This review brings together valuable key findings and insights from reviews undertaken across the system from 2022 to October 2024 into a single summary. It aims to help organisations to
  - **"zoom out" and understand the needs of our children and young people with SEND and their families from a more person-centred perspective- thinking of the child or young person and their family rather than with a particular need presenting to a particular service.**
  - **Provide the rationale and intelligence base to further adapt and align longer term strategic approaches.**
  - **Think earlier, and intervene and empower earlier, in a way that reduces inequalities and promotes inclusion.**
  - **Advocate for our children and young people with SEND regionally and nationally.**
- It is expected that key partner organisations across Cheshire East will utilise this JSNA review in their future strategic developments.

## What is a JSNA review?

- JSNA stands for Joint Strategic Needs Assessment.
- A JSNA review is a review of a topic area relating to health and wellbeing, which helps us understand an issue in more detail and to plan the services that are provided and the way organisations and wider communities can work together in the longer term. Information has been examined from 2022 to October 2024 .
- **New and more up to date information will continue to become available regarding our children and young people with SEND, and the numbers supported. However, this review provides an important, more detailed and comprehensive summary of the experience of SEND across Cheshire East over the past two years and has helped us see where the gaps in support services are and how we can better meet the needs of our children and families with SEND over the longer term.**

## How was the content and focus for this review agreed?

- The scope of this review was agreed through multistage consensus building including representatives from the Council, the NHS, Voluntary, Community, Faith and Social Enterprises and with parent carers.

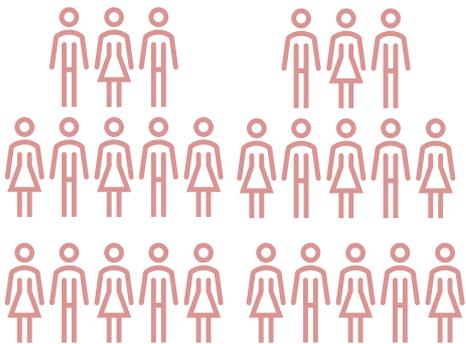
**The review is broad ranging and complex because the experiences of our children and young people with SEND, and their families, are complex and broad ranging.**

**Responsibility for the challenges and needs of children and young people with families with SEND does not fall to a single organisation, nor should it. It is the responsibility of all organisations and all communities across Cheshire East.**

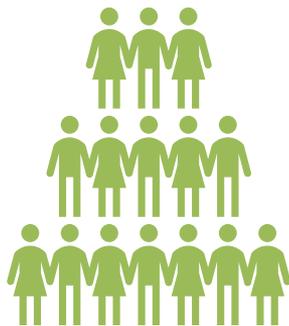
- The process of undertaking the review itself has led to building of connections across the system and further shared understanding of the challenges in relation to SEND.

This review was produced through the Special Educational Needs JSNA Working Group. The working group contributed to the development of the scope; analysis; and narrative development.

In addition to this a range of stakeholders also contributed through providing insights and information.



Approximately **71**  
people contributed to  
the SEND JSNA.



Approximately **37** of  
these people were  
members of the working  
group\*.

\*Numerous individuals have been involved the SEND working group conversation at varying points of the JSNA process, which is why an approximate number is given.

More information on this can be found here...

[contributors](#)

Within this JSNA we have included feedback from the...

- Speech and Language Therapy pilot
- SEND Partnership Survey 2023 (123 staff, 63 educational settings, 54 young people and 234 parent carers responded).
- Cheshire East SEND Toolkit for Inclusion consultation (33 responses)
- SEND related complaints and compliments
- Healthy Young Minds recommission engagement.
- Delivering Better Value work (over 90 providers and 160 parent/carers responded)
- SEND Health Provider Survey (103 responses)
- We have had conversations with paediatricians which we plan to continue.
- Cheshire and Wirral Partnership Waiting List Pilot
- Cheshire East Parent Carer Forum (CEPCF) survey (117 responses)
- Parent Carer Forum member priorities
- Insights from the Parent Perspective Training
- A local family's experience of living with severe disability
- Feedback from young people who attend both the Macclesfield and Crewe Jigsaw groups

Neurodivergent conditions can sometimes, but not always, be associated with special educational needs and disability. A definition of "neurodivergent" is included below:

Neurodivergent- "People with conditions such as autism, ADHD, dyslexia, dyspraxia and Tourette's syndrome are a key part of a balanced, neurodiverse society. People living with these conditions are sometimes referred to as neurodivergent people. The term neurodivergent simply means that your brain works differently to what may be considered 'typical'".

This JSNA review covers elements of need in relation to Autism Spectrum Condition (ASC) and Attention-Deficit / Hyperactivity Disorder (ADHD). However, the main focus on neurodivergent conditions is where there is an associated Special Educational Needs and Disability. In addition to this review, there are two JSNA reviews that have previously been published and cover all age perspectives of [learning disabilities](#) and [autism](#).

# Topic areas covered by this JSNA review

Key professionals from across the Council, the NHS, the volunteer, community and social enterprise sector, and parent/carers guided what should be included within the review.

The aim of the SEND JSNA is to try and understand what the need is in terms of:



1. Referrals for special educational needs, neurodevelopmental pathways and combined mental health/neurodevelopmental pathways

2. Parents and families and what the barriers are to help

3. Identification of children and young people (based on a shared understanding of needs and risks) and supporting them during this process in a joined-up way

4. The need for communication about identifying and supporting children with developmental challenges and SEND from different perspectives

5. How we work in a way that empowers our children and families

6. Workforce challenges across education (including specialist teaching), health and care

7. Transition

# Scope questions to be addressed by this JSNA review

Key professionals from across the Council, the NHS, the volunteer, community and social enterprise sector, and parent/carers guided what questions should be answered by the review. These included:

- 1. What is the need in terms of: referrals for special educational needs, neurodevelopmental pathways and combined mental health/neurodevelopmental pathways?**
  - Where feasible, how does this vary by place, protected characteristics and over time? What is the need for first concerns support, SEN support, EHCPs? What support is available whilst parents are waiting for assessments either initial assessments or definitive outcomes from assessments? What specific challenges are there in relation to physical health need? (-e.g. Dental pathway access, hospital investigations, blood tests, reasonable adjustments for MRI, Xray etc?) What is the need for advocacy for children and young people?
- 2. What are the needs of parents and families and what are the barriers to help?**
  - What is the need for advocacy for parents?
- 3. What is the need for identification of children and young people (based on a shared understanding of needs and risks) and how do we support them during this process in an integrated way?**
  - What is the need in relation to recognition of milder intellectual disability and support for reasonable adjustments?
- 4. What is the need for communication about identifying and supporting children with developmental challenges and SEND from different perspectives?**
  - What do parents need? What do schools need? What does health care need? What is the need for communication between different agencies? What is the need for communication between parents?
- 5. What is needed to work in a way that empowers our children and families?**
- 6. What are the workforce challenges across education, health and care?**
  - How can we make the best use of skills?
- 7. What are the needs in relation to transition?**

# National approaches to Special Educational Needs and Disability

# National challenges regarding SEND

Nationally there has been considerable focus on SEND provision particularly with regards to the following issues<sup>1</sup>:

- Outcomes for children and young people with SEND are consistently worse than their peers – across almost every measure
- “Parents’ confidence in the system is in decline. Too many parents have lost faith in a system that is not sufficiently responsive to them, which is increasingly adversarial, and in which they face long waiting times to access information and support for their children, including accessing therapists and mental health support”.
- Despite unprecedented investment, the SEND system is not delivering value for money for children, young people and families

A national improvement plan (Right Support, Right Place, Right Time) was published in 2023 with the following vision<sup>1</sup>:

**“To create a more inclusive society that celebrates and enables success in all forms, with the cultures, attitudes and environments to offer every child and young person the support that they need to participate fully, thrive and fulfil their potential”.**

The Government set out their intended actions to improve the special educational needs and disabilities (SEND) and alternative provision system in England in the SEND and alternative provision improvement plan. These are summarised in a road map and include<sup>2</sup>:

1. Creating a national system underpinned by national standards
2. Creating a system that makes sure children and young people with SEND have successful transitions and are prepared for adulthood
3. Supporting a skilled workforce with excellent leadership
4. Strengthening accountabilities and make sure there are clear routes of redress.
5. Creating a fair and financially sustainable system that provides improved outcomes

1. Department for Education (2023) Special Education Needs and Disabilities (SEND) and Alternative Provision (AP) improvement plan. Policy Paper. March 2023. Available from: <https://www.gov.uk/government/publications/send-and-alternative-provision-improvement-plan> (Accessed 9 May 2023).

2. Department for Education (2023) SEND and alternative provision roadmap. March 2023. Available from: <https://www.gov.uk/government/publications/send-and-alternative-provision-improvement-plan/send-and-alternative-provision-roadmap> (Accessed 9 May 2023).

# Towards An Effective and Financially Sustainable Approach To SEND In England (July 2024)

## Very recently, an independent report commissioned by the County Councils Network and Local Government Association highlighted the following:

- A conclusion that “the SEND system is broken” and stakeholders feel powerless to change the system that is costing more and failing to improve outcomes.
- “More children and young people than ever before are being identified as having SEND” and the rise in Education Health and Care Plans has been more rapid than that of SEN support.”
- “There are more children and young people than ever before whose needs are not being met in mainstream education and thus require specialist provision”.
- “More money than ever before is being invested in SEND, but it is significantly less than what is actually being spent on SEND by local authorities, health services and education settings.”
- “Despite rapidly rising expenditure, outcomes of children and young people with SEND and families’ day-to-day experiences of the system have not improved”.
- “The root causes of this crisis are systemic and require national reform”.
- “There are different ways in which the progress achieved by a wider cohort of children could be captured and celebrated” than academic attainment alone.
- A need for more physical space in mainstream to support children and young people with SEND.

## Root causes identified included

- The **volume challenge**: the system struggling to respond to ever-increasing demand; a mixture of increased need and demand; a shift away from inclusion towards medical and deficit based understanding of need; introduction of parental preference; reforms reducing mainstream schools ability to be inclusive; and a reduction of wider support services for children and families.
- The **decision-making challenge**, including: a lack of clarity about how SEN and EHCPs are defined; misaligned responsibilities and accountabilities for partners in the SEND system; the problematic effect of the SEND tribunal on the operation of the SEND system highlighted by many stakeholders.
- The **market challenge**: lack of clarity about the role that independent providers should play.

## Recommendations

- Government should set a new national ambition with clear expectations of inclusive practice in mainstream education
- National framework describing level of needs with clarity and expectation of provision in relation to these needs
- Measures to enable inclusive practice including: a new core offer of targeted multidisciplinary support that all education settings can access; and more outreach support from special schools.
- Reform elements of the SEND statutory framework
- A new Destinations and Progression Service in each local area.
- Creating statutory Local Inclusion Partnerships.
- Articulate a more strategic relationship between the state and the independent sector

# SEND Area Inspection Framework<sup>1</sup>

- Local area partnership inspections are carried out jointly by Ofsted and the Care Quality Commission (CQC).
- The “‘Local area partnership’ refers to those in education, health and care who are responsible for the strategic planning, commissioning, management, delivery and evaluation of arrangements for children and young people with SEND who live in a local area.”
- The purpose of inspection is to provide an independent, external evaluation of the effectiveness of the local area partnership’s arrangements for children and young people with SEND (including those with Education, Health and Care Plans (EHCPs), and those who receive special educational needs (SEN) support) and recommend what partnerships should do to improve, as required. Inspectors will evaluate a range of evidence and follow Ofsted and the CQC’s published policies and relevant legislation.
- A framework and handbook has been published, which outlines the inspection process in more detail.

Local approaches and strategies to supporting  
Special Educational Needs and Disability in  
Cheshire East



# The core principles underpinning our coproduction approach to addressing the challenges seen across Cheshire East are outlined below:

## TOGETHER in Cheshire East

**TOGETHER is our shared definition of coproduction in Cheshire East because it is inclusive to all.**

**T**eamwork when designing, delivering and evaluating individual support and services

**O**pen-minded ideas and discussions

**G**enuine communication for all parties involved

**E**qual partners help to shape and improve support for all

**T**rust each other to make the right decisions

**H**onest

**E**ngage and empower children, young people, adults and families

**R**espect for everyone's views and opinions

**Working TOGETHER as equal partners towards a common goal for all of our children, young people and adults living in Cheshire East.**

### Our TOGETHER Values and Commitment

#### We will...

- Listen to your views
- Communicate honestly
- Trust each other
- Be person centred
- Adapt to people's needs
- Respect and value all opinions
- Do what we say we will

#### We won't...

- Use jargon or acronyms
- Give too much information
- Rush meetings
- Take too long to complete our actions
- Be judgemental

Here is some further information about our four key principles of **TOGETHER** going forward, and who is involved in delivering that.



#### Co-Involvement

We will involve and engage with you from the very start to make you aware of changes to services and policy. Your needs will be identified and views are welcomed at every stage.

#### Co-Design

We will work closely with you to plan and design your individual support, services, and policy making sure that children, young people, adults and families are at the centre of those services.

#### Co-Delivery

We will plan and deliver services together ensuring your voice is heard and acted on at every stage.

#### Co-Evaluation

We offer opportunities for feedback so that we can improve your experience.

# Challenges regarding SEND in Cheshire East: 2018-2024

**Ofsted SEND inspection 2018:** Between the 12 March and the 16 March 2018 Ofsted and the Care Quality Commission (CQC) undertook a joint inspection in Cheshire East. There were significant strengths, but also serious weaknesses<sup>1</sup>. The local area was asked to submit a written statement of action to Ofsted to explain how they would tackle: the timeliness, process and quality of Education, Health and Care Plans; and the lack of an effective Autistic Spectrum Disorder pathway and unreasonable waiting times. In May 2021 Ofsted and CQC revisited Cheshire East to establish whether progress had been made. It was concluded that the area had made sufficient progress in addressing the areas of significant concerns<sup>2</sup>.

During 2022/23, the Council received Department for Education support via the **Delivering Better Value in SEND programme**<sup>3</sup>. This resulted in recommendations around communicating and embedding vision and strategy for a sustainable future and promoting inclusive practice, a graduated approach, more defined decision-making approaches, effective SEND support plans, upskilling schools and partners to support needs and enhancing the transition process<sup>3</sup>.

Following the Delivering Better Value programme further developments have included:

- Approval of the **latest Dedicated Schools Grant Management Plan**. This plan aims to reduce the council's deficit by 2030/31 from 1.2 billion to 284.8 million. Cheshire East has developed local plans to achieve an improved financial position. More information can be found on slide 22.
- Subsequent work to address the recommendations following the **Ofsted Children's services inspection (ILACS)**.
- There has been further **collaboration with Department for Education** experts. More information can be found on slides 23 and 24.
- A focus on Preparing for Adulthood as part of the **Council's transformation plans**.
- Planning to **write a new single SEND and Alternative Provision strategy and development plan – the 'One Plan'**.

(1) Joint local area SEND inspection in Cheshire East accessed from [2773971 \(ofsted.gov.uk\)](https://www.ofsted.gov.uk/inspections/2773971) on 22/11/23  
(2) Joint area SEND revisit in Cheshire East accessed from [50165711 \(ofsted.gov.uk\)](https://www.ofsted.gov.uk/inspections/50165711) on 22/11/23  
(3) e-correspondence from Education Project Manager, 27 April 2023

2018

2024

# An overview of the Dedicated Schools Grant Management Plan 2024/25-2030/31

Cheshire East has developed local plans to achieve an improved financial position and ensure right support at the right time in the right place. These include:

- Support mainstream schools to adopt inclusive practice
- Ensure the graduated approach is consistently implemented
- Strengthen the SEN support offer
- Strengthen the professional networks across mainstream settings

- Expand specialist provision within the local authority footprint.
- Secure collaboration and financial commitment from partner agencies.
- Develop and implement a clear planning and decision-making process for placements.
- Strengthen oversight and contracting with independent and non-maintained schools.
- Strengthen the EHCP annual review process.
- Review and develop a clear SEND financial strategy.

# Planning for adulthood in young people in care: Cheshire East Council Children's Services Improvement Plan, April 2024-March 2025 (1 of 2)

- Cheshire East Council children's services were inspected by Ofsted during February and March 2024. The inspection gave Cheshire East's children's services an overall grading of inadequate. It found that some improvements had been made since the last Children's Services inspection in 2019. However, practice was variable.
- An improvement plan has been developed based on the findings from the inspection, of which, parts relevant to the SEND agenda are summarised on the next slide.

## **Findings in relation to SEND**

The improvement plan highlighted inspection findings that transition planning into adulthood for care leavers was variable. It highlighted that there was some proactive planning for disabled care leavers with complex physical needs, and young people with neurodiverse needs. However, for other care leavers such as those with complex mental health and emotional needs, proactive transition planning does not always take place, meaning care leavers do not always access the support that they need.

The plan also highlighted that disabled care leavers who are open to the 21+ offer are not prioritised as a vulnerable group and as such the local authority cannot be assured that their needs are being met. In cases seen there was not enough evidence of persistence or curiosity in where they may be now, despite histories of having extensive engagement with services as children.

# Planning for adulthood in young people in care: Recommendations from the Cheshire East Council Children's Services Improvement Plan following Ofsted inspection, April 2024-March 2025 (2 of 2)

## **Recommendations in the improvement plan relating to planning for adulthood in young people in care included:**

- Embed a culture of planning for adulthood as soon as a child or young person enters care.
- Review terms of reference and membership for Ignition Panel to ensure young people's post 18 plans are effectively tracked and reviewed from age 16 to ensure proactive transition plans are in place.
- The practice standards will specify which preparing for adulthood roles should be undertaken by social workers and which by Personal Assistants and will set clear expectations on what care leavers should receive/ have in place.
- Develop care leavers hubs, with our care leavers, as a safe space for care leavers to access support and advice. Advice sessions will be offered from the hub to support preparation for adulthood, including housing, finances, drug and alcohol support, parenting support, careers advice, CV workshops, and interview preparation. Emotional health and wellbeing support will be available at the hub through Pure Insight and health support through the cared for nurse.
- Review the transition policy.
- Engage and consult with care experienced young people as to how they want to understand their health histories and adapt the current process accordingly.
- Deliver training to PAs on arrangements to support young people to understand their health histories.
- Launch an app for the care leaver local offer. This will ensure all care leavers have immediate access to the local offer and their entitlements through their mobile. It will also support us to keep in touch with young people and gain their feedback and allow young people to develop peer support groups.
- Review the care leaver local offer together with young people and partners.
- Develop regular participation opportunities for care leavers through the care leaver hubs, to ensure their views shape services.
- Launch a free bus pass for care leavers aged up to 22.

**In addition, a specific recommendations was included for supporting young people that have left care with a disability aged over 21 which was to:** Review cases for care leavers with a disability who are open to the 21+ offer to ensure their needs are being met.

**What were the key findings from this review?**



**All of our children and young people with SEND can and do achieve, and have many strengths.**

Across Cheshire East place, we do not have a good system for capturing and celebrating the achievements and successes of our children and young people with SEND, or acknowledging that they overcome many challenges on a regular basis. The system of support tends to focus in on where things do not go to plan.

However, it is important to always consider the strengths of our children and young people in relation to the needs that they have.



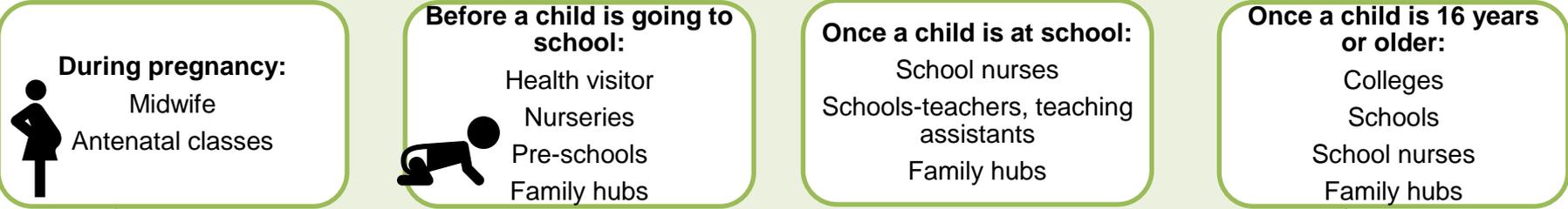
**How are our children and young people  
with SEND supported?**



# All children have strengths and can achieve.

## Everyone is different and all children develop in different ways and have different strengths.

There is lots of support that all children and families receive routinely from a wide range of professionals:



Family and friends

Parent groups, libraries and other community groups

General practices and hospitals

These professionals can also refer on to a wide range of extra support. Families can ask them for advice about whether extra support is needed, or they might suggest it after one of the routine checks, like the 6-8 week and 12-month baby checks, the toddler check at 2 years old, or once a child reaches reception.

# What support is currently available to support children with possible or confirmed SEND and their families?

There are lots of different sources of support but it can be hard to understand what is there and what you need at what point.

Staff in nurseries, schools and colleges, including Special Educational Needs and Disability Coordinators (SENCOs)

The health visitor and school nursing service (0-19 service)

The Toolkit for Inclusion

Physical and mental health and wellbeing advice and services

Family hubs

NHS therapies including for, example, speech and language, physiotherapy and occupational therapy

Cheshire East Council Education Services including: the Educational Psychology Service, Cheshire East Autism Team and Sensory Inclusion Service

NHS services to explore possible diagnoses leading to the SEND challenges experienced

The SEND Cheshire East Special Educational Needs and Disability Statutory Assessment Service

Cheshire East Information and Advice Service

Cheshire East Parent Carer Forum

Advocacy or someone to speak on the behalf of children or their families

Children and adults (18-25 years) early help and social care services

A wide range of services and sources of information that more specifically relate to specific challenges in education, health and wellbeing or care that can be found on the Local Offer website

**Cheshire East SEND Local Offer  
available at**

[www.cheshireeast.gov.uk/localoffer](http://www.cheshireeast.gov.uk/localoffer)

Nearly every school will teach children with additional needs.

Many schools will teach many children with additional needs and are used to making reasonable adjustments

- All schools have a special educational needs coordinator (a SENCO).
- Not all children need formal SEND support.
- Some of the **reasonable adjustments** that schools should be able to make as part of **ordinarily available inclusive provision** are shown below.
- Detailed information on reasonable adjustments is included within the Cheshire East Toolkit for Inclusion<sup>1</sup>. Some examples of these include:

Classroom position-e.g. front or rear of classroom according to need

Allow touch typing, dictation, scribe, assistive technology instead of handwriting

Allow use of ear defenders/ headphones to minimise distraction

Provision of sensory resources e.g fidget toy, wobble cushion, TheraBand, chewing gum

The addition of a ramp to ensure accessibility

Access to classrooms on the ground floor if in a wheelchair and no lift is available

Allowing a pupil to wear a different item of uniform, different material or not to wear a certain item of uniform at all

# How are children and young people with SEND supported across Cheshire East?

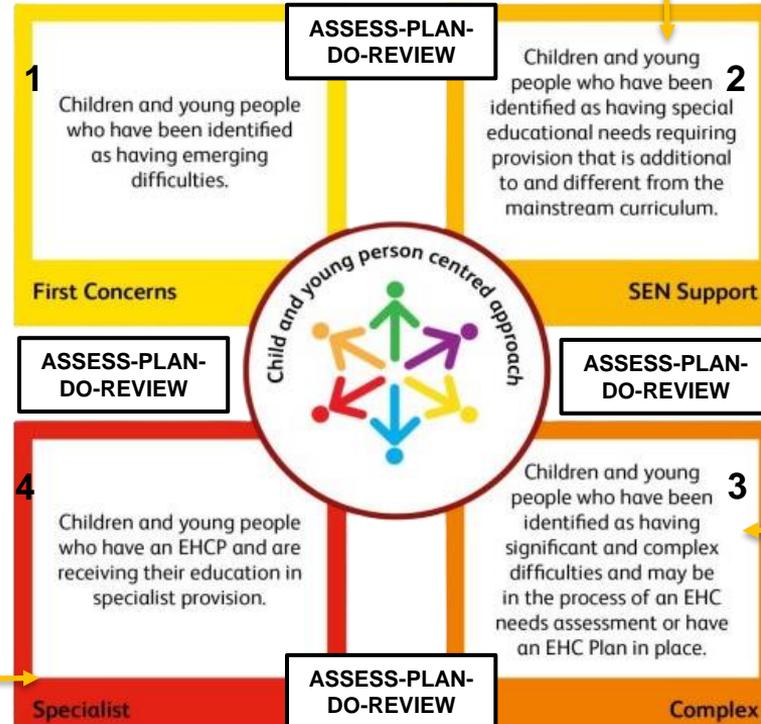
Educational settings can support most children and young people through their universal support by making reasonable adjustments.

If it looks like after a few tries, a child or young person needs more support than can be provided by reasonable adjustments they move on from first or initial concerns regarding development or additional needs (which is where the **graduated approach** starts) to a different level of support- this could be SEN support, complex or specialist.

Educational psychologist or NHS assessments can support the process of deciding on the most appropriate support.

This support is generally provided in **specialist schools** such as special schools or resourced provision

This support is put in place when a child has a confirmed need which calls for special educational provision to be made for him or her. The support is provided within the school's existing funds and described in their **special educational need support plan (SEN Support Plan or sometimes called an SSP)**.



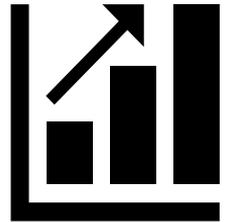
An Education, Health and Care Plan (EHCP) may be written at this stage following a **needs assessment**. The school may then receive extra funding at this stage to support a child.

**Across Cheshire East, what need is there for: referrals for special educational needs, neurodevelopmental pathways and combined mental health/ neurodevelopmental pathways?**



# There are increasing numbers of children across Cheshire East with Education, Health and Care Plans (EHCPs)

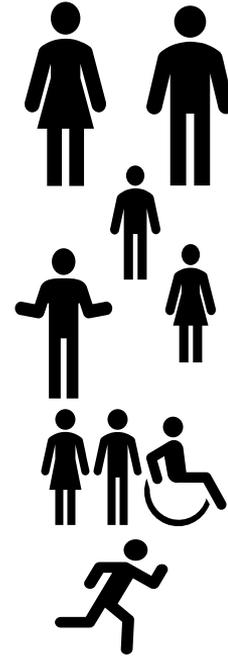
- There has been year on year growth in the overall numbers of Education, Health and Care Plans (EHCPs). However, as at January 2024, the rate of growth in the number of plans had slowed (13.6% increase since the previous year compared to an 18% increase from January 2022 to January 2023) with a reduction in new, first plans approved during 2023 compared to 2022.<sup>1,2,3</sup>
- A higher percentage of children and young people aged up to 18 have an EHCP in Cheshire East (5.1% in 2023/24) compared to the England average (4.7%).<sup>4</sup>
- In 2022/23 EHCPs made up almost a third of the total SEND (SEN Support plan + EHCP) within Cheshire East (32.3%), a higher proportion than any of our statistical neighbours (local authorities with a similar sociodemographic make up to Cheshire East) (range 22.9% - 32.3%), the North-West (26.1%) and the national average (24.7%).<sup>5</sup>
- There is a steady increase in numbers of EHCPs from pre-school to Year 6. In Year 7 the EHCP specialist/non-specialist split is almost 50/50<sup>3</sup> which is considerably more than in primary school where there is a much lower proportion of children with specialist support. Demand for support increases as children approach school transition points: pre-school to primary and primary to secondary.



1. Department for Education. Education, health and care plans [Education, health and care plans. Reporting year 2024 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](#) [Accessed 30/07/24]
2. Cheshire East Single SEND Forecast Data Document FINAL v1.0 May 2022 [single-send-forecast-data-document-v1.0-final-may-2022.pdf \(cheshireeast.gov.uk\)](#)
3. Cheshire East. SEND Sufficiency Statement 2023-2026 Appendix A 3a. [SEND Sufficiency Statement Appendix A.pdf \(cheshireeast.gov.uk\)](#)
4. Department for Education. Special educational needs in England, Academic year. Available from: [Special educational needs in England, Academic year 2023/24 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](#) [Accessed 30/07/24]
5. [Special educational needs in England, Academic year 2022/23 – Explore education statistics – GOV.UK \(explore-education-statistics.service.gov.uk\)](#)

# There are variations in who requires Education, Health and Care Plans (EHCPs) and the reasons for the support required

- In Cheshire East the most common primary support reasons on EHCPs: Social emotional and mental health, and speech language and communication need and autism<sup>1</sup>. Social emotional and mental health, speech language and communication need, autism and specific learning difficulty represent nearly three quarters of all EHCPs<sup>1, 2</sup>.
- Trend analysis of EHCP primary needs in Cheshire East shows that pupil rates of autism, social emotional and mental health, speech language and communication need, moderate learning difficulty and specific learning difficulty identified have all shown large increases over time<sup>2</sup>.
- The most recently available data, shows that the pupil rate for children with learning difficulties known to schools in Cheshire East during 2020 was 22.9 per 1,000 children (1,251 children). This is below the England average (34.4 per 1,000). However, the rate in Cheshire East has increased since 2016<sup>3</sup>. Whilst the rates of children with severe, and profound and multiple learning difficulties (PMLD) have been stable, the increase has been seen in the rate of children with moderate learning difficulties<sup>3</sup>.
- Data for 2023/24 shows that there is a higher proportion of white British pupils have an EHCP (5%) compared to pupils of any other ethnicity (3%) in Cheshire East<sup>4</sup>. Data as January 2024, also shows that lower proportions of pupils with EHCPs where English is an additional language than the national average (2.5% compared to 3.5%)<sup>5</sup>.



1. Department for Education. Education, health and care plans [Education, health and care plans, Reporting year 2023 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](#) [Accessed 30/07/24]
2. Department for Education. Special educational needs in England, Academic year. Available from: [Special educational needs in England, Academic year 2023/24 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](#) [Accessed 30/07/24]
3. Office for Health Improvement & Disparities. Public Health Profiles. [11.05.23] <https://fingertips.phe.org.uk> © Crown copyright [2023]
4. Department for Education. Special educational needs in England [Special educational needs in England, Academic year 2023/24 – Explore education statistics – GOV.UK \(explore-education-statistics.service.gov.uk\)](#) [Accessed 30/07/24]
5. Department for Education. Education, health and care plans SEN2 data [Education, health and care plans, Reporting year 2024 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](#) [Accessed 30/07/24]

# There are challenges in terms of the availability of appropriate settings for children and young people with Education Health and Care Plans (EHCPs)

The highest proportions of residents with EHCPs were seen in Crewe (1.4%), Congleton (1.3%) and Macclesfield (1.2%) Care Communities (as a % of the total population in July 2023)<sup>1</sup>.

In 2023/24

- 90% of pupils with either SEN support or an EHCP were educated within state-funded education<sup>2</sup>.
- Most children and young people with an EHCP were attending school (two-thirds of EHCPs are for compulsory school age children (aged 5 to 15)). Just over half of these children will attend a mainstream school, which is higher than the national proportion (41%)<sup>3</sup>
- A further 27% were attending a special school and 13% are in Further Education<sup>3</sup>. The highest proportions of young people in specialist settings are seen in secondary school aged pupils (years 7 to 11)<sup>4</sup>.
- One in every six children with an EHCP were based in out of county settings (17.2%)<sup>4</sup>.
- More children with EHCPs were in settings in the South (32.3%) or North (29.1%) compared to the Central locality<sup>4</sup>. The Central locality still had the lowest proportion (56%) of its own pupils with SEND accommodated internally within Central settings, and has the highest proportion (19%) attending provision out of borough<sup>4</sup>
- Less than 1% of children and young people with an EHCP attended Alternative Provision (AP)/Pupil referral unit (PRU)<sup>3</sup>
- There had been an increasing number of children with EHCPs that are being educated at home. Although the numbers are still low. As of January 2024, they equated to approximately 1% of all children and young people with EHCPs<sup>5,6</sup>

Those children and young people aged 5-10, 11-15 and 16-19 consistently account for over 90% of EHCPs in Cheshire East<sup>3</sup>. The number of young people in year 12 with EHCPs has increased from 132 in 2018 to 248 in 2023<sup>7</sup>. Children and young people aged 20 and over make up less than 3% of the EHCPs<sup>3</sup>. Some children with EHCPs go on to university or employment at which point cases, EHCP would cease. However, in some cases, it may be that some children don't go on to access further education. Currently there is not a systematic approach to capturing and understanding these outcomes in our post 20 population.

1. Email correspondence from Business Intelligence Officer, Cheshire East Council, Business Change, 25/06/24
2. Department for Education. Special educational needs in England, Academic year 2023/24 - Explore education statistics - GOV.UK (explore-education-statistics.service.gov.uk) [Accessed 30/07/24]
3. Education, health and care plans SEN2 data [Education, health and care plans, Reporting year 2024 – Explore education statistics – GOV.UK \(explore-education-statistics.service.gov.uk\)](#)
4. SEND Sufficiency Statement 2023-2026 Appendix A 3a. SEND Sufficiency Statement Appendix A.pdf (cheshireeast.gov.uk)
5. Email from Project Manager – Education received on 16/08/23
6. Cheshire East SEND Monthly Scorecards
7. Source: e-correspondence from Business Intelligence Officer, Cheshire East Council, Business Change, 1 August 2023

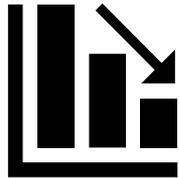
# It is very difficult to predict the likely numbers of Education Health and Care Plans (EHCPs) required in the future

- The number of pupils with SEND has been increasing year on year, with the average costs of provision ranging from £7,536 for a pupil supported in mainstream to £25,000 for a special school to over £60,000 for independent specialist provision<sup>1</sup>.
- The England EHCP:SEN support ratio is very different to that of Cheshire East. If we assume the national SEND rates are the more accurate and calculate SEND in our school age children based on the England rates, it shows, we have an imbalance locally, with higher EHCP numbers. In 2022/23 there were 155 more EHCPs than expected and in 2023/24 198 more<sup>2</sup>.
- The biggest differences by need were Autistic Spectrum Condition (ASC) and Social, Emotional and Mental Health (SEMH). Cheshire East had more pupils with ASC with an EHCP than expected (+175 in 22/23, +174 in 23/24) and lower numbers of pupils with an EHCP for SEMH (-190 in 22/23, -206 in 23/24)<sup>2</sup>.
- If the imbalance of EHCP/SEN support can be redressed, this would mean that there could be a possible 6%-7% reduction in EHCPs<sup>2</sup>.
- This would result in a reduction below the current normal (unmitigated) forecast, but it does not reduce the future trend below the 'mitigated forecast' within the current DSG Management Plan. To achieve this trend more needs to be done<sup>2</sup>.
- It is important to recognise that for some children and young people they will require an EHCP throughout their childhood and into adulthood, whilst for others, they may only require an EHCP for a shorter period of time and once they have successfully achieved their agreed goals an EHCP may no longer be needed.

1. Cheshire East DSG Management Plan 2023/24 to 2027/28 [1a. DSG Management Plan Appendix A.pdf \(cheshireeast.gov.uk\)](#)  
2. Department for Education. Special educational needs in England, Academic year. Available from: [Special educational needs in England, Academic year 2023/24 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](#) [Accessed 30/07/24]

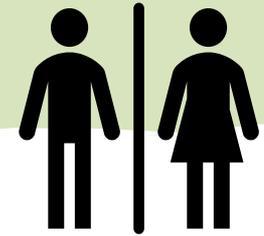
# There are comparatively lower numbers of SEN support plans in Cheshire East compared to other similar areas

- As at 2022/23, across Cheshire East, there were fewer children and young people with Special Educational Need Support Plans than expected compared to other similar local authority areas and the England average<sup>1</sup>.
  - If we had the same proportion of pupils aged 0-18 with SEN support as nationally, there would have been 1,886 more in 2022/23 across all settings<sup>1\*</sup>.
  - The biggest increase in numbers of SEN support plans was in the age 5-10, an increase of 181 in 2022/23 and a further 206 in 2023/24. This age group represents 56% of all SEN support (55% in 2023/24)<sup>2\*\*</sup>. Those children and young people aged 5-10, 11-15 and 16-19 consistently account for 95% of SEN support in Cheshire East<sup>2\*\*</sup>.
- 2023/24 figures show that in an average class size of 30 across Cheshire East, one pupil will have an Education Health and Care Plan (EHCP), with a further three pupils having a SEN support plan without an EHCP<sup>3\*\*\*</sup>.
- As well as those children and young people already receiving support, the latest figures (2023/24) suggest that around 1,600 pupils across Cheshire East may not be receiving the support they need to reach their potential either through an EHCP or through SEN support<sup>3\*\*\*</sup>.

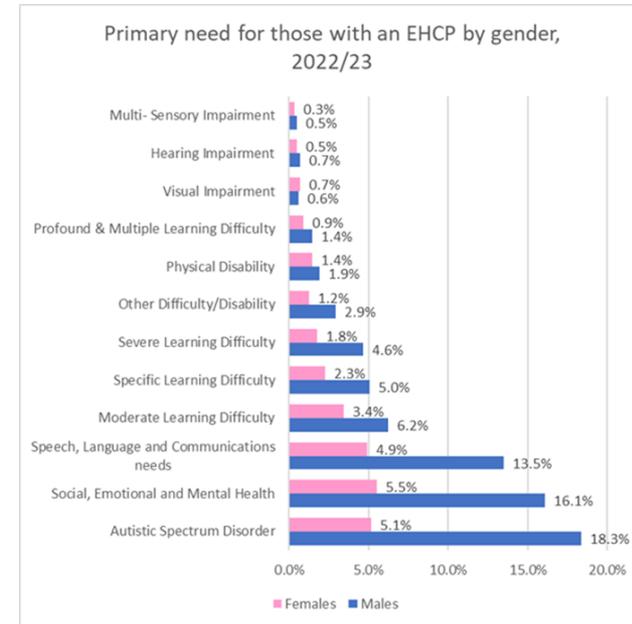


1. 2022/23 Academic year and all settings (including independent and general hospital schools) .The data source should be [Special educational needs in England, Academic year 2022/23 – Explore education statistics – GOV.UK \(explore-education-statistics.service.gov.uk\)](#) table sen phase\_type accessed on the 05/06/24 \* this includes independent and general hospital schools
2. Special educational needs in England [Special educational needs in England, Academic year – Explore education statistics – GOV.UK \(explore-education-statistics.service.gov.uk\)](#) [Accessed 30/07/24] \*\* this excludes independent schools
3. [Special educational needs in England, Academic year 2023/24 – Explore education statistics – GOV.UK \(explore-education-statistics.service.gov.uk\)](#) \*\*\* this excludes independent and general hospital schools.

# There are significant differences in SEND between genders



- In Cheshire East the gender ratio for pupils with SEND has changed little over time: with two males for every one female with an Education, Health and Care Plan (EHCP); and one and a half times more males than females with SEN support<sup>1,2</sup>.
- This matches the national picture but is very different to the ratio for all pupils which is approximately 50/50. Some of the age differential reflects the gender specific prevalence rates of some of the specific needs, with boys more prevalent than girls in all EHCP need domains, other than 'other difficulty' and 'visual impairment'<sup>1,2</sup>.
- In Cheshire East the gender ratio is even higher for autism, with a quarter of boys with an EHCP having Autistic Spectrum Disorder as their primary need. This may reflect the fact that it is still harder to diagnose in females. More detail of this gender difference is given in the Autism JSNA. The highest proportion of primary support reasons in girls was for social, emotional and mental health<sup>1,2</sup>.



1. Department for Education. Education, health and care plans [Education, health and care plans](https://www.gov.uk/government/statistics/education-health-and-care-plans). Reporting year 2024 - Explore education statistics - GOV.UK ([explore-education-statistics.service.gov.uk](https://www.gov.uk/government/statistics/education-health-and-care-plans)) [Accessed 30/07/24]
2. Department for Education. Special educational needs in England, Academic year. Available from: [Special educational needs in England](https://www.gov.uk/government/statistics/special-educational-needs-in-england), Academic year 2023/24 - Explore education statistics - GOV.UK ([explore-education-statistics.service.gov.uk](https://www.gov.uk/government/statistics/special-educational-needs-in-england)) [Accessed 30/07/24]

# There are significant differences in SEND by sexuality



Locally, we do not have any data to understand the needs of our children and young people with SEND who identify as LGBTQ+. However, information that is available nationally highlights the following:

- People with SEND can identify as LGBTQ<sup>1</sup>. Sex education resources should be designed with this in mind, rather than assuming that all people with SEND are heterosexual<sup>2</sup>.
- There is evidence to suggest that LGBTQ people with a learning disability face 'double discrimination' because of their sexuality or gender<sup>3</sup>. As a result of this some LGBTQ people with a learning disability may hide their sexuality to avoid discrimination<sup>4,5</sup>.
- The Census 2021 showed that a higher percentage of disabled people aged 16+ in England identified as LGB+ (6.4%) compared to non-disabled people (2.6%) \*<sup>6</sup>. This difference is driven in part by a higher proportion of young disabled people, aged 16 to 24, identifying as LGB+ and a higher proportion of females identifying as LGB+<sup>6</sup>.
- It has been highlighted by the National Autistic Society that some evidence suggests that there may be a link between gender dysphoria and autism. However, some research suggests this link is not clear<sup>7</sup>.

1. Learning Disability Sex and Relationships Research | Mencap (01/12/23)

2. Taken from Learning Disability Sex and Relationships Research | Mencap accessed (24/06/24) Wilson et al. (2016). A narrative review of the literature about people with intellectual disability who identify as lesbian, gay, bisexual, transgender, intersex or questioning. *Journal of Intellectual Disabilities*, 22(2), 171-196. Taken from Learning Disability Sex and Relationships Research | Mencap accessed (01/12/23)

3. Snell, J. (2018). Ending bigotry faced by LGBT people with learning disabilities. *Learning Disability Practice* 21(1), 8-11

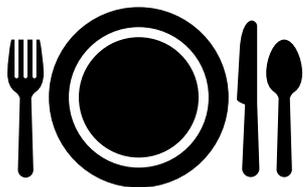
4. Miller, R., Wynn, R., & Webb, K. (2019). "This really interesting juggling act": How university students manage disability/queer identity disclosure and visibility. *Journal of Diversity in Higher Education*, 12(4), 307-318.

5. Bates, C. (2020). "It's Nothing to be Ashamed of, I'm Like, I'm Bisexual and I Love Women, I Like Men" - Being a Bisexual Person with an Intellectual Disability. *Journal of Bisexuality*, 20(4), 493-513.

6. Protected Characteristics by disability status England and Wales: Census 2021 Protected characteristics by disability status, England and Wales: Census 2021 - Office for National Statistics (ons.gov.uk) (accessed 24/05/24) Census 2021 from the Office for National Statistics

7. Autism and gender identity (accessed 01/12/23). Taken from Sexuality- research and statistics - <https://www.mencap.org.uk/learning-disability-explained/research-and-statistics/sexuality-research-and-statistics> accessed (24/05/24)

# We see a higher proportion of free school meal eligibility in our children with SEND compared to our children without SEND<sup>1</sup>



- In 2022/23 academic year, the proportion of school aged pupils in Cheshire East eligible for free school meals with either an Education, Health and Care Plan (EHCP) (32%) or SEN support (30%) was more than double that of pupils with no SEND (13%).
- In 2023/24 academic year, the proportions had increased slightly to 33% with an EHCP and 31% with SEN support, those with no SEND remained at 13%.
- This pattern is mirrored in the national data. The proportions in Cheshire East are lower than the national averages. Across England as a whole, 42.2% of pupils with an EHCP and 38.3% of pupils with SEN support were eligible for free school meals in 2024. This compares to 21.4% of all pupils in schools without SEN.
- This analysis suggests that SEND is more prevalent in low-income households.

# There are higher rates of exclusions and suspensions in our children with Special Educational Needs and Disabilities

Nationally we know that<sup>1</sup>:

- Pupils with Education, Health and Care plans (EHCPs) are five times more likely to be excluded
- Exclusion rates for students with undiagnosed SEND are likely to be much higher
- Students with autism are the largest SEND group to be excluded
- The reason for the exclusion could be unmet SEND need, either insufficient support within the mainstream setting or well supported by the mainstream school but requires a more specialist school place or alternative provision better matched to their needs.

Locally we know that in Cheshire East, as at 2022/23:

- There was a higher rate of permanent exclusions for pupils with SEND in secondary schools (7.6 per 1,000) compared to those without SEND. This rate is higher than the national rate of SEND pupils in secondary schools (6.6 per 1,000). This higher exclusion rate was driven by pupils with a SEN support plan<sup>2</sup>.
- There were no exclusions for pupils with autism in Cheshire East<sup>3</sup>.
- There were higher rates of suspensions for pupils with SEND in both primary and secondary schools, compared with pupils with no SEND<sup>2</sup>.
- All suspension rates were lower than their national equivalent<sup>2</sup>.

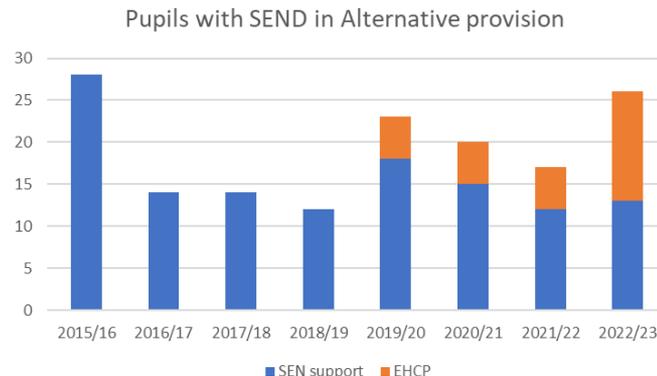
1. National Education Union (NEU), SEND children and exclusion published 28/04/23 [accessed 12/08/24] [SEND children and exclusion | National Education Union \(neu.org.uk\)](https://www.neu.org.uk)
2. Suspensions and permanent exclusions in England Academic year 2022/23 published 18 July 2024 [accessed 09/08/24] [Suspensions and permanent exclusions in England, Academic year 2022/23 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](https://www.gov.uk/government/statistics/suspensions-and-permanent-exclusions-in-england-academic-year-2022-23)
3. Received via email (Team Manager, Children and Families, Autism Team 30/11/23)

Early analysis suggested that a significant proportion of our children and young people with SEND are open to early help or children's social care than those without SEND.

- During January 2024-April 2024, approximately 1 in 7 (14%) of children and young adults (18 and under) with an EHCP were open to either Children's Social Care, or Early Help<sup>1</sup>
- Further information is needed to capture this data over a longer time period. This longer term analysis should also include young people (18-25 years) open to adult social care.

# Alternative provision has increased since 2016/17

- Alternative provision (AP) is supposed to offer a short-term, time limited education provision for children struggling with attendance, whether due to sickness or exclusion<sup>1</sup>.
- Within the AP sector there are a variety of types of providers catering for pupils with diverse needs, abilities and reasons for being in AP, including pupil referral units, alternative provision academies and free schools<sup>1</sup>.
- **A child in AP should not be disadvantaged<sup>2</sup>**. They should receive the same amount of education and achieve good academic attainment on par with mainstream schools and be reintegrated back into mainstream with appropriate support<sup>2</sup>.
- Nationally, there are some groups of pupils who are more likely to attend AP than others: those with special educational needs (80% compared to 15% of all school age pupils), and those eligible for Free School Meals (40% compared to 14% in the state sector)<sup>3</sup>.
- During 2022/23, there were 26 Cheshire East pupils with SEND attending AP. Of these, half had an Education, Health and Care Plan. This was a large increase compared to previous years. In 2023/24 this had reduced by one<sup>4</sup>.
- Nationally, there were concerns that alternative provision was being used to supplement SEND systems (82% of children and young people in state-place funded alternative provision had identified special educational needs<sup>2,4</sup>).



1. DfE, Alternative Provision Statutory guidance for local authorities, January 2013 [Additional health needs guidance \(publishing.service.gov.uk\)](https://publishing.service.gov.uk) (accessed 11/06/24)
2. HM Government, Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan Right Support, Right Place, Right Time, March 2023 [Special Educational Needs and Disabilities \(SEND\) and Alternative Provision \(AP\) Improvement Plan \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)
3. House of Commons Research Briefing Alternative Provision Education in England Published Tuesday, 12 March, 2019 Alternative Provision Education in England - House of Commons Library ([parliament.uk](https://parliament.uk))
4. Department for Education. Special educational needs in England, Academic year. Available from: [Special educational needs in England, Academic year 2023/24 - Explore education statistics - GOV.UK \(explore-education-statistics.service.gov.uk\)](https://explore-education-statistics.service.gov.uk) [Accessed 30/07/24]

# Unmet SEND and neurodiversity needs have been highlighted as significant issues in young people engaged with the Cheshire Youth Justice Service

- Cheshire Youth Justice Services (YJS) undertook a comprehensive health needs assessment (HNA) on children and young people aged 10-17 years, which was published in March 2023. This highlighted significant unmet health needs in relation to the following three main areas: mental health, neurodiversity and SEND; and substance use.
- Information provided by the parents, young people and stakeholders suggests that a high proportion of young people had co-morbidities, meaning that young people had multiple, complex needs and many of these health needs were interlinked and co-existing for many of them. This included, for example, young people who were neurodiverse, who were also struggling with their social skills, experiencing poor mental health, and had disengaged from school.
- No single risk factor leads to offending behaviour. However, exposure to several risks increases risk of delinquent behaviour and YJS involvement. Neurodiversity is an example whereby risk factors may cluster, and lead to greater cumulative effect.
  - Engagement in education or training was key, 35.6% of statutory cases were not in any form of education, employment, or training (NEET), and 21.2% in alternative education provision (such as a Pupil Referral Unit).
- 63.4% of young people had some form of special educational need and disability (SEND). Overall, 63.7% had some type of speech and language needs and 12.5% of young people had a traumatic brain injury. 42.2% of young people had a formal diagnosis of a neurodivergent condition, while a further 15.6% were awaiting diagnosis or referral.
- Studies suggested that aspects of the system including custody can be more traumatic and damaging for those who are neurodiverse.

# Mental wellbeing is a vital consideration in our children and young people with SEND

- Significant proportions of children presenting to our Emotionally Healthy Children and Young People support have SEND or a pending diagnosis relating to SEND<sup>1,2,3</sup>.
- The rates of hospital admission for self harm in children and young people aged 10-24 years in Cheshire East have been significantly higher than the England average for many years<sup>4</sup>. From local data, children and young people with SEND appear to be at higher risk of presenting to hospitals with self-harm<sup>5</sup>.
- Many of the issues experienced by children and young people with SEND such as struggling with social skills and disengaging from school, can lead to poor mental health. In some instances, this interlinking of risk factors can be associated with further disengagement, delinquent behaviour and involvement with the Youth Justice System<sup>6</sup>.
- Children and young people's mental health services (formerly CAMHS) staff are trained to provide inclusive care and reasonable adjustments. For example, use of the Greenlight Toolkit work, Skills for Me work, which supports people with autism<sup>7</sup>.
- There are also specific mental health services to support children and young people with confirmed learning disability (IQ<70). However, there is an acknowledged gap in support for children and young people with less severe learning difficulties who also have a diagnosis of autism<sup>7</sup>.
- The Dynamic Support Register and Database has been developed to more comprehensively support children and young people aged 5-25 years with a formal diagnosis of autism and learning disability at risk of acute mental health admission or at risk of placement breakdown leading to admission or 52-week placement. There have been some positive case studies reported using this approach<sup>8,9</sup>.

1. Email correspondence - Head of Therapeutic Services at Visyon (18/10/23) & 09/11/23)
2. Email correspondence - South Cheshire CLASP (18/10/23) & 08/11/23)
3. Email correspondence - Chief Officer at JDI (09/11/23)
4. Office for Health Improvement & Disparities. Public Health Profiles. [27.03.25] <https://fingertips.phe.org.uk> © Crown copyright [2025]
5. Mid Cheshire data source: Email correspondence Designated Nurse Safeguarding Children @Cheshire East place and Cheshire West and Chester place.\*MCHFT Safeguarding Children Team generate this information through monthly data collection and analysis, which is then shared through email correspondence with the Designated Nurse Safeguarding Children @Cheshire East place and Cheshire West and Chester place.
6. McCoy, E et al, Public Health Institute (PHI), Liverpool John Moores University (LJMU), Cheshire Youth Justice Services Health Needs Assessment – Executive Summary Report March 2023 [2023-07-cheshire-youth-justice-services-health-needs-assessment-executive-summary-report.pdf](https://www.ljmu.ac.uk/~services-health-needs-assessment-executive-summary-report.pdf) (ljmu.ac.uk)
7. E-correspondence- Associate Director LD, NDD & ABI & East Cheshire, Cheshire and Wirral Partnership NHS Foundation Trust (16/05/24)
8. E-correspondence Dynamic Support Facilitator Team Manager, Cheshire and Merseyside ICB (08/04/24)
9. E-correspondence- Safeguarding Administrator.ICB: Cheshire East Place & Covering Cheshire West Place sent on behalf of Project Support Officer - Mental Health & Neurodiversity (Cheshire East) (14/02/24)

# What is mental wellbeing?

- The World Health Organization describes wellbeing in the following way:

***“Wellbeing encompasses quality of life and the ability of people and societies to contribute to the world with a sense of meaning and purpose”<sup>[1]</sup>***

- Important steps to optimising and maintaining good wellbeing include<sup>[2]</sup>:
  - **Connecting with others**
  - **Being active**
  - **Reminding yourself to take notice**
  - **Learning new things**
  - **Being kind or helpful to others**

[1] *Promoting well-being* (no date) World Health Organization. Available at: <https://www.who.int/activities/promoting-well-being> (Accessed: 25 November 2024).

[2] NHS (2022) Five steps to mental wellbeing. Available from: <https://www.nhs.uk/mental-health/self-help/guides-tools-and-activities/five-steps-to-mental-wellbeing/> (Accessed 6 February 2025).

# There is varied NHS provision of support and advice for SEND across Cheshire East



- Parents report waiting times remain an issue throughout Cheshire East<sup>1</sup>.
- There is a recognition that thresholds for being accepted into services vary across Cheshire East<sup>2</sup>.
- Varied metrics are used for monitoring NHS SEND support across the Cheshire East footprint, which makes comparison between areas challenging<sup>2</sup>.
- There are marked differences in provision structure between north and south<sup>3</sup>
  - There is no community paediatric service in the north of Cheshire East<sup>3</sup>.
  - There are varied waiting times for assessment with longer waits on average in the north than the south, except for Speech and Language Therapy, which is more even<sup>3</sup>. As at May 2024 waiting times for assessment in the North for both Autism (4-18 years) and for Attention Deficit Hyperactivity Disorder (ADHD) (6-16 years) via Cheshire and Wirral Partnership NHS Foundation Trust were over a year and a half<sup>4</sup>.
- There is only one organisation that assesses young people for Autistic Spectrum Condition between the ages of 18 years and 25 years. This service is available to young people from 16 years of age<sup>3</sup>.
- There is currently global disruption to supplies of ADHD medication<sup>5</sup>.
- Nationally, people with profound and multiple learning disabilities (PMLD) report challenges in getting the right healthcare in hospital such as<sup>6</sup>:
  - Prevalence of higher health complications
  - Poor recognition of pain
  - Poor partnership working between healthcare professionals and family/support staff. This was also reflected by the experiences of a local family<sup>7</sup>.
  - Negative assumptions about quality of life.

1. "Mad, Sad, Glad" Cheshire East Parent Carer Forum Survey (2022) Include sent from Co-Chair, Cheshire East Parent Carer Forum (01/03/23)
2. E-correspondence Consultant Child Psychiatrist Cheshire and Wirral Partnership NHS Foundation Trust (16/02/24)
3. Cheshire and Merseyside Integrated Care Board. Cheshire East Health SEND Scorecard Quarter 4 2023/4 Final Analysis
4. Cheshire and Wirral Partnership NHS Foundation Trust. My Mind. Waiting times-neurodevelopmental services. Available from: <https://www.mymind.org.uk/services-and-contacts/waiting-times/waiting-times-neurodevelopmental> (Accessed 10/06/24).
5. Royal College of Psychiatrists (2023) Updated information regarding the shortage of ADHD medication. 19 October 2023 updated 12 December 2023. Available from: <https://www.rcpsych.ac.uk/news-and-features/latest-news/detail/2023/12/12/updated-information-regarding-the-shortage-of-adhd-medication> (Accessed 13 December 2023)
6. Taken from [mencap.org.uk/sites/default/files/2019-05/PMLD\\_brochure\\_FINAL.pdf](https://www.mencap.org.uk/sites/default/files/2019-05/PMLD_brochure_FINAL.pdf) (accessed 24/04/24)
7. Information from a conversation from 2 May 2024 between Consultant Lead for Health Intelligence at Cheshire East Council and G's mother. The purpose of the conversation was explained and consent provided.

**Across Cheshire East, what is the need for identification of children and young people (based on a shared understanding of needs and risks) and how do we support them during this process in an integrated way?**



Open

Fair

Green

# Generally, Cheshire East performs well in relation to uptake of universal screening during the early years of life. However, nationally the COVID-19 pandemic has had a negative impact on development for some children and young people.



The first 5 years, and particularly the first 1001 days of a child's life provide the foundation of their onwards development both in terms of their education progress and to optimise their emotional and mental wellbeing<sup>1,2</sup>. There are multiple routine opportunities to identify potential development challenges during the early years of life through contacts with midwives, paediatricians, health visitors and GPs.

- Cheshire East is similar or better than the national average in relation to coverage of neonatal, hearing tests, blood spot screening, 6-8 week, 12 month and 2-2.5 year reviews<sup>3,4,5,6,7,8</sup> During 2022/23, Cheshire East saw a reduction in the number of infants receiving a 6-8 week review from the preceding year (79.4% compared to 91.1% in 2021/22)<sup>3</sup>.
- In addition, significantly higher proportions of children aged 2-2.5 years achieved a good level of development compared to the England average (85.6% compared to 79.2%) across all domains<sup>9</sup>.
- Of children that were identified as not having achieved their developmental milestones at 2.5 years, the majority were referred to other services (82%). 27% of children received a brief intervention, for example, to support toileting or behaviour<sup>10</sup>.
- Portage is a home-visiting educational service for pre-school children with more complex SEND and their families, which aims to: help families to experience and develop a quality of life for themselves and for their children; minimise the disabling barriers that are presented to young children and their families; and support both the national and local development of inclusive services for children<sup>11</sup>.

There is a national body of evidence that highlights that the COVID-19 pandemic has had a negative impact on development for some children and young people<sup>12,13,14</sup>.

1. Fitzgerald E et al, Maternal influences on fetal brain development: The role of nutrition, infection and stress, and the potential for intergenerational consequences Early Hum Dev. 2020 Nov; 150: 105190. Published online 2020 Sep 10. doi: 10.1016/j.earlhumdev.2020.105190
2. taken from Precious foundations: The first 5 years of a child's life 30th November 2020 accessed from Precious foundations: The first 5 years of a child's life | Blogs | Anna Freud Centre on 17.08.23
3. NHS population screening programmes: KPI reports - GOV.UK ([www.gov.uk](http://www.gov.uk)) (accessed 21/09/2023)
4. Newborn blood spot test - NHS ([www.nhs.uk](http://www.nhs.uk)) (accessed 18/12/2023)
5. NHS population screening programmes: KPI reports - GOV.UK ([www.gov.uk](http://www.gov.uk)) (accessed 21/09/2023)
6. Newborn blood spot screening: data collection and performance analysis reports - GOV.UK ([www.gov.uk](http://www.gov.uk)) (accessed 20/12/2023)
7. Newborn physical examination - NHS ([www.nhs.uk](http://www.nhs.uk)) (accessed 18/12/2023)
8. OHID using interim reporting of health visiting metrics: <https://www.gov.uk/government/collections/child-and-maternal-health-statistics#health-visitor-service-delivery-metrics>. Office for Health Improvement & Disparities. Public Health Profiles. [05/04/24] <https://fingertips.phe.org.uk> © Crown copyright [2024]
9. Office for Health Improvement & Disparities. Public Health Profiles. [05/04/23] <https://fingertips.phe.org.uk> © Crown copyright [2024]
10. Received by email (0-19+ Service Lead, 28/11/23)
11. Information taken from Portage ([cheshireeast.gov.uk](http://cheshireeast.gov.uk)) (accessed 26/03/24)
12. Education recovery in early years providers: spring 2022 - GOV.UK ([www.gov.uk](http://www.gov.uk))
13. La Valle I., Lewis J., Crawford C., Paull G., Lloyd E., Ott E., Mann G., Drayton E., Cattoretti G., Hall A., & Willis E. (2022). Implications of COVID for Early Childhood Education and Care in England. Centre for Evidence and Implementation Early-Years-Impact-Brief.pdf ([suttontrust.com](http://suttontrust.com))
14. Emerging Evidence: Coronavirus and children and young people's mental health – Anna Freud centre

# Significant inequalities exist in Cheshire East by the time pupils reach year 1

- During 2022/23 69% of children across Cheshire East achieved a good level of development at the end of Reception year<sup>1</sup>.
- However, rates of achieving a good level of development in our children and young people eligible for free school meals is significantly lower than the England average. According to 2022 data, Crewe sees the lowest percentage of pupils achieving a good level of development<sup>2</sup>.
- Inequalities also exist in areas considered to be less deprived. The gap in achieving a good level of development between those eligible and not eligible for free school meals is highest in Nantwich (43.3%) and Poynton (33.1%)<sup>2</sup>.



# The emerging evaluation findings from early intervention work appear positive

Ensuring early support for all, with greater intensity of support to those who need it most is vital to reducing inequalities across Cheshire East<sup>1</sup>. There are a variety of services and new trial services to support our children and young people with SEND earlier.

- In 2022, 3 out of 10 of those eligible did not take up the offer of **free early years education** for 2 year olds, which is available to children with greater need<sup>2,3</sup>. From April 2024, there has been new statutory guidance from the Department for Education for early education and childcare. As of September 2025, eligible working parents who have a child 9 months or older will be entitled to 30 hours free childcare over 38 weeks of the year<sup>4</sup>. It will remain important to ensure that those more vulnerable and at greatest need take up this extended offer.
- A **pre-school course offer for parents commenced in June 2023 and is offered by the 0-19 specialist SEND health practitioners**. The aim of the courses is to support parents under the health visiting service whilst they are waiting to see a paediatrician and to support with emerging concerns around their child's development<sup>5</sup>.
- There have been positive early results from the **Cheshire East Autism Team, Cheshire East Chatters, the North East Cheshire Waiting List project** and the **Speech and Language Therapy pilot** that suggest good outcomes by intervening earlier with children and young people or by supporting the professionals that work with them<sup>6-11</sup>. However, it is currently very difficult to track how our children progress between their health visitor assessments and those undertaken at the end of reception to check for "school readiness" to be able to robustly understand the impact of this provision.
- There is a drive towards implementing the Parent Infant and Early Years Relationship (PIERS) Service Model. The PIERS service model aims to support children aged 5 years and under and their parents to develop healthy and secure relationships<sup>12</sup>.

1. Marmot et al (2020). Health Equity in England: The Marmot Review 10 Years On. Available from: <https://www.health.org.uk/publications/reports/the-marmot-review-10-years-on> (Accessed 20 November 2023).
2. Email correspondence (Intelligence Manager, 11/10/22) Taken from Local authority interactive tool (LAIT) - GOV.UK ([www.gov.uk](http://www.gov.uk))
3. Taken from Early education and childcare (applies from 1 April 2024) - GOV.UK ([www.gov.uk](http://www.gov.uk)) (accessed 06/02/24)
4. Taken from Free childcare: How we are tackling the cost of childcare - The Education Hub ([blog.gov.uk](http://blog.gov.uk)) (accessed 06/02/24)
5. Email correspondence and verbal conversation (SEND 0-19 Health Practitioner on 18.12.23 & 08.01.24)
6. Cheshire East Council. Live Well Cheshire East. Communication and Language. Available from: <https://www.cheshireeast.gov.uk/livewell/care-and-support-for-children/early-years-and-childcare/info-for-providers/eyc-practice-information/communication-and-language.aspx> (Accessed 3 August 2023).
7. E-correspondence from Specialist Speech & Language Therapist, Cheshire East Chatters, Mid Cheshire Hospitals NHS Foundation Trust. 18 July 2023.
8. Cheshire East Autism Team (CEAT) Impact Report – June 2023
9. Received by email (Clinical Lead – CYP Neurodevelopmental Services & Learning Disabilities, 11.01.24)
10. Slide received by email from Inclusion Quality SENCO, Cheshire East Council (24/01/24)
11. E-correspondence Paediatric Speech and Language Therapy Team Manager- East Cheshire NHS Trust (17/06/24)
12. Received by email from Senior Project Manager – Mental Health & Neurodiversity on 11/08/23

**What are the needs of parents and families and what are the barriers to help?**

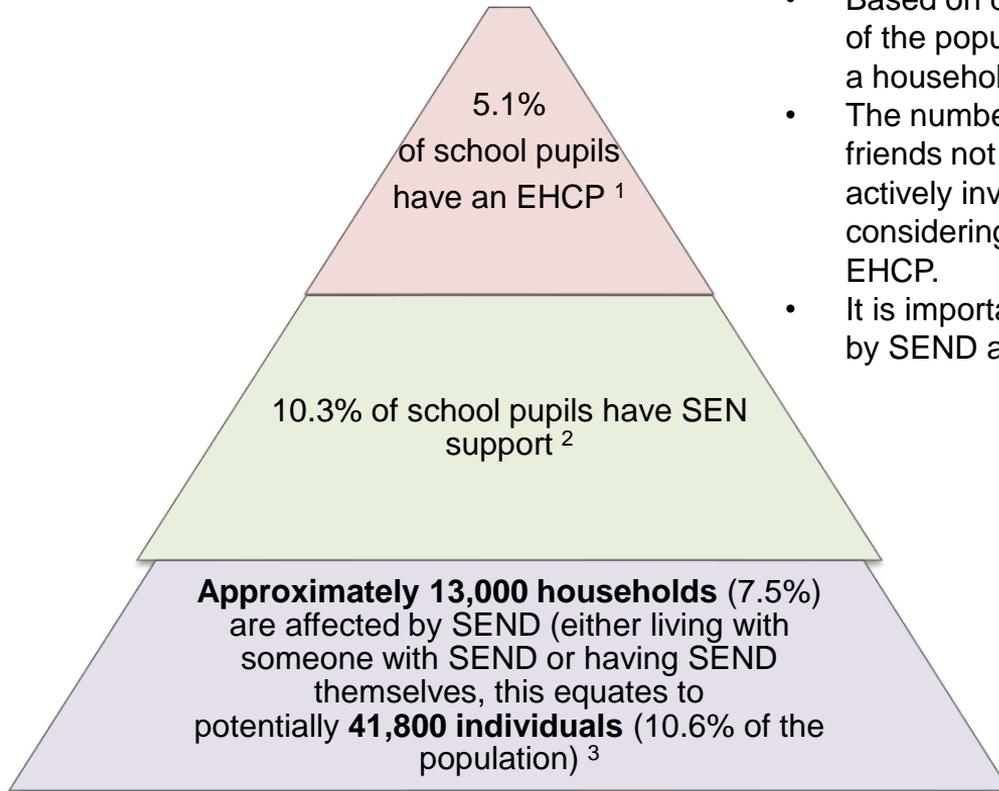


and

**What is needed to work in a way that empowers our children and families?**



# SEND has impacts and implications for a significant proportion of the Cheshire East population including our children and young people and those whom they live with



- SEND issues are not just relevant to a small number of our residents.
- Based on data from 2023/24 an estimated 41,800 individuals (10.6% of the population) could be affected by SEND either in themselves or a household member across Cheshire East<sup>3</sup>
- The number would be even greater when considering close family and friends not living with children and young people with SEND but actively involved in supporting them. The number is greater still when considering children no longer in school and aged up to 25 with an EHCP.
- It is important to understand the experiences of our children affected by SEND and also those of their families.

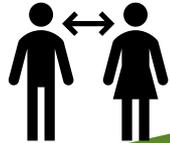
#### Calculation methodology

1. Number of pupils in state-funded nursery, primary, secondary and special schools, non-maintained special schools and state-funded alternative provision schools with an Education, Health and Care Plan (EHCP) 2023/24. The number does not include independent schools.
2. Number of pupils in state-funded nursery, primary, secondary and special schools, non-maintained special schools and state-funded alternative provision schools with a SEN support plan. The number does not include independent schools.
3. Calculated from Census 2021 household composition tables, excludes households without children and those within a communal establishment. Assumptions - only one child in the household has an EHCP or SEN support.

## Feedback from our children and young people:

Our children and young people with SEND responding to the SEND Partnership Survey were generally positive about the support they receive making a difference and being listened to, but they highlighted that the support could be more holistic in terms of health care and support with social activities<sup>1</sup>

- 92% of children and young people respondents said that the extra help which their Education, Health and Care Plan (EHCP) gives them makes it 'much easier' or 'a little easier'.
- A high percentage of young people report that their EHCP is having a positive impact on their progress at school with 83% of respondents doing at least 'a little better' and the majority of respondents (59%) "doing a lot better"
- However, lower proportions felt their plans were sufficiently holistic
  - 62% of young person survey respondents felt that everyone who needed to be was involved within the meeting.
  - 39% of respondents said that they always get the right help and support from healthcare services and a further 26% said that they get the right help sometimes. They were also asked what could we change to make sure their support is right for them. Some of the responses included "more social local activities/clubs/holiday/ out of school events" (6 comments) and "schools to listen to children and parents" ( 3 comments)



# Feedback from young people with SEND in our JIGSAW groups highlighted many joys but also worries<sup>1,2,3</sup>

## What do we like about life?

- Football
- Social media: funny videos; a world to connect to; stop isolation
- Being with family and friends, youth groups, Cheshire East Youth Council and Jigsaw SEND Youth forum
- Healthy living
- Holidays
- Education-learning new things/skills
- Art-painting for mindfulness and mental health and rug making
- Singing, music and dancing
- Gyms open 24 hours a day
- Like staff at college
- Animals/pets
- YouTube
- Video games
- Watching musicals
- Food and cooking
- Listening to audio books
- Utopia
- Films
- Shopping
- Architecture



## What don't we like/worries us?

- Social media-bullying, harassment
- Not enough shops
- Cost of living/ paying bills
- My football team going down a league
- Not enough nature
- Discrimination-race, sexuality etc.
- Poor mental health services
- Finding jobs and not getting jobs-frustrating
- Long waiting lists to get NHS support
- Difficulties speaking to a GP straight away
- Things being uncertain
- War
- Thinking extensively
- College/school
- Home
- The future and having security
- Covid coming back and having to go into another lock down – becoming isolated from friends and family
- Losing friends
- Losing family members



1. Cheshire East Council. Jigsaw for young people with additional needs. Available from: [Jigsaw for young people with additional needs | CheshireEast MarketPlace](#) (Accessed 3 October 2024)
2. Discussion with young people at the Jigsaw Group, aged 19-24 in Crewe. 16 November 2023
3. Discussion with young people at Jigsaw Group in Macclesfield feedback received by email (Participation worker 26/03/24)

# Feedback from young people with SEND in our JIGSAW group highlight some things they look forward to in the future, but also some worries about the future<sup>1,2,3</sup>

## What do we want to do in the future?

- Holding down a job/ getting a good job
- Having my own house/flat if I feel ready
- Travel- seeing the world
- Being an uncle
- Families of our own- husbands, wives, kids
- Being happier than I am now
- Becoming a youth worker
- Becoming a voice actor
- Being happier with my inner conflicts
- Being a judge on a talent show
- Being famous
- Being my own boss- running my own company
- Getting married
- Living on my own
- Working in a nursery
- Being independent
- Going out socially- pubs etc
- Learning to drive



## What are we worried about in the future?

- Not being able to get the right mental health support/ not enough mental health support
- Not having support when I turn 25 years old
- Cost of living-buying a house/ not being able to buy a house
- Living alone and moving out of family support-would I have the right support
- We need more preparing for adulthood days
- Getting old-can't walk properly, becoming ill/injured
- What will happen to the NHS if it continues to be underfunded
- People I am close with leaving my life
- That I won't be able to stay in a good mental place
- Having financial problems
- What if someone in my family gets ill
- Not having the right support
- Not being able to find a job
- Change
- Being bullied
- Losing friends/family members to death
- My mental health not getting better



1. Cheshire East Council. Jigsaw for young people with additional needs. Available from: Jigsaw for young people with additional needs | CheshireEast MarketPlace (Accessed 3 October 2024)

2. Discussion with young people at the Jigsaw Group, aged 19-24 in Crewe. 16 November 2023

3. Discussion with young people at Jigsaw Group in Macclesfield feedback received by email (Participation worker 26/03/24)

# Locally, our parent carers report a wide variety of challenges in supporting their children and young people with SEND

Some parent carers report that experiences include:

- Feeling emotional, lonely / isolated, stressed and permanently in state of 'fight or flight', frustrated, scared, exhausted, desperate or grieving<sup>1</sup>
- Dealing with their own additional needs<sup>1</sup>
- Spinning too many plates and being a nurse, parent, psychiatrist, advocate-having many roles, no training<sup>1</sup>
- Settings not having reviewed the graduated approach or communicating regarding the graduated approach<sup>2</sup>.
- Challenges in ensuring the curriculum is sufficiently adapted for their child's needs and to support with sensory issues<sup>3</sup>
- Positive impact of new EHCPs once in place, with a low response suggesting that the EHCP does not meet the needs of their child/young person/pupil, but frustrations were expressed around the time it takes to get and issues and uncertainty about the process and information available to them at this time<sup>4</sup>
- A need for more provision or clarity of provision stated within the EHCP. However, a recent survey highlighted that 65% of parent carers responding felt EHCP provision would improve outcomes or progress<sup>4</sup>
- Challenges getting the right help and support to prepare them for their next steps<sup>4</sup>
- Challenges getting the right help and support from healthcare services<sup>4</sup>
- Challenges getting the right help and support to join clubs, activities, to go on holiday or to make friends<sup>4</sup>.

1. © 2020 Ruby's Fund and CEPCF. Received by email correspondence Programme Lead – Mental Health and Neurodiversity. Cheshire East Place (11/07/23)

2. 1. e-correspondence from Education Project Manager, 27 April 2023

3. "Mad, Sad, Glad" Cheshire East Parent Carer Forum Survey (2022) Include sent from Co-Chair, Cheshire East Parent Carer Forum (01/03/23)

4. A summary of responses to Cheshire East Councils SEND Partnership Surveys (2023) and Email correspondence Business Development Manager Cheshire East Council (30/07/24)

# Nationally, additional challenges in supporting children and young people with SEND have been highlighted

According to national surveys parent carers report the following:

- According to a Mencap survey in 2017, 34% of parents of a child with a learning disability are in a 'distressed relationship'. This is compared to 26% of other parents<sup>1</sup>.
- Concerns that their child's therapy, mental health or communication needs were not being met within school<sup>2</sup>.
- A negative impact on their own mental health, their ability to work and their financial circumstances<sup>1</sup>.
- Although more recent data was not identified, it is important to recognise that these challenges may be present for our local families also.

1. Relate and Mencap 2017 'The state of the UK's relationships

2. The Disabled Children's Partnership, Failed and Forgotten: Research by the Learning Hub at the Disabled Children's Partnership, available from: Failed-and-Forgotten-DCP-report-2023.pdf (disabledchildrenspartnership.org.uk), accessed: August 2023.

# Parent carers also report the wide variety of strengths and assets that they bring to supporting their children and young people with SEND<sup>1</sup>

Parent carers can be:

- Knowledgeable
- Aspirational
- Inspirational
- Resourceful
- A great coproduction partner
- Hard working
- Ambitious
- Expert in their child and their individual needs, abilities and aspirations
- Inventive and full of ideas
- Able to help make your job easier
- Doing a brilliant job of managing a difficult situation<sup>1</sup>

**What are the communication needs for identifying and supporting children with developmental challenges and SEND from different perspectives?**



# There is need for proactive and timely communication and information sharing across all stakeholders including all children and young people and parents/carers.

- Local survey results suggest that more young people need to be made aware of the youth forum and the local offer<sup>1</sup>
- Parents report needing<sup>2</sup>:
  - Proactive communication and more timely support
  - Key workers to be accessible
  - Clarity of processes
  - Communication about support with mental health
  - Support and advice from local authority services
  - Support navigating the SEND system
  - Recommendations regarding educational settings
  - Improved routes to reach relevant teams<sup>1</sup>
  - More up to date information on the Local Offer website with improved ability to navigate it<sup>1</sup>
- Also, cross-setting awareness and communication were two of the greatest barriers to support cited by practitioners. This confirms information sharing as a significant lever by which to improve transition support in Cheshire East<sup>4</sup>. Embedding the TOGETHER Principles, and improved information sharing and communication would further support transition<sup>1</sup>. Nearly two in five educational settings responded in a recent survey that it was difficult to contact relevant teams or services. However, 74% had used the local offer website<sup>1</sup>.
- Nationally, parent carers have highlighted the importance of them and their child or young person being listened to and being provided with evidence that they have been listened to, and that their concerns have been acted upon<sup>3</sup>.



1. A summary of responses to Cheshire East Councils SEND Partnership Surveys (2023) and Email correspondence Business Development Manager Cheshire East Council (30/07/24)
2. "Mad, Sad, Glad" Cheshire East Parent Carer Forum Survey (2022) Include sent from Co-Chair, Cheshire East Parent Carer Forum (01/03/23)
3. Independent analysis of the consultation responses to the SEND review: right support, right place, right time (publishing.service.gov.uk) (accessed 06/11/23)
4. e-correspondence from Education Project Manager, 27 April 2023

# What communication approaches can professionals use to support families?<sup>1</sup>

A local charitable organisation and the Cheshire East Parent Care Forum highlighted the importance of communications that were person-centred and helped families to navigate the system.

## **Navigating the system**

- Co-production
- Manage expectations
- Explain timescales and keep promises on them (even if it's an update to say there's a delay)
- Be aware of SEND laws and policies / processes
- Outline who does what
- Inform about the process and what will happen
- Understand that this is your normal day to day, but for parents it's baffling

## **Person centred approach**

- Use active listening and open questions
- Don't assume or have preconceptions (beware unconscious bias)
- Don't patronise
- Don't call us 'mum' or 'dad' –please use our name
- Involve parents, children and young people in decisions
- Try to put yourself in their shoes
- Recognise the parent as an equal in the process –as the expert on their child
- Every child and family are different

# It is important to continue to consider opportunities to further widen reach of parent support and advice services

The parent carer forum is an important source of parent support and has a wide reach

- The aim of the Cheshire East Parent Carer Forum is “to make sure the services in Cheshire East meet the needs of disabled children / young people and their families”<sup>1</sup>.
- Analysis demonstrated that its Facebook page reached 27,000 people over a three month period (January to July 2023) and 45,000 in the preceding 12 months<sup>2</sup>
- As of July 2023, over 3000 parent carers were part of the private parent/carers only Facebook group<sup>2</sup>

In addition, Cheshire East Information Advice and Support (CEIAS) is a statutory service which operates separately from the local authority and the ICB. CEIAS offers free impartial, confidential, and accurate information, advice and support about education, health and social care. Children, young people and their parents/carers can access this service for matters relating to special educational needs and disability. Feedback from service users has been positive (based on 2022/23 data)<sup>3</sup>. Annual numbers of enquiries via this service are relatively low compared to the numbers of families experiencing SEND.

A wide range of local and national charities and organisations provide support to parents and families with children with SEND as captured in the local offer for SEND. Examples of local support include the SEND family hub, Ruby’s fund and Space4Autism. Visyon and Just Drop In provide support in relation to mental and emotional wellbeing<sup>4,5,6,7</sup>.

The online “Toolkit for Inclusion” also provides a wide range of information. Some consultation feedback regarding this resource has highlighted the potential need for a more “user-friendly” version for parents<sup>8</sup>.

1. Cheshire East Parent Carer Forum. Available from: <https://cepcf.org/> (Accessed 05.07.23)
2. Email correspondence with Cheshire East Parent Carer Forum (05.07.23)
3. Cheshire East Information, Advice and Support (CEIAS) Team 1<sup>st</sup> August 2022 - July 31<sup>st</sup>, 2023 Annual Report received by email from Cheshire East Information Advice and Support (CEIAS) Team (14.01.25)
4. Cheshire East Council. Family Hubs ([cheshireeast.gov.uk](https://cheshireeast.gov.uk)) (Accessed 03/05/24)
5. Received by email from Business Development Manager - Strong Start, Education and Integration (07/02/24)
6. Received by email from Project Support Officer - Mental Health & Neurodiversity (Cheshire East) (20.11.23)
7. Local Offer for SEND available from [www.cheshireeast.gov.uk/localoffer](http://www.cheshireeast.gov.uk/localoffer)
8. The Inclusion Quality Team, Cheshire East Council 11/01/24



**What are the workforce challenges  
across education, health and care?**



# Educational settings report ongoing challenges with recruitment, lack of appropriate physical space, and understanding and implementing the graduated approach, obtaining support from healthcare and ensuring all children make good progress

The **Delivering Better Value Programme engagement work (2022/23)** with educational settings highlighted that<sup>1</sup>:

- Significant proportions of staff members reported that not all their colleagues were confident in discussing the graduated approach with parents/carers or had received training on the graduated approach<sup>1</sup>.
- 80% of Early Years Leaders cited difficulty recruiting personnel as a key barrier. This represents a significant opportunity to improve the provision of graduated approaches<sup>1</sup>.
- Lack of appropriate physical space to support children with SEND was also highlighted as an issue<sup>1</sup>.

Responses to the **SEND Partnership Survey** from educational settings between July and August 2023 and November and December 2023<sup>2</sup> highlighted that:

- Around half of staff were not confident with the graduated approach however, most did feel confident about SEND reforms.
- 78% of educational settings respondents agreed that the Education, Health and Care Plans (EHCPs) either completely or mostly reflect the child/young person's needs with only 3% that saying the plans do not reflect their needs at all.
- Where improvement was needed, the most frequent response was “plans need greater clarification on how needs can be met, more guidelines and summary of how to best support”.
- 65% of educational settings said that all or most children were making progress towards their expected outcomes. 28% said that some children were making progress towards their outcomes. Where children were not making progress, varied reasons for this were highlighted for example, the educational settings said there was not an appropriate setting/ cannot support complex needs.
- 35% agreed that they get the right help and support from healthcare services and 39% disagreed.

1. E-correspondence from Education Project Manager, 27 April 2023

2. A summary of responses to Cheshire East Councils SEND Partnership Surveys (2023) and Email correspondence Business Development Manager Cheshire East Council (30/07/24)

# Healthcare staff report challenges with capacity (recruitment, training and retention) and the ability to contribute regularly to annual reviews

- Between July 2022 and June 2023 across the 0-19 programme Healthy Child Programme workforce, the average voluntary turnover rate was 16.0% and their average sickness rate was 4.6%<sup>1</sup>. This service includes health visitors and school nurses, who are key in supporting children and young people with their wellbeing and development.
- Between November 2022 and February 2023, a survey of 103 professionals including paediatricians, therapists, 0-19 service and CAMHS/neurodevelopmental pathway staff working in Cheshire East was undertaken. The survey found that<sup>2</sup>:
  - **69%** of staff reported feeling well informed and confident in their knowledge of the SEND reforms that started in 2014.
  - **86%** of respondents had participated in the EHC needs assessment process.
  - **51%** reported regularly contributing to annual reviews.
  - Other themes included that the annual review process could be more timely and efficient, and that children with sensory needs preventing them leaving the home are excluded from support by the Sensory Processing Occupational Therapy Support Service (SPOTSS).

## During 2022-23 many school staff across Cheshire East participated in the SEND Partnership Training Programme highlighting that the training offer is reaching many school staff across the local area



- Across all training courses over the past 12 months, there were 462 attendees with 407 from primary schools and 55 from secondary schools<sup>1</sup>.
- In addition to this, 74 internal Cheshire East Council employees also attended training<sup>1</sup>.
- One specific example of training is the Teacher Assistant training offer. This covers the method and practice of learning, inclusive practice, adaptive teaching and the curriculum, complex needs, behaviour for learning, teamwork and communication. As at the 24 January 2024, there had been 31 attendees<sup>2</sup>.

1. Email correspondence: SEND School Improvement Officer (27/06/23) Denominator figures to work out the average attendees derived from the List of Cheshire East Schools in Cheshire East - <https://www.cheshireeast.gov.uk/docs/schools/schools-list-and-term-dates/schools-in-ce-list-january-2024.xls>

2. Email correspondence- Inclusion Quality SENCO, SEND Team (24/01/24)

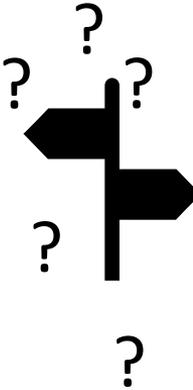
**What are the needs in relation to transition?**



# There is need for further work on approaches to transitions particularly in terms of raising awareness of opportunities and tracking progress

A variety of engagement activity has highlighted the need for a focus on transitions and improving the information available regarding them:

- Some parents reported they had insufficient information, communication and support regarding transition. SEND providers also reported that parental knowledge and involvement could be barriers to transition<sup>1</sup>.
- SEND providers also reported that that they receive insufficient information regarding new pupils to support them with transitions<sup>1</sup>.
- A need for improved cross-setting awareness has been highlighted as important in terms of transition<sup>1</sup>.
- The Cheshire East Autism Team are working to improve transition support for children with autism or suspected autism between different stages of education<sup>2</sup>.
- Bespoke analysis undertaken as part of this JSNA review demonstrated that significant proportions (approximately half) of children with Education Health and Care Plans (EHCPs) in reception (during 2011/12) were in mainstream in year 12 (during 2022/23)<sup>3</sup>. However, the ability to more routinely follow our children and young people's progress and path through the education system could be beneficial to understand the effectiveness of the local offer and in guiding parent/carers as to the potential best route for their child or young person given their specific circumstances.
- There is room for improved understanding of Preparing for Adulthood outcomes amongst primary schools<sup>4</sup>.



1. E-correspondence from Education Project Manager, 27 April 2023

2. Cheshire East Autism Team (CEAT) Impact Report – June 2023

3. e-correspondence from Business Intelligence Officer, Cheshire East Council, Business Change, 1 August 2023

4. E-correspondence from Inclusion Quality Team Cheshire East Council (21/12/23). 156 schools surveyed. 50 survey responses received. 32% return. 40 responses from primary schools, 10 responses from secondary schools.

# There is need for further work on approaches to preparing for adulthood particularly in terms of raising awareness of opportunities and tracking progress (1 of 2)



Bespoke analysis as part of this JSNA review has highlighted difficulties in tracking progress regarding preparing for adulthood outcomes across education, health, and care outcomes through annual reviews<sup>1</sup>. Preparing for adulthood outcomes and holistic wellbeing outcomes are very closely linked. Understanding holistic wellbeing (including physical, mental and social wellbeing) and supporting development to ensure a good level of holistic wellbeing by adulthood could further help to understand and refine the effectiveness of the local offer and again help guide both parent carers and professionals.

From data available for Cheshire East it can be seen that:

- In 2024, children and young people in Cheshire East maintained schools and academies with an EHCP generally did better than their national peers. However, children with SEN Support tend to have results that are below national. Generally, learners receiving SEN support did as well as or better than their peers nationally in Phonics and Key Stage 2 in 2024 but were below national for EYFS and Key Stage 4. Children and young people with EHCPs are achieving expected standard or better than their national peers<sup>2</sup>.
- The proportion of children and young people with SEND achieving expected standards is understandably lower than those without SEND, given the challenges they experience<sup>3,4,5</sup>. These disparities highlight the importance again of considering broader outcomes in the context of preparing for adulthood and for acknowledging achievements and progress towards these. In addition, it is important to ensure that educational outcomes are optimised through the graduated approach.
- Data regarding other preparing for adulthood outcomes in our children and young people with SEND are outlined on the next slide.

1. Cheshire East Council case review involving representatives from Public Health, Commissioning and Children's and Adult's Services Undertaken between October 2023 –July 2024
2. Received by email from Business Development Manager Cheshire East Council (28.03.25)
3. 2022 DfE statistics published 6 October Key stage 1 and phonics screening check attainment, Academic Year 2021/22 – Explore education statistics – GOV.UK (explore-education-statistics.service.gov.uk) 2019 and 2022 LAP results calculated in house by Cheshire East Received by email from Business Intelligence Officer (30/11/22)
4. Cheshire East and National pupil characteristic groups from DfE statistics published 22 December 2022 Table "ks2\_regional\_local\_authority\_and\_pupil\_characteristics\_2019\_and\_2022\_revised- National figures based on state funded schools and academies Key stage 2 attainment, Academic Year 2021/22 – Explore education statistics – GOV.UK (explore-education-statistics.service.gov.uk) 2019 and 2022 Local Area Partnership (LAP) results calculated in house by Cheshire East based on the location of the school Received by email from Business Intelligence Officer (01/02/23)
5. Taken from the LAIT Tool available from [Local Authority Interactive Tool \(LAIT\) - LA Level: , Attainment 8 score - pupils with SEN Support](#) (accessed 13.03.25)

# There is need for further work on approaches to preparing for adulthood particularly in terms of raising awareness of opportunities and tracking progress (2 of 2)

The Cheshire Youth Justice System Health Needs Assessment (HNA) highlighted that transition to adulthood and adult service provision was critical for all young people engaging with the Youth Justice Service, with gaps in services identified that put this group at increased risk, both in terms of their health needs and risk of offending<sup>10</sup>. It would therefore be particularly important for young people engaged with the Youth Justice Service who have SEND.

- 68% of 14-17 year olds with a learning disability received a health check during 2023, which is something they will be eligible for annually throughout life<sup>1</sup>.

## **What we routinely know about social care outcomes in our children and young people with SEND:**

- As of October 2023, of all the 1,678 young people in Cheshire East who had an EHCP and were aged 18+, 33% had received an adult social care assessment at some stage with 48% currently receiving support. Additional information regarding this process was added to the Council website in October 2023<sup>2,3</sup>.

## **What we routinely know about our employment outcomes in our children and young people with SEND:**

- Over the past 4 years the Supported Internship programme has resulted in 75% of interns progressing to paid work or apprenticeship<sup>4</sup>.
- During 2023-24 12.5% of adults with learning disability were in paid employment<sup>5,6,7</sup>.

In addition, the Cheshire Youth Justice Service Health Needs Assessment (HNA) highlighted that transition to adulthood and adult service provision is critical for all young people engaging with the Youth Justice Service, with gaps in services identified that put this group at increased risk, both in terms of their health needs and risk of offending<sup>8</sup>. It would therefore be particularly important for young people engaged with the Youth Justice Service who have SEND.

1. Email correspondence from Project Support Officer, Mental Health & Neurodiversity, Cheshire East Place Team (received 06 July 2023).
2. Data provided by Business Intelligence Officer, Business Change, Cheshire East Council (received 16/10/2023)
3. Received by email from Social Worker- Adults Learning Disability Team 05/03/24
4. Reference- received by email from Supported Internship Lead, Cheshire East Council (09.01.24)
5. NHS Digital. ASCOF time series. Available from: Measures from the Adult Social Care Outcomes Framework, England, 2022-23 - NHS England Digital (Accessed 20/05/2024).
6. Email correspondence from Head of External Funding, Complex Worklessness & Inclusion, Cheshire East Council. 26 June 2023.
7. E-correspondence Head of External Funding, Complex Worklessness & Inclusion and Business Intelligence Officer Cheshire East Council (08/07/24)
8. McCoy, E et al, Public Health Institute (PHI), Liverpool John Moores University (LJMU), Cheshire Youth Justice Services Health Needs Assessment – Executive Summary Report March 2023 [2023-07-cheshire-youth-justice-services-health-needs-assessment-executive-summary-report.pdf \(ljmu.ac.uk\)](https://www.ljmu.ac.uk/research-and-innovation/research-reports/2023-07-cheshire-youth-justice-services-health-needs-assessment-executive-summary-report.pdf)

**What were the gaps in support  
identified by this review?**

# Strengths of SEND provision across Cheshire East

This review focuses on the challenges experienced and gaps in provision in relation to SEND across Cheshire East and makes a wide range of recommendations in relation to these.

However, it also highlighted many strengths including:

- Our **children and young people with SEND** themselves with broad and varied talents, interests, passions and expertise.
- Extensive **passion, dedication and engagement from professionals, children and families** alike to optimise outcomes for children and young people with SEND.
- A **recognition of need for change** and for SEND to be a priority across organisations.
- **Focus on the need for promoting inclusion** and of tools to support inclusive approaches across educational settings and connection with the wider children and families agenda, for example, through family hubs.
- A highly active and engaged **Parent Carer Forum**.
- Developing proactive **family hub support**.
- Broad **engagement of school staff** with the local training offer.
- A recognition of the **importance of starting to prepare for adulthood early**.
- **Good reach of health visiting service evidenced by uptake of routine early years checks**.
- **Examples of positive feedback from parent/carers**.
- **Collaborative working to improve consistency of NHS support through the clinical network**.



## Work in progress to try to support SEND earlier, and in more effective ways

- Further development of the [Toolkit for Inclusion](#) resource.
- Parental Perspectives training.
- 0-19 years service pre-school course for parents.
- Earlier speech and language support pilot.
- Cheshire East Chatters.
- Cheshire East Autism Team.
- Piloting and implementation of more multi-agency assessments across education, health and social care.
- Waiting lists initiative.
- Good outcomes reported through the supported internships.

# Summary of gaps in access to support (identified through this extensive review)

A number of gaps have been identified in relation to the way residents or schools access support in Cheshire East including:



There is a lower rate of children and young people with Special Educational Need Support Plans compared to other local comparator areas.



There is a lower proportion of children eligible for free school meals achieving a good level of development at the end of reception compared to the national average.



There is a need to increase uptake of health checks for young people with learning disability between the ages of 14 and 17.

# Summary of gaps in support available

Certain gaps have been identified in relation to the support available to residents or schools including:



There needs to be consistent and timely communication that provides comprehensive information to empower our children, families and the professionals that support them



There needs to be more consistently timely assessments particularly in relation to Attention Deficit Hyperactivity Disorder, Autism, Speech and Language Therapy, and mental health assessment



There needs to be more tailored and proactive support to promote wellbeing and address mental wellbeing



There are challenges with staff retention and recruitment across SEND provision. Also, there is no community paediatrics service in the North of Cheshire East



Specific mental health support for children and young people who do not have a confirmed learning disability, but less severe learning difficulties who also have a diagnosis of autism



There is need for more specialist provision in the Cheshire East footprint and more appropriate physical space to support children with SEND in mainstream settings



We need to improve our ability to track outcomes across different settings in relation to education health and social care progress



Further support for education settings (including early years, schools and colleges) around transition is required



Further resources and information required specifically around transition and promoting wellbeing during this



There needs to be longer term evaluation of newly piloted approaches that consider equalities and a breadth of education health and care outcomes

**What were the recommendations from  
this review?**

# Overarching recommendations summary

Across Cheshire East we need to:

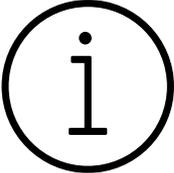
1. Provide inclusive information, be proactive and intervene early
2. Think holistically: education, health and wellbeing, and care
3. Recognise complex risk factors early, including where there has been childhood trauma
4. Increase resource and capacity to ensure that a child's education needs are met in the best setting so that the child is not disadvantaged
5. Ensure timely and consistent NHS provision of support and advice in relation to Autism, Attention Deficit Hyperactivity Disorder and therapies such as speech and language, physiotherapy, occupational therapy and sensory processing
6. Communicate clearly, proactively, consistently, transparently, and through a person-centred approach
7. Empower children, young people, families and professionals to look towards and plan for the future



## Recommendation 1- Provide inclusive information, be proactive and intervene early

Across Cheshire East we need to promote early intervention and ensure parents are aware of the support and adjustments that are available to their child or young person whether they have short term developmental needs or a longer term special educational need or disability by:

- Ensuring that parents are aware of support and reasonable adjustments through the Toolkit for Inclusion and Family Hub offer and wider local offer for SEND.
- Further promoting early intervention provision and uptake including
  - 2 year free early years education provision
  - Family hubs support including specialist family hub support
  - Cheshire East Chatters
  - Cheshire East Autism Team
  - Speech and Language Pilot
  - Specialist outreach packages
- Ensuring comprehensive awareness of early intervention provision across education, health and care.
- Building upon robustness of emerging evaluation findings from different early intervention initiatives, including through improved ability to track progress of children over time and across different educational settings.
- Ensuring early support for all, with a greater intensity of support to those who need it most, particularly those with protected characteristics, low income, those with mental health or other health conditions.
- Improving local understanding of protected characteristics such as: gender; pregnancy and maternity; gender reassignment; and of the under representation of SEND in our minority ethnic communities. This will improve the potential to provide tailored support accordingly.
- Considering implementation of the Parent Infant and Early Years Relationship (PIERS) Service Model across Cheshire East Place to support children aged 5 years and under and their parents to develop healthy and secure relationships.

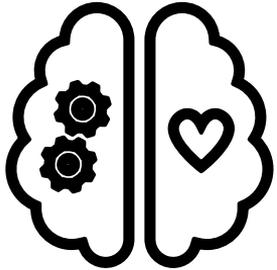


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## Recommendation 2- Think holistically: education, health and wellbeing, and care (1 of 2)

Across Cheshire East, we need to promote holistic approaches that encompass the physical, mental and social wellbeing needs of the child and their families by:

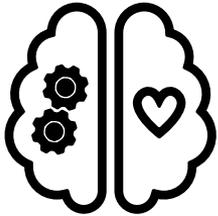
- Consistently monitoring physical, mental and social wellbeing in all children with SEND as part of annual reviews, potentially through validated tools.
- Addressing root causes of poor mental wellbeing, including supporting parental wellbeing
- Consistently signposting in relation to promoting good mental wellbeing in parents and school staff
- Monitoring the numbers of children presenting to mental health services: Healthy Young Minds, CAMHS, hospitals and those presenting to A&E with self harm. The aim of this is to understand self harm behaviours and how to provide support.
- Having an approach to tracking children that did not meet the threshold for support by CAMHS and to ensure signposting to relevant support is achieved
- Recognising the additional challenges of children and young people with SEND who identify as LGBT+ and those experiencing gender dysmorphia .
- Considering the need of tailored sex and relationship education for children with SEND to support developing healthy relationships.
- Using the findings and recommendations from this JSNA to inform the ongoing development of the
  - Senior Mental Health Lead workforce.
  - Whole school approaches
  - Implementation of the iThrive framework
  - Family hubs
- Engaging with the Senior Mental Health Lead workforce with regards to the inclusion strategy and trauma informed practice.
- Ensuring that support and provision for our children and young people is trauma-informed.



## Recommendation 2- Think holistically: education, health and wellbeing, and care (2 of 2)

Across Cheshire East, we also need to promote holistic approaches that encompass the physical, mental and social wellbeing needs of the child and their families by:

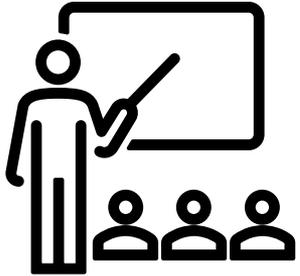
- Exploring access to physical health pathways more such as primary care, dentistry and phlebotomy.
- Utilising the education setting to promote Learning Disability health checks in young people aged 14 years or older.
- Working to explore, and potentially regularly monitor, outcomes following learning disability health checks.
- Promoting the use of health passports and inclusive health and care provision to accommodate severe disability.
- Where reduced school attendance or multiple suspensions have been highlighted, ensuring that an undiagnosed or unmet special educational need or disability is not the underlying cause and address it if it is.
- Regularly monitoring attendance more (potentially as part of annual reviews) in children with SEN support plans or Education, Health and Care Plans.
- Understanding how children and young people being educated at home, and their parents, are being supported.
- Undertaking a deep dive review into children and young people's mental health service support available for children and young people with SEND.
- Ensuring multi factorial assessment of children and young people presenting with either SEND, mental health or social care need and appropriate multiple agency working in response to these assessments.
- Learning from the Dynamic Needs Assessment Tool (DNAT) and ensure that it aligns with the Complex Needs Escalation and Support Tool (CNEST).
- Working together to address the acknowledged gap in support for children and young people who do not have a confirmed learning disability but less severe learning difficulties, who also have a diagnosis of autism.



### Recommendation 3- Recognise complex risk factors early, including where there has been childhood trauma

Across Cheshire East, we need to have a responsive proactive support for those children and young people who have multiple risk factors such as those disengaging from education or who have had traumatic adverse childhood experiences by:

- Understanding more about particularly vulnerable populations such as: children with an Education, Health and Care Plan who are missing education.
- Supporting children and young people with SEND early where they have multiple risk factors that could lead to involvement with the Youth Justice System.
- Ensuring time limited use of Alternative Provision to allow school to make reasonable adjustments and enable the child to reintegrate back into mainstream school.
- Ensuring that children and young people in Alternative Provision are not disadvantaged and are supported to achieve good academic attainment.

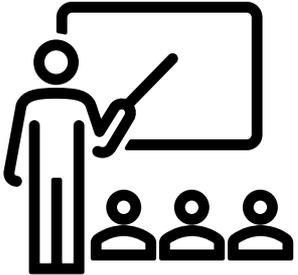


## Recommendation 4- Increase resource and capacity within educational settings

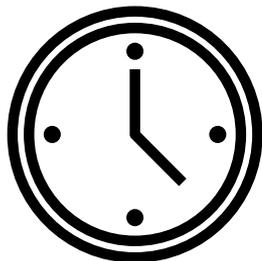
Across Cheshire East, we need to increase resource and capacity to ensure that a child's education needs are met in the best setting so that the child is not disadvantaged by improving our effective use of education, health and care plans, including through:

- Streamlining outcomes and strengthening outcomes monitoring
- Reviewing plan quality
- Promoting strategies as normal practice rather than in a plan where appropriate
- Celebrating successful outcomes
- Regularly reviewing the need for plans following the achievement of successful outcomes

- Further promoting inclusion in mainstream schools and supporting them to make reasonable adjustments- building understanding regarding barriers to inclusion and supporting schools to overcome them. Secondary schools, particularly need support to make adaptations that can inclusively meet need.
- Increasing appropriate physical space in mainstream settings to support children and young people with SEND.
- Having a package of support provided by the council, specialist schools and the NHS to support intervening earlier in terms of the graduated approach so robust support plans are in place.
- Increasing capacity for specialist education (covering resource provision, SEN units and special schools) within Cheshire East.



Recommendation 5- Ensure timely and consistent NHS provision of support and advice in relation to Autism, Attention Deficit Hyperactivity Disorder, community paediatrics and therapies such as speech and language, physiotherapy and occupational therapy.



Across Cheshire East, we need to ensure that all children and young people and their families have consistent and timely access to clinical services and support both in the north and the south of Cheshire East, by:

- Continuing to promote the clinical network to facilitate consistency of advice across Cheshire East.
- Further working to improve consistency of access to services between north and south Cheshire East including referral thresholds.
- Considering community paediatrics provision in the North of Cheshire East to ensure a consistent offer to residents.
- Monitoring processes, such as the number and timeliness of assessments and the impact of proactive support.
- Consider monitoring of preparing for adulthood outcomes as part of NHS support and advice.

## Recommendation 6- Communicate clearly, proactively, consistently, transparently, and through a person-centred approach

Across Cheshire East, we need to communicate in a way that:

- Balances proactive and reactive needs for information.
- Supports with navigating the system\*
- Is person-centred\*\*
- Recognises strengths in the child or young person, their families and the professionals that support them.
- Recognises differences in perspectives and understanding regarding SEND and written and spoken English.
- Recognises and supports the wellbeing of children, young people, parents, carers and professionals supporting children and young people with SEND.
- Recognises the process of psychological adjustments that some families and children and young people with longer term SEND experience.

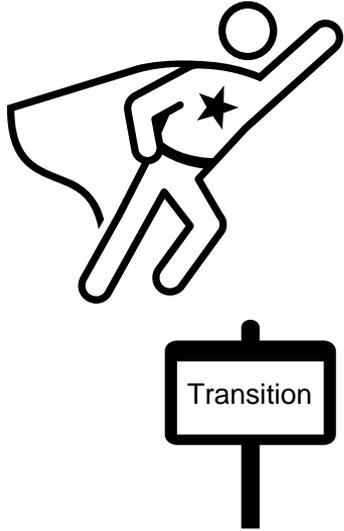
### \*Navigating the system<sup>1</sup>

- Co-production
- Manage expectations
- Explain timescales and keep promises on them (even if it's an update to say there's a delay)
- Be aware of SEND laws and policies / processes
- Outline who does what
- Inform about the process and what will happen
- Understand that this is your normal day to day, but for parents it's baffling

### \*\*Person centred approach<sup>1</sup>

- Use active listening and open questions
- Don't assume or have preconceptions (beware unconscious bias)
- Don't patronise
- Don't call us 'mum' or 'dad' –please use our name
- Involve parents, children and young people in decisions
- Try to put yourself in their shoes
- Recognise the parent as an equal in the process –as the expert on their child
- Every child and family are different

## Recommendation 7- Empower children, young people, families and professionals to look towards and plan for the future



Across Cheshire East, we need to:

- Provide dedicated resources to support the child or young person through each of the transition stages, e.g. starting school and going on to further education.
- Have earlier conversations with children and families regarding preparing for adulthood and developing shared goals across a breadth of outcomes.
- More consistently and systematically track progress towards preparing for adulthood outcomes in our children and young people with special educational needs and disabilities.
- Raise awareness of the processes involved for the assessment to adult social care, through wider dissemination of the resident information booklet that has recently been produced.
- Understand and pre-empt additional support for pupils, parent carers and schools at each of the school transition points.

We need to achieve this by:

- Further working on approaches to transitions and preparing for adulthood.
- Focusing on transition within the rewrite of the SEND strategy and ensure there is a dedicated workstream and resource.
- Celebrating successes.
- Further development of annual review processes.
- Building upon the Preparing for Adulthood outcomes analysis and audit findings.
- Working as a multi-partnership, which children and their families should be central to.

# Contributors

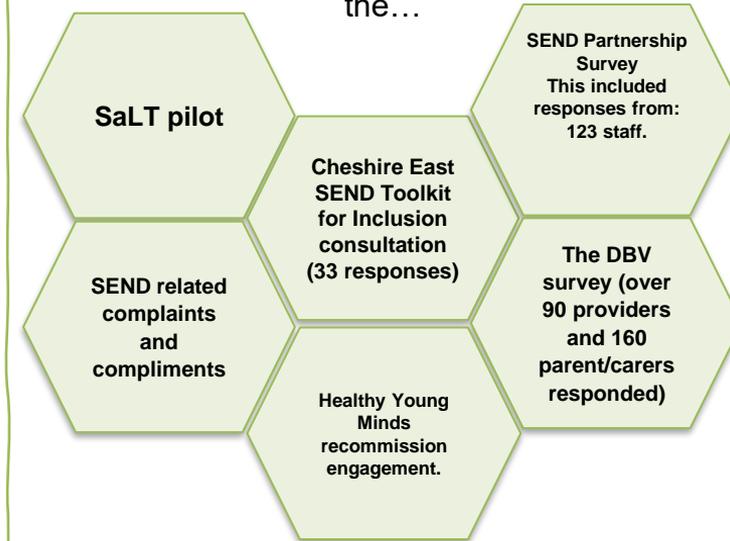
This review was produced through the SEND JSNA Working Group. The working group contributed to the development of the scope; analysis; and narrative development. In addition to this a range of stakeholders also contributed through providing insights and information.

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Within this JSNA we have included feedback from the...

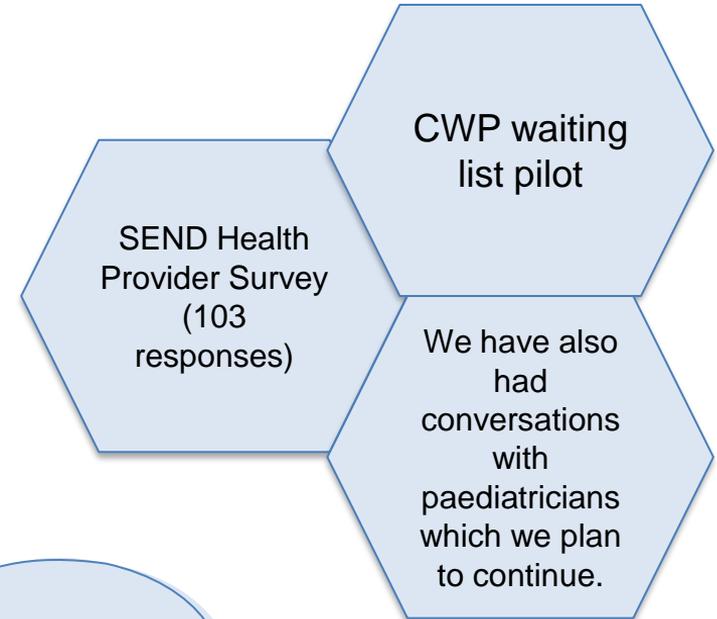


*In total 36 Cheshire East Council employees have been involved in the SEND JSNA.*

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Within this JSNA we have included feedback from the...



18 NHS employees have been involved in the SEND JSNA.

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Four Cheshire East resident parent carers

- Cheshire East Parent Carer Forum (CEPCF) survey (117 responses) and the PCF member priorities.
- SEND Partnership Survey (234 responses)
- Insights from the Parent Perspective Training
- A local family's experience of living with severe disability

**Parent Carer Reps and feedback included within the JSNA**



- SEND Partnership Survey (54 responses from young people)
- Feedback from young people who attend both the Macclesfield and Crewe Jigsaw groups
- Healthy Young Minds recommission feedback from young people.

**Children and young people feedback included within the JSNA**



Tracey Walklate- former eCAPH Chair (former working group member)  
Gill Price- eCAPH Chair (working group member)  
Mark Bayley- eCAPH Chair (working group member)  
Helen Philips (working group member)  
Lisa Hodgkison (working group member)

- SEND Partnership Survey (63 educational settings)

**School Reps- working group members**



Steph – Ruby's Fund (Working group member)  
Alison- Ruby's Fund (Working group member)  
Helen Davis- Ruby's Fund (former working group member and contributor)  
Sam Ruck- Visyon (Contributor)  
Ann Wright- JDI (Contributor)  
Julia Wood – South Cheshire CLASP (contributor)

- Insights from the Parent Perspective Training

**Voluntary, Community, Faith and Social Enterprise Sector working group members and feedback included within the JSNA**

