

Our SEND strategy priorities - we will:

- Support children at the earliest opportunity to access the intervention they need to achieve and thrive.
- Wherever possible, meet the provision needs of Haringey's children and young people in Haringey.
- Deliver a Local Offer to children and families that allows them choice and access to services that meet their needs.
- Actively seek opportunities to work with our children, young people and families in a model of co-production
- Prepare our children for their adult lives and support their transition.
- Parents and Carers say they can see progress but still have more work to do.
- While the quality and timeliness of new EHCPs have improved significantly since 2021, ongoing annual review recovery addresses the quality of previous plans and improves multi-agency.

Key facts and figures

- 2,801 children have an Education Health Care Plan (EHCP).
- 29% females; 71% males
- 4% of children with EHCPs are pre-school age; 35% are at primary school; 33% are at secondary school; 21% are 16-19 and 7% between 20-25.
- Disproportionately children from Black Caribbean and African families compared to the school population
- 45.7% of assessments and plans for children who are autistic
- 17% of children with speech, language, and communications as a primary need
- Seeing increasing assessments and plans for children with social, emotional, and mental health needs
- 61% of children with a plan are in mainstream settings

Outcomes for children and young people (what we know, what we are proud of and what we still need to do)

Needs are identified accurately and assessed promptly and effectively; receive the right help at the right time.

- 95% of schools are good, outstanding and inclusive – children with SEN are more likely to be in mainstream education (ranked 22/150)
- Education outcomes for children with SEN are excellent – KS1-KS4, we are ranked in the top 20 for schools.
- 81% of young people with SEN post 16 are in EET (13/32 in London)
- 35% of pupils in alternative provision reintegrate into mainstream or other specialist settings and consistently achieve significantly above the national averages for alternative provision
- 96% of EHCPs in 20 weeks (Sept)
- 60% of annual reviews completed (last 12 months)
- Autism assessment waiting times improved from 70 to 50 weeks.
- Speech and language therapy waiting times are between 13 and 14 weeks.
- Most children referred to occupational therapy are seen within 12 weeks.
- Established Transitions Panel supports and plans for young people transitioning from children's to adult social care.
- We have a rising demand for autism assessments – the number of children referred has doubled since the last inspection from 320 waiting to 652

Participate in decision-making about individual plans and support; valued, visible, and included in their communities.

- We significantly improved coproduction with children and their families and held a Voices Day in March 2023 to inform our coproduction.
- Send Power, our parent carer forum, is a key strategic partner on our Board and operational groups, shaping what we do.
- 63% of families engaged in coproduction for their statutory assessment
- Over half of young people (58%) chose to be involved in co-producing their Annual review.
- We launched our Elevated Youth Panel in Mary 2023 with 20 members aged 11-24.
- Elevated Youth are visible and included in communities and participated in a project [promoting Wood Green](#) and [Haringey Feast](#), [evaluating local activities](#) for SEND accessibility and [attended an event with the NCL Integrated Care Board](#).
- Co-produced with the Parent Carer Forum all letters and advice from autism assessment providers
- Over 400 children receive a personal budget, and 325 receive a direct payment to select provisions to meet their needs.

Key priorities for the next 12 months

- Continue to improve autism assessment waiting times and timeliness to access other therapies.
- Implement our new universal and targeted [Speech and language communications pathways](#).
- Develop our Joint Transitions Team and improve transition pathways for young people requiring support from adult social care.
- We refreshed our joint strategic needs assessment for SEND to inform our priorities and planning.
- Embed support for SEND within our Family Hubs model.
- Deliver the capital programme for 118 new school places.
- Strengthen our short breaks offer to include an overnight residential respite.
- An excellent [Local Offer](#) is in place, with progress made on our [Preparation for adulthood action plan](#).
- Updated RAS Form in Jan 2024.

Leadership, governance & accountability (What we know, what we are proud of and what we still need to do)

Ambitious for children and young people; an accurate, shared understanding of the needs of children in their local area

- We have outstanding commitment and engagement from partners, parents, and carers across the SEND system, with effective governance arrangements that influence strategic decision-making and service delivery.
- We have an [ambitious Safety Valve](#) (SV) programme to deliver better outcomes for children and young people across 18 projects.
- Increased capacity of the designated clinical officer

Commission services to meet the needs and aspirations of children, including alternative provision; evaluate and make improvements

- An effective dynamic support register in place reduces the risk of breakdowns and hospital admissions.
- Significant additional investment in the SEND Statutory assessment team, Educational Psychology, additional capacity for autism assessments
- EHCPs routinely quality assured and show improved quality of advice from health and social care partners (over 80%)
- Access to good impartial advice and support through [SENDIASS commissioned](#)
- [Markfield](#) to support children/families waiting for an autism diagnosis (or those recently diagnosed)

Key priorities for the next 12 months

- Implement all 18 SV projects successfully
- Continue to improve health and social care advice in EHC plans
- Explore introducing parent carer representation at all decision-making panels.
- Strengthen our commissioning arrangements with a key focus on enhancing and evidencing outcomes.