

# SEND

# Strategic Needs Assessment

2023

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## **Executive Summary**

#### **Background**

In October 2019 the local authority produced a Joint Strategic Needs Assessment JSNA with the aim of determining what we knew about Special Educational Needs and/or Disabilities (SEND) in Sefton, and providing a profile of the Sefton children, young people and adults with special educational needs and/or disabilities.

According to Census 2021, Sefton had a resident population of 279,239 people, with 57,904 children and young people in Sefton (age 0-19) and 74,281 children and young people in (age 0-25). In 2020/21, 16% of children and young people (aged 0-19) in the borough were living in relative low-income households (relative low-income is defined as a family in low income before housing costs in the reference year. A family must have claimed one or more of Universal Credit, Tax Credits or Housing Benefit at any point in the year to be classed as low income in these statistics).

There were 107 school settings in Sefton and 42,576 children and young people attending those settings, with 40,245 children and young people educated in the 102 Sefton state-funded, maintained nursery, primary, secondary, special schools and pupil referral units (PRUs), and a further 2,331 children and young people attending 5 non-maintained and independent settings.

At the time 4,134 (9.78%) children and young people were receiving 'SEN support' (previously school action and school action plus) in a Sefton maintained school or post 16 provision, which was in-line with the previous five-year period (2014 – 2018) trend of 10.66%, compared to a national average at the time of 11.7% and a north west average of 11.8%. However, there was a strong sense of opinion at the time that disability was likely under-reported. In 2019, the local authority also reported that it maintained an EHC Plan for 1,445 (3.32%) children and young people. The total number of pupils that had an EHC plan or where receiving 'SEN support' at the time was 5,579 (13.2%), compared to the then national average of 14.6% and north west average of 14.8%. 23% of EHCPs were for children aged 510yrs, 40% s for children aged 11-15yrs, 27% for young people aged 16-19yrs and 7% for young people/adults aged 20-25yrs. Approximately 25% of children and young people for whom the local authority maintained an EHC plan at the time were integrated in mainstream education provision. Speech, language and communication needs, moderate learning difficulties and social, emotional and mental health needs were the top three primary needs for children with SEND in primary settings. In secondary schools the needs were specific learning difficulties and social, emotional or mental health needs.

The trend for the five-year period (2014 – 2018) of children with a SEN Statement or EHCP illustrated a clear shift from SEN Statements to EHC plans in 2016 & 2017, in accordance with the SEND reform expectation that all statements should have been converted to EHC plans by 1st April 2017, but also a considerable 47.3% rise in number of children and young people with a Sefton maintained EHC plan, from 981 to 1,445, an increase of 464. This increase was put down to the 2014 SEND reform, extending the rights and protection to children and young people by introducing a new education, health and care plan, and extended the special educational needs system to young people up to the age of 25. At the time, considering population projections, it was estimated that the demand for EHC plans would continue to increase at an average rate of at least 12% per annum.

In 2018, 364 requests were made for assessment for an EHC plan, compared to a national average of 509 and a north west average of 442 at the time, which represented a significant growth of 46.15% from 168 requests received in 2016 and 303 requests received in 2017. 145 children and young people were assessed, and a decision taken to issue an EHC plan, compared to a national average of 339 and a north west average of 307.

In 2015, 2016 and 2017 the Council outperformed both the national and north west averages for establishing EHCPs with the statutory 20-week period, with a three-year average of 90.8%. However, this performance dropped significantly in 2018 to 13.8%, compared to a national average of 60.1% and a north west average of 63.1%, but unfortunately by April 2019,

the level of performance had dropped again to 3%.

Sefton underwent a local area SEND inspection in November 2016. The inspection found weaknesses in the way Sefton provided the support required and they were required to submit a Written Statement of Action (WSoA) detailing how the weaknesses would be addressed over a 3-year period.

Between 15 and 17 April 2019, Ofsted and the Care Quality Commission (CQC) revisited Sefton to decide whether the local area has made sufficient progress in addressing the areas of significant weakness detailed in the written statement of action (WSOA). As a result of the findings of the initial inspection and in accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, Her Majesty's Chief Inspector (HMCI) determined that a WSOA was required because of significant areas of weakness in the local area's practice. HMCI determined that the local authority and the area's clinical commissioning group were jointly responsible for submitting the written statement to Ofsted, which was declared fit for purpose on 31 July 2017.

While recognising the significant challenges that the local area leaders have faced, Inspectors believed they have failed to secure the improvements in SEND provision across Sefton since the time of the November 2016 inspection, and that provision has worsened. Inspectors identified that robust partnership governance, around the action plan, had not developed since 2016 and that there was little progress on some of the areas previously identified. Consequently, an Improvement Notice was issued by the Secretary of State for Education. Responding swiftly to the feedback received the Council Chief Executive, Chief Officer of the two local Clinical Commissioning Groups (at that time responsible for commissioning of health services) and Health Leaders established a multi-agency joint board called the SEND Continuous Improvement Board (SENDCIB). A full review was undertaken of the WSoA from 2016 to ensure the Council did not repeat the same mistakes. The main areas for development focussed on timeliness and quality of Education Health and Care Plans (EHCPs), waiting lists for health referrals as well as the operational oversight of the Designated Clinical

Officer (DCO). In addition, co-production and communication with parents was also a focus. Joint commissioning was a further area of concern in ensuring there was adequate services to meet local demand. Actions were taken to improve governance, practice, performance, and parental engagement. The SENDCIB met monthly to scrutinise the improvement plan and agree where further improvements could be made.

Further monitoring visits were made by the DfE, which acknowledged the improvements in the system, and evidence from a review in June 2021 demonstrated that Sefton Council and partners had made significant progress and had been successful in addressing and embedding the improvements identified in Ofsted's/CQC revisit in 2019; the improvement notice was then revoked. This meant that the Council formally exited departmental intervention but remained subject to continued monitoring of progress. Although the notice had been lifted it was agreed that the SEND Continuous Improvement Board (SENDCIB) would continue to meet bi-monthly to ensure there is continued focus on this area of work.

In early 2023 a new Ofsted Framework for Inspection of SEND services came into effect and as a result a new plan is in development to ensure we are meeting the needs of children and young people in Sefton with Special Educational Needs and Disabilities. Co-production remains high on the list as does timeliness and quality of services.

# Moving forward - A National system underpinned by National Standards

In the interim period since the last JSNA was produced in 2019, and following statutory intervention, the Council and its partners have faced the challenges of the Covid-19 pandemic and are now dealing with a cost-of living crisis, both placing additional demand on Council resources.

The SEND and Alternative Provision Green Paper, published in March 2022 alongside the Schools White Paper, set out bold proposals to deliver a generational change for a more inclusive system. This was followed by the Government's Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan

(Right Support, Right Place, Right Time) release in March 2023 explored the issues present within the current SEND system. It set out the government's proposals to improve outcomes for children and young people; improve experiences for families, reducing the current adversity and frustration they face; and deliver financial sustainability. It also considered the specific issues facing the alternative provision sector. This is because 82% of children and young people in state-place funded alternative provision have identified special educational needs, and it is increasingly being used to supplement local SEND systems.

The key challenges identified in the SEND and Alternative Provision Green Paper are (1) The system is failing to deliver improved outcomes for children and young people with SEND; (2) Parents' confidence in the system is in decline and (3), Despite substantial additional investment, the system has become financially unsustainable.

The vision for the new national SEND and alternative provision system is to (1) Fulfil children's potential; (2) Build parents' trust, and (3) Provide financial sustainability.

The Government vision is 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. We want the process of identifying needs and accessing support to be early, dignified and affirmative, focusing on a child or young person's achievements, talents, and strengths. We also want the process to be easier to navigate, with parents being clear on what support they can expect for their child and where they can turn for help, including how to make use of support through the SEND Local Offer and SEND Information, Advice and Support Services (SENDIASS).

This vision aligns with other key reforms underway across government. The recently published Children's Social Care Implementation Strategy envisages that every child and family who need it will have access to high-quality help no matter where they live. The Government is working to ensure that the reforms across both SEND, and Children's Social Care align, in

recognition of the important overlap between these groups of children and young people and that services and systems designed to support them. The upcoming Academies Regulation and Commissioning Review will set out plans to spread the impact of high-quality multi-academy trusts and incentivise improvement for all children, including support for children and young people with SEND who attend mainstream settings. In addition, a new Disability Action Plan will be consulted on and published in 2023, setting out the practical action ministers across Government will take over the next two years to improve disabled people's lives.

In the green paper, the Government proposed that the new single national SEND and alternative provision system should deliver consistent, clear and early support for children and young people with SEND, giving greater clarity to parents about the timely and accurate identification of needs, and how decisions around support are made from early years to post-16. Support should be put in place, based on a child or young person's needs, not where they happen to live, in line with this government's commitment to levelling up.

The national system will provide greater clarity on evidence-based support, share examples of best practice, and minimise perverse incentives that can prevent inclusion:

- For children and young people, this means that they will be able to access and regularly attend the most appropriate early years setting, school or college for their needs be this mainstream or specialist.
- For parents and carers, a national system will provide clarity about what support their children should be receiving without a fight to secure what is appropriate, and without needing to navigate a complex system. This will increase confidence and, in turn, minimise disputes.
- For providers, it will give them clarity on the support they should be providing, who should be working together, and will enable government to hold delivery partners to account and intervene where expectations are not met. It will also provide clarity on the resources available to deliver the right provision, for example, by ensuring that the

new National SEND and Alternative Provision Standards are clear on which budgets should be used to provide different types of support.

New National Special Educational Needs and Alternative Provision Standards ('National Standards') will set clear and ambitious expectations for what good looks like in identifying and meeting needs, and clarify who is responsible for delivering provision and from which budgets, across the 0-25 system. National Standards will place a greater emphasis on the important role mainstream settings play in providing quality first teaching and evidencebased SEN Support to meet the needs of most pupils with SEND, so that all settings provide consistently high-quality provision. By improving early identification and the quality of SEN Support, the Government expect to reduce the need for EHCPs because the needs of more children and young people will be met without them, through ordinarily available provision.

The delivery of National Standards will be supported by new SEND and alternative provision practice guides for frontline professionals and an amended SEND Code of Practice for all system partners. These will set out the wider processes and systems to ensure children and young people get the right support, in the right place, at the right time.

In summary, the Government's Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan sets out:

- That from Summer 2023, Local Authorities will be required to provide data that details the capacity of special schools and provision in mainstream schools as well as forecasts of specialist placements. (Chapter 2).
- That from Autumn 2023, the DfE will publish a local and national inclusion dashboard to support the development of local inclusion plans, giving parents improved transparency of local performance. (Chapter 5)
- Three approaches to bringing the High Needs Budget back into balance. (Chapter 1)
- Approval of further applications to open special free schools in addition to the 92 open

- special free schools and the 49 in the pipeline. (Chapter 2)
- Local authorities are required to improve information available to families and provide a tailored list of suitable settings informed by the local inclusion plan.
- The introduction of local SEND and alternative provision partnerships.
- The introduction of reformed EHCP process that will involve a standardised national template and digitalisation.
- Encouragement for the adoption of a DSCO (Designated Social Care Officer) role in each local area.
- Increase of roll-out of Mental Health Support Teams in schools and colleges, which will be expanded to around 400 operational teams later in 2023, covering around 35% of pupils in England, and reach around 500 operational teams by 2024.
- Investment into doubling the capacity of the Supported Internships programme which will see the delivering partner work closely with LAs to achieve this by 2025. Up to £10.8 million in grant funding will be available to all local authorities over the next three years, alongside support and training as a part of this.

The Government has pledged £70 million investment into establishing Regional Expert Partnerships to help co-produce, test and refine key reforms. This Includes the establishment of new local SEND and alternative provision partnerships, agreed local inclusion plans, strengthened accountabilities and new inclusion dashboards. Furthermore, the Government has recognised that despite significant investment, local authority spending continues to outstrip funding. £400 million of the £2 billion additional funding for schools, announced in the Autumn Statement, will be allocated to local authorities' high needs budgets in 2023-24, and in 2023-24, high needs funding will be rising to £10.1 billion an increase of over 50% from the 2019-20 allocations. This extra funding is intended to help local authorities and schools with the increasing costs of supporting children and young people with SEND.

As with the previous assessment, this updated 2023 JSNA draws together data and evidence from a range of sources, including the views of parents and professionals working in the field (following consultation and engagement), to describe a picture of need and service provision across Sefton.

This 2023 SEND JSNA is intended to inform strategic choice, planning, prioritisation ad joint commissioning across the local system, supporting the local authority and its partners on the journey to a future Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) system in Sefton.

### **Summary of findings**

The refresh of the SEND JSNA has highlighted the following:

- The SEND and Alternative Provision Green Paper, published in March 2022 alongside the Schools White Paper, set out bold proposals to deliver a generational change for a more inclusive SEND system, followed by the Government's Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan (Right Support, Right Place, Right Time) release in March which sets out the government's proposals to improve outcomes for children and young people; improve experiences for families, reducing the current adversity and frustration they face; and deliver financial sustainability. The transition to a new national SEND and alternative provision system and national standards will result in significant change across the local system in the next three years (between 2022 and 2026).
- Sefton has a resident population of 279,239 people, with 57,904 (21%) children and young people in Sefton (age 0-19) and 74,281 children and young people in Sefton (age 0-25).
- In 2020/21 there were 9,501 children (aged 0 to 19) living in relative low-income families in Sefton, equating to 16% of the Borough's children, bust this varies considerably across Sefton, rising to 28% in places.

- Throughout the Covid-19 pandemic 81% of low-income families reported lower income and 54% of the lowest income families had borrowed money to cover everyday living costs. The current Cost-of Living-Crisis is impacting further on the those who are living in poverty and experiencing financial pressure before cost increases hit.
- There are 107 school settings in Sefton with 42,576 attending those settings. 40,245 children and young people are educated in 102 Sefton state-funded, maintained nursery, primary, secondary, special schools and pupil referral units (PRUs). 2,331 children and young people attend 5 non-maintained and independent settings.
- The percentage of children and young people with Special Educational Needs and/or Disabilities requiring support from the Council has increased each year since 2010.
- In January 2022, the number of school pupils with SEN but no EHC plan (SEN support) has increased to 5,403, 12.7%, compared to the national percentage of 12.6%.
- In January 2022, the local authority maintains an EHC Plan for **2,243** children and young people, which to represent approximately **3%** of the population of children and young people aged 0 25 years resident in the borough, compared to the national percentage of 4.0%.
- In January 2022 the aggregate the number of children and young people for whom the local authority maintains an EHC plan and those children that were receiving SEN support in a Sefton school or a post 16 provision had increased to 16.5%, compared to a national average of 16.5% and a north west average of 16.9%. There is a high concentration of demand in the south of the borough in the Bootle parliamentary area around the Linacre, Derby, Ford and St Oswald wards.
- Of the 2,243 children and young people (0–25yrs) living in the borough with a current EHC plan in January 2022, children aged 11-15yrs account for 37% of the cohort. 4% are aged under 5 years and 11% are young people/adults aged 20-25yrs.

- For those **2,243** children and young people for whom the local authority maintains an EHC plan (January 2022) **72%** are males and **28%** are females. **88%** of the cohort are classified as 'white/British', with less than **8%** classified as other nationality and **4%** unclassified.
- Of the 2,243 children and young people (0–25yrs) living in the borough with a current EHC plan, 1,604 are aged 2 ½yrs 19yrs and are educated in Sefton schools or post 16 provisions (including maintained and nonmaintained settings). 1,550 `of these attend a Sefton maintained school setting.
- In January 2022, the percentage of pupils with an EHC plan who are in mainstream state-funded primary and secondary schools in Sefton is 46.7%, below the national comparator of 51.4%, whilst the percentage of pupils with an EHC plan attending state-funded special schools in Sefton is 45.5%, above the national comparator of 39.4%.
- Whilst the needs vary across primary, secondary and special schools, the primary needs of pupils with a Sefton EHC plan or receiving SEN support include, Speech and Language, Social Emotional & Mental Health and Autism.
- Between 2014 and 2019 Sefton saw a 49% increase in maintained EHC plans. Between 2019 and 2022 this number has increased further by 55% growth. Over the period of 2014 to 2022 the overall increase of 132% and it is predicted that the number of EHC plans will continue to grow at an average rate of approximately 18% per annum.
- In January 2023 the number of Sefton maintained EHC plans has increased further to 2,565, which represents a growth of more than 77% since the last JSNA was produced in 2019 and a significant increase of 165% since 2014.
- In 2021 the Sefton rolling three-year average (2019, 2020 and 2021) for completing EHC plans within a 20-week timescale was **50.3%**, however by January 2023 this has dropped significantly to **18%**. There are positive signs of recovery and at the beginning of average performance is **30%**, but there is still further improvement required to return to a level

- consistent with both the previous national and the north west comparators.
- since 2016 the percentage of EHC plan cases progressing to tribunal following mediation (disagreement resolution), have steadily declined, dropping to the lowest point at 2.9% in 2021, which is considerably lower than the National and north West figures of 25.5% and 18.9%. This Arguably demonstrates that mediation is effective in Sefton. Furthermore, the appeal rate for Sefton (0.87) is significantly lower than the National rate (1.84), suggesting that the decision taken in Sefton about EHC Assessments and Plans stand up to scrutiny and reinforcing that the mediation process is effective.
- 44.4% of children and young people with an EHC Plan received an annual review in the 2022/23 academic school year, which is a decline on the previous performance of 61.6% in 2021/22. However, despite this decline in performance, 100% of children transitioning into Reception or Secondary school received a review in order to allocate school placements by the statutory deadline of 15th February.
- High Needs expenditure has risen by approximately 40%, from £28.5M (2017/18) to £39.9M (2021/22), and has continually exceeding the available income/funding by an average of 10.3% per annum. Forecast expenditure for 2022/23 has increased by a further 12.5% to £44.9M from the previous financial year (2021/22), exceeding the income/funding (£40M) by an overspend of £4.8M (12%).
- Comparative analysis of the SEN-S251 outturn for 2021/22 suggest that Sefton spent approximately £7.9m more than all English single tier and county councils over the typical 38-week academic year when accounting for those children and young for whom the local authority maintains and EHC plan or are in receipt of SEN Support in a Sefton maintained school or PRU, funded through the High Needs block.
- It is anticipated that the demand against the high needs block will continue to grow at a rate of approximately 10- 12% per annum,

- which could equate to an estimated continual overspend of £3.5M to £4M per annum.
- The absence of readily available data that details income/funding and expenditure per child/young person per annum, hinders any analysis of the impact that the funding is having on the outcomes for the child/young person and potentially increase greater control of the budget to reduce overspend.
- In October 2019, in September 2020, March 2021 and March 2022 the local authority consulted with parents, carers, children and young people to gather their views, opinions and experiences of local SEND system; whilst some parents and carers think that the 'SEND System' is improving, and there are positive experiences and areas where parents and carers feel could be improved, more than half of parents and carers feeling that parts of the SEND system could work better together.
- At Key stage 2 all pupils with SEN (EHCP and SEN Support) have lower progress scores compared to those with no identified SEN. The percentage of children receiving 'SEN support' at KS2 meeting expected standards in reading, writing and maths, is moderately below national comparator, but consistent with statistical neighbour and north west comparators.
- Those children with an EHC Plan at KS2 meeting expected standards in reading, writing and maths is significantly below the national, north west and statistical neighbour averages. However, children are making better progress in reading, writing and mathematics than at the time of the last inspection, and progress is better than the national average for similar pupils in reading and mathematics.
- The average attainment 8 and progress 8 scores at Key stage 4 for pupils with SEN (EHC Plan and SEN Support) is below the national and north west comparators.
- The percentage of SEN pupils who receive 'SEN support' in secondary school going to, or remaining in education & employment or training overall is consistent with the national comparator, but above both northwest and statistical neighbour averages. However, the

- percentage of SEN pupils with an EHC plan going to, or remaining in education & employment or training overall is below national, north west and statistical neighbour averages.
- The percentage of young people with an EHC Plan qualified to level 2 (2021/22) is higher than the northwest and national comparators, however, the percentage of 19yr olds receiving SEN Support qualified to level 2 is significantly lower than the northwest and national comparators.
- The percentage of young people with an EHC Plan or receiving SEN Support qualified to level 3 (2 or more A levels or equivalent size vocational qualifications) is lower than the northwest and national comparators.
- The SEND cohort that Career Connect work with has increased significantly by 27.9% over the last 3 years (December 2020, to November 2022). The number of 16-17-yearolds with SEND in learning is 91.3% (December 2022). However, the percentage of 16–17-year-old children with SEND not in employment, education or training (NEET) has reached 9.4% and the 'Not Known' has risen to **0.3%.** The number of 16–24-year-old children and young people with SEND in learning is **85.4%.** The percentage of 16–24year-old children and young people with SEND not in employment, education or training (NEET) has increased by 4.1% year on year to 12.8%, however, this is 0.2% below the north west average at 13.0%. The SEND 16-24 Not Known has increased by 0.5% year on year to 2.3%, however, this is 23.6% below the NW average (25.9%).
- Between November 2019 and November 2022, the Council has experienced a growth in demand for Home to School Travel Support of approximately 40% for children and young people with SEND aged 0 25. As of November 2022, the Council was providing SEND commissioned travel support for 150 Post 16 Students and 964 Children and Young People aged 0–16. At this point the Council was also providing a SEND Personal Travel Budget for 214 Children and Young People aged 0-25, and saw an increase in the

- number of children and young people with SEND eligible for Travel Support by over 20% since 2020. The number of statutory school age students transport to out of borough settings increased 147% and the number of out of borough settings that the Council transports children and young people to has increased by more than 47% and demand for a Personal Travel budget has increased by 77%.
- The Aiming High short breaks programme, which is promoted as part of the Local Offer continues to offer 19 sessions every week during the school terms to children and young people (aged 5 -19 years). 258 children and young people have participated. The number of children and young people benefiting from the school holiday programmes over the last 12-months included 128 at Easter, 92 during the Spring Break, 217 over the summer holidays, 111 in the October school half-term and 116 in the February 2023 school half term. The short breaks service has delivered 29,862 hours of respite to local families in Sefton. In addition the service has organised and delivered family activities, providing 2,120 hours of supported events that include parents, carers and siblings.
- 35 children and young people currently make use of the Springbrook residential unit and on average a total of 871 nights stay is offered each year.
- In April 2022 under 38% of those waiting for Speech and Language Therapy services had been waiting less than 18 weeks, however by January 2023 performance has continued to improve and now 65% of patients are waiting under 18 weeks.
- The Paediatric Dietetics Service has seen a growth over the last 3 years in both referrals and contacts. Performance has consistently been above the commissioned target of **92%** (those on waiting list waiting less than 18 weeks), however, more recently there has been a drop in performance to **70%**.
- Occupational Therapy referrals and contacts where not impacted as significantly as Speech and Language Therapy during the Covid-19 pandemic and positively, the service has

- achieved the **92%** target (those on waiting list waiting less than 18 weeks) throughout 2022/23.
- In 2021/22 referrals for ASD & ADHD Assessment and Diagnosis increased significantly: a 75.3% increase in ASD and a 265% increase in ADHD, and referral rates for 2022/23 are projected to be higher again.
- The number of referrals and contacts to the specialist Child and Adolescent Mental Health Services has increased since 2019/20, and is forecast to grow further throughout 2022/23. As of January 2023, just over 40% of children and young people were waiting less than 6 weeks for a 'choice' appointment and 60% had been waiting less than 18 weeks for a 'partnership' appointment.
- This updated version of the SEND JSNA does not include any analysis of the capacity of special schools and provision for SEND in mainstream schools, nor forecasts of specialist placements needs, which must be a priority if the local authority is to provide data to the DfE for Summer 2023. This should be planned for and resourced if the Council is to comply with the recommendations and expectations of the Government's Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan.

#### Introduction

Sefton Council and its partners committed to meeting the needs of children and young people with special educational needs and/or disabilities (SEND) living within the borough.

The purpose of Sefton's SEND Strategic Needs Assessment is to reflect on the of the previous Joint Strategic Needs Assessment (JSNA 2019) and update of quantitative and qualitative information to identifying needs should inform local priorities, policies, and strategies that in turn inform local commissioning priorities that help to improve outcomes and reduce inequalities across Sefton.

Support for children and young people with special educational needs and/or disabilities (SEND) has undergone radical reform. The Children and Families Act 2014 extends the SEND system from birth to 25; replacing statements of special educational need with a new birth-to-25 Education Health and Care plan (EHCP); broadening the definition of special educational needs and/or disabilities (SEND) to include any disability including mental health and offers personal budgets to those families with children affected by SEND.

The Act puts children, young people, parents and carers at the centre of the process. Partners in the local system are required to make available and easily accessible, the full range of information and support in the Local Offer. A key feature of the Act is that health, (locally this is Sefton's two Clinical Commissioning Group (CCG), and NHS England), are required to make joint commissioning arrangements to secure Education, Health and Care provision for children and young people for whom the authority is responsible for as well as those who have special educational needs.

The Special Educational Needs and Disability Code of Practice (SEND Code of Practice 2014) requires Health and Wellbeing Boards to consider the needs of vulnerable groups, including those with special educational needs and disabled children and young people, those needing palliative care and looked after children. To ensure that the reforms are implemented successfully the Department for Education introduced a new SEND Ofsted and Care Quality Commission (CQC) Inspection Framework for Local Areas. An up-to-date JSNA is a mandated part of the Ofsted and

CQC measurement framework, which assess the strength of arrangements in local areas, rather than the contribution of individual agencies, against 3 broad strands:

- What we know about children and young people with special educational needs and/or disabilities (SEND), including risk factors for SEND and vulnerable groups? (Systems to identify need)
- What are the key services within the local offer and how do they work together? (Assessing and meeting needs)
- How effective is the local area in improving outcomes for children and young people who have special educational needs and/or disabilities (SEND)? (Outcomes achieved).

This JSNA looks at all the evidence available for children and young people with special needs and/or disabilities within Sefton Council and all health partners, combined with nationally published statistics and research materials, focussing on prevalence and trends. It explores the characteristics of the children and young people and discusses the factors which can lead to a child having special educational needs and/or disabilities.

The Code of Practice sets out the relationship between population needs, what is procured for children and young people with special educational needs and/or disabilities (SEND), and individual EHC plans (see Figure 1).

**Figure 1** JSNA Process, SEND Code of Practice. Source: SEND code of practice, Department for Education/Department of Health (June 2014)



In line with guidance from the SEND Code of Practice, the Sefton SEND Joint Strategic Needs Assessment (JSNA) is how the Health and Wellbeing Board, SEND Continuous Improvement Board and other decision makers understand and agree the needs of all local people.

The JSNA considers the needs of the local community, including specific analysis of the needs of vulnerable groups including disabled children and young people and those with special educational needs and/or disabilities (SEND), those with life limiting conditions and looked after children. Local partners across education, health and social care work together to establish what targeted commissioning is needed to address the needs identified.

The JSNA helps to inform the joint commissioning decisions made for children and young people with special educational needs and/or disabilities (SEND), which will in turn be reflected in the services set out in the Local Offer. Emerging themes from recent consultation in localities across the borough illustrate that the following are areas that parents and/or professionals have identified as areas for consideration.

This JSNA represents an accurate picture of known data and information available at the time of publishing.

### **Sefton People and Place (Context)**

#### **Population**

According to the latest Census (2021):

- 279,233 people reside in Sefton which makes up 0.5% of the overall population across England. The Borough has the 55<sup>th</sup> highest population count of the 309 Lower Tier Local Authorities (LA) in England
- As with the comparator areas, Liverpool City Region, the north west and England there are slightly more females than males within Sefton.
- 23% of the residents within Sefton are aged 65 and over, this is higher than LCR, the north west (both 19%) and England (18%). The Borough is the 79<sup>th</sup> highest LA for the percentage of residents aged 65 and over. Sefton moves to 54<sup>th</sup> highest

- when looking at percentage of residents aged 85 and over, with Sefton being higher than the three comparator areas.
- 21% of the population are aged between 0 to 19 compared to 23% across the north west and 22% in England. Sefton was ranked 239 out of 309 LAs for the percentage of those aged 0 to 19.
- 96% of Sefton's usual residents identified their ethnic group as White, higher than the levels seen in LCR, the north west and England. Of White residents in the Borough, 96% identified themselves as White English, Welsh, Scottish, Northern Irish, or British.
- 7% (19,563) of Sefton residents stated that their general health was either bad or very bad, higher than seen in the north west (6%) and England (5%)
- 22% (61,134) of Sefton residents stated they were disabled under the equality act higher than the 19% in the Nort West and 17% in England.
- Of those who were disabled under the equality act, in Sefton 49% stated their day-to-day activities were limited a lot, higher than the north west at 46% and England at42%
- 7% (19,258) of Sefton residents weren't disabled under the equality act but did have a long-term physical or mental health condition but day-to-day activities were not limited, like the north west and England.
- 11% of Sefton residents provided unpaid care compared to 10% in the Nort West and 9% in England. Of those providing unpaid care 32% provide 50 or more hours per week, like the north west yet slightly higher than England (30%).

#### Deprivation

Growing up in conditions of poverty has long been recognised as a defining influence on health and wellbeing across the life-course and a persistent driver of health and income inequality. The term child poverty encompasses a wide range of experiences and impacts. These add up to a major

set of challenges and obstacles that make it much more difficult for children to reach their potential as they grow and develop, whether in health and mental health, education and employment, or other life goals.

Higher living costs, reduced earnings through job loss or benefit change, emergency costs such as replacing vital household goods, or a combination of factors can push families into poverty. Poverty is not caused by mismanagement of household income or reckless spending. Most children now living in poverty come from working households. Other risks associated with childhood poverty include, living in a large family, being the child of a teenage parent/s, having one or more disabled parents.

#### Indices of Deprivation (IoD)

The IoD measures levels of deprivation across seven domains, these are combined and weighted to create the Index of Multiple Deprivation (IMD) score. The higher this score the more affected or 'deprived' an area is.

IMD has increased in Sefton from 2004-2019, indicating deprivation has increased. The Borough has repeatedly higher deprivation rates than seen nationally but is lower than the city region and north west.

Deprivation varies vastly across the Borough (Map 1), with 38 Lower Super Output Areas (LSOAs) falling into the most deprived 10% of areas nationally (with 20 of these being in the top 5%, and seven in the top 1%). In comparison 23 LSOAs are within the least 10% deprived areas in England (seven of which are in the least deprived 5%).

Of the 38 LSOAs in the most 10% deprived IMD areas nationally:

- Five are in North Sefton (with two in the top 5%)
- 12 are in Central Sefton (with eight in the top 5%)
- 21 are in South Sefton (10 in the top 5%, and seven in the top 1%)

Of the 23 LSOAs in the least deprived 10% areas IMD nationally:

15 are in North Sefton (six in the least 5%)

- Eight in Central Sefton (one in the least 5%)
- There are none located in South Sefton

The income deprivation affecting children index (IDACI) is a supplementary index to the IoD.

A reduction can be seen in IDACI from 2004-2019 in Sefton along with the three comparator areas. In 2019, Sefton had a higher IDACI score than that of England but lower than Liverpool City Region and the north west.

Along with IMD, IDACI fluctuates across the Borough (Map 2), 31 LSOAs are within the most deprived 10% (19 of are in the top 5% and a further five in the top 1%). 30 areas are in the least deprived 10% nationally (13 fall into the bottom 5%).

Of the 31 LSOAs in the most 10% deprived IDACI areas nationally:

- None are in North Sefton
- 11 are in Central Sefton (six in the top 5%)
- 20 are in South Sefton (13 in the top 5%, with five in the top 1%)

Of the 30 LSOAs in the least deprived 10% IDACI areas nationally:

- 13 are in North Sefton (seven in the least 5%)
- 17 in Central Sefton (six in the least 5%)
- There are none located in South Sefton

#### Children of Low-Income Families

In 2020/21 there were 9,501 children (aged 0 to 19) living in relative low-income families in Sefton, equating to 16% of the Borough's children. The percentage of children living in relative low-income families have shown little change in Sefton across the past five years (2016/17-2020/21). During this time, Sefton has consistently been below LCR, the north west and England averages.

The levels of children living in relative low-income families vary considerable throughout Sefton. Linacre ward makes up 10% of the Boroughs children with Derby accounting for a further 8%. 28% of Linacre residents aged 0-19 are living in relative low-income families, with 24% in Derby Map 3). In comparison just 1% of Sefton children living in relative low-income families reside in



Harington ward, with only 5% of the ward's residents aged 0-19 living in relative low-income families.

#### Census 2021 – Deprivation Dimensions

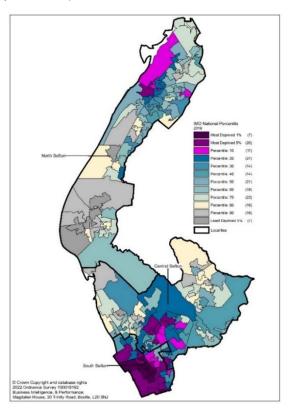
Census 2021 splits household deprivation into four dimensions Education, Employment, Heath & Disability and Housing (Table 1). In Sefton, 55% of households were identified as having one or more deprivation dimension, higher than the north west (53%) and England (52%). 5% of the Borough's households have three or four deprivation dimensions identified, accounting or 5,738 households.

As with other forms of deprivation Linacre and Derby wards have the highest levels of households with three or four deprivation dimensions identified (Map 4). Similarly, Harington and Blundellsands wards have some of the lowest levels.

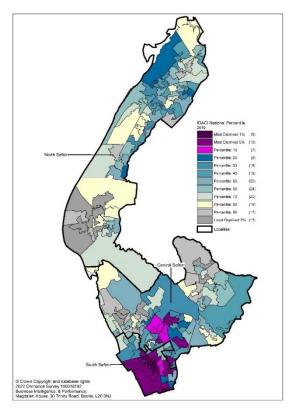
**Table 1**. Census 2021 Deprivation Dimensions Explained

Dimension	Explanation
Education	no person in the household has at least five or more GCSE passes (grade A* to C or grade 4 and above) or equivalent qualifications, and no person aged 16 to 18 years is a full- time student
Employment	where any member of a household, who is not a full-time student, is either unemployed or economically inactive due to long-term sickness or disability
Health & disability	any person in the household has general health that is "bad" or "very bad" or is identified as disabled
Housing	the household's accommodation is either overcrowded, with an occupancy rating of negative 1 or less (implying that it has one fewer room or bedroom required for the number of occupants), or is in a shared dwelling, or has no central heating

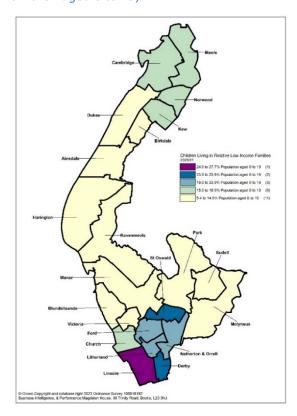
**Map 1**. Index of Multiple Deprivation 2019 – Sefton Lower Super Output Area (national percentiles)



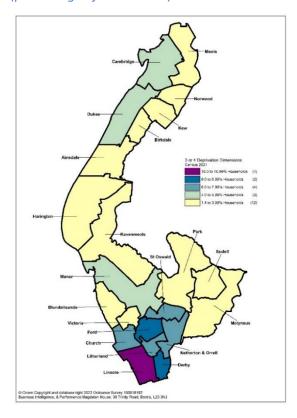
**Map 2.** Income Deprivation Affecting Children Index 2019 – Sefton Lower Super Output Area (national percentiles)



Map 3. 2020/21 – Children Living in Relative Low-Income Families by Sefton Ward (percentage of children aged 0 to 19)



Map 4. Census 2021 – Households with Three or Four Deprivation Dimensions by Sefton Ward (percentage of households)



#### COVID-19

During 2020 and 2021 there was a global pandemic caused by the SARS-CoV-2 virus also referred to as 'Coronavirus'. The pandemic has resulted in substantial health impacts for the Sefton population. This includes direct consequences of contracting the virus (e.g., mortality and morbidity) but also indirect impacts linked to the restrictions and changes in living circumstances brought about by the pandemic.

- National research comparing incomes before and after the first national lockdown found that 23% of working age adults reported lower family income, almost half of new claimants saw income fall by over a quarter
- Parents were more than twice as likely to report reduced income, this peaked at 32% in May 2020, and had reduced to 18.1% in December 2020 (vs 10.8% non-parents)
- 81% of low-income families reported lower income – those with income from

employment were more likely to report this than benefits claimants not in employment pre-pandemic. 54% lowest income families had borrowed money to cover everyday costs

- 25% of adults reported reductions in household expenditure – higher income households whose income was maintained accrued savings.
- 29% of families on lower income throughout the pandemic reported they could not afford daily heating costs or to have fruit and vegetables every day.
- Food is the biggest day to day expense for low-income families and loss of income from 80% furlough, not compensated for by increase in Universal Credit, plus the unavailability of free school meals especially early on led to a predictable rise in demand at Foodbanks in Sefton 7,384 children were children by foodbanks in the 12 months before the pandemic.
- Other impacts caused by the pandemic which had a detrimental effect on children (especially those in lower income families) included limited access to outdoor space, reduction in the levels of physical activity undertaken, increase alcohol consumption on parents, home-schooling attendance levels, strain on family relationships, increased levels of abuse. In general, the pandemic had a negative effect on many individuals' mental health and wellbeing.

#### **Cost-of-Living Crisis**

At the time of writing the UK is amid a Cost-of-Living Crisis. The amount of money needed to cover essential items such as energy, fuel and food has risen sharply since early 2021. At the same time, wages and benefit increases have not kept in line with the rate of inflation.

Most of the society are impacted by the Cost-of-Living Crisis. ONS reported that in October 2022, 93% of adults in Great Britain said their cost of living had increased compared with the previous year. This has ramifications for health as people are forced to make changes to their spending and may have to forgo things that support their health. For example, a survey by the RSPH found that this winter people were concerned about being able to afford prescriptions (12%) and travel to medical appointments (16%), were cutting back on fresh fruit and vegetables (39%) and reducing sporting activities (28%). Furthermore, living under financial pressure and insecurity is highly stressful and will no doubt have negative impacts on mental wellbeing for many residents.

Whilst the Cost-of-Living Crisis impacts almost everyone, some groups will be more greatly affected than others. Those who were living in poverty and experiencing financial pressure before cost increases hit. The health inequalities already faced by these groups will likely be compounded by the Cost-of-Living crisis, with these groups experiencing a disproportionate worsening of their health.

Cost of living is one of the main balancing drivers of child poverty. The main costs of living are housing and household utility bills, communication (phone, internet), household furniture and appliances, transport, and day to day material needs like clothes, food, books and toys. Managing these costs on a low household income is made more challenging when opportunities to price compare, find and take advantage of best value options and secure credit are constrained, e.g. by access to internet, private transport, savings, other prerequisites.

A good example is the link between obesity and food poverty. Living on a low income can mean that families do not have access to the financial means to equip, use and stock a kitchen where they live, cannot easily shop online, or regularly visit large supermarkets and invest surplus income in good value products. High energy, low nutrients, low-cost foods that take little preparation, are available within walking distance from home and which are familiar and enjoyable are a rational and understandable choice for families in these circumstances.

## **SEND - Definition and Scope**

The following definitions are summarised from the SEND Code of Practice 2014.

#### Special Education Needs (SEN)

 A child or young person has SEN if they have a learning difficulty or disability that means they

- need special educational provision or support to help them learn.
- This means they have a significantly greater difficulty in learning than most of their peers, or they are not able to use the universal provision available within their school because of their disability.
- The term 'SEN' applies across ages 0–25, although the term 'learning difficulties and disabilities' (LDD) is often used post 16 through to adult services.

#### Disability

- Under the Equality Act 2010, a disability is defined as a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal dayto-day activities.
- The definition includes sensory impairments and long-term conditions such as asthma, diabetes, epilepsy and cancer.
- Children and young people with disabilities do not necessarily have SEN, but there is a significant overlap. Where a disabled child or young person requires special educational provision, they will also be covered by the SEN definition.

#### Broad areas of SEND.

- Communication and interaction
- Cognition and learning
- Social, emotional and mental health
- Sensory and/or physical needs

This needs assessment will encompass all areas of SEND as defined above. It will focus on the needs of children and young people with special educational needs and/or disabilities (SEND), and the needs of their parents and carers, as services will inevitably impact on the needs of both.

Please note that where the abbreviated term 'SEND' is used within this document, it refers to special educational needs and/or disabilities.

This publication combines information from the school census (state-funded schools), school level annual school census (independent schools) and general hospital school census on pupils with special educational needs (SEN).

#### **SEND - The National Picture**

Just under 1.5 million pupils in England have special educational needs, an increase of 77,000 from 2021. Both the number of pupils with an EHC plan and the number of pupils with SEN support have increased.

- The percentage of pupils with an education, health and care (EHC) plan has increased to 4.0%.
- The percentage of pupils with SEN but no EHC plan (SEN support) has increased to 12.6%.

Both continue a trend since 2016.

The number of pupils with an EHC plan has increased by 9% between 2021 and 2022, and by a total of 50% since 2016.

The number of pupils with SEN support has increased by 4% to 1,129,800 since 2021 and by a total of 14% since 2016. Between 2016 and 2022 the total pupil population increased by 5%.

The number of children and young people with EHC plans increased to 473,300, as of January 2022. This has increased each year since 2010.

Children of compulsory school ages continue to account for over two thirds of EHC plans.

- In primary, 2.3% of pupils have an EHC plan and 13.0% have SEN support.
- In secondary, 2.2% of pupils have an EHC plan and 11.9% have SEN support.
- In pupil referral units (PRUs), 28.2% have an EHC plan and 54.0% have SEN support.

This is a consistent long-term trend. Pupils with an EHC plan made up almost one quarter (24%) of all pupils with SEN in January 2022. Whilst the number of children and young people across all establishment types have increased, the proportion of young people with EHC plans receiving provision in special schools has decreased to 34.8%, while the proportion in mainstream schools is now at 40.5%. This is due to larger increases in provision in mainstream and other settings.

From September 2014, EHC plans replaced Learning Difficulty Assessments (LDAs) for

children in further education. The percentage of children and young people with an EHC plan who are aged 16 years old and over has subsequently increased since January 2014 but has been stabilising.

62,200 new EHC plans were made during 2021. The number of new EHC plans has increased each year since their introduction in 2014.

There were 93,300 initial requests for an EHC plan during 2021, up from 76,000 in 2020. Apart from a decrease in 2020, initial requests have increased each year since EHC plans were introduced.

In 2021, 59.9% of new EHC plans were issued within 20 weeks. This was an increase when compared to 2020 but lower than the 60.4% issued in 2019.

The most common type of need for those with an EHC plan is autistic spectrum disorder and for those with SEN support is speech, language and communication needs.

# Sefton Children and Young People

This summary report uses the most recent validated Sefton data for population, school, children and young people from January 2022 census information.

Sefton has a resident population of **279,239** people. There are **57,904** children and young people in Sefton (age 0-19) and **74,281** children and young people in Sefton (age 0-25).

There are **107** school settings in Sefton and **42,576** children and young people attending those settings, as summarised below (January 2022 school census). Across the academic school year the reported average number of pupils **40,447**.

The January 2022 school census shows **40,245** children and young people were educated in **102** Sefton state-funded, maintained nursery, primary, secondary, special schools and pupil referral units (PRUs).

**2,331** children and young people attend **5** non-maintained and independent settings.

Table 2. School and Children Numbers

State	State	State	State	Non-	Pupil	Independ	All Schools	
funded	funded	funded	funded	mantained	Referral	ent		
Nursery	Primary	Secondary	Special	Special	Unit			
3	74	18	5	1	2	4	107	
Children ar	Children and young people:							
227	22,779	16,570	731	68	72	2,129	42,576	

Table 1 source: explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england/2021-22 (Table: sen\_phase\_type)

16% of children and young people (aged 0-19) in the borough were living in relative low-income households (relative low-income is defined as a family in low income before housing costs in the reference year. A family must have claimed one or more of Universal Credit, Tax Credits or Housing Benefit at any point in the year to be classed as low income in these statistics).

In 2020/21 there were 9,501 children (aged 0 to 19) living in relative low-income families in Sefton, equating to 16% of the Borough's children. The percentage of children living in relative low-income families have shown little change in Sefton across the past five years (2016/17-2020/21). During this time, Sefton has consistently been below LCR, the north west and England averages.

Sefton's rate of hospital admission for self-harm in children and young people aged 10 to 24, reduced in 2020/21 to 602.3 per 100,000. This may be due to the impact of the COVID-19 pandemic, where hospital admissions decreased in general. Prior to this, Sefton's rate had been increasing. Sefton's rate is significantly higher than the England average and has been since 2016/17. Nationally self-harm admissions have been found to be higher for young women than young men.

Sefton's rate of hospital admission for mental health affecting those aged under 18 (129.4 per 100,000) also reduced in 2020/21 (from 166.5 per 100,000 in 2019/20). Again, this may be a consequence of the COVID-19 pandemic. Prior to this, Sefton's rate has fluctuated with no statistically significant change. Sefton's rate has been significantly higher than England since 2018/19.

The rate of young people not in employment, education or training (NEET) aged 16 to 17 within Sefton has been higher than the rate seen across England since the measure's introduction (2016);

however, these have shown a year-on-year reduction.

The rate of children looked after in Sefton has shown an overall increase from 2013 to 2012. The current rate of children looked after is 113 per 10,000 children under the age of 18 years, and has consistently been above the rate seen across England (70 per 10,000), north west (97 per 10,000) and Statistical Neighbours (90.3 per 10,000) during this period.

The rates of Sefton young people who have received a caution or custodial sentence have fluctuated. The most recent comparative data for 2022 shows a rate of 1.8 per 1,000 population of 0–17-year-olds, below the north west comparator (2.2 per 1,000) and Statistical Neighbour comparator (2.46 per 1,000).

#### **Sefton validated SEND Statistics**

# Sefton children and young people receiving SEN Support.

Over the last decade the number of children educated in the borough has remained at approximately 43,000 pupils (+/- 0.7%).

In January 2022, **5,403** (12.7%) children and young people were receiving 'SEN support' (previously school action and school action plus) in Sefton schools or post 16 provisions (including independent, state-funded maintained, PRUs and non-maintained settings), compared to a national average of 12.4% and a north west average of 12.7%

Table 3. SEN Support by Educational Setting

Sefton							
Phase	All Pupils	SEN Support					
		Number	%	% of SEN			
				EHCP			
Independent school	2,129	270	12.7	5.0			
Non-maintained special school	68	2	2.9	0.0			
Pupil referral unit	72	57	79.2	1.1			
State-funded nursery	227	45	19.8	0.8			
State-funded primary	22,779	3,047	13.4	56.4			
State-funded secondary	16,570	1,981	12.0	36.7			
State-funded special school	731	1	0.1	0.0			
Sefton Total	42,576	5,403	12.7	100.0			

Table 3 source: explore-education-statistics.service.gov.uk/findstatistics/special-educational-needs-in-england/2021-22 (Table: sen\_phase\_type) Chart 1 shows the trend in 'SEN support' in a Sefton maintained setting and PRUs over the previous five academic years (2017/18 – 2021/22). Whilst the overall number of pupils has not varied significantly, there is a noticeable increase of almost 3% across the five-year period in the number of children receiving SEN support, with a current **5,133** children receiving SEN support.

Population projections for Sefton suggest that the younger population will remain relatively stable and it is anticipated that the trend in pupils educated in a Sefton maintained school or post 16 setting will remain relativey consistent at approximately 40,000 alll pupils (+/- 0.7%). However, with a linear projection forecast, the associated demand for 'SEN support' could increase from 12.7% to an estimated 15.6%, exaberated by the impact of the Covid-19 pandemic on children's education, emitonal health and wellbeing, which has now been copmpunded further by the cost of living crisis.

**Chart 1**. Pupils Receiving SEN Support in a Sefton Maintained school or Post 16 setting.

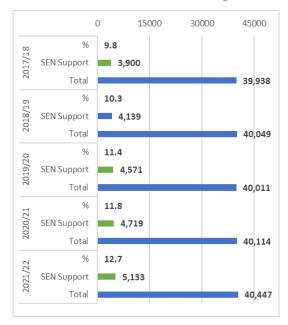


Chart 1 source: explore-education-statistics.service.gov.uk/findstatistics/special-educational-needs-in-england/2021-22 (Table: sen\_age\_gender)



# Number of Sefton children and young people with an EHC Plan.

The information collected via the SEN2 provides the major source of data for children and young people with statements of special educational need (statements) or Education, Health and Care (EHC) plans for whom the local authority has responsibility for the management of the SEND processes, under the 1996 Education Act and the 2014 Children and Families Act. The SEN2 provides data for the previous calendar year, so statistics labelled 2022 are for the calendar period 01/01/2021 to 31/12/2021. In January 2022, the local authority reported it maintains an EHC Plan for 2,243 (3%) of children and young people living in the borough.

Chart.2 shows the age distribution for those **2,243** children and young people for whom the local authority maintains an EHC plan in January 2022.

- 97 (4%) are aged under 5 years
- 552 (25%) are aged 5-10 years,
- 824 (37%) are aged 11-15 years,
- 517 (23%) are aged 16-19 years,
- Noticeably 253 (11%) of EHC Plans where for young people/adults aged 20-25yrs.

**Chart 2**. Children and young people with a Sefton maintained EHC plan by age groups.

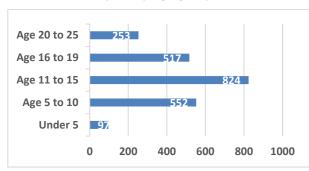


Chart 2 source: gov.uk/government/statistics/education-health-and-care-plans-england-2022 (Table: sen2\_age\_caseload)

Chart 3 below, shows the increasing trend in the number of EHCPs maintained by the local authority over the previous 8-year period 2014 to 2022.

**Chart 3**. Sefton Children and young people with a Statement of SEN or EHC plan (2018-2022).

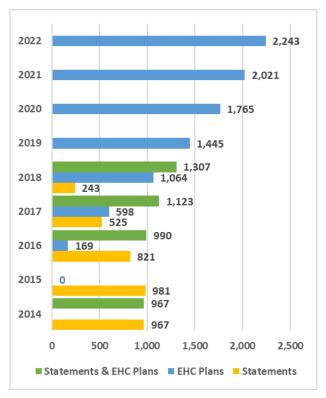
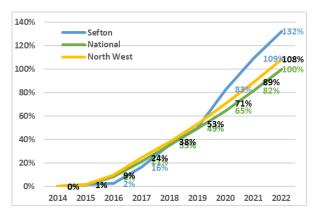


Chart 3 source: gov.uk/government/statistics/education-health-and-care-plans-england-2022 (Table: sen2\_age\_caseload)

**Graph 1**. Shows the percentage increase for Children and young people with an EHC plan during the period 2014-2022, compared to National and north west.



Graph source: gov.uk/government/statistics/education-health-and-care-plans-england-2022 (Table: sen2 age caseload)

Between 2014 and 2019 when the last SEND JSNA chapter was written Sefton has seen a **49%** (478) increase in maintained EHC plan, from 967 to 1,445. Between 2019 and 2022 this number has increased by further 798 EHC plans, which represents **55%** growth. Over the period of 2014

to 2022 this represents an overall increase of **132%** (1,276).

Population projections for Sefton suggest that the younger population will remain relatively stable, and using a linear projection forecast, it is anticipated that the trend in demand for EHC plans will continue to grow at an average rate of approximately **18%** per annum.

Of the **2,243** children and young people (0–25yrs) living in the borough with a current EHC plan, **1,604** are aged 2 ½yrs – 19yrs and are educated in Sefton schools or post 16 provisions (including maintained and non-maintained settings). **1,550** of these attend a Sefton maintained school setting.

Chart 4 shows the total combined number of children and young people for whom the local authority has maintained statements of SEN or EHC plan over the previous five-year period (2018 – 2022), as a percentage of the 42,576 total school age population attending one of the 107 school settings in Sefton (Sefton state-funded, maintained schools, PRUs, non-maintained and independent settings).

**Chart 4.** Children and young people with an EHC plan (2018 – 2022).

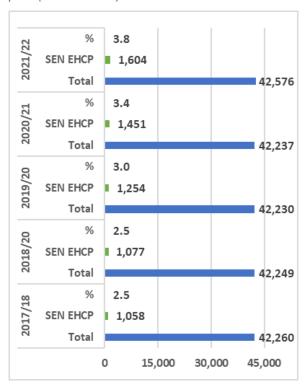


Chart 2 source: explore-education-statistics.service.gov.uk/findstatistics/special-educational-needs-in-england/2021-22 (Table: sen\_phase\_type)

When we aggregate the number of children and young people educated in Sefton schools or post 16 provision (including maintained and nonmaintained settings) whom the local authority maintains an EHC plan (1,604) and those children and young people that are receiving SEN support in a Sefton maintained school or post 16 provision (5,403), the total number of pupils that had an EHC plan or where receiving 'SEN support' was 7,007 (16.5%), compared to a national average of 16.5% and a north west average of 16.9%, which is comparable and not an outlier. The table below shows the 5year trend for aggregated SEN Support and local authority maintained EHCPs for school age children (2yrs – 19yrs), including early years to Post 16 education.

**Table 4**. Number of children and young people with special educational needs (5yr Trend)

	Sefton							
Academic Year	Total	SEN EH	SEN EHC Plans SEN Support SEN EHCPs & Support		SEN Support			
		SEN EHC	%	Number %		Number	%	
		Plan						
2017/18	42,260	1,058	2.5	4,121	9.8	5,179	12.3	
2018/20	42,249	1,077	2.5	4,422	10.5	5,499	13.0	
2019/20	42,230	1,254	3.0	4,930	11.7	6,184	14.6	
2020/21	42,237	1,451	3.4	5,004	11.8	6,455	15.3	
2021/22	42,576	1,604	3.8	5,403	12.7	7,007	16.5	

Table 4 source: explore-education-statistics.service.gov.uk/findstatistics/special-educational-needs-in-england/2021-22 (Table: sen\_phase\_type)

#### **SEND EHCP - Equality & Diversity**

For those **2,243** children and young people for whom the local authority maintains an EHC plan (January 2022) there are significantly more males than females for whom the local authority maintains and EHC plan, with males accounting for approximately **72%** of the overall cohort.

**88%** of the 2021/22 cohort of children and young people with special educational need and/or disabilities (SEND) are classified as 'white/British', with less than **8%** classified as other nationality and **4%** unclassified.

Analysis of the protected characteristics for the cohort of **1,550** children and young people with special educational need and/or disabilities (SEND), age 2½yrs – 19yrs and educated in a Sefton maintained schools or post 16 provisions, as outlined in the Equality Act (2010), are described below.

**Table 5**. School Age Children and young people with an EHC plan (by Gender)

Primary SEN Need	2021/22 - SEN EHC Plan					
	All	Fen	nale	Ma	ale	
Autistic Spectrum Disorder	681	130	19.1	551	80.9	
Hearing Impairment	7	3	42.9	4	57.1	
Moderate Learning Difficulty	88	34	38.6	54	61.4	
Multi- Sensory Impairment	7	1	14.3	6	85.7	
Other Difficulty/Disability	33	16	48.5	17	51.5	
Physical Disability	35	11	31.4	24	68.6	
Profound & Multiple Learning Difficulty	55	30	54.5	25	45.5	
Severe Learning Difficulty	107	38	35.5	69	64.5	
Social, Emotional and Mental Health	198	39	19.7	159	80.3	
Specific Learning Difficulty	75	21	28.0	54	72.0	
Speech, Language and Communications needs	257	77	30.0	180	70.0	
Visual Impairment	7	5	71.4	2	28.6	
SEN EHC Plan Total	1,550	405	26.1	1,145	73.9	

Table 5 source: explore-education-statistics.service.gov.uk/findstatistics/special-educational-needs-in-england/2021-22 (Table: sen\_age\_gender\_)

Table 5 shows that there are significantly more males than females for in this cohort, with males accounting for over **73.9%** of the cohort.

The age distribution for the cohort is:

- 89 (6%) are under the age of five,
- 564 (36%) are aged 5-10yrs,
- 778 (50%) are aged 11-15yrs and
- 119 (8%) are aged 16-19yrs

**Table 6**. Children and young people with an EHC plan by pupil characteristics for the last five years (2017/18 – 2021/22)

SEN Statements or SEN EHC Plans	2017/18	2018/19	2019/20	2020/21	2021/22
number_of_pupils	1,009	1,045	1,186	1,359	1,550
number_of_females	258	264	286	345	405
number_of_boys	751	781	900	1,014	1,145
fsm_eligible	363	382	439	541	637
fsm_not_eligible	646	663	747	818	913
language_english	975	1,005	1,136	1,288	1,473
language_other	31	36	47	60	69
language_unclassified	3	4	3	11	8
ethnicity _WBRI	938	960	1,065	1,221	1,385
ethnicity _Other	66	77	102	116	147
ethnicity _unclassified	5	8	19	22	18

Table 8 source: explore-education-statistics.service.gov.uk/findstatistics/special-educational-needs-in-england/2021-22 (Table: sen\_age\_gender\_ and sen\_fsm\_ethnicity\_language\_)

**89%** of the 2021/22 cohort are classified as 'white/British', with less than **9%** classified as other nationality and **1%** unclassified.

Only 4% of the cohort have English as an additional language.

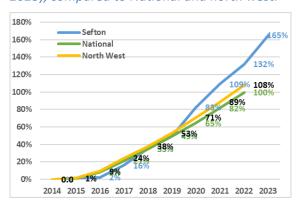
Over **41%** of the cohort are eligible for Free School Meals.

### **Sefton local SEND statistics (2023)**

In January 2023 the number of Sefton maintained EHC plans has increased to **2,565**, however this data remains to be validated and there are no national or regional comparators. Despite being unvalidated, the figure represents a growth of more than **77%** since the last JSNA was produced in 2019 and over the period of 2014 to 2022 this an overall significant increase of **165%**. Using a linear projection forecast, this change is marginally above the forecast growth in demand for EHC plans of approximately **18%** per annum (19.25%).

The following graph shows a summary of the growth in EHC Plans maintained by the local authority, with a continuing upward trend to 2023.

**Graph 2.** Shows the percentage increase for Children and young people with an EHC plan during the period 2014-2023 (unvalidated for 2023), compared to National and north west.



Graph source: gov.uk/government/statistics/education-health-andcare-plans-england-2022 (Table: sen2\_age\_caseload) and the unvalidated EHC Plan data produced for the January 2023 SEN2

# Placement of children and young people with a Sefton maintained EHC Plan.

Studies have shown that inclusion is beneficial for all students, not just children with special needs and disabilities; inclusive classrooms are essential for changing discriminatory attitudes. Children with special educational needs who are in inclusive classrooms are not absent from class as often; develop stronger skills in maths and English

and are more likely to have jobs and pursue education after secondary school. Also, children without special needs and disabilities have been found to be more comfortable with differences; have greater self-esteem and diverse, caring friendships. Therefore, inclusion in schools is considered important for all students with and without special needs and disabilities.

Furthermore, on the 28th of March 2022 the Government published the 'Opportunity for all: strong schools with great teachers for your child' White Paper. The White Paper sets out proposed reforms to the education system, including targeted support for every child that needs it and a stronger and fairer school system. In addition to this a SEND Green Paper has also been published outlining details of a reformed Special Educational Needs and Disability (SEND) education system which sets out to improve provision and inclusivity, to support children with SEND in mainstream and specialist settings to ensure consistently high standards in line with new national standards. The Green paper seeks to address three key challenges for children with SEND.

Nationally, the percentage of pupils with an EHC plan who are in mainstream schools (state-funded primary and secondary) has increased to **51.4%** in 2022. Although the number of pupils in special schools has increased, the percentage of pupils with an EHC plan attending state-funded special schools has dropped to **39.4%**. These trends continue patterns seen since 2018.

Table 7 summarises the placement information for those **1,604** children and young people for whom Sefton maintains an EHC plan.

**Table 7.** Children and young people for whom Sefton maintains an EHC plan, by phase.

Sefton							
Phase	All Pupils	SEN EHC Plan					
		Number	% of All	% of SEN			
				EHCP			
Independent school	2,129	54	2.5	3.4			
Non-maintained special school	68	66	97.1	4.1			
Pupil referral unit	72	3	4.2	0.2			
State-funded nursery	227	2	0.9	0.1			
State-funded primary	22,779	470	2.1	29.3			
State-funded secondary	16,570	279	1.7	17.4			
State-funded special school	731	730	99.9	45.5			
Sefton Total	42,576	1,604	3.8	100.0			

Table 7 source: explore-education-statistics.service.gov.uk/findstatistics/special-educational-needs-in-england/2021-22 (Table: sen\_phase\_type) In January 2022, the percentage of pupils with an EHC plan who are in mainstream state-funded primary and secondary schools in Sefton is 46.7%, below the national comparator of 51.4%, whilst the percentage of pupils with an EHC plan attending state-funded special schools in Sefton is 45.5%, above the national comparator of 39.4%. The percentage of pupils with an EHC plan in Sefton PRUs is relatively low, at just 4.2% compared to the national average of 28.2%.

The figures suggest the need to review and potentially improve provision and inclusivity in Sefton mainstream state-funded primary and secondary schools, to support more children with SEND in these settings in line with new national standards.

# Sefton children and young people with SEND by Locality and Ward.

Maps 5 to 7 show the distribution of the children and young people with special educational needs and/or disabilities (SEND) in Sefton, including total need (Map 5), those for whom the local authority maintains and EHC Plan (Map 6), those receiving SEN Support in a maintained school setting (Map 7). Although there is some disparity between the most deprived and most affluent areas across the borough, the distribution of SEND largely follows that of the general child population.

The Children and Families Act places a legal duty on the local authority and the Integrated Care Board (ICB), which now encompasses the former Clinical Commissioning Groups (CCGs) to secure services to meet the provision set out in individual EHC Plans, which means that the ICB and the Local Authority will need to continue work together to ensure the full integration of special educational needs and disabilities (SEND) provision across education, health and care and strengthen the principles of joint planning and commissioning of services as set out in the Children and Families Act 2014. The geographic distribution of SEND need demonstrates the demand for consistent locality-based systems for delivering support and interventions and reviewing and monitoring outcomes for children and young people with SEND. It also demonstrated a need to consider locality-based commissioning models, which explore opportunities for co-location of services, locality

aligned staff, and locality focussed needs analysis and strategic response. This may go some way to ensuring sustainability, building capacity where appropriate and sourcing services as locally as possible.

**Table 8.** Number of children and young people with special educational needs living in a Sefton ward (October 2022 school census)

October 2022 School Census (2-19)						
Sefton Wards	SEN EHC	SEN	All SEN			
	Plan	Support				
Bootle	696	2,548	3,244			
Church	65	174	239			
Derby	106	363	469			
Ford	118	406	524			
Linacre	110	477	587			
Litherland	85	269	354			
Netherton and Orrell	70	310	380			
St Oswald	93	402	495			
Victoria	49	147	196			
Sefton Central	316	1,091	1,407			
Blundellsands	31	104	135			
Harington	57	155	212			
Manor	64	210	274			
Molyneux	43	161	204			
Park	22	92	114			
Ravenmeols	49	211	260			
Sudell	50	158	208			
Southport	423	1,401	1,824			
Ainsdale	78	208	286			
Birkdale	64	242	306			
Cambridge	38	90	128			
Duke's	42	122	164			
Kew	80	249	329			
Meols	46	167	213			
Norwood	75	323	398			
Sefton Wards	1,435	5,040	6,475			

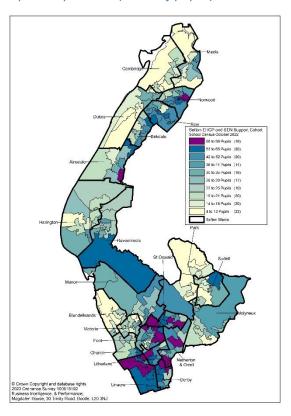
Table 8 source: October 2022 school census data

The figures in table 8 above do not necessarily correspond with the figures mentioned previously in this document for the number of children that the local authority maintains an EHC Plan and the number of children receiving SEN Support in Sefton maintained or non-maintained education setting. The is because the October 2022 school census will only include children who live in Sefton Ward and attend a Sefton maintained school. The table and the following maps provide an indication of the distribution of SEN demand across the borough.

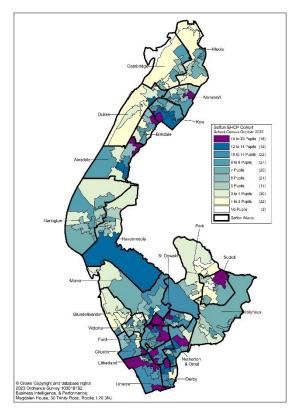
The highest demand is in the Linacre ward for all SEN needs and the lowest is in the Park ward.

There is a high concentration of demand in the south of the borough in the Bootle parliamentary area around the Linacre, Derby, Ford and St Oswald wards.

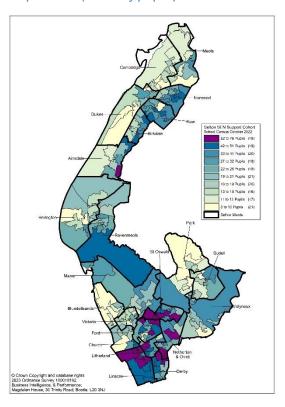
Map 5. School Census October 22 – Sefton SEN cohort, including EHCP and SEN Support by Lower Super Output Area (count of pupils)



**Map 6.** School Census October 22 – Sefton SEND cohort with an EHCP by Lower Super Output Area (count of pupils)



Map 7. School Census October 22 – Sefton SEND cohort receiving SEN Support by Lower Super Output Area (count of pupils)



# Primary Needs for all children and young people receiving SEN Support and with an EHC plan.

Nationally, the most common type of need among pupils with an EHC plan is autistic spectrum disorder (ASD). Almost one in three pupils with an EHC plan are identified with a primary need of ASD.

Nationally, the most common type of need among pupils with SEN support are speech, language and communication needs. This is followed by social, emotional and mental health needs and moderate learning difficulty.

Table 9. shows the 2021/22 statistical analysis of Sefton Primary SEN Need for all phases (Primary, Secondary and Special schools) compared to national and north west averages.

The top 3 primary needs of pupils with a Sefton EHC plan or receiving SEN support in the primary phase are:

- Speech, language and communication need. This is 28.5% compared to 33.7% nationally and 34.2% across the north west.
- Specific learning difficulties. This is 16.8% compared to 9.1% nationally and 9.8% across the north west.
- Social, emotional and mental health needs. This is 18.1% compared to 16.8% nationally and 19.3% across the north west.

In the secondary phase we see the primary needs of pupils with a Sefton EHC plan or receiving SEN support change to:

- Social, emotional or mental health needs; this is 22% compared to 22.6% nationally and across the north west.
- Specific learning difficulty: this is 22% compared to 18.9% nationally and 18.5% across the north west.
- Autism spectrum disorder: this is 14.1% compared to 12.5% nationally and 11.8% across the north west.

The top 3 primary needs of pupils with a Sefton EHC plan or receiving SEN support in Special Schools are:

- Autism, at 50.2% compared to 33.7% nationally and 35.4% in the north west. This is a marked difference and shows the importance of good joint commissioning in this area, there is a need to more fully understand this and perhaps suggests the need to focus on promoting greater inclusivity and cascading of best practice to our universal offers.
- The second highest primary need in Sefton special schools is severe learning difficulty at 13.5% compared to 19.7% nationally and 19.9% in the north west.
- The third is social, emotional, or mental health needs at 13.4% compared to 12.5% nationally and 14.6% across the north west.

The Primary SEN Needs for All SEN Pupils in Sefton (0-25years) is shown in greater detail in charts 3, 4, 5 & 6. Whilst the needs vary across primary, secondary, and special schools in summary, the primary needs of pupils with a Sefton EHC plan or receiving SEN support (0-25yrs) are:

- Speech and Language needs 21%
- Social Emotional & Mental Health 18%
- Autism 18%

Universally, this may suggest an increasing demand for the Sefton Community Speech & Language Therapy (SALT) service, who work with children from the Sefton area who are experiencing difficulties with communication and/or eating and drinking. It also implies an increasing demand on the Sefton Child & Adolescent Mental Health Services (CAMHS) multi-disciplinary team, who work with children and young people with varying difficulties including low mood, anxiety, self-harm, suicidal ideation, behavioural difficulties and trauma within the Sefton area, and the Autism and Social Communication Team, which sits within Sefton Council's Inclusion Service, Complex Needs Team, offering support to children and young people with Social Communication Needs and Autism in mainstream school settings.

**Table 9.** Shows the 2021/22 Sefton Primary SEN Need for All Phases, Primary, Secondary and Special schools, compared to National and north west

		Sefton				National				North West									
Primary SEN Need	Tota		State-funded	State-funded	State-funded	Tota	l	State-fund	ed	State-fun	ded	State-funded	2021	22	20212	22	20212	22	202122
			primary	secondary	special			primary		seconda	ary	special							
Autistic Spectrum Disorder	1,217	18.2%	466 13.2%	319 14.1%	367 50.2%	182,493	13.3%	69,648	9.8%	62,598	12.5%	47,592 33.7%	48,518	12.7%	16,712	8.3%	15,562	11.8%	15,060 35.4%
Hearing Impairment	77	1.2%	37 1.1%	39 1.7%	0.0%	22,884	1.7%	10,885	1.5%	10,386	2.1%	1,056 0.7%	6,158	1.6%	2,988	1.5%	2,798	2.1%	338 0.8%
Moderate Learning Difficulty	748	11.2%	419 11.9%	310 13.7%	16 2.2%	229,466	16.7%	120,288 1	6.9%	93,576	18.6%	14,955 10.6%	62,708	16.4%	33,994	16.8%	24,814	18.9%	3,664 8.6%
Multi- Sensory Impairment	30	0.4%	19 0.5%	9 0.4%	2 0.3%	4,112	0.3%	2,354	0.3%	1,396	0.3%	305 0.2%	1,256	0.3%	690	0.3%	440	0.3%	94 0.2%
Other Difficulty/Disability	306	4.6%	145 4.1%	144 6.4%	13 1.8%	53,144	3.9%	23,066	3.2%	26,844	5.3%	2,795 2.0%	15,702	4.1%	7,150	3.5%	7,888	6.0%	506 1.2%
Physical Disability	188	2.8%	95 2.7%	86 3.8%	3 0.4%	36,882	2.7%	18,217	2.6%	14,047	2.8%	4,015 2.8%	10,376	2.7%	5,320	2.6%	3,872	2.9%	1,104 2.6%
Profound & Multiple Learning Difficulty	66	1.0%	20 0.6%	2 0.1%	41 5.6%	10,877	0.8%	1,661	0.2%	469	0.1%	8,470 6.0%	3,488	0.9%	566	0.3%	106	0.1%	2,750 6.5%
SEN support but no specialist assessment of type o	198	3.0%	131 3.7%	59 2.6%	0.0%	46,103	3.4%	31,485	4.4%	14,117	2.8%	113 0.1%	13,250	3.5%	9,310	4.6%	3,778	2.9%	4 0.0%
Severe Learning Difficulty	116	1.7%	7 0.2%	7 0.3%	99 13.5%	33,938	2.5%	3,852	0.5%	1,894	0.4%	27,850 19.7%	10,264	2.7%	1,178	0.6%	594	0.5%	8,444 19.9%
Social, Emotional and Mental Health	1,207	18.1%	559 15.9%	498 22.0%	98 13.4%	258,441	18.8%	119,243 1	6.8%	113,424	22.6%	17,605 12.5%	73,854	19.3%	33,578	16.6%	30,898	23.5%	6,184 14.6%
Specific Learning Difficulty	1,099	16.4%	591 16.8%	498 22.0%	4 0.5%	163,031	11.9%	64,728	9.1%	95,071	18.9%	2,773 2.0%	45,124	11.8%	19,848	9.8%	24,338	18.5%	812 1.9%
Speech, Language and Communications needs	1,383	20.7%	1,001 28.5%	271 12.0%	86 11.8%	319,757	23.3%	240,188 33	3.7%	61,731	12.3%	13,076 9.2%	88,378	23.1%	69,156	34.2%	14,582	11.1%	3,362 7.9%
Visual Impairment	48	0.7%	27 0.8%	18 0.8%	2 0.3%	13,596	1.0%	6,206	0.9%	6,355	1.3%	784 0.6%	4,296	1.1%	1,958	1.0%	1,916	1.5%	172 0.4%
Missing (No SEN Recorded)	33,764		19,262	14,310		7,043,289		3,943,692		3,065,470		48	1,899,240		1,102,216		787,078		4
Total	40,447		22,779	16,570	731	8,418,013		4,655,513		3,567,378		141,437	2,282,612		1,304,664		918,664		42,498
Total minus Missing (No SEN Recorded)	6,683	100%	3,517 100%	2,260 1	731 100%	1,374,724	100%	711,821 1	.00%	501,908	1	141,389 100%	383,372	100%	202,448	100%	131,586	1	42,494 100%

Table 3 source: explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england/2021-22 (Table: sen\_secondary\_need)



Chart 5. 2021/22 - Sefton Primary SEN Needs by Phase: All SEN Pupils (0-25years)

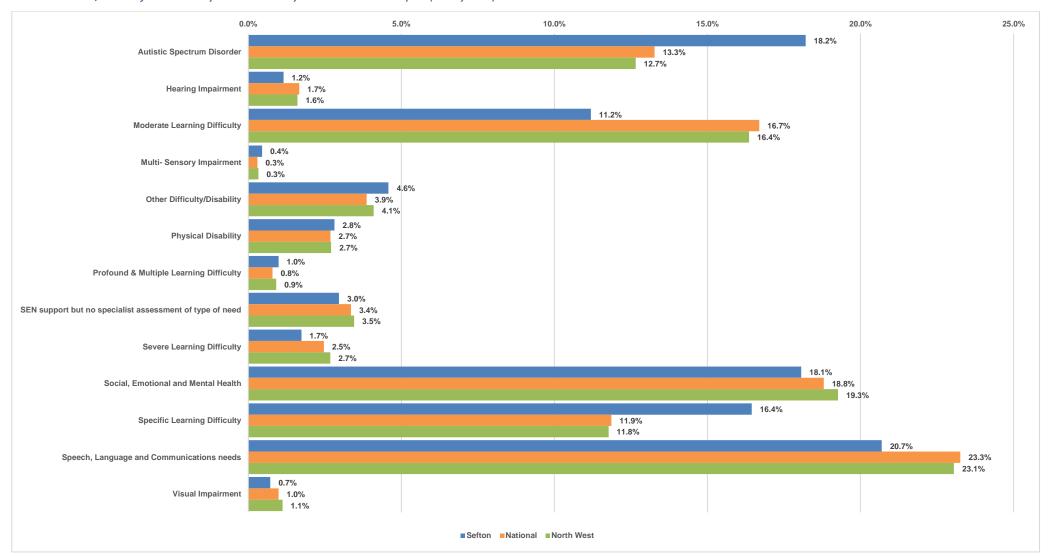
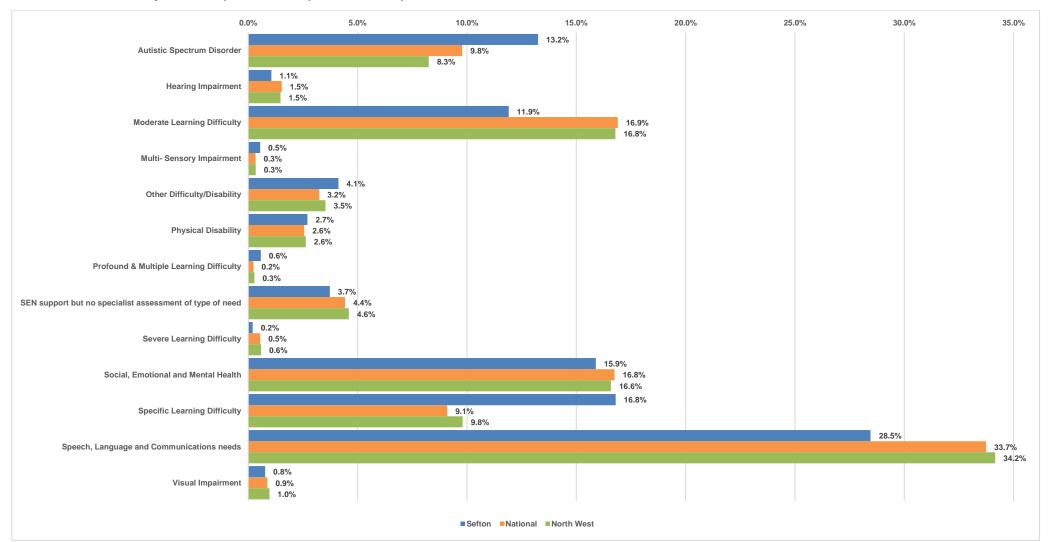


Chart 5 source: explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england/2021-22 (Table: sen\_secondary\_need)

Chart 6. 202021/22 - Sefton Primary SEN Needs by Phase: Primary Schools



 $Chart\ 6\ S source: explore-education-statistics. service. gov.uk/find-statistics/special-educational-needs-in-england/2021-22\ (Table: sen\_secondary\_need)$ 

Chart 7. 2021/22 - Sefton Primary SEN Needs by Phase: Secondary Schools

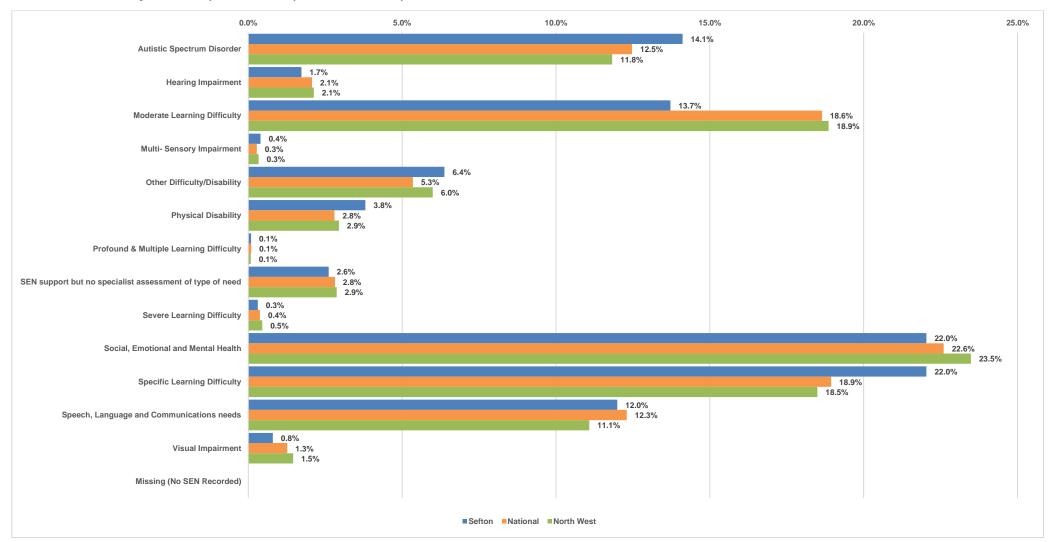


Chart 7 source: explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england/2021-22 (Table: sen\_secondary\_need)



Chart 8. 2021/22 - Sefton Primary SEN Needs by Phase: Special Schools

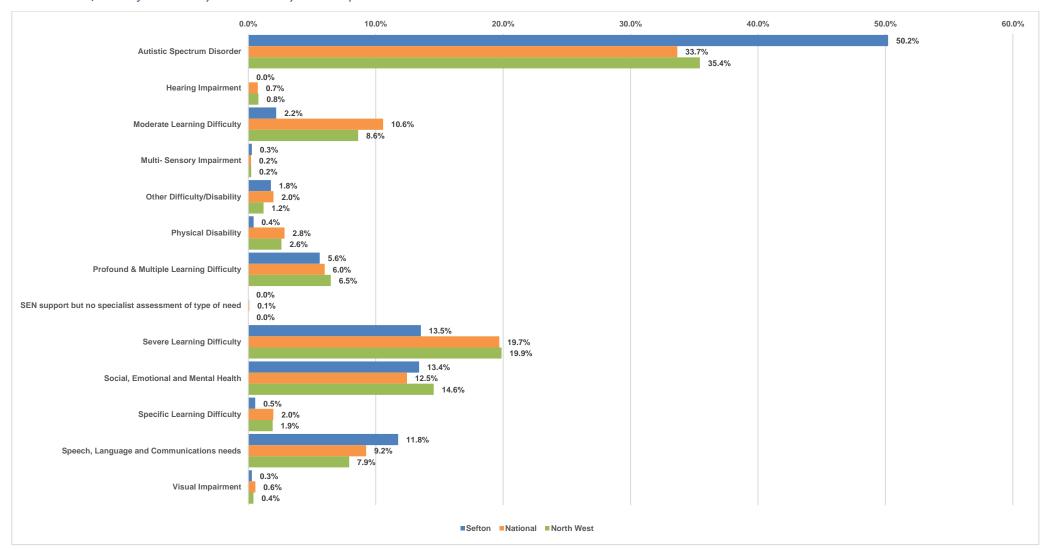


Chart 8 source: explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england/2021-22 (Table: sen\_secondary\_need)



#### **Number of EHC Assessments**

The SEN2 provides statistics for EHCs for the previous calendar yeat period. The Janaury 2023 SEN2 return is still to be finanlise, therfore there is no published, validated and comparative data for the 2022 calendar period. This document will be updated with that information when available. However, for comparative purposes between this version of the JSNA Needs Assessment and the previous version published in October 2019 2021 validated data is sued. In January 2022, the Local Authority reported that in the 2021 calendar year 602 initial requests were made for an EHC plan, of these 321 were issued. This is a growth of 8% from 296 issued in 2020 and an increase of 37% from 234 issued in 2017.

- 170 of those initial requests were refused during the 2021 calendar year (28.2%), compared to a national average of 22.3% and a Northest average 18%.
- 325 children and young people were assessed and decision taken whether or not to issue an EHC plan during the 2021 calendar year. Of the 325 children and young people assessed only 4 assessed where it was decided not to issue an EHC plan
- 196 of the 321 EHC plans made for the first time during the 2021 calendar year were issued within 20 weeks (61.1%), compared to a national average of 57.9% and a north west average of 65%.
- A further 168 children and young people were still being assessed or their assessment has been completed but no decision had been made for an EHC plan.

Chart 9 shows the age distribution for the **321** EHC plans that were made for the first time during the 2021 calendar year. 38% were for children aged 5-10 yrs; 36% for children and young people aged 11-15 yrs. The smallest demand was for young people and adults aged 20-25yrs, representing 0%.

**Chart 9.** Number of children and young people for whom an EHC plan was made for the first time during 2021

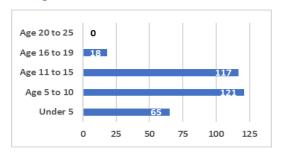


Chart 9 source: gov.uk/government/statistics/education-health-and-care-plans-england-2022 (Table: sen2\_age\_new\_plans)

# Number of SEN Statements & EHC Plans issued by Sefton (2014 - 2021)

Chart 10 shows the number of statements and EHC Plans issued annually over the previous eight-year period (2014 – 2021). The average number over the eight-year period has increased to **211** EHC Plans per annum. Given the increasing number of requests for EHCP assessments seem over the previous eight-year period, it is anticipated that the number of EHC plans issued in 2023 will continue to increase in line with the trend seen since 2019, at approximately **320** plans per annum.

**Chart 10.** Number of children and young people with a new statement or EHC plan by calendar year

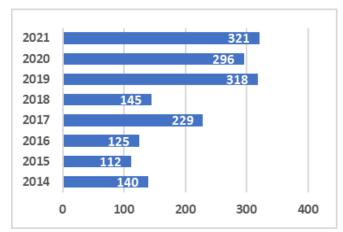


Chart 10 source: gov.uk/government/statistics/education-health-and-care-plans-england-2022 (Table: sen2\_estab\_new\_plans)



# Percentage of new EHC Plans issued within 20 weeks (2017 - 2021)

**Chart 11.** Percentage of new EHCP issued within 20 weeks - excluding exception cases.

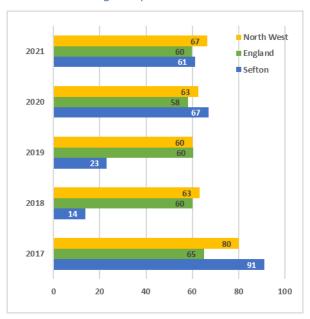


Chart 11 source: gov.uk/government/publications/local-authority-interactive-tool-lait (EHC Plans issued with 20 weeks)

The previous JSNA published in 2019 showed that percentage of new EHC plans issued in Sefton within the statutory recommended 20-week period, was better than both the national and north west averages consecutively for 2015, 2016 and 2017, at a three-year average of 90.8%. However, this performance dropped significantly in 2018 to 13.8% and in 2019, at the time of the Ofsted/CQC revisit the performance had dropped as low as 3%.

Chart 13 above, shows the percentage of new EHC plans issued within the statutory recommended 20week period, over the last five years (2017-2021) inclusive. It shows that Sefton's overall performance in 2020 and 2021 was better than the national average, at 67% and 61% respectively. In 2021 the Sefton rolling three-year average for 2019, 2020 and 2021 was **50.3%**, much lower than both the national at 59.4% and the north west at 63%. However, by January 2023 the reported performance in Sefton for the calendar year 2022 had dropped significantly to 18%, as shown in table 9. Despite this decline in performance there were signs of recovery in November and December 2022, which has continued into 2023, with the current performance averaging 30%. However, there is still further improvement required to return to a level

consistent with both the previous national and the north west comparators.

**Table 9.** Percentage of new EHCP issued within 20 weeks - excluding exception cases in 2022.

EHCPs Completed in 2022 ONLY									
Calendar Month	New Agreed Referrals in Month	Plans Finalised in Month	Plans Finalised in Month Within 20 Weeks	% Plans Finalised in Month Within 20 Weeks					
2022-01	25	15	1	6.7%					
2022-02	39	17	2	11.8%					
2022-03	69	19	2	10.5%					
2022-04	21	20	1	5.0%					
2022-05	41	40	4	10.0%					
2022-06	44	63	13	20.6%					
2022-07	68	43	6	14.0%					
2022-08	15	28	4	14.3%					
2022-09	33	36	7	19.4%					
2022-10	54	36	3	8.3%					
2022-11	69	36	14	38.9%					
2022-12	55	35	13	37.1%					
Total	533	388	70	18.0%					

**Table 10.** Percentage of new EHCP issued within 20 weeks - excluding exception cases in 2022.

EHCPs Completed in 2023 ONLY								
Calendar Month	New Agreed Referrals in Month	Plans Finalised in Month	Plans Finalised in Month Within 20 Weeks	% Plans Finalised in Month Within 20 Weeks				
2023-01	47	32	10	31.3%				
2023-02	1	87	27	31.0%				
2023-03	0	3	0	0.0%				
2023-04	0	0	0	0.0%				
2023-05	0	0	0	0.0%				
2023-06	0	0	0	0.0%				
2023-07	0	0	0	0.0%				
2023-08	0	0	0	0.0%				
2023-09	0	0	0	0.0%				
2023-10	0	0	0	0.0%				
2023-11	0	0	0	0.0%				
2023-12	0	0	0	0.0%				
Total	48	122	37	30.3%				

#### **SEN EHC Plan Mediation**

Mediation is a more informal way of trying to settle a dispute between a parent or young person and the local authority, compared to an appeal.

**Chart 12.** Percentage of mediation cases held which were followed by appeals to tribunal.

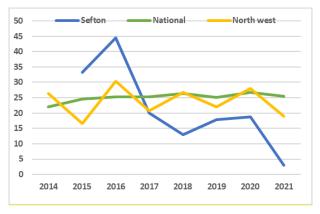


Chart 12 source: gov.uk/government/statistics/education-health-andcare-plans-england-2022 (Table: sen2\_mi)

Disagreement Resolution in Sefton is provided by independent service 'Global Mediation'. The chart above illustrates that in 2016 the local authority had a significantly higher than average percentage of cases progressing to tribunal following mediation. However, since 2016 the numbers have steadily declined, from its highest percentage of 44.4% in 2016, dropping to the lowest point at 2.9% in 2021. This is considerably lower than the National and north west figures of 25.5% and 18.9%. Arguably, this demonstrates that disagreement resolution arrangements established under the Children and Families Act 2014 are working for children and young people with SEND, and their families in Sefton.

#### **SEN EHC Plan Appeals**

Parents, carers and young people can appeal to the Special Educational Needs and Disability Tribunal if they disagree with a decision that Sefton Council has made about an education, health and care (EHC) Plan.

The First-tier Special Educational Needs and Disability (SEND) jurisdiction hears appeals against decisions of local authorities in England regarding special educational needs. Appeals to the Tribunal can be made in relation to several different decisions the Local Authority would make relating to that system which included the refusal to assess a child with special educational needs, the refusal to

issue an EHC plan following that assessment or the contents of the EHC plan once it has been finalised. The changes brought in under The Children and Families Act 2014 have also extended the reach of the SEND Tribunal. The number of families who can now appeal has increased because of the extension of EHC plans to those aged 0- 25 (with certain additional criteria attached to the upper age group).

Up to 2016/17 financial year the registered SEN appeals were measured as a rate per 10,000 of the local school population and at that time rate in Sefton was **2.58**, lower than the north west (3.03) and national (5.45). However, in 2014, because of the changes brought in under The Children and Families Act 2014, and following public consultation between December 2017 and February 2018, the appeal rate to the SEND Tribunal is now published as a percentage of all 'appealable decisions' on a calendar year basis. Total Appealable Decisions is calculated from data collected by the DfE from the annual SEN2 data return, which is mandatory for local authorities to complete. The Total Appealable Decisions figure is calculated as the sum total of the following:- Number of initial requests for Education, Health and Care (EHC) assessments refused-Number of assessments completed and a decision made not to issue an EHC plan- Number with an EHC plan as at January each year- Number of EHC plans ceased because the special educational needs of the child or young person are being met without an EHC plan.

**Chart 13.** Appeal rate to the SEND Tribunal based on total appealable decisions.



Chart 13 source: LAIT gov.uk/government/collections/tribunalsstatistics

Chart 13 shows that the appeal rate for Sefton (0.87) is significantly lower than the National rate (1.84), suggesting that the decision taken in Sefton about EHC Assessments and Plans stand up to scrutiny and that the mediation process is effective.

#### **SEN EHC Plan Reviews**

The local authority is responsible for children and young people's Education, Health and Care Plans and the annual review of those plans. The law requires all EHC Plans are reviewed by the local authority at least annually. This is usually referred to as the Annual Review. The exception to this is in Early Years, where EHCPs should be reviewed every 3 to 6 months. The Annual Review process is concluded when the Local Authority (1) issues a letter to confirm that they are maintaining the plan in its current form i.e. no amendments needed (4 weeks from Review meeting) (2) makes amendments and has issued the Amended Final Plan (8 weeks from Review meeting) or (3) it issues a letter proposing to cease the plan (4 weeks from Review meeting).

The process involves looking at the needs, provision and outcomes specified in an EHC Plan, and deciding whether these need to change. The first review of the EHC plan must be completed within 12 months of the EHC plan being finalised. Subsequent reviews must be completed within 12 months of the previous review process being completed (see timescales above).

**Table 11.** 2021/22 Academic Year for EHC Plan Review Performance

EHCP Reviews By Year Group Academic Year 2021/22	Total Cohort	No. Reviewed	% Reviewed
Nursery to Reception	5	2	40.0%
Year 2 Transfer	2	2	100.0%
Year 6	117	115	98.3%
Year 9	156	104	66.7%
Year 11	154	135	87.7%
Year 14	108	65	60.2%
Other years	1,547	862	55.7%
Total	2,089	1,285	61.5%

Table 11 above shows the number of children and young people with an EHC Plan and those receiving an annual review by year group for the 2021/22 academic school year. In Year 6 we can see a very positive 98.3% of students received an annual review and overall when we look at all children & young people, we can see the percentage receiving the annual review drops significantly to 61.6%. This is a marked improvement in performance from when the last JSNA was produced in 2019.

**Table 12.** 2022/23 Academic Year to date for EHC Plan Review Performance

EHCP Reviews By Year Group Academic Year 2022/23	Total Cohort	No. Reviewed	% Reviewed
Nursery to Reception	10	6	60.0%
Year 2 Transfer	1	1	59.8%
Year 6	94	86	91.5%
Year 9	197	87	44.2%
Year 11	169	129	76.3%
Year 14	153	60	39.2%
Other years	1,709	654	38.3%
Total	2,419	1,074	44.4%

Table 12 shows the number of children and young people with an EHC Plan and those who have received an annual review by year group for the 2022/23 academic school year. The analysis shows that by mid-February 2023 **91.5%** of Y6 students have received an annual review. However, overall the figures show a significant drop in the percentage of all children & young people receiving an annual review **(44.4%).** Tables 13 and 14 below, show the analysis of reviews by education stage and the national curriculum year groups.

**Table 13.** 2022/23 Academic Year to date split by school age for EHC Plan Review Performance

EHCP Reviews By School Age Academic Year 2022/23	Total Cohort	No. Reviewed	% Reviewed
Early Years & Nursery	11	7	63.6%
Primary	662	358	54.1%
Secondary	923	435	47.1%
Post 16	823	274	33.3%
Total	2,419	1,074	44.4%

Within Post 16, transition can happen at any point, for example if the young person changes their mind about their course or setting and drops out. It can be difficult for the LA to track these young people.

**Table 14.** 2022/23 Academic Year to date by all year groups for EHC Plan Review Performance 15<sup>th</sup> February 2023 deadline.

EHCP Reviews By Year Group	Total	Review	% Review
Academic Year 2022/23	Cohort	dates	dates
Year -2	1	1	100.0%
Nursery to Reception	10	6	60.0%
Reception	78	39	50.0%
Year 1	99	45	45.5%
Year 2 Transfer	1	1	100.0%
Year 2 All	87	52	59.8%
Year 3	97	34	35.1%
Year 4	102	49	48.0%
Year 5	105	53	50.5%
Year 6	94	86	91.5%
Year 7	200	66	33.0%
Year 8	193	63	32.6%
Year 9	197	87	44.2%
Year 10	164	90	54.9%
Year 11	169	129	76.3%
Year 12	185	79	42.7%
Year 13	157	59	37.6%
Year 14	153	60	39.2%
Year 15	84	29	34.5%
Year 16	83	18	21.7%
Year 17	77	21	27.3%
Year 18	42	4	9.5%
Year 19	27	3	11.1%
Year 19+	15	1	6.7%
Total	2,420	1,075	44.4%

However, despite the challenge associated with increasing demand for EHC Plans, which subsequently increases the number of annual reviews, The SEND Service has recently achieved a key milestone, which involved completing all EHCP assessments, reviews and amending existing EHCPs for 147 children due to change settings and to allocate school placements by the statutory deadline of 15th February. For the children starting in Reception, 91% were named in line with parental preference of schools and for children due to start in year 7, 89% were named in line with parental preference. As a result, they have received some positive feedback from parents / carers.

"I'm so appreciative for the time and effort that you've put in. Thank you for always being kind. My angel now has a school, a fantastic school that I'm over the moon with. It's real! It's really happening!"

"I just wanted to thank you from the bottom of my heart for the draft & going above and beyond because I know that you listened to us & noted everything I explained (that's not an easy job). So thank you so much

# Reported Council Expenditure on SEND (2013/14 – 2021/22)

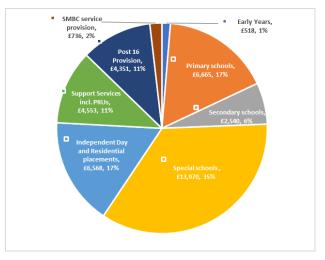
High needs funding is intended to provide the most appropriate support package for children and young people (from early years up to aged 25) with special educational needs and/or disabilities (SEND) in a range of settings, taking account of parental and student choice.

Table.15 and chart 14 shows a summary of the 2021/22 high needs expenditure year spend on high needs funding in Sefton.

**Table 15.** 2021/22 High Needs Funding in Sefton

2021/22 £'000	
Early Years	£518
Primary schools	£6,665
Secondary schools	£2,540
Special schools	£13,970
Independent Day and Residential placements	£6,568
Support Services incl. PRUs	£4,553
Post 16 Provision	£4,351
SMBC service provision	£736
Total Expenditure	£39,901

Chart 14. 2021/22 High Needs Funding in Sefton



Analysis of the Sefton High Needs expenditure for the period 2017/18 – 2021/22 reveals that expenditure has risen by approximately **40%**, from £**28.5M** (2017/18) to £**39.9M** (2021/22) annually and has continually exceeding the available income/funding by an average of **10.3%** per annum. In 2021/22 the expenditure (£39.9M) exceeding the income/funding (£35.7M) by approximately £4.2M. The forecast expenditure for 2022/23 has increased by a further **12.5%** to £44.9M from the previous financial year (2021/22), exceeding the

income/funding (£40M) by an overspend of £4.8M (12%).

Chart 14 below shows the average reported expenditure between 2013/14 and 2021/22 per week per child/young person for whom the local authority maintains an EHC Plan or receive SEND support in a Sefton maintained school setting or PRU). The figure is based on the total reported weekly expenditure on SEND for the local authority, divided by the number of pupils with EHC plans or receiving SEND support where high needs funding is attached.

**Chart 15.** Reported Expenditure (SEN - S251 outturn)



Chart 15 source: LAIT gov.uk/government/collections/statistics-local-authority-school-finance-data

In Sefton, this figure was £125 per week per child, compared to the average for all English single tier and county councils of £95 and across the north west average of £80. This includes the cost of SEN support services; Direct Payments (SEN and disability); SEN Transport; Home to school transport (pre-16); SEN transport expenditure; SEN Admin, assessment and coordination and monitoring. Although the average Sefton unit cost of spend has continued to reduce since 2016/17, displaying a downward trend, it has continually remained higher than the reported national, north west and statistical neighbour comparators.

The comparative figures for the average reported expenditure in the SEN-S251 outturn for 2021/22 suggest that Sefton spent approximately £7.9m more than all English single tier and county councils over the typical 38-week academic year in 2021/22 when accounting for those 7,007 children and young for whom the local authority maintains and EHC plan or are in receipt of SEN Support in a Sefton maintained school or PRU, funded through the High Needs block.

Between October 2018 and January 2019, a report presented by 'WAVES Consultants' highlighted a repeated overspend on high needs funding, rise in out of area placements, a lack of capacity in specialized schools, and a rise in the number of primary school kids receiving support. This patter has not changed, and it is anticipated that the demand against the high needs block of the Sefton dedicated schools grant (DSG) will continue to grow in-line with forecast increase of maintained EHC plans and the numbers of children and young people receiving SEN Support at a rate of approximately 10- 12% per annum, which could equate to an estimated continual overspend of £3.5M to £4M per annum.

However, the absence of readily available data that show the allocated high needs funding for each phase and child/young person. It is therefore recommended that a new dataset is established that will provide for a detailed level of analysis of income/funding and expenditure per child/young person per annum, to measure the impact that the funding is having on the outcomes for the child/young person and potentially increase greater control of the budget to reduce overspend.

# Educational Outcomes for the Sefton SEND Cohort

In response to the COVID-19 pandemic, the Department for Education cancelled the 2019/20 and 2020/21 national curriculum assessments.

### **Key Stage 2**

23% of all pupils with SEN (EHCP and SEN Support) achieved the expected level in reading, writing and mathematics in 2021/22 compared to 69% of those with no identified SEN – these figures are below the 2018/19 figure when 26% of pupils with SEN and 73% of pupils with no identified SEN achieved the expected level in reading, writing and mathematics.

Pupils with SEN have lower progress scores compared to those with no identified SEN and the score is lowest in writing TA.

**Table 16.** 2021/22 KS2 Progress Scores in Reading, Writing and Mathematics

<b>KS2</b> Progress	All	<b>EHC Plan</b>	SEN	All SEN	No SEN
	Pupils		Support		
Reading	0.75	-2.40	0.10	-0.36	0.74
Writing	-0.17	-4.40	-1.50	-2.01	0.30
Maths	0.28	-2.90	0.00	-0.47	0.47

Please note: A progress score of -1 would mean that the pupil achieved the equivalent of 1 scaled score point lower in that subject than all pupils with similar prior attainment nationally.

**20%** of children receiving 'SEN support' at KS2 are meeting expected standards in reading, writing and maths this is moderately below national (**21%**) and like both statistical neighbour averages (**20.1%**) and across the north west (**20%**).

The progress score for children receiving 'SEN Support' for KS2 Reading (0.10) is positive and above national (-1.20), statistical neighbour averages (-1.15) and north west (-0.70). Although progress for KS2 Writing (-1.50) is negative this remains higher than the national (-1.60). Progress for KS2 Maths (0.00) is positive and above national (-0.90), statistical neighbour averages (-0.80) and north west (-0.70).

Those children with an EHC Plan at KS2 meeting expected standards in reading, writing and maths is **4%** and significantly below the national (**7%**), north west (**6%**) and statistical neighbour averages (**5%**).

Children with an EHC plan at the end of KS2 are making better progress in reading, writing and mathematics than at the time of the last inspection. In reading the progress made is negative at **-2.40**, however this is significantly better than for similar pupils nationally at **-4.50**. In writing the progress made **-4.40**, although this is improving Sefton still lags the national average at **4.10**. Whilst the mathematics progress for KS2 is **-2.90** compared to the national at **-3.90**.

## **Key Stage 4**

The average attainment 8 score for pupils with SEN in 2021/22 was **26.7** compared to **49.1** for those with no identified SEN. The Sefton figures are below the national for both pupils with SEN **(29.3)** and those with no identified SEN **(52.5)**.

The average progress 8 score for pupils with SEN in 2021/22 was **-0.91** compared to **-0.24** for those with no identified SEN. The Sefton figures are below the

national for both pupils with SEN (-0.69) and those with no identified SEN (0.10).

In 2021/22, **13%** of pupils with SEN achieved grades 5 or above in English and mathematics GCSEs, compared to **49%** of pupils with no identified SEN. The Sefton figures are below the national for both pupils with SEN (**18%**) and those with no identified SEN (**56%**).

The average Attainment 8 score for young people receiving 'SEN support' at KS4 is **32.8**, moderately below national at **34.8**, north west **33.6** and statistical neighbour averages at **33.9**.

The average progress 8 score for young people receiving 'SEN support' is **-0.64**, this is currently below the national (**-0.47**), north west (**-0.58**) and statistical neighbour averages (**-0.53**).

The average English Baccalaureate point score for young people receiving 'SEN support' is **2.64**, this is currently below the national (**2.89**), north west (**2.74**) and statistical neighbour averages (**2.78**).

The Attainment 8 score for young people with an EHC Plan at KS4 is **12.7** moderately below national at **14.3**, north west at **13.3** and statistical neighbour averages **13.2**.

The percentage of SEN pupils who receive 'SEN support' in secondary school going to, or remaining in education & employment/training overall is the same as the national at **89.1%**, above both north west at **88.1%** and statistical neighbour averages at **88.7%**.

The average progress 8 score for young people with an EHC Plan at KS4 is -1.58, this is currently below the national (-1.33), north west (-1.44) and statistical neighbour averages (-1.41).

The average English Baccalaureate point score for young people with an EHC Plan at KS4 is **0.89**, this is currently below the national (**1.14**), north west (**1.05**) and statistical neighbour averages (**1.04**).

**87.1%** of SEN pupils with an EHC plan going to, or remaining in education & employment/training overall is below national at **90.5%**, north west at **88.6%** and statistical neighbour averages at **89.1%**.

### Post 16 – attainment by age 19.

**26**% of pupils identified with SEN achieved Level 2 (equivalent to 5+ A\*-C/ 9-4 at GCSE) including English and mathematics (GCSEs only) by age 19 in

2020/21, which is **50%** lower than pupils with no identified SEN (76%), as illustrated in the table below. The next update to this data set is April 2023.

**Table 17.** Percentage of 19yr olds Qualified to Level 2 (2021/22)

%19 year olds qualified to Level 2, inc English & Maths	All Pupils	EHC Plan	SEN Support	All SEN	No SEN
%19 year olds qualified to Level 2	81.1	29.3	55.3	46.8	84.9
%19 year olds qualified to Level 2, inc English & Maths	71.3	18.5	29.8	26.0	76.3
%19 year olds qualified to Level 3	54.2	12.0	26.6	21.8	57.8

The percentage of young people with an EHC Plan qualified to level 2 (2021/22) is **18.5%**, higher than the northwest (15.7%) and national (16.1%) comparators, placing Sefton in the second highest quartile of other local authorities for performance. However, the percentage of 19yr olds receiving SEN Support qualified to level 2 is **29.8%**, significantly lower than the northwest (39.2%) and national (40.2%) comparators, placing Sefton in the lowest quartile band for performance on this indicator.

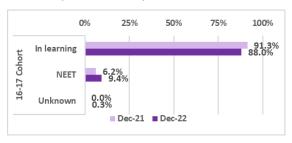
The percentage of young people with an EHC Plan qualified to level 3 (2 or more A levels or equivalent size vocational qualifications) in 2021/22 is 12%, lower than the northwest (13.7%) and national (14%) comparators, placing Sefton in the third quartile of other local authorities for performance. By comparison the percentage of young people with no identified SEN achieving a level 3 qualification by age 19 is 57.8%. The percentage of 19yr olds receiving SEN Support qualified to level 3 is 26.6%, lower than the northwest (33.2%) and national (35.4%) comparators, placing Sefton in the lowest quartile band for performance on this indicator.

### **SEND NEET Statistics**

The SEND cohort that Career Connect work with has increased significantly by 27.9% over the last 3 years, from 569 in December 2020, to 728 in November 2022.

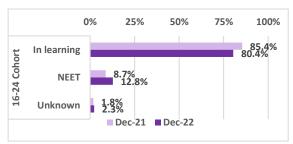
The number of 16–17-year-olds with SEND in learning is **91.3%** (December 2022). However, the percentage of 16–17-year-old children with SEND not in employment, education or training (NEET) has increased by 3.2% year on year and by the end of 20222 it had reached **9.4%.** In the same period (December 2021 to December 2022) the 'Not Known' has risen to **0.3%.** 

**Chart 16.** Destination Breakdown Percentage Dec 21 v Dec 22 (16-17 Cohort)



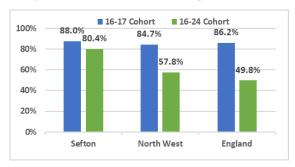
The number of 16–24-year-old children and young people with SEND in learning is **85.4%.** The percentage of 16–24-year-old children and young people with SEND not in employment, education or training (NEET) has increased by 4.1% year on year to **12.8%,** however, this is 0.2% below the north west average at 13.0%. The SEND 16-24 Not Known has increased by 0.5% year on year to 2.3%, however, this is 23.6% below the NW average (25.9%).

**Chart 17.** Destination Breakdown Percentage Dec 21 v Dec 22 (16-24 Cohort)



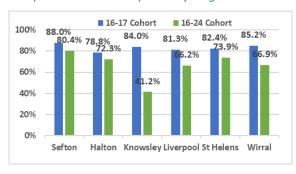
Sefton has seen a drop in the percentage of SEND 'In learning' as of December 2022 however, when you compare Sefton with England, the north west, and the Liverpool City Region, both cohorts age groups 16-17 and 16-24 show higher percentage engaging 'In learning'.

**Chart 18.** SEND In Learning Percentage Dec 22 compared to north west and England.



Sefton has seen a drop in the percentage of SEND 'In learning' as of December 2022 however, when you compare Sefton with the Liverpool City Region LAs both cohorts age groups 16-17 and 16-24 show higher percentage engaging 'In learning'.

**Chart 19.** SEND In Learning Percentage Dec 22 compared to the Liverpool City Region





### Table 18. SEN Population educational outcomes over a 5-year Trend

The metrics below show the range of educational and other outcomes for Sefton children and young people with special educational need and/or disabilities (SEND), compared to north west, statistical neighbours and national comparators over 5-year trend.

The academic year 2020/21 saw the return of the summer exam series, after they had been cancelled in 2020 and 2021 due to the impact of the COVID-19 pandemic, where alternative processes were set up to award grades (centre assessment grades, known as CAGs, and teacher assessed grades, known as TAGs). As part of the transition back to the summer exam series adaptations were made to the exams (including advance information) and the approach to grading for 2022 exams broadly reflected a midpoint between results in 2019 and 2021.

•	2017/18 (Sefton)	2018/19 (Sefton)	2019/20 (Sefton)	2020/21 (Sefton)	2021/22 (Sefton)	Statistical Neighbour Compariso	North West	National Comparison
Percentage of children achieving expected standard at Key Stage 2 in Reading, Writing and Maths for SEN pupils with EHCP	1.0%	3.0%	not available	not available	4.0%	5.3%	6.0%	7.0%
Percentage of children achieving expected standard at Key Stage 2 in Reading, Writing and Maths - SEN pupils without EHCP	21.0%	17.0%	not available	not available	20.0%	20.1%	20.0%	21.0%
Progress scores at Key Stage 2 in Reading - SEN pupils with EHCP	-4.50	-2.30	not available	not available	-2.40	-5.01	-3.70	-4.50
Progress scores at Key Stage 2 in Writing - SEN pupils with EHCP	-6.70	-4.70	not available	not available	-4.40	-4.63	-3.70	-4.10
Progress scores at Key Stage 2 in Maths - SEN pupils with EHCP	-6.20	-3.00	not available	not available	-2.90	-4.29	-3.20	-3.90
Progress scores at Key Stage 2 in Reading - SEN pupils without EHCP	1.10	-1.20	not available	not available	0.10	-1.15	-0.70	-1.20
Progress scores at Key Stage 2 in Writing - SEN pupils without EHCP	-1.60	-3.00	not available	not available	-1.50	-1.65	-1.30	-1.60
Progress scores at Key Stage 2 in Maths - SEN pupils without EHCP	1.00	-1.20	not available	not available	0.00	-0.80	-0.70	-0.90
Average Attainment 8 score per pupil at end of Key Stage 4 for SEN pupils with EHCP	14.30	10.40	10.90	16.90	12.70	13.23	13.30	14.30
Average Attainment 8 score per pupil at end of Key Stage 4 for SEN pupils without EHCP	29.50	27.30	34.80	34.80	32.80	33.85	33.60	34.80
Average Progress 8 score per pupil at end of Key Stage 4 for SEN pupils with EHCP	-1.12	-1.36	not available	not available	-1.58	-1.41	-1.44	-1.33
Average Progress 8 score per pupil at end of Key Stage 4 for SEN pupils without EHCP	-0.70	-0.95	not available	not available	-0.64	-0.53	-0.58	-0.47
Average English Baccalaureate Point Score per pupil at the end of Key Stage 4 for SEN pupils with EHCP	0.97	0.68	0.73	1.31	0.89	1.04	1.05	1.14
Average English Baccalaureate Point Score per pupil at the end of Key Stage 4 for SEN pupils without EHCP	2.26	2.09	2.69	2.77	2.69	2.78	2.74	2.89
Percentage of SEN children and young people who are persistent absentees - SEN provision Statement or EHCP	26.10	24.72	not available	44.77	Available Mar-23	not available	44.26	43.31
Percentage of SEN children and young people who are persistent absentees - SEN provision SEN Support	18.92	20.19	not available	21.68	Available Mar-23	not available	19.20	18.88
Rate of SEN children and young people who are subject to suspensions - SEN provision Statement or EHCP	10.13	10.48	5.69	4.86	Available Jul-23	not available	12.32	12.98
Rate of SEN children and young people who are subject to a suspensions - SEN provision SEN Support	8.34	7.35	5.51	5.42	Available Jul-23	not available	10.07	11.86
Rate of SEN children and young people who are subject to a permanent exclusion - SEN provision Statement or EHCP	0.00	0.00	0.00	0.00	Available Jul-23	not available	0.05	0.08
Rate of SEN children and young people who are subject to a permanent exclusion - SEN provision SEN Support	0.16	0.30	0.13	0.09	Available Jul-23	not available	0.19	0.15
% KS4 SEN pupils with EHCP going to, or remaining in education & employment/training overall (inc special schools)	86.1%	87.1%	87.6%	87.1%	available Oct_2023	89.1%	88.6%	90.5%
% KS4 SEN Pupils With SEN Support going to, or remaining in education & employment/training overall (inc special schools)	87.9%	85.1%	83.6%	89.1%	available Oct_2023	88.7%	88.1%	89.1%
16-17 yr olds with SEN in education & training, as at 31 March	84.4%	86.4%	95.3%	89.8%	available Aug_2023	89.2%	86.5%	89.2%
Percentage of KS4 SEN cohort in Education, Employment or Training at 17 (inc special schools)	87.1%	85.8%	85.1%	88.3%	available Oct_2023	89.0%	88.2%	89.5%
%19 year olds qualified to Level 2, with EHCP	23.3%	30.2%	23.2%	29.3%	available Apr_2023	27.1%	27.5%	28.8%
%19 year olds qualified to Level 2, SEN pupils without EHCP	64.4%	54.5%	54.3%	55.3%	available Apr_2023	68.8%	60.0%	62.1%
%19 year olds qualified to Level 2, inc English & Maths - with EHCP	13.8%	11.3%	14.5%	18.5%	available Apr_2023	14.1%	15.7%	16.1%
%19 year olds qualified to Level 2, inc English & Maths - SEN pupils without EHCP	31.5%	28.7%	28.6%	29.8%	available Apr_2023	40.5%	39.2%	40.2%
%19 year olds qualified to Level 3 - with EHCP	12.1%	10.4%	11.6%	12.0%	available Apr_2023	12.3%	13.7%	14.0%
%19 year olds qualified to Level 3 - SEN pupils without EHCP	28.2%	22.5%	24.6%	26.6%	available Apr_2023	34.6%	33.2%	35.4%

## **Specialist Transport**

Parents and carers are responsible for ensuring that their children attend school regularly and on time. Most pupils in Sefton.

- walk to school, accompanied, if necessary, by a parent/carer; or
- travel to school on public transport; or
- are driven to school by parents.

Wherever possible the local authority expects parents to make similar arrangements for children and young people with special educational need and/or disabilities (SEND) attending mainstream schools. However, the local authority has a statutory duty, and in appropriate circumstances discretionary powers, to help with home to school travel, based on a pupil's individual needs and circumstances. The key outcomes we are seeking when we deliver this service are for the children and young adults to arrive:

- On time
- Ready to Learn
- Safely

Sefton Council offers a range of Travel Solutions to meet the individual needs of students and young people with SEND, including Independent Travel Training, Personal Travel Budgets, Travel Pass and Commissioned Transport. The following table shows the number of children and young people (aged 0 - 25) with special educational needs and/or disabilities (SEND) who received specialist transport provision (Commissioned or Personal Travel Budget) over the last four-year period:

**Table 19.** Children and young people with an EHC plan (Specialist Transport Provision)

Year	0-25
Nov-19	949
Nov-20	1,087
Nov-21	1,202
Nov-22	1,328

Table 19 shows a growth in demand for Home to School Travel Support of approximately **40%** from November 2019 to November 2022 for children and young people with SEND aged 0-25.

As of November 2022, Sefton Council was providing SEND commissioned travel support for:

- 150 Post 16 Students
- 964 0 16 Children and Young People

As of November 2022, Sefton Council was providing a SEND Personal Travel Budget for 214 Children and Young People aged 0-25.

The number of children and young people with SEND and eligible for Travel Support increased by over **20%** since 2020.

The number of statutory school age students transport to out of borough settings increased from 47 in 2020 to 116 in 2020, which represents a **147%** increase in demand for out of borough transport.

The number of out of borough settings that the Council transports children and young people to has increased from 36 in 2021 to 53 in 2022, an increase of more than 47%.

Demand for a Personal Travel budget has increased by **77%**, from 121 to 214 over the past 2 years.

However, Children and young people with special educational needs and/or disabilities (SEND) who attended the Youth Participation Conferences have said that they would like further support in travel training.

# Aiming High for Disabled Children

Disabled children in Sefton & their families are supported by Aiming High for Disabled Children. Aiming High for Disabled Children is a Sefton Council service that ensures disabled children, young people and their families have the same access to fun, fulfilling activities and life chances as those without disabilities by providing specially tailored sessions during term-time and holidays that young people can access, short breaks and specialist support when our young people reach key 'transition points', such as moving from education into employment.

The Aiming High short breaks programme is promoted as part of the Local Offer and children

and young people (aged 5 -19 years) are referred via a professional. A care plan is co-produced with the family to ensure that the children's needs are understood and met. All the activities are offered from venues across the borough. Sessions cater for a range of interests and are appropriately adapted.

Every week during the school terms 19 sessions are offered per week. (Some weekend sessions are biweekly adding an additional three sessions to the overall offer). 258 children and young people have participated. The number of children and young people benefiting from the school holiday programmes over the last 12-months included 128 at Easter, 92 during the Spring Break, 217 over the summer holidays, 111 in the October school halfterm and 116 in the February 2023 school half term.

The short breaks service has delivered 29,862 hours of respite to local families in Sefton. In addition, the service has organised and delivered family activities, providing 2,120 hours of supported events that include parents, carers and siblings.

Aiming High also supports a summer programme at Rowan Park School (26 pupils), a summer programme and afterschool club at Merefield School (8 pupils), a contribution to the Buddy Up Programme (peer support) (50 young people aged 13-18 at risk of social isolation), a contribution to Phoenix afterschool provision for teenagers (2 young people per week) and a contribution to Saturday morning activities at Kinderworld (average 4 children with their families). The budget for this provision is £637,750 and arguably the service continues to make a valued difference to the lives of children and young people with disabilities in Sefton.

# Short Breaks in Springbrook Residential Unit

Springbrook Children's Home is registered with Ofsted to provide overnight short breaks for up to five disabled children at a time. The children who stay at Springbrook are aged between 6 and 17 years and have significant disabilities.

Springbrook is a specialist provision that is only available following the outcome of a Social Work assessment and the Registered Managers decision that the child's needs can be met at the home.

Children's stays are pre-planned and on a rolling programme. This means that children stay with a consistent group of their peers who they are compatible with. Staff organise a variety of community-based activities such as swimming, bowling, cinema as well as activities in the home such as sensory play and arts/crafts.

Thirty-five disabled children currently access short stays at Springbrook. On average they stay for 2 nights per month. As children who stay at Springbrook are classified as Children in Need, their continued access to overnight short stays is reviewed as part of their 3 or 6 monthly Child in Need Review chaired by the child's social worker.

# Qualitative Evaluation of Sefton's SEND Provision

In December 2018 Edge Hill University completed a Consultative Qualitative Evaluation of the local are SEND provision in Sefton. The report summarised the lack of accessibility and consistency in provision within the borough, highlighting long wait times, cancelled appointments and inadequate pathways in the local Health offer, the need for greater use of adaptations and equipment in the home to ensure the home is viewed as a safe environment for children and young people with SEND, and called for an increase in mainstream school's capacity to adequately support and make reasonable adjustments for children with SEND. The report also called for the need for children and young people and their families to feel they are being listened to.

Between October 2018 and January 2019, the report presented by 'WAVES consultants' recommended building in annual parent carer satisfaction surveys, Furthermore the Youth Participation Conferences held in March 2019 identified many barriers children and young people with SEND experience to academic achievement, being healthy and travel independently.

Since then, 4 SEND parent and carer surveys have undertaken; a full baseline survey in October 2019, a short 'temperature check' survey in September 2020 and further full surveys in March 2021 and March 2022. The annual survey provides us with an overview of the views and opinions of the parents and carers of children and young people with Special Educational Needs and/or Disabilities (SEND), on what is going well and what could be

improved in our local area. The survey focuses on the Education, Health and Social Care services and the information and support they receive.

At the time of the 2022 survey, Sefton had **2,340** children and young people with an EHC Plan and there were **285** open EHC assessments. The survey was completed by 140 respondents, giving us a response rate of 5% (with a calculate the margin of error of 8%). A large proportion of respondents either did not answer or indicated that the Social Care related questions were not applicable to them. Of the 2,340 children/young people with an EHC Plan 253 are known to Children's Social Care and as a result, saw a lower response rate to Social Care related questions.

Across the system, most respondents reported that they feel listened to in a calm and respectful manner and the language used by professionals is positive and useful. Most parents and carers find it easy to contact people in the education establishments, queries are responded to in a timely manner, they receive the right level of advice about the assessment process and feel listened to in the development and review of the young person's plan.

However, across the system parents and carers are reporting that there needs to be some improvements with the EHCP process, from being aware of the EHCP, through to the written plan and the monitoring and review of the plan. Parents and carers are generally satisfied with the way that the school staff, SENCO's and early years are working together, however feel that all staff within the education setting would benefit from an increased awareness of SEND and some additional training.

In Health, satisfaction was highest for GP's and school nursing, with parents and carers reporting that generally their needs are met. However, over half of respondents were dissatisfied with CAMHS, indicating that their needs are not met, monitoring and assessment is not taking place and waiting times are too long. CAMHS and paediatricians received the most negative responses with over half of respondents feeling that these two professional agencies were not working well with others to support the needs of their child/young person. Many of the respondents are not aware of the Designated Clinical Officer (DCO) and their role.

Whilst some parents and carers value Aiming High, Springbrook, the Local Offer and the Special Education Needs and Disabilities Information Advice and Support Services (SENDIASS), there are more parents and carers who are not satisfied with these services. More than half of respondents have heard of the Local Offer and SENDIASS, but many have not used the service or accessed the website in the past 6 months. Some parents and carers are reporting that there is some improvement to the Local Offer but there are still some issues with navigation. Of those whose children/young people who were at the age for preparing for adulthood, many parents and carers were not satisfied with the support available and only 13% were aware of the Preparation for Adulthood Guide.

Some parents and carers think that the 'SEND System' is improving. There are positive experiences and areas where parents and carers feel could be improved, but more than half of parents and carers feeling that parts of the SEND system could work better together.

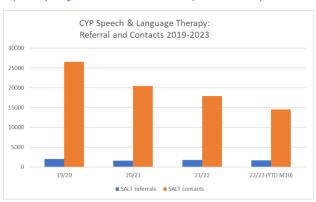
The SEND Parent and Carer Survey for 2023 will be undertaken in March. Developed in conjunction with the SEND Parent and Carer Forum, the survey will be the shorter survey, but with a few additional questions, from the larger survey. The 2023 survey will provide an updated view. The consultation report will be presented to the SEND Continual Improvement Board in May 2023.

# **Community Health Activity and Average Waiting Times**

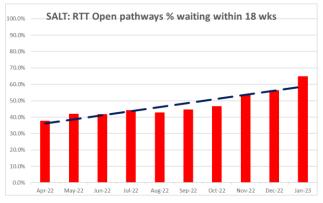
The following data provides an indication of the demand and waiting times to access community health services such as speech and language therapy, occupational therapy, physiotherapy, autistic spectrum disorder (ASD) diagnostic assessment and community paediatrics.

# Paediatric Speech and Language Therapy (SALT)

**Table 20.** Paediatric Speech and Language Therapy (SALT) Referrals and Contacts (2019-2023)



**Table 21.** Paediatric Speech and Language Therapy (SALT) Referrals Rates to Treatment

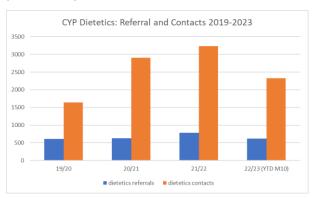


Referral rates to Speech and Language Therapy treatment have been affected by COVID lockdown periods as schools remain the primary source of referrals to the service. Contact also dropped but this is also because this therapy requires close face to face contact which has taken time for normal practice to resume. Referrals and contacts are projected to return to pre-pandemic levels by the end of 2022/23.

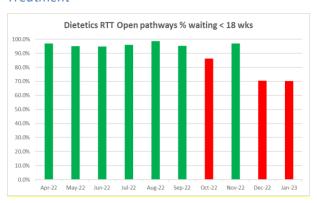
Restrictions on delivery during COVID had a significant impact on performance. In April 2022 under 38% of those waiting had been waiting less than 18 weeks. Following an agreed improvement plan, performance has continued to improve and in January 2023 **65%** of patients were waiting under 18 weeks.

#### **Paediatric Dietetics**

**Table 22.** Paediatric Dietetics Referrals and Contacts (2019-2023)



**Table 23.** Paediatric Dietetics Referrals Rates to Treatment



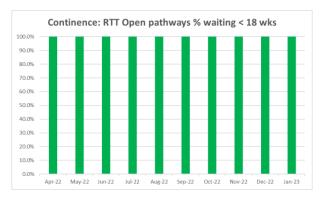
The Dietetics Service has seen a growth over the last 3 years in both referrals and contacts. Over 20% increase in the number of referrals and over 70% increase in the numbers of contacts. This does correspond with a planned expansion of the service to provide wider access across the borough. Performance has consistently been above the commissioned target of 92% (those on waiting list waiting less than 18 weeks). However, more recently there has been a drop in performance to 70% related to staff sickness and vacancies, but performance is expected to recover.

### **Paediatric Continence**

**Table 24.** Paediatric Continence Referrals and Contacts (2019-2023)



**Table 25.** Paediatric Continence Referrals Rates to Treatment



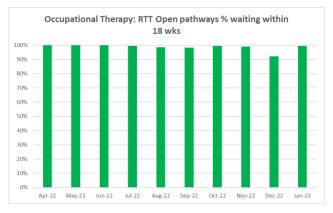
Referrals to continence have been consistent over the past few years and during 2022/23 the service has reported every month that 100% of those waiting to be seen have been waiting less than 18 weeks.

### **Occupational Therapy**

**Table 26.** Occupational Therapy Referrals and Contacts (2019-2023)



**Table 27.** Occupation Therapy Referrals Rates to Treatment



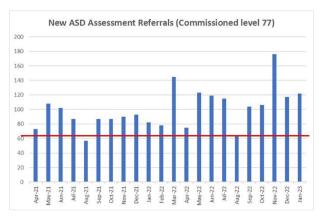
Occupational Therapy referrals and contacts where not impacted as significantly as Speech and Language Therapy during the Covid-19 pandemic, and again the numbers are likely to be at similar levels to prepandemic by the end of 2022/23. Positively, the service has achieved the **92**% target (those on waiting list waiting less than 18 weeks) throughout 2022/23.

# ASD & ADHD Assessment and Diagnostic pathway

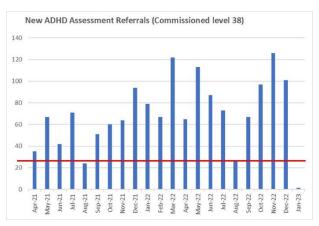
**Table 28.** ASD and AHHD Referrals and Contacts (2019-2023)



**Table 29.** New ASD Assessment Referrals (2021-2023)



**Table 30.** New ADHD Assessment Referrals (2021-2023)



A new NICE compliant assessment and diagnostic pathway was introduced in April 2020. During that year, the referral levels were like the commissioned levels of activity. During 2021/22 referrals increased significantly: **75.3%** for ASD (668 to 1171) and **265%** for ADHD (228 to 832). It was unclear whether this increase was a direct result of COVID. However, referral rates for 2022/23 are projected to be higher again. A review of referrals has indicated that an increased rates of referrals is likely to be sustained for at least a number of years.

 Table 30. ADHD Assessment Referrals (2021-2023)

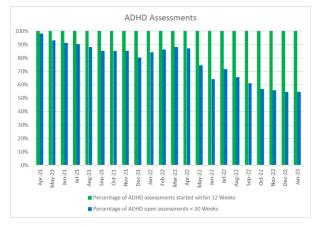
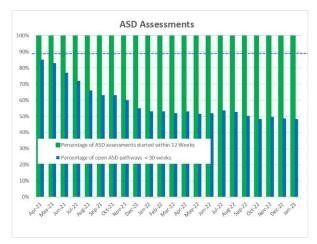


Table 31. ASD Assessment Referrals (2021-2023)



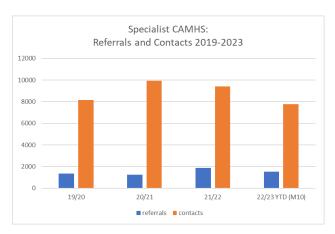
As a result of the number of referrals exceeding capacity for a continued period, performance has been negatively affected. Although all accepted referrals are started with 12 weeks, the rate of open cases that are waiting less than 30 weeks for the assessment to be concluded has deteriorated.



# **Child and Adolescent Mental Health Services**

# **Specialist CAMHS: Referrals and Contacts**

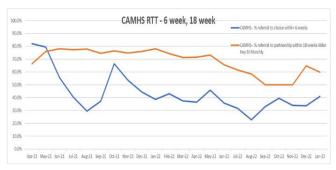
**Table 32.** Specialist CAMHS Referrals and Contacts (2019-2023)



The number of referrals has increased since 2019/20 with 2021/22 having referrals more than 35% higher. Similarly, the number of contacts increased over the same time by over 15%. There has been additional investment into these services over that time. These increased referrals and contact numbers continue at this level into 2022/23.

### **CAMHS** Referral to treatment times

**Table 32.** Specialist CAMHS Referrals to Treatment (2021-2023)



Increased activity combined with workforce challenges and COVID have negatively impacted on performance. As of January 2023, of those waiting for a 'choice' appointment just over 40% were waiting less than 6 weeks, and those waiting for a 'partnership' appointment 60% had been waiting less than 18 weeks.

### Conclusion

The following points have been identified within the main body of this report and highlighted as area of opportunity for future partnership work, inform the Joint Commissioning Strategy for children and young people with special educational needs and/or disabilities (SEND) over the coming years.

The SEND and Alternative Provision Green Paper, published in March 2022 alongside the Schools White Paper, set out bold proposals to deliver a generational change for a more inclusive system. This was followed by the Government's Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan (Right Support, Right Place, Right Time) release in March 2023 explored the issues present within the current SEND system. It set out the government's proposals to improve outcomes for children and young people; improve experiences for families, reducing the current adversity and frustration they face; and deliver financial sustainability. It also considered the specific issues facing the alternative provision sector. This is because 82% of children and young people in state-place funded alternative provision have identified special educational needs, and it is increasingly being used to supplement local SEND systems. The vision for the new national SEND and alternative provision system is to (1) Fulfil children's potential; (2) Build parents' trust, and (3) Provide financial sustainability. The Government's Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan will have far and reaching transformational implications for the local SEND system in Sefton, that the local authority and partners will have to ready themselves for. The transition to a new national SEND and alternative provision system and national standards will result in significant change across the local system in the next three years (between 2022 and 2026).

Sefton has a resident population of 279,239 people, with 57,904 (21%) children and young people in Sefton (age 0-19) and 74,281 children and young people in Sefton (age 0-25).

In Sefton, 55% of households are identified as having one or more deprivation dimension, higher than the north west (53%) and England (52%). In 2020/21 there were 9,501 children (aged 0 to 19)

living in relative low-income families in Sefton, equating to 16% of the Borough's children. The levels of children living in relative low-income families vary considerable throughout Sefton. Linacre ward makes up 10% of the Boroughs children with Derby accounting for a further 8%. 28% of Linacre residents aged 0-19 are living in relative low-income families, with 24% in Derby. In comparison just 1% of Sefton children living in relative low-income families reside in Harington ward, with only 5% of the ward's residents aged 0-19 living in relative low-income families. Throughout the Covid-19 pandemic 81% of lowincome families reported lower income and 54% of the lowest income families had borrowed money to cover everyday living costs. The current Cost-of Living-Crisis is impacting further on the those who are living in poverty and experiencing financial pressure before cost increases hit. The health inequalities already faced by these groups will likely be compounded by the Cost-of-Living crisis, with these groups experiencing a disproportionate worsening of their health.

There are 107 school settings in Sefton with 42,576 attending those settings. 40,245 children and young people are educated in 102 Sefton state-funded, maintained nursery, primary, secondary, special schools and pupil referral units (PRUs). 2,331 children and young people attend 5 non-maintained and independent settings.

The percentage of children and young people with Special Educational Needs and/or Disabilities requiring support from the Council has increased each year since 2010.

At the time of publishing the last JSNA (October 2019) the number of school pupils with SEN but no EHC plan (SEN support) was **4,134**, 9.78% of the population attending a Sefton school or post 16 provisions (including maintained and nonmaintained, independent settings). Using the latest school census information, in January 2022, this number had increased to **5,403**, 12.7%, compared to the national percentage of 12.6%.

Similarly in 2019, the local authority reported it maintains an EHC Plan for 1,445 (3.32%) children and young people aged 0-25 years resident in the borough. Using the results from latest validated SEN2 statutory data collection, in January 2022 this

number had increased to **2,243** but continued to represent approximately **3%** of the population of children and young people aged 0-25 years resident in the borough, compared to the national percentage of 4.0%.

In 2019 the aggregate the number of children and young people for whom the local authority maintains an EHC plan and those children that were receiving SEN support in a Sefton school or a post 16 provision, was **13.2%**, lower than the national average of 14.6% and a north west average of 14.8%. By January 2022 this had increased to **16.5%**, compared to a national average of 16.5% and a north west average of 16.9%.

The highest demand is in the Linacre ward for all SEN needs and the lowest is in the Park ward. There is a high concentration of demand in the south of the borough in the Bootle parliamentary area around the Linacre, Derby, Ford and St Oswald wards.

The continued increase seen locally in Sefton in both the percentage of pupils with an education, health and care (EHC) Plan and the percentage of pupils with SEN, but no EHC plan (SEN support) is broadly in-line with that continued trend seen nationally since 2016, and arguably represents an increasing demand on the Council resources.

Of the **2,243** children and young people (0–25yrs) living in the borough with a current EHC plan in January 2022, children aged 11-15yrs account for **37%** of the cohort. **4%** are aged under 5 years and **11%** are young people/adults aged 20-25yrs.

For those **2,243** children and young people for whom the local authority maintains an EHC plan (January 2022) **72%** are males and **28%** are females. **88%** of the cohort are classified as 'white/British', with less than **8%** classified as other nationality and **4%** unclassified.

Of the **2,243** children and young people (0–25yrs) living in the borough with a current EHC plan, **1,604** are aged 2 ½yrs – 19yrs and are educated in Sefton schools or post 16 provisions (including maintained and non-maintained settings). **1,550** `of these attend a Sefton maintained school setting. Analysis of the protected characteristics for the cohort of **1,550** children and young people with special educational need and/or disabilities (SEND), age 2½yrs – 19yrs and educated in a Sefton maintained schools or post 16 provisions, shows that **73.9%** of

the cohort are male and **26.1%** are female. **6%** are under the age of five, **36%** are aged 5-10yrs, **50%** are aged 11-15yrs and **8%** are aged 16-19yrs. **89%** of the cohort are classified as 'white/British', with less than **9%** classified as other nationality and **1%** unclassified. Only **4%** of the cohort have English as an additional language and **41%** of the cohort are eligible for Free School Meals.

In January 2022, the percentage of pupils with an EHC plan who are in mainstream state-funded primary and secondary schools in Sefton is **46.7%**, below the national comparator of 51.4%, whilst the percentage of pupils with an EHC plan attending state-funded special schools in Sefton is **45.5%**, above the national comparator of 39.4%. The figures suggest the need to review and potentially improve provision and inclusivity in Sefton mainstream state-funded primary and secondary schools, to support more children with SEND in these settings in line with new national standards.

Whilst the needs vary across primary, secondary and special schools, the primary needs of pupils with a Sefton EHC plan or receiving SEN support include, Speech and Language, Social Emotional & Mental Health and Autism.

The top 3 primary needs of pupils with a Sefton EHC plan or receiving SEN support in the primary phase are Speech, language and communication need (28.5%), Specific learning difficulties (16.8%) and Social, emotional and mental health needs (18.1%). In the secondary phase we see the top 3 primary needs change to Social, emotional or mental health (22%), Specific learning difficulty (22%) and autism spectrum disorder (14.1%). The top 3 primary needs of pupils Special Schools are Autism (50.2%), Severe learning difficulty (3.5%) and Social, emotional, or mental health needs (13.4%). Whilst the needs vary across primary, secondary, and special schools in summary, the primary needs of pupils with a Sefton EHC plan or receiving SEN support (0-25yrs) are Speech and Language needs (21%), Social Emotional & Mental Health (18%) and Autism (18%). The analysis suggests an increasing demand for the Sefton Community Speech & Language Therapy (SALT) service, the Sefton Child & Adolescent Mental Health Services (CAMHS) multidisciplinary team, and the Council's Autism and Social Communication Team.

Between 2014 and 2019 Sefton has seen a 49% increase in maintained EHC plan, from 967 to 1,445. Between 2019 and 2022 this number has increased further by 55% growth. Over the period of 2014 to 2022 the overall increase of 132% and it is predicted that the number of EHC plans will continue to grow at an average rate of approximately 18% per annum. In January 2023 the number of Sefton maintained EHC plans has increased further to 2,565, which represents a growth of more than 77% since the last JSNA was produced in 2019 and a significant increase of 165% since 2014.

Despite a previously positive trend, in 2018 the percentage of new EHC plans issued in Sefton within the statutory recommended 20-week period had dropped significantly to 13.8% and in 2019, at the time of the Ofsted/CQC revisit, the performance had dropped as low as 3%. Despite significant performance improvements in 2020 (67%) and 2021 (61%), in 2021 the Sefton rolling three-year average for 2019, 2020 and 2021 was 50.3%, much lower than both the national at 59.4% and the north west at 63%, and by January 2023 the performance for the 2022 calendar year has dropped significantly to **18%.** However, there are positive signs of recovery and at the beginning of 2023, with the current performance average is 30%, but there is still further improvement required to return to a level consistent with both the previous national and the north west comparators.

In 2016 the local authority had a significantly higher than average percentage of cases progressing to tribunal following mediation (disagreement resolution), but since 2016 the numbers have steadily declined, from its highest percentage of 44.4% in 2016, dropping to the lowest point at 2.9% in 2021, which is considerably lower than the National and north West figures of 25.5% and 18.9%. Arguably, this demonstrates that mediation is effective in Sefton. Furthermore, the appeal rate for Sefton (0.87) is significantly lower than the National rate (1.84), suggesting that the decision taken in Sefton about EHC Assessments and Plans stand up to scrutiny and reinforcing that the mediation process is effective.

The number of children and young people with an EHC Plan who received an annual review in the 2021/22 academic school year averaged **61.6%.** For

the 2022/23 academic year this performance dropped to 44.4%. However, despite this decline in performance, which is more than likely associated with the increasing demand for EHC Plans, which subsequently increases the number of annual reviews, The SEND Service has recently achieved a key milestone, which involved completing all EHCP assessments, reviews and amending existing EHCPs for 147 children due to change settings and to allocate school placements by the statutory deadline of 15th February.

Analysis of the Sefton High Needs expenditure over the last 4 financial years reveals that expenditure has risen by approximately 40%, from £28.5M to £39.9M annually, and has continually exceeding the available income/funding by an average of 10.3% per annum. Forecast expenditure for 2022/23 has increased by a further 12.5% to £44.9M from the previous financial year (2021/22), exceeding the income/funding (£40M) by an overspend of £4.8M (12%). Comparative analysis of the SEN-S251 outturn for 2021/22 suggest that Sefton spent approximately £7.9m more than all English single tier and county councils over the typical 38-week academic year when accounting for those children and young for whom the local authority maintains and EHC plan or are in receipt of SEN Support in a Sefton maintained school or PRU, funded through the High Needs block. It is anticipated that the demand against the high needs block will continue to grow at a rate of approximately 10-12% per annum, which could equate to an estimated continual overspend of £3.5M to £4M per annum. The absence of readily available data that details income/funding and expenditure per child/young person per annum, hinders any analysis of the impact that the funding is having on the outcomes for the child/young person and potentially increase greater control of the budget to reduce overspend.

In October 2019, in September 2020, March 2021 and March 2022 the local authority consulted with parents, carers, children and young people to gather their views, opinions and experiences of local SEND system; on what is going well and what could be improved in our local area. In summary, some parents and carers think that the 'SEND System' is improving. There are positive experiences and areas where parents and carers feel could be improved, but more than half of

parents and carers feeling that parts of the SEND system could work better together.

At Key stage 2 all pupils with SEN (EHCP and SEN Support) have lower progress scores compared to those with no identified SEN. 23% achieved the expected level in reading, writing and mathematics in 2021/22 compared to 69% of those with no identified SEN. 20% of children receiving 'SEN support' at KS2 are meeting expected standards in reading, writing and maths, which is moderately below national (21%) and similar to both statistical neighbour averages (20.1%) and across the north west (20%). The progress score for children receiving 'SEN Support' for KS2 Reading (0.10) is positive and above national (-1.20), statistical neighbour averages (-1.15) and north west (-0.70). Those children with an EHC Plan at KS2 meeting expected standards in reading, writing and maths is 4% and significantly below the national (7%), north west (6%) and statistical neighbour averages (5%). However, children with an EHC plan at the end of KS2 are making better progress in reading, writing and mathematics than at the time of the last inspection, and progress is better than the national average for similar pupils in reading and mathematics.

The average attainment 8 score at Key stage 4 for pupils with SEN in 2021/22 was 26.7 compared to 49.1 for those with no identified SEN, and below the national comparators for both pupils with SEN (29.3) and those with no identified SEN (52.5). The average progress 8 score for pupils with SEN in 2021/22 was **-0.91** compared to **-0.24** for those with no identified SEN, below the national for both pupils with SEN (-0.69) and those with no identified SEN (0.10). In 2021/22, 13% of pupils with SEN achieved grades 5 or above in English and mathematics GCSEs, compared to 49% of pupils with no identified SEN, below the national for both pupils with SEN (18%) and those with no identified SEN (56%). The average Attainment 8 score for young people receiving 'SEN support' at KS4 is 32.8, moderately below national at 34.8, north west 33.6 and statistical neighbour averages at 33.9. The average progress 8 score for young people receiving 'SEN support' is -0.64, slightly below the national (-**0.47**), north west (-**0.58**) and statistical neighbour averages (-0.53). The Attainment 8 score for young people with an EHC Plan at KS4 is 12.7, moderately below national at 14.3, north west at 13.3 and

statistical neighbour averages **13.2**. The average progress 8 score for young people with an EHC Plan at KS4 is -1.58, below the national (-1.33), north west (-1.44) and statistical neighbour averages (-1.41).

The percentage of SEN pupils who receive 'SEN support' in secondary school going to, or remaining in education & employment/training overall is the same as the national at **89.1%**, above both north west at 88.1% and statistical neighbour averages at 88.7%. The percentage of SEN pupils with an EHC plan going to, or remaining in education & employment or training overall **(87.1%)** is below national at 90.5%, north west at 88.6% and statistical neighbour averages at 89.1%.

26% of pupils identified with SEN achieved Level 2 (equivalent to 5+ A\*-C/ 9-4 at GCSE) including English and mathematics (GCSEs only) by age 19 in 2020/21, which is 50% lower than pupils with no identified SEN (76%). The percentage of young people with an EHC Plan qualified to level 2 (2021/22) is **18.5%**, higher than the northwest (15.7%) and national (16.1%) comparators, however, the percentage of 19yr olds receiving SEN Support qualified to level 2 is **29.8%**, significantly lower than the northwest (39.2%) and national (40.2%) comparators. The percentage of young people with an EHC Plan qualified to level 3 (2 or more A levels or equivalent size vocational qualifications) is **12%**, lower than the northwest (13.7%) and national (14%) comparators. The percentage of 19yr olds receiving SEN Support qualified to level 3 is 26.6%, lower than the northwest (33.2%) and national (35.4%) comparators.

The SEND cohort that Career Connect work with has increased significantly by 27.9% over the last 3 years, from 569 in December 2020, to 728 in November 2022. The number of 16-17-year-olds with SEND in learning is 91.3% (December 2022). However, the percentage of 16-17-year-old children with SEND not in employment, education or training (NEET) has reached 9.4% and the 'Not Known' has risen to 0.3%. (December 2022). The number of 16-24-year-old children and young people with SEND in learning is 85.4%. The percentage of 16-24-year-old children and young people with SEND not in employment, education or training (NEET) has increased by 4.1% year on year to 12.8%, however, this is 0.2% below the north west average at 13.0%. The SEND 16-24 Not Known has increased by 0.5% year on year to 2.3%, however, this is 23.6% below the NW average (25.9%). Sefton has seen a drop in the percentage of SEND 'In learning' as of December 2022 however, when you compare Sefton with England, the north west, and the Liverpool City Region, both cohorts age groups 16-17 and 16-24 show higher percentage engaging 'In learning'.

Sefton Council offers a range of Travel Solutions to meet the individual needs of students and young people with SEND, including Independent Travel Training, Personal Travel Budgets, Travel Pass and Commissioned Transport. Between November 2019 and November 2022, the Council has experienced a growth in demand for Home to School Travel Support of approximately 40% for children and young people with SEND aged 0 – 25. As of November 2022, the Council was providing SEND commissioned travel support for 150 Post 16 Students and 964 Children and Young People aged 0–16. At this point the Council was also providing a SEND Personal Travel Budget for 214 Children and Young People aged 0-25, and saw an increase in the number of children and young people with SEND eligible for Travel Support by over 20% since 2020. The number of statutory school age students transport to out of borough settings increased **147%** between 2019 and 2022, and the number of out of borough settings that the Council transports children and young people to has increased by more than 47%. In the same period the demand for a Personal Travel budget has increased by 77%. However, Children and young people with special educational needs and/or disabilities (SEND) who attended the Youth Participation Conferences have

said that they would like further support in travel training.

In February 2023, a total of 258 disabled children and young people referred to the Aiming High service were actively engaging in fun, fulfilling activities at especially tailored support sessions during term-time and holidays. On average 82 children and young people attend per week, which equates to an average of 158 visit per week and 592 hours of provision. Over the previous 12-month period there has been 2,559 visits to the service, which equates to 8,848hrs attendance (10,968 including family hours).

Disabled children in Sefton & their families are supported by Aiming High for Disabled Children. Aiming High for Disabled Children is a Sefton Council service that ensures disabled children, young people and their families have the same access to fun, fulfilling activities and life chances as those without disabilities by providing specially tailored sessions during term-time and holidays that young people can access, short breaks and specialist support when our young people reach key 'transition points', such as moving from education into employment. The Aiming High short breaks programme, which is promoted as part of the Local Offer, continues to offer 19 sessions eery week during the school terms to children and young people (aged 5 -19 years). 258 children and young people have participated. The number of children and young people benefiting from the school holiday programmes over the last 12-months included 128 at Easter, 92 during the Spring Break, 217 over the summer holidays, 111 in the October school half-term and 116 in the February 2023 school half term. The short breaks service has delivered 29,862 hours of respite to local families in Sefton. In addition, the service has organised and delivered family activities, providing 2,120 hours of supported events that include parents, carers and siblings.

**35** children and young people currently make use of the Springbrook residential unit and on average a total of 871 nights stay is offered each year.

Despite a drop in referral rates to Speech and Language Therapy services and restrictions on faceto-face contact and delivery because of the Covid19 pandemic lockdown, referrals and contacts are projected to return to pre-pandemic levels by the end of 2022/23. In April 2022 under **38%** of those waiting for SALT had been waiting less than 18 weeks, however by January 2023 performance has continued to improve and now **65%** of patients are waiting under 18 weeks.

The Paediatric Dietetics Service has seen a growth over the last 3 years in both referrals and contacts, with a **20%** increase in the number of referrals and over **70%** in the numbers of contacts. Performance has consistently been above the commissioned target of **92%** (those on waiting list waiting less than 18 weeks), however, more recently there has been a drop in performance to **70%**.

Occupational Therapy referrals and contacts where not impacted as significantly as Speech and Language Therapy during the Covid-19 pandemic and positively, the service has achieved the **92**% target (those on waiting list waiting less than 18 weeks) throughout 2022/23.

In 2021/22 referrals for ASD & ADHD Assessment and Diagnosis increased significantly: a **75.3%** increase in ASD (from 668 to 1171) and a **265%** increase in ADHD (from 228 to 832). It is unclear whether this increase was a direct result of the Covid-19 pandemic, however, referral rates for 2022/23 are projected to be higher again.

The number of referrals to the specialist Child and Adolescent Mental Health Services has increased since 2019/20, with 2021/22 having referrals more than **35%** higher. Similarly, the number of contacts increased over the same time by over **15%**. The increase in referrals and contacts is forecast to grow further throughout 2022/23. This increased activity, combined with workforce challenges and the impact of the Covid-19 pandemic have negatively impacted on performance of referral to treatment services times. As of January 2023, just over **40%** were waiting less than 6 weeks for a 'choice' appointment and **60%** had been waiting less than 18 weeks for a 'partnership' appointment.

### Recommendations

The following have been identified within the main body of this report and highlighted as areas for further investigation and strategic choice:

- 'SEN support' in a Sefton maintained setting and PRUs continues to increase by approximately 3% per annum, and using a linear projection forecast demand could increase to 15.6% by 2024, exasperated by the impact of the Covid-19 pandemic and the current cost of living crisis on children's education, emotional health and wellbeing. This will result in increase demand on school resources and potentially on the high needs block of the dedicated schools grant, which should be monitored closely.
- Between 2014 and 2019 when the last SEND JSNA chapter was written Sefton saw a 49% increase in maintained EHC plans, and between 2019 and 2022 this number has increased by a further 55%; 132% increase between 2014 and 2022, and using a linear projection forecast, it is anticipated that this trend will continue to grow at an average rate of approximately 18% per annum. Undoubtably this will put an increased demand on the high needs block of the dedicated schools grant, that needs to be factored into medium term financial planning.
- In 2020 and 2021 Sefton Council's performance for issuing EHC Plans within the 20-week statutory timescale was above the national average, at 67% and 61% respectively, but by January 2023 this had dropped significantly to 18%. There are sign of recovery, with the current performance averaging 30%. However, there is still further improvement required to return to a level commensurate with regional and national comparators, which is likely to put increasing pressure on existing resources, which should be monitored to reduce any risk of burnout.
- The decline in the performance of EHC Plan reviews over the last academic school year is an area of concern given the increasing demand for EHC Plan assessments, and further improvement is required, which again is likely to put increasing pressure on existing resources, which should be monitored to reduce any risk of burnout.
- Analysis of the Sefton High Needs expenditure between 2017/18 and 2021/22 reveals that expenditure has risen by approximately 40%, from £28.5M to £39.9M annually, and has continually exceeding the available

income/funding by an average of **10.3%.** In 2021/22 the expenditure (£39.9M) exceeding the income/funding (£35.7M) by approximately **£4.2M.** The forecast expenditure for 2022/23 has increased by a further **12.5%** to £44.9M from the previous financial year (2021/22), exceeding the income/funding (£40M) by an overspend of £4.8M by **12%.** This repeated pattern of overspend is likely to increase given the forecast growth in demand for EHC Plans and SEN Support, and financial forecasting may need to be adjusted accordingly.

- The absence of readily available, timely and accurate data hinders the Council's ability to provide comprehensive identification and analysis of SEND need and the administration high needs funding block. Furthermore, it is limiting the ability to for detailed analysis of the impact of funding on the outcomes for children and young people with SEND in Sefton, and arguably preventing greater control of the budget to reduce overspend. The Council should consider mandating and accelerating the use of its core education system (Capita ONE) for managing information for children and young people with an EHC Plan and all of those receiving SEN support, particularly where high needs funding is attached. This could provide a greater level of accuracy for future forecasting and aid strategic choice and planning.
- In 2021/22 academic year 23% of all pupils with SEN (EHCP and SEN Support) achieved the expected level in reading, writing and mathematics at Key stage 2, compared to 69% of those with no identified SEN, and these figures represent a decline compared to the 2018/19 performance. Whilst the attainment and progress for children receiving 'SEN support' is positive, the same cannot be said for the attainment of those children with an EHC Plan at KS2. The average attainment 8 and progress 8 scores for all pupils with SEN (those with an EHCP and receiving SEN Support) at Key stage 4 are below the national, north west and statistical neighbour comparators. The percentage of pupils who receive 'SEN support' in secondary school going to, or remaining in education & employment/training overall is the same as the national, north west and statistical neighbour averages, whilst the percentage of pupils with an EHC plan going to, or remaining

- in education & employment or training overall is below national, north west, and statistical neighbour averages. Whilst the percentage of young people with an EHC Plan qualified to level 2 (2021/22) at age 19 is higher than the northwest and national comparators, the percentage of 19yr olds receiving SEN Support qualified to level 2 is significantly lower than the northwest and national comparators. Furthermore, the percentage of young people with an EHC Plan and those receiving SEN Support qualified to level 3 (2 or more A levels or equivalent size vocational qualifications) is lower than the north west and national comparators. Overall, the educational performance may be reason to review the Council's education strategy to ensure a stronger focus on maximising the progress that children and reducing the attainment gap between children and young people with SEND and their peers.
- Despite significant improvements in the percentage of patients waiting under 18 weeks for Speech and Language Therapy Services, with 65% of patients are waiting under 18 weeks for face-to-face, telephone and video consultations, as the demand for the service continues increase to levels seen prior to the Covid-19 pandemic lockdown, this is likely to place increased demand on Alder Hey Children's NHS Foundation Trust, which should be monitored.
- The Paediatric Dietetics Service has seen a continued growth over the last 3 years in both referrals and contacts, and recently the performance has dropped below the commissioned target of 92% (those on waiting list waiting less than 18 weeks). This may need to be monitored to assess if this will become a trend to increased contact and referrals.
- Demand for ASD & ADHD Assessment and Diagnosis has increased significantly, and referral rates are projected to increase further. Again, this is likely to place increased demand on Alder Hey Children's NHS Foundation Trust, which should be monitored.
- The number of contact and referrals to the specialist Child and Adolescent Mental Health Services has increased since 2019/20 and is forecast to grow further throughout 2022/23.

- This increased activity, combined with workforce challenges and the impact of the Covid-19 pandemic have negatively impacted on performance of referral to treatment services times. As of January 2023, just over 40% were waiting less than 6 weeks for a 'choice' appointment and 60% had been waiting less than 18 weeks for a 'partnership' appointment. Again, this is likely to place increased demand on Alder Hey Children's NHS Foundation Trust, which should be monitored.
- The increase in demand for Speech and Language Therapy Services (SALT) the Paediatric Dietetics Services, ASD & ADHD Assessment and Diagnosis and Child and Adolescent Mental Health Services (CAHHS) may result in increasing cost pressures on the NHS Cheshire and Merseyside Integrated Care Board if increased capacity is necessitated, which should be monitored.
- The Government's Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan will have far and reaching transformational implications for the local SEND system in Sefton, that the local authority and partners will have to ready themselves for. The transition to a new national SEND and alternative provision system and national standards will result in significant change across the local system in the next three years (between 2022 and 2026). In Summary:
  - From Summer 2023, the local authority must be ready to provide data that details the capacity of special schools and provision in mainstream schools as well as forecasts of specialist placements.
  - From Autumn 2023, the local system must be ready for the DfE to publish a local and national inclusion dashboard to support the development of local inclusion plans, giving parents improved transparency of local performance.
  - The local authority will need to be ready to consider the three approaches to bringing the High Needs Budget back into balance.
  - The local authority will need to consider the implications of further applications to open special free schools, and the implication on local pupil placed planning and SEND sufficiency arrangements.

- The local authority will be required to improve information available to families and provide a tailored list of suitable settings informed by the local inclusion plan.
- The local system must be ready for the introduction of local SEND and alternative provision partnerships.
- The local system must be ready for the introduction of reformed EHCP process and practice standards that will involve a standardised national template and digitalisation.
- The local area must consider the adoption of a DSCO (Designated Social Care Officer) role.
- The local system must ready itself for the increase of roll-out of Mental Health Support Teams in schools and colleges by 2024.
- The local authority must prepare for the Supported Internships programme by 2025.
- This updated version of the SEND JSNA does not include any analysis of the capacity of special schools and provision for SEND in mainstream schools, nor forecasts of specialist placements needs, which must be a priority if the local authority is to provide data to the DfE for Summer 2023. This should be planned for and resourced if the Council is to comply with the recommendations and expectations of the Government's Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan.



## **Data Gaps and Issues**

When interpreting the data provided in this report several factors should be borne in mind:

- This summary report makes substantive use of the most recent validated Sefton data for population, school, children and young people from January 2022 census information. Local monitoring is affected by the timeliness of national data reporting and the absence of readily available, timely and accurate and comprehensive SEND and financial data.
- Health data is mostly on a LA basis, meaning indepth analysis for small areas such as LSOA is not always available.
- Age related breakdowns of topics are not available for some indicators, particularly around Health data.
- Local cross topic studies are unavailable i.e. counts of people living in poverty with SEND compared to those of more prosperous areas.

This updated version of the SEND JSNA does not include any analysis of the capacity of special schools and provision for SEND in mainstream schools, nor forecasts of specialist placements needs, which must be a priority if the local authority is to provide data to the DfE for Summer 2023. This should be planned for and resourced if the Council is to comply with the recommendations and expectations of the Government's Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan.

The absence of readily available, timely and accurate data hinders the Council's ability to provide comprehensive identification and analysis of SEND need and the administration high needs funding block. Furthermore, it is limiting the ability to for detailed analysis of the impact of funding on the outcomes for children and young people with SEND in Sefton, and arguably preventing greater control of the budget to reduce overspend. The Council should consider mandating and accelerating the use of its core education system (Capita ONE) for managing information for children and young people with an EHC Plan and all of those receiving SEN support.

## A note on interpretation

Throughout the needs assessment values are presented alongside the England (national), north west, Liverpool City Region (LCR) and Statistical neighbour values. This allows comparison, providing a benchmark against which Sefton can be compared. Where possible, indicator values in tables are coloured to provide a RAG (red-ambergreen) rating. In most cases this rating is based on whether the Sefton value is statistically significantly different to the England average (at the 95% significance level).

Indicators shaded red are statistically significantly worse than the England (national) value/target, green values are significantly better and amber values are not statistically different to England/the target. For some indicators a blue shading has been applied rather than a RAG colour scheme. This is because, for these indicators, it is not clear cut as to whether a value higher than England is good or bad.

# **Supporting Information & Context**

JSNA Webpage

https://www.sefton.gov.uk/your-council/planspolicies/business-intelligence,-insight,-performance/jointstrategic-needs-assessment-(jsna).aspx

**Population Projections** 

https://www.sefton.gov.uk/media/1436091/sefton-population-projections-v3.pdf

Review of Poverty in Sefton

https://www.sefton.gov.uk/media/1405220/Welfare Reform a nd Anti-Poverty v3.pdf

Sefton Local Plan

https://www.sefton.gov.uk/localplan

Ward profiles on Sefton's website

https://www.sefton.gov.uk/your-council/planspolicies/business-intelligence,-insight,-performance/Borough ward-profiles.aspx

# **Glossary of Terms / Acronyms**

ASD

AHDH



EYFSP - Early Years Foundation Stage Profile

GP - General Practitioner

HA – Hospital Admissions

**HES – Hospital Episode Statistics** 

KS1 - Key Stage 1

KS2 – Key Stage 2

KS4 - Key Stage 4

LCR - Liverpool City Region

MBC - Metropolitan Borough Council

NCMP - National Child Measurement Programme

NHS - National Health Service

NW – North west

ONS - Office of National Statistics

QOF - Quality and Outcomes Framework

### **Sources**

What are Health Inequalities?

https://www.kingsfund.org.uk/publications/what-are-health-inequalities

Impact of increased cost of living on adults across Great Britain: June to September 2022

https://www.ons.gov.uk/peoplepopulationandcommunity/personaland householdfinances/expenditure/articles/impactofincreasedcostofliving onadultsacrossgreatbritain/junetoseptember2022

Our Health: The Price we will pay for the cost-of-living crisis.

https://www.rsph.org.uk/about-us/news/rsph-s-new-report-shows-health-will-be-the-price-we-will-pay-for-the-cost-of-living-crisis.html

WHO Covid-19

WHO Coronavirus (COVID-19) Dashboard | WHO Coronavirus (COVID-19) Dashboard with Vaccination Data

Public Health Outcomes Framework - Data - OHID (phe.org.uk)

## **Health Index for England**

How health has changed in your local area: 2015 to 2020 - ONS

### **Hospital Statistics - Children**

**Unintentional Injuries** 

Child and Maternal Health - Data - OHID (phe.org.uk)

A&E Attendances and deprivation

Child and Maternal Health - Data - OHID (phe.org.uk)

A&E Attendances

Child and Maternal Health - Data - OHID (phe.org.uk)

**Emergency Admissions** 

Definition — Child and Maternal Health - Data - OHID (phe.org.uk)

Prevalence - Child and Maternal Health - Data - OHID (phe.org.uk)

Hospital Admissions - Unintentional and Deliberate Injuries

Public Health Outcomes Framework - Data - OHID (phe.org.uk)

### Life Expectancy

Life Expectancy at Birth

Male — <u>Public Health Outcomes Framework - Data - OHID</u> (<u>phe.org.uk</u>)

Females — <u>Public Health Outcomes Framework - Data - OHID</u> (phe.org.uk)

Ward Life Expectancy at Birth

Male — <u>Local Health - Office for Health Improvement and Disparities - Indicators: maps, data and charts</u>

Female — <u>Local Health - Office for Health Improvement and</u> Disparities - Indicators: maps, data and charts

Index of Multiple Deprivation

English indices of deprivation 2019 - GOV.UK (www.gov.uk)

Life Expectancy and Deprivation

<u>Health state life expectancies by national deprivation deciles, England - Office for National Statistics (ons.gov.uk)</u>

Healthy Life Expectancy at Birth

Definition — <u>Healthy and Disability-Free Life Expectancy - London Datastore</u>

Male — <u>Public Health Outcomes Framework - Data - OHID</u> (<u>phe.org.uk</u>)

Females — <u>Public Health Outcomes Framework - Data - OHID</u> (<u>phe.org.uk</u>)

### **SEND**

The SEND and Alternative Provision Green Paper, published in March 2022

SEND review: right support, right place, right time - GOV.UK (www.gov.uk)

SEND and alternative provision improvement plan: right support, right place, right time.

SEND and alternative provision improvement plan - GOV.UK (www.gov.uk)

National statistics: Special educational needs in England: January 2022



Special educational needs in England: January 2022 - GOV.UK (www.gov.uk)

National statistics: Education, health and care

plans: England 2022

Education, health and care plans: England 2022 - GOV.UK (www.gov.uk)

Academic year 2020/21: Level 2 and 3 attainment

age 16 to 25

Special educational needs publication June 2022 (publishing.service.gov.uk)

Local authority interactive tool (LAIT) extracted

date: 02 February 2023

Local authority interactive tool (LAIT) - GOV.UK (www.gov.uk)

## **Appendix**

### **Demographic Data**

Census 2021 showed that 26% of residents in Sefton were children and young people (aged between 0 and 24), with males making up 51% of the 74,281 of the Boroughs children and young people (Table 1 & 2).

The distribution of children and young people throughout Sefton wards varies (Table 3) with Linacre making up the highest proportion of the Sefton total (6%) and Cambridge the lowest (3%). When looking at the Borough's individual ward population further variations can be seen with 31% of Linares total population being children and young people compared to just 17% in Cambridge (Table 4).

Population projections by the Office for National Statistics (ONS) suggest that generally over the next two decades Sefton is likely to have a relatively stable younger population but an increasing number of 'older people' (Figure 1 / Table 5). As those people in the current ages 45 to 69 get older they begin to get to an age where they are much more likely to require support from Adult Social Care. This trend of people requiring additional support is likely to last for 25 years or so.

The number of children and young people in the Borough are going to remain relatively consistent, though certain age groups are projected to show increases of over 5% specifically those aged 0 to 3 and 17 to 24 (Table 6). Whilst the population projections suggest that the younger population will remain relatively stable this does not mean that there will not be an increased demand for services for younger people support in Adult Social Care. This is because once someone 'ages out' of the 0-17 cohort (0-25 SEND) and if they require ongoing support, they are likely to stay with a service for a significant period. This cohort of clients with physical or learning difficulties are also living for longer periods. As a result, the continual 'filing up' from below means that we will need to be able to support an increased number of people in younger age groups 'in total' even though annual demand of those transitioning from 17 to 18 will remain relatively stable.

Table 1. Sefton Children and Young People Population – Census 2021

Sefton Census 2021	Males	Females	Total
Early Years &			
Nursery Aged: 0-3	5,420	5,183	10,603
Primary School			
Aged: 4-11	12,451	11,722	24,173
Secondary School			
Aged: 12-16	7,773	7,313	15,086
Young People - YP			
Aged: 17-19	4,097	3,945	8,042
Young People - YP			
Aged: 17-24	11,034	10,508	21,542
Children & YP			
Aged: 0-24	36,678	34,726	71,404

Age Ranges are Inclusive

Table 2. Sefton Population by Five Year Bands – Census 2021

Age Group	Males	Females	Total	% of Total
Aged: 0-4	6,895	6,611	13,506	4.8%
Aged: 5-9	7,733	7,337	15,070	5.4%
Aged: 10-14	7,900	7,398	15,298	5.5%
Aged: 15-19	7,213	6,817	14,030	5.0%
Aged: 20-24	6,937	6,563	13,500	4.8%
Aged: 25-29	7,501	7,733	15,234	5.5%
Aged: 30-34	8,254	8,887	17,141	6.1%
Aged: 35-39	8,201	8,632	16,833	6.0%
Aged: 40-44	7,618	7,936	15,554	5.6%
Aged: 45-49	8,079	8,622	16,701	6.0%
Aged: 50-54	9,853	10,257	20,110	7.2%
Aged: 55-59	10,469	11,211	21,680	7.8%
Aged: 60-64	9,568	10,248	19,816	7.1%
Aged: 65-69	8,167	8,723	16,890	6.0%
Aged: 70-74	7,874	8,624	16,498	5.9%
Aged: 75-79	5,586	6,852	12,438	4.5%
Aged: 80-84	4,038	5,551	9,589	3.4%
Aged: 85-89	2,378	3,725	6,103	2.2%
Aged: 90+	979	2,269	3,248	1.2%
Total	135,243	143,996	279,239	100%

Age Ranges are Inclusive

Table 3. Sefton Wards Children and Young People Population – Census 2021

Sefton Wards Census 2021	Early Years & Nursery Aged: 0-3	Primary School Aged: 4-11	Secondary School Aged: 12-16	Young People - YP Aged: 17-19	Young People - YP Aged: 17-24	Childre Aged:	
Ainsdale	367	983	744	394	919	3,013	4.2%
Birkdale	452	1,158	790	418	1,020	3,420	4.8%
Blundellsands	349	845	598	317	783	2,575	3.6%
Cambridge	332	717	434	240	672	2,155	3.0%
Church	445	938	597	310	922	2,902	4.1%
Derby	632	1,303	802	403	1,176	3,913	5.5%
Dukes	343	761	465	369	1,127	2,696	3.8%
Ford	554	1,314	765	391	1,111	3,744	5.2%
Harington	295	878	697	312	790	2,660	3.7%
Kew	612	1,436	861	445	1,132	4,041	5.7%
Linacre	771	1,315	746	385	1,405	4,237	5.9%
Litherland	574	1,255	650	340	1,006	3,485	4.9%
Manor	433	1,039	621	339	862	2,955	4.1%
Meols	383	963	614	357	811	2,771	3.9%
Molyneux	463	1,070	687	424	1,006	3,226	4.5%
Netherton & Orrell	598	1,285	789	426	1,152	3,824	5.4%
Norwood	657	1,600	957	477	1,139	4,353	6.1%
Park	371	942	568	302	829	2,710	3.8%
Ravenmeols	376	992	688	377	840	2,896	4.1%
St Oswald	481	1,120	617	318	972	3,190	4.5%
Sudell	517	1,054	628	344	935	3,134	4.4%
Victoria	596	1,194	771	358	943	3,504	4.9%
Sefton	10,601	24,162	15,089	8,046	21,552	71,404	100%

Age Ranges are Inclusive

Table 4. Sefton Wards Population – Census 2021

Census 2021 Ainsdale	0-17			Aged:	Aged:	Aged:	Total	% Aged
Ainsdale		18-24	25-44	45-64	65-74	75+	10101	0-24
	2,262	751	2,282	3,553	1,861	1,886	12,595	23.9%
Birkdale	2,579	841	2,809	3,852	1,527	1,082	12,690	27.0%
Blundellsands	1,933	642	2,340	3,369	1,602	1,479	11,365	22.7%
Cambridge	1,585	570	2,292	3,435	2,015	2,624	12,521	17.2%
Church	2,090	812	3,279	3,563	1,293	1,039	12,076	24.0%
Derby	2,885	1,028	3,594	3,538	1,208	919	13,172	29.7%
Dukes	1,695	1,001	3,265	4,051	1,984	2,378	14,374	18.8%
Ford	2,767	977	3,213	3,600	1,295	968	12,820	29.2%
Harington	2,012	648	1,805	3,252	1,756	2,075	11,548	23.0%
Kew	3,099	942	3,616	3,768	1,346	1,135	13,906	29.1%
Linacre	2,979	1,258	4,078	3,354	1,248	691	13,608	31.1%
Litherland	2,604	881	3,457	3,214	1,069	852	12,077	28.9%
Manor	2,234	721	2,635	3,680	1,706	1,431	12,407	23.8%
Meols	2,097	674	2,300	3,442	1,776	1,776	12,065	23.0%
Molyneux	2,373	853	2,815	3,581	1,474	1,362	12,458	25.9%
Netherton & Orrell	2,803	1,021	3,443	3,575	1,173	961	12,976	29.5%
Norwood	3,397	956	3,730	4,299	1,413	1,027	14,822	29.4%
Park	2,006	704	2,377	3,429	1,592	1,714	11,822	22.9%
Ravenmeols	2,208	688	2,213	3,357	1,657	1,960	12,083	24.0%
St Oswald	2,347	843	2,780	3,204	1,173	1,002	11,349	28.1%
Sudell	2,319	815	3,127	3,450	1,705	1,799	13,215	23.7%
Victoria	2,711	793	3,327	3,752	1,508	1,223	13,314	26.3%
Sefton	52,985	18,419	64,777	78,318	33,381	31,383	279,263	25.6%

Figure 1. Sefton Population Pyramid 2018 and 2043

Projections – Population Projections 2018

85 - 89 80 - 84 75 - 79 70 - 74 65 - 69 60 - 64 55 - 59 50 - 54 45 - 49 40 - 44 35 - 39 30 - 34 25 - 29 20 - 24 15 - 19 10 - 14 5 - 9 0 - 4 10% 8% 6% 4% 2% 0% 2% 4% 6% 8% 10% 2018 Females 2018 Males

---- 2043 Males ---- 2043 Females

Table 5. Projections by 5-Year Age Groups — Population Projections 2018

Age Group	2018	2025	2030	2035	2040	2043
Aged: 0-4	14,441	13,416	13,269	13,355	13,905	14,296
Aged: 5-9	15,647	15,015	14,463	14,342	14,464	14,777
Aged: 10-14	14,942	16,741	15,956	15,396	15,286	15,317
Aged: 15-19	14,181	15,434	16,316	15,563	15,062	14,999
Aged: 20-24	13,546	11,623	13,034	13,831	13,222	12,768
Aged: 25-29	15,868	13,898	12,822	14,396	15,192	14,898
Aged: 30-34	15,265	15,348	14,122	13,150	14,751	15,411
Aged: 35-39	14,800	16,663	16,471	15,204	14,238	15,242
Aged: 40-44	14,387	16,558	17,746	17,670	16,361	15,496
Aged: 45-49	18,250	15,170	17,245	18,449	18,430	17,496
Aged: 50-54	20,466	17,417	15,687	17,761	18,977	19,550
Aged: 55-59	20,868	19,847	17,758	16,109	18,185	18,830
Aged: 60-64	18,703	21,580	20,040	18,013	16,429	17,898
Aged: 65-69	16,653	19,288	21,348	19,978	18,029	16,226
Aged: 70-74	16,211	16,261	18,477	20,563	19,397	18,743
Aged: 75-79	11,999	15,204	14,773	16,867	18,910	18,524
Aged: 80-84	9,860	10,354	12,699	12,461	14,361	15,572
Aged: 85-89	6,045	6,635	7,112	8,835	8,836	9,754
Aged: 90+	3,264	3,962	4,406	4,932	6,124	6,379
Total	275,396	280,414	283,744	286,875	290,159	292,176

Age Ranges are Inclusive

Table 6. Sefton Children and Young People Population Projections – Population Projections 2018

Popultion Projections - 2018	2025	2030	2035	2040	2043	2025 to Cha	
Early Years &							
Nursery Aged: 0-3	10,605	10,493	10,593	11,063	11,363	758	7.1%
Primary School							
Aged: 4-11	24,418	23,331	23,146	23,310	23,758	- 660	-2.7%
Secondary School							
Aged: 12-16	16,838	16,757	15,750	15,630	15,591	- 1,247	-7.4%
Young People - YP							
Aged: 17-19	8,745	9,423	9,167	8,714	8,677	- 68	-0.8%
Young People - YP							
Aged: 17-24	20,368	22,457	22,998	21,936	21,445	1,077	5.3%
Children & YP							
Aged: 0-24	72,229	73,038	72,487	71,939	72,157	- 72	-0.1%

Age Ranges are Inclusive