

**JOINT STRATEGIC NEEDS ASSESSMENT
SPECIAL EDUCATIONAL NEEDS AND DISABILITY
(SEND)**

JANUARY 2019

1. **INTRODUCTION**
 - 1.1 Purpose of the needs assessment
 - 1.2 Defining Special Educational Needs and Disability
 - 1.3 National and Local Policy context
2. **THE VIEWS OF CHILDREN AND YOUNG PEOPLE**
3. **THE VIEWS OF PARENTS/CARERS**
4. **DATA**
 - 4.1 Sunderland Profile
 - 4.2 University of Sunderland research
 - 4.3 City Hospitals Sunderland Paediatrics data
 - 4.4 EHCPs
 - 4.5 SEN Support
5. **CHILDREN AND YOUNG PEOPLE WITH SPECIAL EDUCATIONAL NEEDS AND/OR DISABILITIES IN SCHOOLS AND SETTINGS**
 - 5.1 Early Years
 - 5.2 Primary Schools
 - 5.3 Secondary Schools
 - 5.4 Special Schools
 - 5.5 Pupil Referral Units
 - 5.6 19-25 year olds in education
 - 5.7 Vulnerable Groups
6. **EDUCATIONAL OUTCOMES**
7. **INCLUSION AND ATTENDANCE**
 - 7.1 Permanent and Fixed Term Exclusions 2017/18
 - 7.2 Looked after children exclusions
 - 7.3 Keeping children in school
8. **YOUNG PEOPLE WITH SPECIAL EDUCATIONAL NEEDS AND/OR DISABILITIES IN EDUCATION, EMPLOYMENT OR TRAINING (EET)**
 - 8.1 Young people with EHCP in EET
 - 8.2 Young people at SEN Support in EET
 - 8.3 Post-16 destination data
9. **MEETING NEED**
 - Communication & Interaction**
 - Autism Spectrum Disorder
 - Speech, language and communication needs
 - Cognition & Learning**
 - Specific Learning Difficulty
 - Moderate Learning Difficulty
 - Severe Learning Difficulty
 - Profound and Multiple Learning Difficulty
 - Social, emotional and mental health**
 - Sensory and Physical Disability**

- Hearing, Visual and multi-sensory impairments
- Physical disabilities, Long Term and Life Limiting Conditions

10. SERVICES

Education Services
Social Care Services
Health Services

11. NEXT STEPS

1. INTRODUCTION

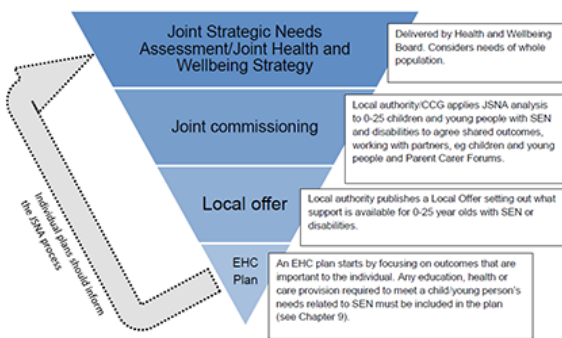
1.1 Purpose of the needs assessment

This needs assessment is produced and owned by the Special Educational Needs and Disabilities Strategic Partnership (the SEND Strategic Partnership), which is a multi-agency group comprising health, education, social care and the voluntary and community sector.

It brings together a wealth of data and information to understand the needs of children and young people with special educational needs and/or disabilities in Sunderland. It is a live document and will be continually updated as new data and needs are identified.

Its primary purpose is to inform commissioning at a partnership and single agency level, so that services are effective, tailored to need and based on evidence.

In line with the SEN and Disability Code of Practice 2015, the views of children, young people and their families are at the heart of commissioning for SEND services. Its importance in the commissioning process, is outlined in the diagram below:



Department for Education, 2014

The improvement actions and commissioning intentions arising from our needs assessment will therefore be shaped by the views already gathered, and will look to improve our feedback and consultation mechanisms, particularly for children and young people to ensure that they continually have a voice in developing and designing services and are involved in decisions that affect them.

1.2 Definitions and scope

Special Educational Needs

The SEN and Disability Code of Practice 2015 states that a child or young person has SEND if they have a learning difficulty or disability which calls for special educational provision to be made for them.

A child of compulsory school age or a young person has a learning difficulty or disability if he or she:

- has a significantly greater difficulty in learning than the majority of children of the same age; or
- has a disability which prevents or hinders them from making use of educational facilities of a kind generally provided for others of the same age in mainstream schools or in mainstream post-16 institutions.

The SEND Code of Practice 2015 describes four broad areas of need as:

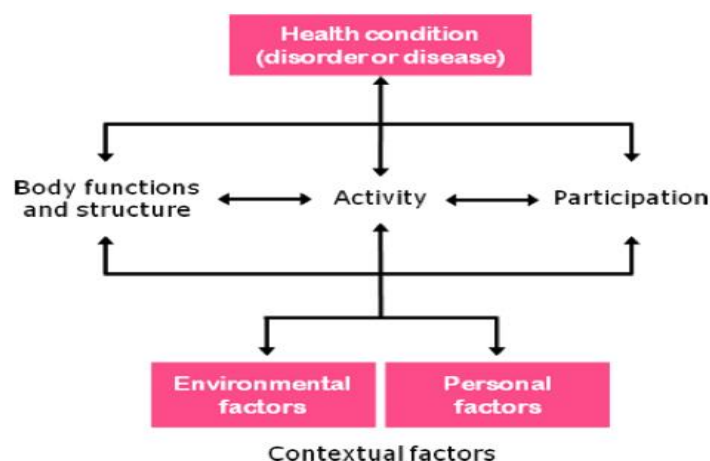
- Communication and Interaction
 - Speech, Language and Communication Needs
 - Autism Spectrum Disorder
- Cognition and Learning
 - Specific Learning Difficulties
 - Moderate Learning Disabilities
 - Severe Learning Disabilities
 - Profound and Multiple Learning Disabilities
- Social, Emotional and Mental Health
- Sensory and/or Physical Difficulties
 - Multi-sensory impairments, Visual Impairments and Hearing Impairments
 - Physical difficulties

Disability

This needs assessment is also guided by the World Health Organisation's (WHO) 'medical model' of disability (2013), which considers health conditions, body structure and function, and the 'social model' of disability, which considers factors in the environment that can be disabling, such as physical factors and peoples' attitudes. The WHO defines disability as:

- an impairment is a problem in body function or structure;
- an activity limitation is a difficulty encountered by an individual in executing a task or action;
- a participation restriction is a problem experienced by an individual in involvement in life.

Disability is thus something that can affect anyone at any time and can vary over time. This definition of disability includes all children and young people with special educational needs and may be better understood as the interaction between different factors:



Furthermore, the Equality Act 2010 defines a person as disabled if he or she has a physical or mental impairment that has a 'substantial' and 'long term' negative effect on his or her ability to do normal daily activities:

- 'substantial' is more than minor or trivial - e.g. it takes much longer than it usually would to complete a daily task like getting dressed
- 'long-term' means 12 months or more - e.g. a breathing condition that develops as a result of a lung infection.

The public sector Equality Duty requires public bodies to have due regard for the need to eliminate discrimination, advance equality of opportunity and foster good relations between different people, including those with disabilities, when carrying out their activities.

1.3 National and Local Policy Context

National Policy Context

All commissioning intentions and improvement actions identified by the SEND Strategic Partnership through this needs assessment are underpinned by the current legislation and guidance for meeting the needs of children and young people with special educational needs, which is set out below:

- Education Act 1996
- Equality Act 2010
- The Children and Families Act 2014
- SEN and Disability Code of Practice 2015
- The Care Act 2015
- Special Educational Needs and Disability Regulations 2014
- Special Educational Needs (Personal Budgets) Regulations 2014
- Local Area SEN Inspection Framework.

Local Policy Context

The most recent legislation, **The Children and Families Act 2014**, set out a significant set of cultural and systematic reforms designed to improve outcomes for children and young people with SEND. The reforms extend the SEN system from birth to 25, giving children, young people and their families' greater control and choice in decisions and ensuring needs are properly met. It requires:

- New joint arrangements for assessing, planning and commissioning services for children and young people with SEND, which make it clear what will be offered and who will deliver and pay for it, underpinned by a process to swiftly resolve local disputes between partners.
- The publication of a local offer, so children, young people and their families are clear what is available locally, with a clear complaint process and redress system. This is a new approach to information delivery in partnership with carers and young people, providing transparent and clear information across education, health and care.
- Introduction of local Education, Health and Care Plans (EHCPs) from age 0 to 25 which set out in one place the support from education, health and care services children and young people will receive; with a focus on helping to improve outcomes, including future employment and independent living.
- Personal budgets for those families who want to have them.
- A duty on clinical commissioning groups (CCGs) (and in limited cases, the NHS Commissioning Board) as health commissioners to secure the provision of health services which they have agreed in the EHCP, similar to the duty on local authorities in respect of special educational services.

An overview is provided below on how we are progressing with the implementation of these reforms in Sunderland.

New joint arrangements for assessing, planning and commissioning services for children and young people with SEND

The Sunderland Integrated Planning and Commissioning Group was established in Autumn 2018 and comprises members from Together for Children (TfC), Sunderland City Council, Sunderland Clinical Commissioning Group (CCG) and Northumberland Tyne and Wear NHS Foundation Trust (NTW). The Group will identify what its members currently commission for the children and young people of Sunderland; identify current need in the city; ensure our individual and joint plans reflect this; commission and jointly commission services to meet the needs of children and young people in Sunderland; redesign services where applicable to ensure the best outcomes and ensure best use of resources whilst minimising demand for specialist services.

Joint planning and commissioning in Sunderland will deliver children, young people and their families:

- Education, Health and Social Care services with streamlined early identification, assessment and diagnosis processes and clear pathways
- Aligned services that provide continuity of care as young people transition into adulthood
- Access to independent information, advice and support services including mediation/dispute resolution where required
- An Early Help offer and improved access to universal services
- Personalised, flexible and outcome-focused services that promote independence and maximise life chances
- Skilled, trained and supported staff who can fully meet the needs of service users
- Commissioners and service providers who are committed, take ownership, hold each other to account and meet agreed timescales
- Value for money services that meet identified need and are monitored throughout the contracts' duration.

Underneath the main group are 4 task and finish groups where the work will actually be done. These will cover:

1. Mental health and emotional wellbeing
2. SEND and specialist services
3. Start well, prevention, universal services and early intervention
4. Placements.

Within numbers 3 and 4, the duty on clinical commissioning groups (CCGs) (and in limited cases, the NHS Commissioning Board) as health commissioners to secure the provision of health services which they have agreed in the EHCP, similar to the duty on local authorities in respect of special educational services, will be addressed.

The Local Offer

An initial Local Offer was produced in collaboration with Parent Carers in the 2013/14 academic year. More recently the working group used to review the Local Offer has requested that children and young people in the city be invited to help design a logo which could be used to clearly promote the local offer and give it a clear identity. Following consultation a design was agreed and has been in use on the Local Offer website from September 2018. The logo is used by SEND Services to ensure that the website and the service is visible.

The local area has been involved in a peer review with South Tyneside and Newcastle local authorities supported by Mott MacDonald. The review helped to identify gaps in information and share good practice and future development ideas which are being implemented through the working group.

Research conducted by the University of Sunderland recommends that the Council should use the Local Offer to make it easier for parents and carers to compare the quality of early years services, including childcare for children before the start of Reception (Recommendation 16).

Education, Health and Social Care Plans (EHCPs)

Sunderland fully converted all of its statements of special educational needs to EHCPs within the statutory timeframe. There is evidence that health and education services routinely contribute to the EHCP process but that input from social care is less consistent. A recommendation from the University of Sunderland research is to examine ways of consistently engage social care to promote effective multi agency working (Recommendation 17).

Personal budgets

A policy and accompanying guidance document for Personal Budgets and Direct Payments was agreed in September 2016. During the EHCP process all parents are offered the opportunity of a personal budget, however requests for these have been low. Those that have been requested have been used to support delivery of particular services, e.g. additional Speech and Language Therapy and specific SEN Programmes such as Applied Behaviour Analysis (ABA) therapy.

Review of SEND in Sunderland

From January 2019, Ann Heywood, an independent SEND specialist will be working in Sunderland to conduct a holistic review of the SEND system in the city. She will provide advice, guidance and recommendations on:

- SEND processes
- SEND Panel
- Resources Panel
- Early Years Inclusion Fund Panel
- Budgets and funding mechanisms, particularly linked to the graduated response
- Support services and service provision
- Preparation for adulthood, including external providers such as the college
- SEND Strategy and Self-Evaluation Framework
- Training offer
- Readiness for inspection.

Final report will be made in July 2019, with regular updates to Together for Children's management team.

2. THE VIEWS OF CHILDREN AND YOUNG PEOPLE

Sunderland is committed to understanding the views of children and young people and ensuring they have a voice in the design and delivery of services, and decisions made that affect them.

Some examples of how children and young people with special educational needs and disabilities have been involved in developing services include:

- the Local Offer - the views of young people from City Equals (the city's then advocate group) were sought to develop the offer. The questions they submitted as part of the consultation process were addressed and the [responses](#) were published on the website.
- Young people from City Equals also produced a [film](#) to support professionals and other young people to understand the SEN reforms and delivered it at an event for parents and professionals.
- The City Equals group no longer operates due to the young people who were part of it being older and moving on to other things. This has created a gap in services being able to routinely consult with disabled young people and TfC's Participation and Engagement Officer is committed to working with young people with SEND to reinstate the group.
- Children and young people with SEND or awaiting diagnosis and home-schooled children are participants in research commissioned by Together for Children to the University of Sunderland School of Education. The research relates to "factors that impact upon social and emotional wellbeing of children and young people from 3-16 years in Sunderland which may lead to exclusion from school."

Action: To create a participation group for children with special educational needs and/or disabilities or ensure that this cohort can meaningfully be included in existing groups.

3. THE VIEWS OF PARENTS/CARERS

3.1 Parent Carer Forum

The Parent Carer Forum is an influential group of parents/carers of children with special education needs and/or disabilities who work closely with agencies to ensure that the voice of parents is heard in developing services.

Professionals regularly attend the Forum to update on local developments and gather feedback. The group has been consulted extensively, including on:

- the new school for pupils with autism
- designing and developing the Local Offer
- development of the 0-2 pathway
- the JSNA for SEND
- developing the format of the EHCP
- development of the Independent Advice and Support Service
- consultation regarding the development of alternative provisions
- the Disabilities and Short Breaks Services
- Preparation for Adulthood Protocols.

3.2 Consulting with individual parents/carers

As part of the EHCP process, all parents are asked to provide feedback on the quality of the service they receive. Information demonstrates an improving picture of involvement.

In addition, 20 caregivers of children with SEN or awaiting diagnosis including home-schooled children are participants in research commissioned by Together for Children to the University of Sunderland School of Education. The research relates to factors that impact upon social and emotional wellbeing of children and young people from 3-16 years in Sunderland Local Authority which may lead to exclusion from school.

3.3 SEND Parental Survey

In February 2018, a survey was included on the Local Offer website to gather the views of caregivers of children with special educational need or disabilities on their experience of the SEND process. They were asked seven key questions. These, and the analysis of their responses, are detailed below.

	Negative Responses	Positive Responses	% Positive
Q1 What do you think is working well in education?	15	27	64%
Positives		Negatives	
Access to strategies		Lack of awareness of need	
Awareness of need		Lack of communication	
Behaviour		Lack of support in mainstream schools	
Diversity of need		Limited range of qualifications	
Feeling of empowerment		Nothing	
Good awareness		School not suited to needs	
Happiness of child		Struggle to get an EHCP	
Inclusion			
One to one tuition			
Out of area placements			
Quality of teaching			
Range of special schools			
Regular SEN meetings			
School staff			
School suited to needs			
Small class sizes			
Social aspects			
Support from school			
Understands needs			

	Negative Responses	Positive Responses	% Positive
Q2 What do you think is working well in health?	17	24	59%
Positives		Negatives	
Access to specialist treatment		Disjointed	
Awareness		Inadequate level of service	
CYPS		Long waiting times	
Diagnosis		Not enough contact	
GP's		Not enough services	
Health Staff		Nothing	
Level of service		Poor service	
Regular appointments			
Short waiting times			
TfC Staff			
Well informed			

	Negative Responses	Positive Responses	% Positive
Q3 What do you think is working well in social care?	33	7	18%
Positives		Negatives	
Good level of service		Disjointed	
Lack of service		Doesn't meet needs	
Learning opportunities		Lack of engagement	
Referrals		Lack of funding	
Social workers		More support required	
Support groups		Not enough support	
Transition team		Nothing	
		Poor service	
		Poor social workers	
		Slow to respond	

Q4 What would be even better in education, health & social care?	
	<u>%</u>
Training and Support	40%
Process	13%
Budget	13%
Education	11%
Cohesion	7%
Contact	7%
Communication	4%
Social Care	4%

Q5 What changes would you like to see?	
	<u>%</u>
Training and Support	43%
Process	23%
Education	16%
Cohesion	7%
Communication	2%
Budget	2%
Transparency	2%
Contact	2%
Social Care	2%

Q6 Sunderland is committed to working with all partners including parents to ensure that services meet the needs of children and young people with SEND. Can you suggest ways we can make this better	
	<u>%</u>
Training and Support	30%
Communication	28%
Process	18%
Cohesion	8%
Education	8%
Transparency	3%
Contact	3%
Educatin	3%
Social Care	3%

Q7 What would you consider success to look like?	
	<u>%</u>
Happy, Confident, Independent Child	38%
Quick & Transparent Process	18%
All needs met	8%
Progress in Education	8%
Supportive Process	8%
Flexibility	5%
Easily accessible services	5%
Parental involvement	5%
Integrated Service	5%

There are limitations to the data, given that the maximum number of responses to individual questions was 43, and there are 1,120 children and young people with EHCPs in the city. Nevertheless, 64% of responses were positive in terms of education, 59% were positive in relation to health services and 18% were positive in relation to social care.

Whilst recognising that parents are significantly unhappy with the service they receive from social care, from a local area perspective we would want to improve satisfaction rates across the board.

Three of the questions in the survey asked parents where improvements could be made, be that to individual services or the process overall, and Training and Support both in school settings and across services was cited as the area that would make the biggest difference.

The results of this survey will contribute to the SEND review being undertaken by an Independent SEND specialist in early 2019 (see section 1).

4. SUNDERLAND SEND PROFILE

4.1 Population data

There were 83,131 children, young people and adults aged 0-25 living in Sunderland according to ONS mid-year estimates for 2017. This can be broken down as follows:

- 57,474 children and young people aged 0-18
- 25,657 adults aged 19-25
- 36,363 children and young people aged 5-16 (compulsory school age)
- 42,496 children and young people aged 3-16 (nursery through to compulsory school age)
- 48,521 children and young people aged 3-18 (nursery through to sixth form)
- 74,178 children, young people and adults aged 3-25. This is the age range that we could expect to see in education settings for those with special educational needs and/or disabilities.

It is estimated that 6,588 children and young people in a school setting have a special educational need and/or disability; there were a further 244 young people aged 19-25 with an identified need or disability. Figures include children and young adults living in Sunderland but attending a setting outside the area.

4.2 [University of Sunderland Research](#)

In May 2017, Together for Children commissioned the University of Sunderland to undertake a piece of research around the prevalence of SEND in the city among children and young people aged 3-16, with the aim of informing the 5-year strategy for SEND provision.

The findings from that research form a major part of this needs assessment and the 35 recommendations are included with other findings from the JSNA to inform improvement actions and commissioning intentions for the SEND Strategic Partnership.

The research found that there was a particularly high prevalence of children identified with Social, Emotional and Mental Health difficulties, Autism and Moderate Learning Difficulties in Sunderland compared to national averages:

- **Social Emotional Mental Health:** National prevalence = 12.3%; Sunderland = 26.3%. This represents an increase in prevalence of **+14.03%** in Sunderland.
- **Autism Spectrum Disorders:** National prevalence = 25.9%; Sunderland = 31.03%. This represents an increase in prevalence of **+5.13%** in Sunderland.
- **Physical Disability:** National prevalence = 5.8%; Sunderland = 10.14%. This represents an increase in prevalence of **+4.34%** in Sunderland.

Conversely, there is a lower than expected prevalence of children identified with Specific Learning Difficulties.

One of the main recommendations was to explore the factors that have led to the increase of 14.03% above national for SEMH on the SEN register for children with an Education, health and care plan/Statement of SEN. Other recommendations from this study focus on:

- providing quality Continued Professional Development (CPD) opportunities in relation to meeting the varying needs of the SEND population, particularly for Special Educational Needs Co-ordinators (SENCOs);
- clarifying the role of the Designated Medical Officer (DMO);
- exploring opportunities for data sharing and ensuring that developing opportunities for effective multi-agency working are a priority.

4.3 Sunderland Paediatric Disability Service, City Hospitals Sunderland

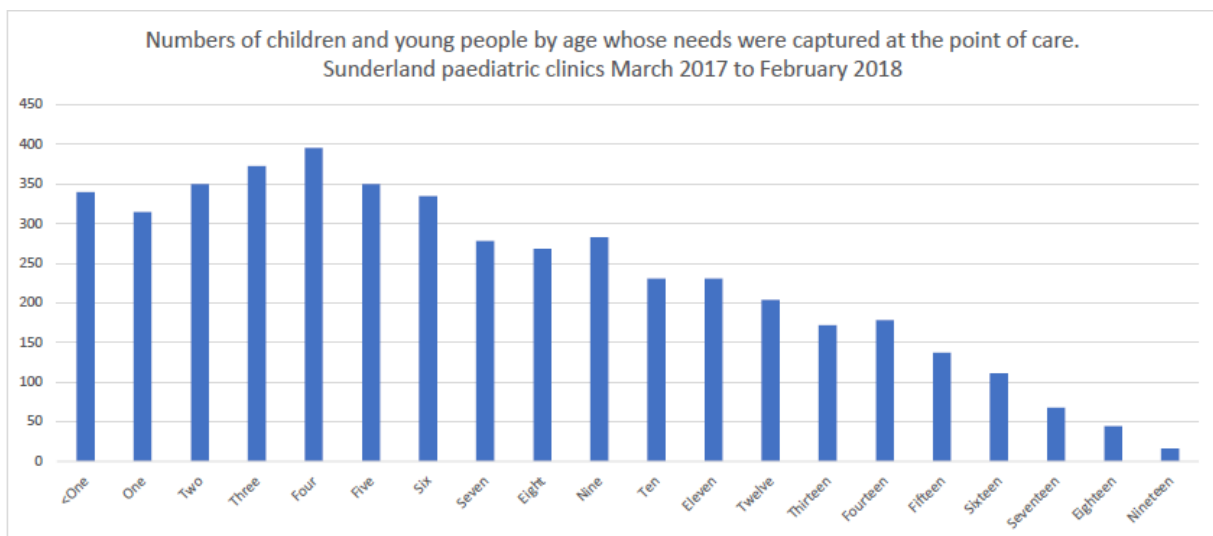
A report by Dr Karen Horridge, Consultant Paediatrician (Disability) was produced on 21 October 2018 outlining the diagnoses and health needs of 4,680 children and young people seen in 6,607 paediatric consultations between March 2017 and February 2018. This was across all paediatric clinics. The data presented in the report focuses primarily on children and young people with Special Educational Needs and Disabilities (SEND).

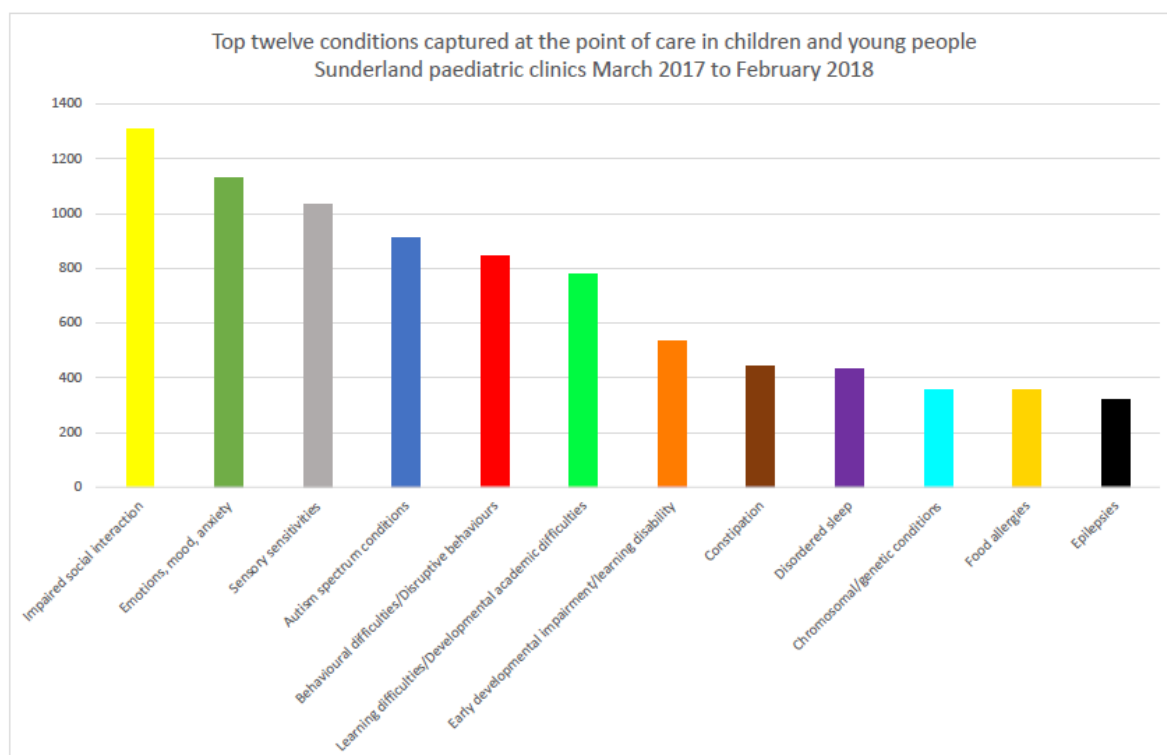
The report describes young people's needs in line with the four broad areas of the SEND Code of Practice. However it also provides a comprehensive overview of the many complexities of need, with a significant number of children and young people with SEND having a range of difficulties to be met. For example, 909 children and young people were identified as having an autism spectrum condition during the given period, 204 of whom had a confirmed learning disability and a further 58 (aged under 4 years) had early developmental delay.

Linked to this, the University of Sunderland recommends that Together for Children should consider recording the number of additional needs that a child with SEND presents with to enable them and educational settings to review care pathways, ensuring they consider the multi-faceted needs of children and young people identified with SEND, particularly those identified with ASD (Horridge, 2016a., 2016b) (Recommendation 18).

Schools and settings are experienced at dealing with the complex needs of children and young people, as evidenced in school Ofsted reports. In particular, children and young people with EHCPs who have complex needs will have these set out in their plan and progress will be measured to ensure all their needs are met. Nevertheless, the SEND Strategic Partnership, using Sunderland City Hospital's report as a basis, will explore whether there are any gaps in provision at a school and service level and make recommendations for improvement as necessary.

Top line data in relation to special educational needs and/or disabilities from the report can be found below.





The [full report](#) is available, in video format, with narrative about the data and what it means. The report itself, and the process for developing the data, are upheld as a national exemplar by the Royal College of Paediatrics and Child Health and further narrative descriptions are available for other professionals to use to develop their own systems.

Actions:

- Consider recording the number of additional needs that a child with SEND presents with to enable them and educational settings to review care pathways, ensuring they consider the multi-faceted needs of children and young people identified with SEND, particularly those identified with ASD (Recommendation 18)
- In terms of meeting the complex needs of children and young people, the SEND Strategic Partnership will explore whether any gaps in provision at school and service level exist and make recommendations for improvement.

4.4 Education, Health and Social Care Plans

In January 2018 there were 1,120 children and young people aged 0-18 on roll at a Sunderland school with an EHCP or statement, which equates to 2.7% of the pupil population. This can be broken down as follows:

	DfE Statistical Release	School Census / local data
Private nursery/childminder	n/a	1
Nursery	14	3
Primary	* 161	162
Secondary	**228	221
Special	663	659

PRU	2	2
Independent	***52	4
	1,120	1,057

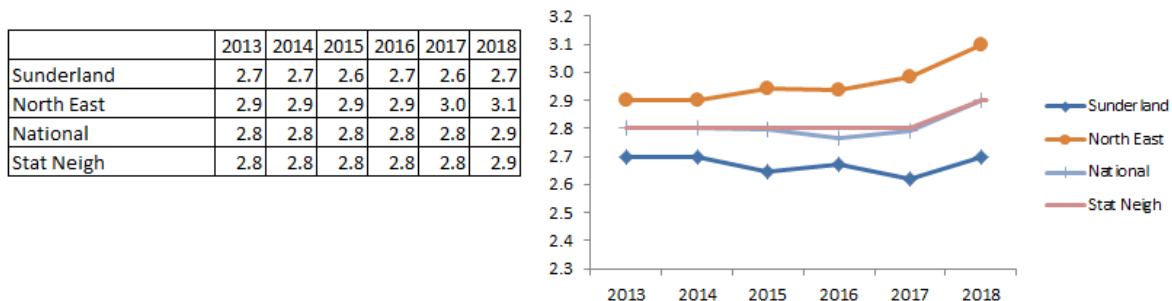
* Includes 0-4 in school and excludes 5-11 in 'all-through' schools

** Includes primary age children in an 'all-through' school and post-16 in secondary school

*** There were an additional 43 children in an independent setting with an EHCP that are not recorded in Capita One.

The rate of children and young people with an EHCP/statement has remained steady over the last five years. Sunderland has the third lowest proportion of children and young people with an EHCP/statement in the region and is lower than North East (3%), national (2.9%) and statistical neighbour (2.9%) averages. The gender split in both January 2017 and January 2018 was 26% female and 74% male.

% Pupils on Roll with an EHCP or Statement



Requests for EHC needs assessments

During the 2016/17 academic year 281 referrals were received for statutory assessment of special educational needs; this rose to 336 in 2017/18. Given changes to legislation, all local authorities are seeing rises in the numbers of assessments being requested. In Sunderland, the percentage increase of EHC needs assessment requests between January 2014 and January 2018 was 21.95%; is significantly lower than the national average increase of 34.88% and the north east average of 36.91%. Early indications from local data are that this gap is narrowing in 2018/19.

Whilst Sunderland's rate of increase is lower than the national and regional averages, it does, nevertheless, pose significant pressures on:

- the workload of SEN casework officers who currently have caseloads of over 230 per 1 FTE member of staff
- dedicated administrative support undertaken by the 2.5 FTE equivalent members of staff
- statutory work carried out by 3.4 FTE Educational Psychologists
- the delivery of therapy services
- demands on mental health provision
- demands on SENCOs.

In 2016/17, 159 out of 281 statutory assessments were initiated. This equates to a 57% initiation rate. Together for Children worked with schools throughout the academic year to increase transparency and understanding of the processes and information required by the SEN Panel and to increase SENCOs' confidence in that process. As a result, 226 out of the 336 assessments requested were initiated – an increased initiation rate of 67%.

The University of Sunderland research (Martin-Denham, et al. 2017) noted that there is currently no standardised exemplar EHC Plan shared across Sunderland’s schools. This is causing delays in assessing children’s needs during SEN Panel meetings, due to excessive time required to identify children’s needs from inconsistent written submissions. They, therefore, recommended that the Together for Children should devise an exemplar EHC plan for all SENCOs to use in recording pupils’ needs, which will then afford better efficiency across the authority (Recommendation 21).

4.5 SEN Support

Based on the DfE Statistical Release, there are 5,307 children and young people on roll at a Sunderland school receiving SEN support in January 2018, which equates to 12.8% of the population. Locally, we calculate there are **5,380** children and young people receiving SEN support. This includes children in private nursery and based with childminders, which are excluded from DfE’s figures.

	DfE Statistical Release	School Census / local data
Private nursery/ childminder	n/a	88
Nursery	100	100
Primary	*3,265	3379
Secondary	**1,872	1753
Special	18	***8
PRU	52	52
	<u>5,307</u>	<u>5,380</u>

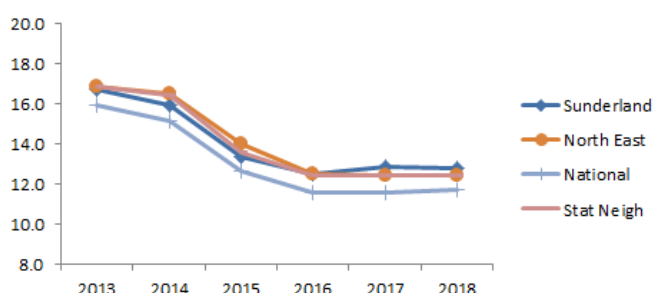
* Includes 0-4 in school and excludes 5-11 in ‘all-through’ schools

** Includes primary age children in an ‘all-through’ school and post-16 in secondary school

*** 18 were reported to the DfE, although 10 children in a special academy were converted to EHCP

% Pupils on Roll receiving SEN Support

	2013	2014	2015	2016	2017	2018
Sunderland	16.7	16.0	13.4	12.5	12.9	12.8
North East	16.8	16.5	14.0	12.5	12.4	12.4
National	16.0	15.1	12.6	11.6	11.6	11.7
Stat Neigh	16.9	16.4	13.6	12.4	12.4	12.4



4.6 Special educational needs and/or disabilities by type

Data collected from schools and published by the DfE, shows that Moderate Learning Difficulty is the most prominent need across children in Sunderland with SEND (EHCP and SEN Support) and that need has risen by 69% in the 5 years between 2014 to 2018. In the same period, Speech, Language & Communication Needs has increased by 72%, Social, Emotional & Mental Health has risen by 30% and Autism has risen by 81%.

	2013		2014		2015		2016		2017		2018	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Moderate Learning Difficulties	914	23	855	22	1190	24	1568	26	1514	25	1442	23
Speech, Language and Communication Needs	698	18	734	19	951	19	1254	21	1267	21	1260	20
Social, Emotional and Mental Health	993	25	956	24	1053	21	1167	19	1248	20	1239	20
Autism Spectrum Disorders	478	12	580	15	699	14	814	13	909	15	1048	17
Specific Language Difficulties	238	6	203	5	349	7	493	8	444	7	427	7
Severe Learning Difficulties	241	6	212	5	210	4	201	3	195	3	195	3
Other Difficulties/Disabilities	125	3	137	3	158	3	185	3	181	3	160	3
Physical Disabilities	155	4	138	4	159	3	166	3	178	3	176	3
Hearing Impairment	72	2	67	2	89	2	103	2	115	2	108	2
Visual Impairment	27	1	27	1	36	1	44	1	52	1	46	1
Profound and Multiple Learning Difficulties	31	1	24	1	35	1	42	1	43	1	43	1
Multi-sensory Impairments	4	0	3	0	3	0	3	0	5	0	8	0
	3976	100	3936	100	4932	100	6040	100	6151	100	6152	100

Source: DfE Statistical Release

As a percentage of the SEND population in Sunderland, it is children and young people presenting with Autism Spectrum Conditions that has seen the largest increase from 12% in 2013 to 17% in 2018. Surprisingly, while the number of children and young people with SEMH has significantly increased, and our comparator figures show we are 14.03% above national rates, the rate of children and young people with SEMH as a total percentage of the SEND population in Sunderland has actually fallen by 5 percentage points between 2013 and 2018.

Sunderland University research (2017) found that:

- The most prevalent primary needs for those identified as requiring **SEN Support** in Sunderland was:
 - MLD (30.56%)
 - SEMH (22.94%)
 - SLCN (19.60)
- The most prevalent primary needs for those who have a **Statement of SEN*** in Sunderland are:
 - ASD (30.12%)
 - SEMH (18.32)
 - SLCN (16.77%)
- The most prevalent primary needs for those who have an **EHC plan** in Sunderland are:
 - ASD (34.30%)
 - SEMH (24.53%)
 - SLCN (17.67%)

* Since the research was conducted all statements have been converted to EHCPs.

5. CHILDREN AND YOUNG PEOPLE WITH SPECIAL EDUCATIONAL NEEDS AND/OR DISABILITIES IN SCHOOLS AND SETTINGS

5.1 Early years

In January 2018, 5,046 children aged 0 to 4 were known to Together for Children (TfC) through attendance at an early year's setting, whether that be a registered child minder, private day care or school nursery. Of those children, 15 (0.3%) had an EHCP and 340 (7%) were receiving SEN support.

Trend over the past 3 years:

0-4 - EHCP/Statement/SEN Support	2016	% of SEND	% of Cohort	2017	% of SEND	% of Cohort	2018	% of SEND	% of Cohort
Speech, Lang or Comm Diff	198	44.7%	3.7%	191	45.2%	3.7%	158	44.5%	3.1%
Not Known	110	24.8%	2.0%	121	28.6%	2.4%	84	23.7%	1.7%
Autistic Spectrum Disorder	31	7.0%	0.6%	34	8.0%	0.7%	28	7.9%	0.6%
Social Emotion and Ment Health	29	6.5%	0.5%	17	4.0%	0.3%	27	7.6%	0.5%
Physical Disability	25	5.6%	0.5%	21	5.0%	0.4%	20	5.6%	0.4%
SEN supp no specialist assess	12	2.7%	0.2%	0	0.0%	0.0%	0	0.0%	0.0%
Moderate Learning Difficulty	10	2.3%	0.2%	13	3.1%	0.3%	13	3.7%	0.3%
Other Difficulty/Disability	7	1.6%	0.1%	2	0.5%	0.0%	6	1.7%	0.1%
Visual Impairment	6	1.4%	0.1%	4	0.9%	0.1%	1	0.3%	0.0%
Profound & Multiple Learn Diff	6	1.4%	0.1%	3	0.7%	0.1%	7	2.0%	0.1%
Hearing Impairment	4	0.9%	0.1%	8	1.9%	0.2%	7	2.0%	0.1%
Severe Learning Difficulty	3	0.7%	0.1%	7	1.7%	0.1%	4	1.1%	0.1%
Spl Learning Diff(Dyslexia)	2	0.5%	0.0%	2	0.5%	0.0%	0	0.0%	0.0%
Total Children with SEND	443			423			355		
Total Children in Cohort	5397			5100			5046		

Speech, Language and Communication Difficulties continues to be the area of greatest primary need for children in early years settings.

The University of Sunderland research found that in the 2017 academic year, 55.61% of all children with an identified need have SLCN. In order to adequately and consistently meet need, the report recommends that Together for Children should explore providing an accredited SLCN programme for early years practitioners, either Level 2, Level 3, Undergraduate credits or MA credits (no recommendation number).

The University's research also found that the proportion of children identified with SEN in the early years that achieve Good Levels of Development (GLD) is extremely low. Of all children identified with SEN in Reception, only 17.38% of those children achieved a GLD in 2016. The key recommendations from the University research are for Together for Children to:

- provide training to nurseries in collaboration with speech and language therapists, playgroup leaders and parents and carers on how to create language rich environments. This should be targeted to early years settings rated requires improvement or in special measures initially (Recommendation 13).
- further investigate and analyse the specific needs of children identified with SEMH in Sunderland and to develop in conjunction with TaMHS a good practice model for use in early years setting to address the range of SEMH needs. This would require appropriate staff training on identification for optimum implementation to occur (Recommendation 14).
- investigate the support provided to children identified with SEN in meeting a GLD, given the current low levels of GLD attainment amongst these children. This will inform strategies to better support professionals, families and children with improving the levels of GLD amongst the SEN population. The 2016 reduction in the achievement of a GLD for Reception aged children identified with ASD should also be investigated (Recommendation 15).

- to use the Local Offer to make it easier for parents and carers to compare the quality of early years services, including childcare for children before the start of Reception (Recommendation 16).

It is very difficult to ascertain whether a child below school age has a special educational need, nevertheless it is exceptionally important to do so, so that children and families can get the support they require as early as possible. Together for Children’s Early Help Service has developed a toolkit to be able to support practitioners through this process (see section 10). To ensure that needs are being identified as early as possible, an Early Years SEND Pathway has been developed with partners and published on the Local Offer. The Pathway provides effective early identification of children aged 0-4 years with potential special educational needs.

5.2 Primary schools

In January 2018, 161 pupils in primary school had a statement/EHCP, which equates to 0.7% of the primary population. This is lower than regional (1%) and national (1.4%) averages. An additional 3,265 children were receiving SEN support in primary schools which equates to 14% of the primary cohort in Sunderland.

Speech, language and communication difficulties continue to be the greatest area of need in the primary sector, followed by moderate learning difficulties, and this has historically been the trend. It is important to note that the number of children presenting with Social, Emotional and Mental Health difficulties and with Autism Spectrum Disorders has steadily increased between 2016 and 2018.

Trend over the past 3 years:

5-11 - EHCP/Statement/SEN Support	2016	% of SEND	% of Cohort	2017	% of SEND	% of Cohort	2018	% of SEND	% of Cohort
Speech, Lang or Comm Diff	1005	32.5%	4.6%	1044	31.0%	4.7%	1057	30.9%	4.8%
Moderate Learning Difficulty	823	26.6%	3.8%	850	25.3%	3.9%	812	23.7%	3.7%
Social Emotion and Ment Health	467	15.1%	2.1%	564	16.8%	2.6%	616	18.0%	2.8%
Autistic Spectrum Disorder	307	9.9%	1.4%	354	10.5%	1.6%	427	12.5%	1.9%
Spl Learning Diff(Dyslexia)	169	5.5%	0.8%	163	4.8%	0.7%	161	4.7%	0.7%
Other Difficulty/Disability	115	3.7%	0.5%	122	3.6%	0.6%	106	3.1%	0.5%
Physical Disability	102	3.3%	0.5%	123	3.7%	0.6%	113	3.3%	0.5%
Hearing Impairment	46	1.5%	0.2%	55	1.6%	0.2%	54	1.6%	0.2%
Physical & Medical	0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Severe Learning Difficulty	17	0.5%	0.1%	18	0.5%	0.1%	14	0.4%	0.1%
Visual Impairment	21	0.7%	0.1%	27	0.8%	0.1%	22	0.6%	0.1%
SEN supp no specialist assess	19	0.6%	0.1%	36	1.1%	0.2%	33	1.0%	0.2%
Multi-Sensory Impairment	1	0.0%	0.0%	3	0.1%	0.0%	6	0.2%	0.0%
Profound & Multiple Learn Diff	4	0.1%	0.0%	5	0.1%	0.0%	5	0.1%	0.0%
Total Children with SEND	3096			3364			3426		
Total Children in Cohort	21721			22040			21940		

5.3 Secondary schools including 16-18

In January 2018, 228 young people had an EHCP or statement, which equates to 1.5% of the secondary school cohort. A further 1,872 (12%) young people received SEN Support.

Moderate learning difficulty continues to be the most prominent need across children with SEND in secondary schools, closely followed by Social, Emotional and Mental Health difficulties. It is important to note the steady increase in numbers and proportion of young people with Autism Spectrum Disorder attending mainstream secondary schools.

12-18 - EHCP/Statement/SEN Support	2016	% of SEND	% of Cohort	2017	% of SEND	% of Cohort	2018	% of SEND	% of Cohort
Moderate Learning Difficulty	725	31.5%	4.7%	641	29.9%	4.1%	604	28.8%	3.9%
Social Emotion and Mental Health	541	23.5%	3.5%	550	25.7%	3.5%	514	24.5%	3.3%
Autism Spectrum Disorder	200	8.7%	1.3%	222	10.4%	1.4%	278	13.2%	1.8%
Spl Learning Diff(Dyslexia)	314	13.7%	2.0%	274	12.8%	1.8%	257	12.2%	1.6%
Speech, Lang or Comm Diff	249	10.8%	1.6%	220	10.3%	1.4%	204	9.7%	1.3%
Hearing Impairment	58	2.5%	0.4%	58	2.7%	0.4%	52	2.5%	0.3%
Physical Disability	54	2.3%	0.3%	46	2.1%	0.3%	53	2.5%	0.3%
Other Difficulty/Disability	63	2.7%	0.4%	49	2.3%	0.3%	43	2.0%	0.3%
Severe Learning Difficulty	37	1.6%	0.2%	31	1.4%	0.2%	34	1.6%	0.2%
Visual Impairment	23	1.0%	0.1%	23	1.1%	0.1%	24	1.1%	0.2%
SEN supp no specialist assess	22	1.0%	0.1%	11	0.5%	0.1%	22	1.0%	0.1%
Physical & Medical	11	0.5%	0.1%	15	0.7%	0.1%	13	0.6%	0.1%
Multi Sensory Impairment	2	0.1%	0.0%	2	0.1%	0.0%	2	0.1%	0.0%
Profound & Multiple Learn Diff	1	0.0%	0.0%	1	0.0%	0.0%	0	0.0%	0.0%
Total Children with SEND	2300			2143			2100		
Total Children in Cohort	15573			15505			15596		

5.4 Special schools

In January 2018 there were 1,120 pupils with an EHCP in a Sunderland school. Of these, 63% (663) were in a special school in the city. This is slightly higher than north east average of 62% and significantly higher than national of 49%.

There are a number of factors that contribute to this including:

- Parents and carers are dissatisfied with SEND support provided in mainstream schools. This is a national issue and is reflected in Sunderland.
- Coupled with this, the quality of special school provision particularly at primary level is at least good, if not outstanding.

2.6% (18 pupils) of all children in special school were receiving SEN support, higher than north east (1.9%) and higher than national (2%).

The most prominent need across children in special school is autism (46%), followed by severe learning difficulty (22%) and social, emotional & mental health (18%).

Trend over the past 3 years

Special - EHCP/Statement/SEN Support	2016	% of SEND % of Cohort	2017	% of SEND % of Cohort	2018	% of SEND % of Cohort
Autistic Spectrum Disorder	281	41.0%	304	44.0%	314	46.1%
Severe Learning Difficulty	148	21.6%	145	21.0%	149	21.9%
Social Emotion and Ment Health	168	24.5%	145	21.0%	120	17.6%
Profound & Multiple Learn Diff	35	5.1%	36	5.2%	36	5.3%
Moderate Learning Difficulty	19	2.8%	19	2.7%	23	3.4%
Speech, Lang or Comm Diff	17	2.5%	22	3.2%	20	2.9%
Spl Learning Diff(Dyslexia)	6	0.9%	6	0.9%	7	1.0%
Other Difficulty/Disability	5	0.7%	9	1.3%	6	0.9%
Physical Disability	5	0.7%	4	0.6%	4	0.6%
Hearing Impairment	1	0.1%	1	0.1%	2	0.3%
Visual Impairment	0	0.0%	0	0.0%	0	0.0%
SEN supp no specialist assess	0	0.0%	0	0.0%	0	0.0%
Physical & Medical	0	0.0%	0	0.0%	0	0.0%
Multi Sensory Impairment	0	0.0%	0	0.0%	0	0.0%
Total Children with SEND	685		691		681	
Total Children in Cohort	685		691		681	

5.5 Pupil Referral Units

In January 2018, there were 78 full time enrolments, of which 54 were SEND. Two learners had an EHCP and 52 were receiving SEN support. 85% of children with SEND had a need of social, emotional & mental health in 2017 and 90% in 2018. During the 2017/18 academic year, all Pupil Referral Units were inspected and judged to be good.

5.6 19-25 year olds in education with an EHCP

A total of 193 adults aged 19 to 25 in education had an EHCP or statement in January 2018 compared to 78 in 2017. In terms of primary need, Autism is highest at 33%, followed by severe learning difficulty at 17%, then social emotional and mental health at 14%.

Trend over the past 3 years:

19-25 - EHCP/Statement/SEN Support	2016	% of SEND	% of Cohort	2017	% of SEND	% of Cohort	2018	% of SEND	% of Cohort
Autistic Spectrum Disorder	10	25.0%	12.2%	30	37.0%	25.0%	63	32.6%	28.0%
Severe Learning Difficulty	9	22.5%	11.0%	21	25.9%	17.5%	32	16.6%	14.2%
Social Emotion and Ment Health	3	7.5%	3.7%	6	7.4%	5.0%	27	14.0%	12.0%
Moderate Learning Difficulty	7	17.5%	8.5%	10	12.3%	8.3%	23	11.9%	10.2%
Speech, Lang or Comm Diff	5	12.5%	6.1%	6	7.4%	5.0%	20	10.4%	8.9%
Physical Disability	3	7.5%	3.7%	6	7.4%	5.0%	14	7.3%	6.2%
Spl Learning Diff(Dyslexia)	3	7.5%	3.7%	1	1.2%	0.8%	5	2.6%	2.2%
Hearing Impairment	0	0.0%	0.0%	0	0.0%	0.0%	4	2.1%	1.8%
Physical & Medical	0	0.0%	0.0%	0	0.0%	0.0%	2	1.0%	0.9%
Profound & Multiple Learn Diff	0	0.0%	0.0%	0	0.0%	0.0%	1	0.5%	0.4%
Not Known	0	0.0%	0.0%	0	0.0%	0.0%	1	0.5%	0.4%
Other Difficulty/Disability	0	0.0%	0.0%	1	1.2%	0.8%	1	0.5%	0.4%
Visual Impairment	0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Total Children with SEND	40			81			193		
Total Children in Cohort	82			120			225		

5.7 Vulnerable groups

Children in Need (CIN)

As at 31 March 2018, 2899 children and young people had a CIN episode in Sunderland, which equates to 534.3 per 10,000 population aged 0-18. Together for Children record that 56 of these young people (2%) have a disability recorded. These can be broken down into the following areas of need:

- 44% - Diagnosed with Autism or Asperger's Syndrome
- 14% - Learning difficulty
- 7% - Physical disability (mobility)
- 5% - Behavioural difficulties
- 4% - Hearing impairment
- 2% - Communication difficulties
- 2% - Incontinence
- 2% - Personal care
- 20% - Other (in line with Equality Act 2010)

Children in need of protection

As at 31 March 2018, 495 children and young people were subject of a child protection plan in Sunderland, which equates to 91.2 per 10,000 population aged 0-18. Together for Children record that 8 of these young people (2%) have a disability recorded. These can be broken down in to the following areas of need:

- 75% - Diagnosed with Autism or Asperger syndrome
- 12.5% - Behavioural difficulties
- 12.5% - Other (in line with Equality Act 2010).

Children Looked After

As at 31 March 2018, 579 children were looked after in Sunderland, which equates to 106.7 per 10,000 population aged 0-18. Together for Children record that 16 of these young people (2.8%) have a disability recorded. These can be broken down in to the following areas of need:

- 31% - Diagnosed with Autism or Asperger's Syndrome
- 19% - Learning difficulties
- 13% - Physical disability (mobility issues)
- 6% - Communication difficulties
- 6% - Hearing impairment
- 25% - Other (in line with Equality Act 2010)

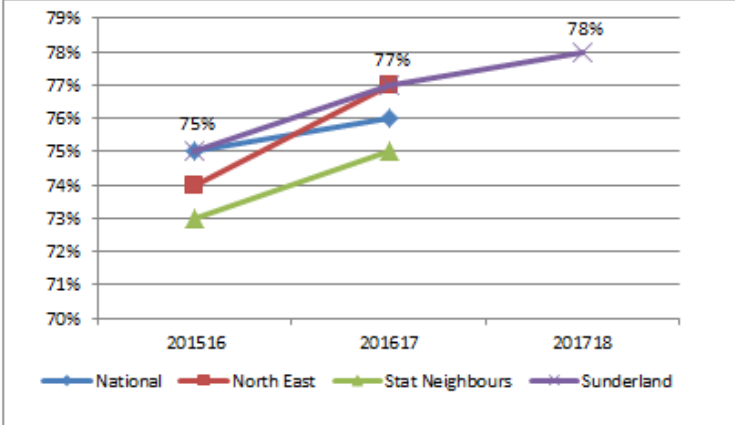
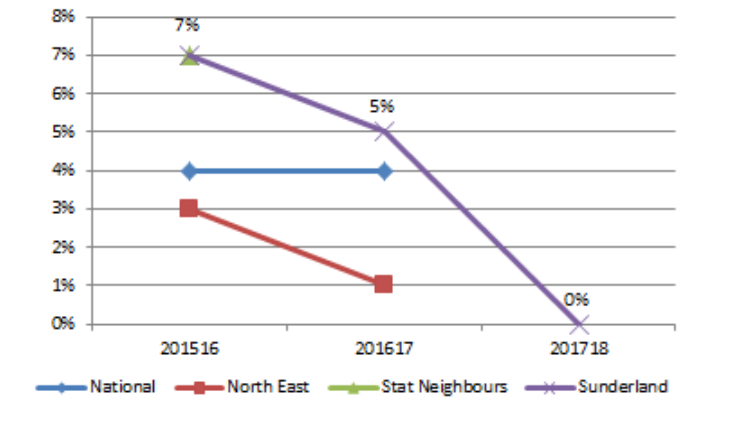
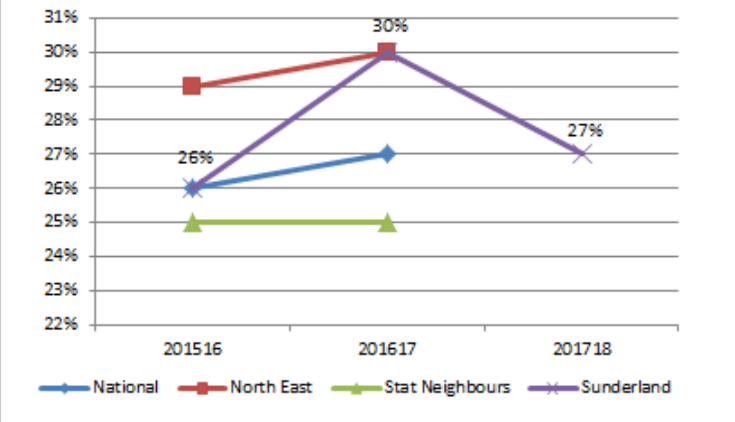
Together for Children has recently changed its Management Information System to LiquidLogic. There have been issues with the migration of disability data from one system to another, and so the data cited above is not accurate, however it does provide an overview of the range of disabilities in the social care system. Work is ongoing to ensure the disability information in LiquidLogic is accurate so that the needs of disabled children can be met fully.

Action:

- Ensure disability information in LiquidLogic is accurate so that the needs of disabled children can be met fully

6. EDUCATIONAL OUTCOMES (2018 comparative data is not yet available.)

6.1 Early Years Foundation Stage Profile

Good Level of Development – No SEND	Good Level of Development – EHCP or Statement <i>Stat Neighbour figure unavailable in 2016/17</i>																																								
 <p>A line graph showing the percentage of children with a Good Level of Development (No SEND) from 2015/16 to 2017/18. The y-axis ranges from 70% to 79% in 1% increments. The x-axis shows the years 2015/16, 2016/17, and 2017/18. Four data series are plotted: National (blue diamonds), North East (red squares), Stat Neighbours (green triangles), and Sunderland (purple crosses). Sunderland shows the highest percentage, increasing from 75% in 2015/16 to 78% in 2017/18. North East follows, increasing from 74% to 77%. National increases from 75% to 76%. Stat Neighbours increases from 73% to 75%.</p> <table border="1"> <thead> <tr> <th>Year</th> <th>National</th> <th>North East</th> <th>Stat Neighbours</th> <th>Sunderland</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>75%</td> <td>74%</td> <td>73%</td> <td>75%</td> </tr> <tr> <td>2016/17</td> <td>76%</td> <td>77%</td> <td>75%</td> <td>77%</td> </tr> <tr> <td>2017/18</td> <td>76%</td> <td>77%</td> <td>75%</td> <td>78%</td> </tr> </tbody> </table>	Year	National	North East	Stat Neighbours	Sunderland	2015/16	75%	74%	73%	75%	2016/17	76%	77%	75%	77%	2017/18	76%	77%	75%	78%	 <p>A line graph showing the percentage of children with a Good Level of Development (EHCP or Statement) from 2015/16 to 2017/18. The y-axis ranges from 0% to 8% in 1% increments. The x-axis shows the years 2015/16, 2016/17, and 2017/18. Four data series are plotted: National (blue diamonds), North East (red squares), Stat Neighbours (green triangles), and Sunderland (purple crosses). Sunderland shows a sharp decline from 7% in 2015/16 to 0% in 2017/18. National remains constant at 4%. North East declines from 3% to 1%. Stat Neighbours is not shown for 2016/17 and 2017/18.</p> <table border="1"> <thead> <tr> <th>Year</th> <th>National</th> <th>North East</th> <th>Stat Neighbours</th> <th>Sunderland</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>4%</td> <td>3%</td> <td>7%</td> <td>7%</td> </tr> <tr> <td>2016/17</td> <td>4%</td> <td>1%</td> <td>5%</td> <td>5%</td> </tr> <tr> <td>2017/18</td> <td>4%</td> <td>1%</td> <td>0%</td> <td>0%</td> </tr> </tbody> </table>	Year	National	North East	Stat Neighbours	Sunderland	2015/16	4%	3%	7%	7%	2016/17	4%	1%	5%	5%	2017/18	4%	1%	0%	0%
Year	National	North East	Stat Neighbours	Sunderland																																					
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<p>Good Level of Development – SEN Support</p>  <p>A line graph showing the percentage of children with a Good Level of Development (SEN Support) from 2015/16 to 2017/18. The y-axis ranges from 22% to 31% in 1% increments. The x-axis shows the years 2015/16, 2016/17, and 2017/18. Four data series are plotted: National (blue diamonds), North East (red squares), Stat Neighbours (green triangles), and Sunderland (purple crosses). North East shows the highest percentage, increasing from 29% in 2015/16 to 30% in 2016/17, then falling to 27% in 2017/18. Sunderland increases from 26% to 30% in 2016/17, then falls to 27% in 2017/18. National increases from 26% to 27%. Stat Neighbours remains constant at 25%.</p> <table border="1"> <thead> <tr> <th>Year</th> <th>National</th> <th>North East</th> <th>Stat Neighbours</th> <th>Sunderland</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>26%</td> <td>29%</td> <td>25%</td> <td>26%</td> </tr> <tr> <td>2016/17</td> <td>27%</td> <td>30%</td> <td>25%</td> <td>30%</td> </tr> <tr> <td>2017/18</td> <td>27%</td> <td>27%</td> <td>25%</td> <td>27%</td> </tr> </tbody> </table>	Year	National	North East	Stat Neighbours	Sunderland	2015/16	26%	29%	25%	26%	2016/17	27%	30%	25%	30%	2017/18	27%	27%	25%	27%	<p>The percentage of children without any SEND achieving a Good Level of Development at Early Years Foundation Stage has increased year on year since 2013.</p> <p>The rate across children with an EHCP or statement has fallen from 7% in 2016 to 0% in 2018. The size of the cohort over the past 3 years was 43, 37 and 32.</p> <p>The rate across children receiving SEN support has been a little sporadic, having increased to 30% in 2017 and falling to 27% in 2018. The size of the cohort over the past 3 years was 356, 378 and 347.</p>																				
Year	National	North East	Stat Neighbours	Sunderland																																					
2015/16	26%	29%	25%	26%																																					
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2017/18	27%	27%	25%	27%																																					

6.2 Year 1 Phonics Assessment

Working above the expected level – No SEND	Working above the expected level – EHCP or Statement																																								
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Year	National	North East	Stat Neighbours	Sunderland																																					
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Year	National	North East	Stat Neighbours	Sunderland																																					
2015/16	46%	49%	45%	45%																																					
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6.3 Key Stage 1 - Reading

Expected level in reading – No SEND	Expected level in reading - EHCP																																								
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6.4 Key Stage 1 - Writing

Expected level in writing – No SEND	Expected level in writing - EHCP																																								
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6.5 Key Stage 1 – Maths

Expected level in maths – No SEND	Expected level in maths - EHCP																																								
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Expected level in maths – SEN Support	<p>The rate of achievement in mathematics across children without SEND peaked in 2017 and has remained stable into 2018.</p> <p>Achievement across children with an EHCP or statement improved year on year and is higher than all comparators.</p> <p>Achievement of children with SEN support improved 2016 into 2017 then fell into 2018, following a similar pattern to the north east average.</p>																																								
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6.6 Key Stage 1 – Science

<p>Expected level in science – No SEND</p> <table border="1"> <thead> <tr> <th>Year</th> <th>National</th> <th>North East</th> <th>Stat Neighbours</th> <th>Sunderland</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>89%</td> <td>91%</td> <td>89%</td> <td>91%</td> </tr> <tr> <td>2016/17</td> <td>90%</td> <td>91%</td> <td>89%</td> <td>91%</td> </tr> <tr> <td>2017/18</td> <td>90%</td> <td>91%</td> <td>90%</td> <td>91%</td> </tr> </tbody> </table>	Year	National	North East	Stat Neighbours	Sunderland	2015/16	89%	91%	89%	91%	2016/17	90%	91%	89%	91%	2017/18	90%	91%	90%	91%	<p>Expected level in science - EHCP</p> <table border="1"> <thead> <tr> <th>Year</th> <th>National</th> <th>North East</th> <th>Stat Neighbours</th> <th>Sunderland</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>17%</td> <td>12%</td> <td>14%</td> <td>6%</td> </tr> <tr> <td>2016/17</td> <td>16%</td> <td>13%</td> <td>14%</td> <td>14%</td> </tr> <tr> <td>2017/18</td> <td>15%</td> <td>11%</td> <td>15%</td> <td>19%</td> </tr> </tbody> </table>	Year	National	North East	Stat Neighbours	Sunderland	2015/16	17%	12%	14%	6%	2016/17	16%	13%	14%	14%	2017/18	15%	11%	15%	19%
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6.7 Key Stage 2 – Combined subjects

Expected level in combined reading/writing/maths – No SEND	Expected level in combined reading/writing/maths – EHCP or Statement																																								
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6.8 Key Stage 2 – Reading

Expected level in reading – No SEND	Expected level in reading – EHCP or Statement																																								
<p>This line graph tracks the percentage of children at the expected reading level for those with no SEND. The y-axis represents the percentage, ranging from 68% to 86% in 2% increments. The x-axis shows the academic years 2015/16, 2016/17, and 2017/18. Four data series are plotted: National (blue diamonds), North East (red squares), Stat Neighbours (green triangles), and Sunderland (purple crosses). All series show an upward trend over the three-year period.</p> <table border="1"> <thead> <tr> <th>Year</th> <th>National</th> <th>North East</th> <th>Stat Neighbours</th> <th>Sunderland</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>74%</td> <td>77%</td> <td>75%</td> <td>78%</td> </tr> <tr> <td>2016/17</td> <td>80%</td> <td>82%</td> <td>80%</td> <td>84%</td> </tr> <tr> <td>2017/18</td> <td>84%</td> <td>85%</td> <td>84%</td> <td>85%</td> </tr> </tbody> </table>	Year	National	North East	Stat Neighbours	Sunderland	2015/16	74%	77%	75%	78%	2016/17	80%	82%	80%	84%	2017/18	84%	85%	84%	85%	<p>This line graph tracks the percentage of children at the expected reading level for those with an EHCP or statement. The y-axis represents the percentage, ranging from 0% to 25% in 5% increments. The x-axis shows the academic years 2015/16, 2016/17, and 2017/18. Four data series are plotted: National (blue diamonds), North East (red squares), Stat Neighbours (green triangles), and Sunderland (purple crosses). All series show an upward trend over the three-year period.</p> <table border="1"> <thead> <tr> <th>Year</th> <th>National</th> <th>North East</th> <th>Stat Neighbours</th> <th>Sunderland</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>14%</td> <td>14%</td> <td>12%</td> <td>15%</td> </tr> <tr> <td>2016/17</td> <td>15%</td> <td>16%</td> <td>15%</td> <td>17%</td> </tr> <tr> <td>2017/18</td> <td>20%</td> <td>23%</td> <td>21%</td> <td>23%</td> </tr> </tbody> </table>	Year	National	North East	Stat Neighbours	Sunderland	2015/16	14%	14%	12%	15%	2016/17	15%	16%	15%	17%	2017/18	20%	23%	21%	23%
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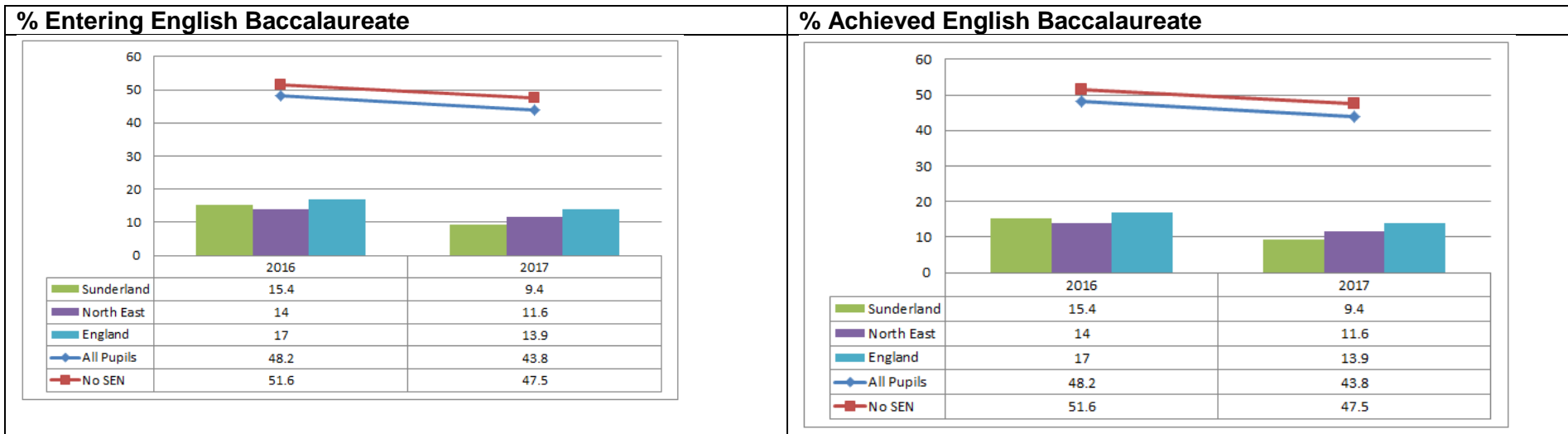
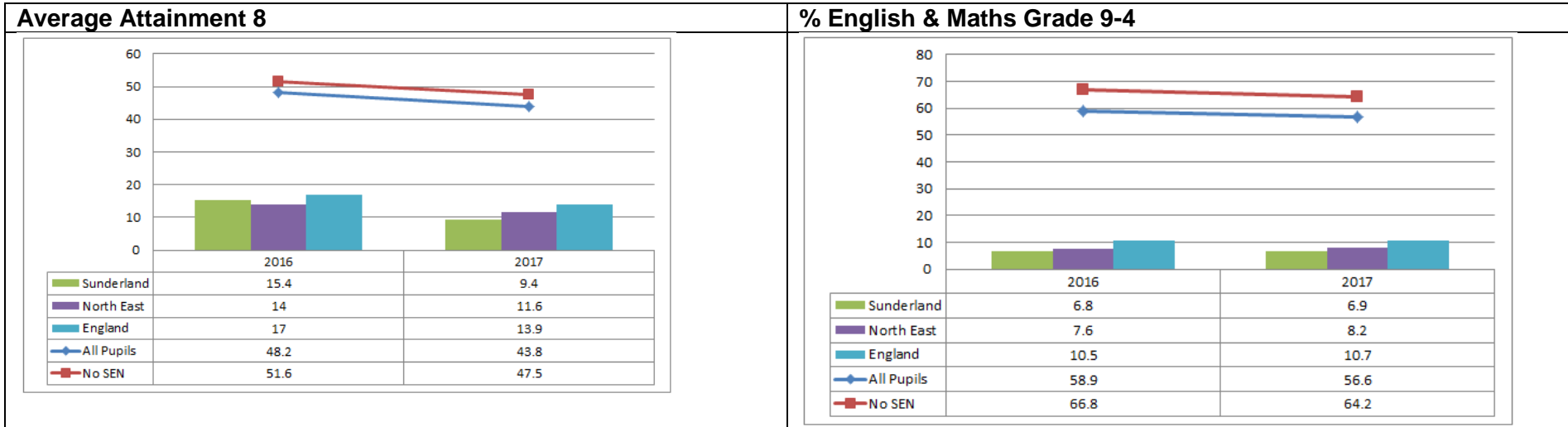
6.9 Key Stage 2 – Writing

Expected level in writing – No SEND	Expected level in writing – EHCP or Statement																																								
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<p>Expected level in writing – SEN Support</p>	<p>Achievement of non-SEND children in writing at key stage two improved year on year into 2018 and remained higher than comparators.</p> <p>An increase can be identified across children with an EHCP or statement, higher than the national rate.</p> <p>Children receiving SEN support fell slightly in 2017 but improved in 2018.</p>																																								
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6.10 Key Stage 2 – Maths

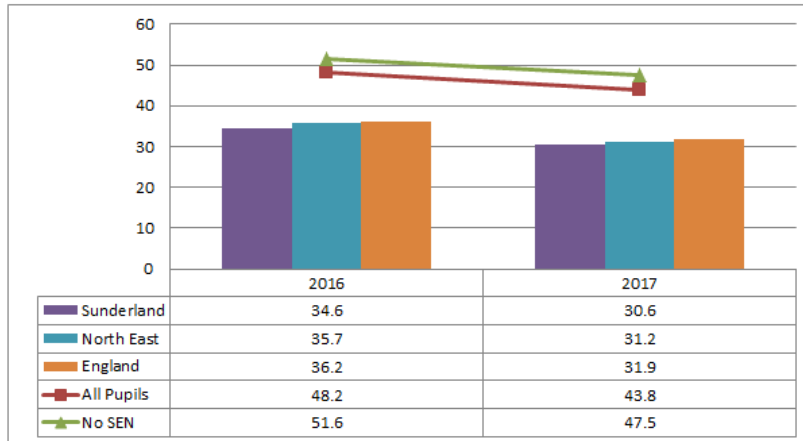
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6.11 Key Stage 4 – EHCPs (2018 data not yet available)

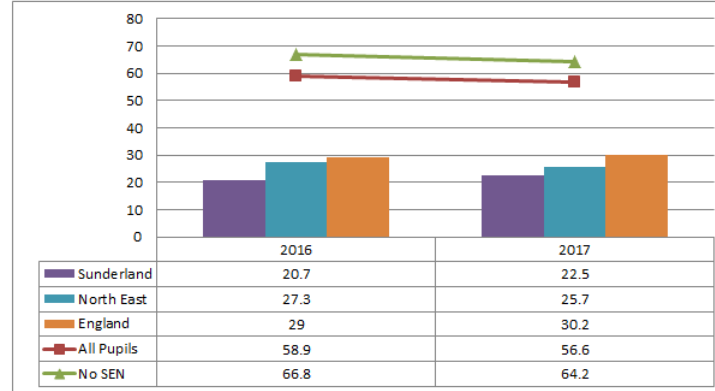


6.12 Key Stage 4 – SEN Support

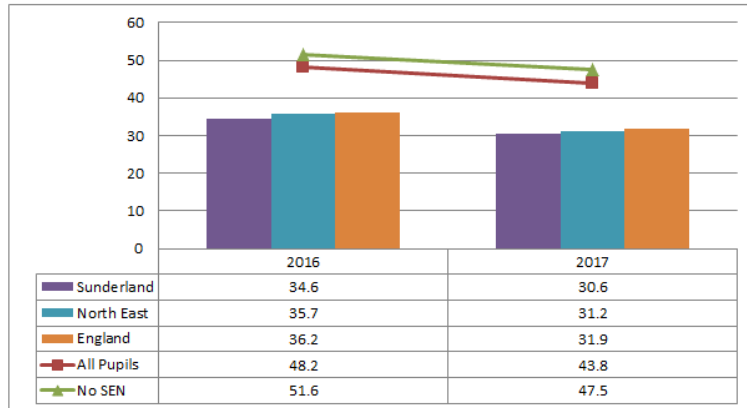
Average Attainment 8



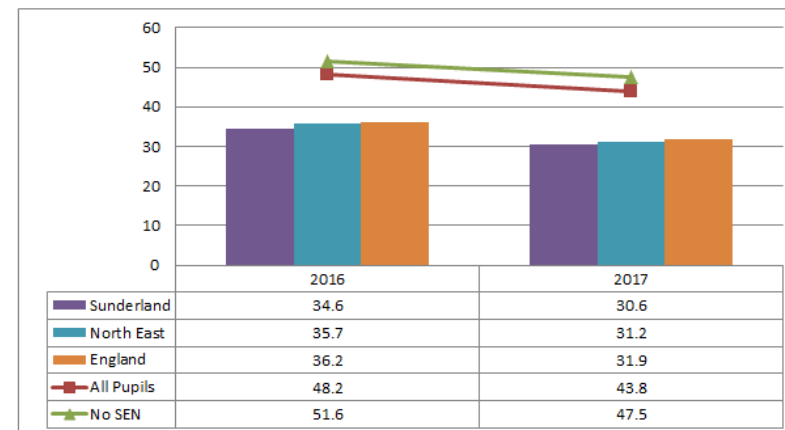
% English & Maths Grade 9-4



% Entering English Baccalaureate



% Achieved English Baccalaureate



Educational outcomes

In Key Stages 1 and 2 children with an EHCP and those receiving SEN Support generally do as well as, if not better, than their counterparts across the region and the nation. However this is not the case for those in the early years of education and at Key Stage 4.

Children with an EHCP achieving a Good Level of Development has fallen from 7% in 2015/16 to 0% in 2017/18 and those achieving Year 1 Phonics has fallen from 19% in 2015/16 to 6% in 2017/18.

At Key Stage 4, both young people with EHCPs and those receiving SEN Support do not do as well as their peers at a regional level and do significantly worse than young people with SEND nationally.

It is essential that children and young people in the education system in Sunderland achieve at least as well as their peers regionally and nationally. The SEND Strategic Partnership will develop appropriate actions to ensure that the systems and processes already in place in the city are appropriate and are supporting children and young people to achieve their academic potential.

Actions:

- Investigate the support provided to children identified with SEN in meeting a GLD, given the current low levels of GLD attainment amongst these children (Recommendation 15).
- Specifically investigate the reduction in the achievement of a GLD for Reception aged children identified with ASD (Recommendation 15).
- Develop appropriate actions to ensure that the systems and processes already in place in the city are appropriate and are supporting children and young people to achieve their academic potential and all key stages.

7. INCLUSION AND ATTENDANCE

7.1 Permanent and Fixed Term Exclusions 2017/18 – (unvalidated data)

In the 2016/17 academic year, there were 37 permanent exclusions across all schools and this was broadly in line with regional and national averages. In 2017/18 permanent exclusions across all schools in the city rose to 68, representing approximately an 84% increase.

- Of the 68 permanent exclusions one pupil had an EHCP or statement (1.5%), 32 (47%) were receiving SEN support and 35 (51.5%) had no SEND. Of all children with SEND, 25 (76%) had a primary need of social, emotional and mental health issues, 5 (15%) had a primary need of moderate learning difficulty.
- 58 pupils were permanently excluded from secondary schools in 2017/18, of which 23 (40%) were receiving SEN Support. 17 of these pupils were receiving support with social, emotional and mental health difficulties, which equates to 74% of all children excluded with SEN support and 29% of all 58 pupils.
- 9 pupils were permanently excluded from primary schools in 2017/18, with 8 receiving SEN Support for a social, emotional and mental health issue and 1 for moderate learning difficulty.
- 1 pupil was permanently excluded from a special school.
- 928 pupils received a fixed term exclusion from secondary school in 2017/18, of which, 18 (2%) had an EHCP, 251 (27%) were receiving SEN Support. Of all children with SEND, 121 (45%) had a social, emotional and mental health issue, 87 (32%) had a moderate learning difficulty.
- 166 pupils received a fixed term exclusion from primary school in 2017/18, of which 3 (2%) had an EHCP, 118 (71%) were receiving SEN support. Of all children with SEND, 80 (66%) had a social, emotional and mental health issue.

7.2 Looked after children (LAC) fixed term exclusion data 2017/18

A total of 37 children looked after anytime during the 2017/18 academic year received a fixed term exclusion. 21 were at secondary school, 2 were at primary school, 9 were in a pupil referral unit and 7 were in special school. Two children were excluded from more than one school which explains the discrepancy in the numbers quoted. 8 (22%) had an EHCP or statement and 18 (49%) were receiving SEN support.

7.3 Keeping children in school

During the 2017/18 academic year there has been an increase in permanent exclusions across the city. An increasing number of children and young people subject to exclusion are identified at SEN Support and a growing number of these with Social, Emotional and Mental Health needs. This is placing significant pressure on all Pupil Referral Units; other local authorities in the region are experiencing similar difficulties. A number of actions have been taken by the local area including: discussions with the Regional Schools Commissioner and the link HMI (Her Majesty's Inspectorate); reviewing the financial clawback in terms of permanent exclusions; extending the Behaviour & Attendance Partnership model to all primary schools; and reviewing In Year Fair Access protocols and Managed Moves

protocols. A working group has been established to consider the development of alternative provision and a draft proposal will be presented to headteachers in January 2019.

In response to the evidence of increasing numbers of children and young people identifying with SEMH, coupled with the rising numbers of pupils receiving fixed term and permanent exclusions, Together for Children has commissioned the University of Sunderland to investigate the factors that impact upon social and emotional wellbeing of children and young people from 3-16 years which may lead to exclusion from school. The research will:

- seek to determine if Social Emotional Mental Health (SEMH) indicators are prevalent in those pupils who are excluded within Sunderland schools
- consider categories of SEMH for those pupils who are identified as SEMH on the SEN register, including those who are excluded or identified as at risk of exclusion
- identify how the SEMH category for the SEN register has been determined, and by who the SEMH has been identified, with reference to whether this has been indicated or diagnosed for the pupil in question
- determine if training for school staff is sufficient to enable them to effectively support pupil social and emotional wellbeing
- highlight areas of good practice and determine guidelines for good practice in supporting pupils with SEMH in schools with the purpose of seeking to support schools in reducing the number of pupil exclusions
- chart behaviour traits displayed by children at risk of exclusion, or as indicators of social and emotional distress, to determine if early intervention is feasible for schools to provide.

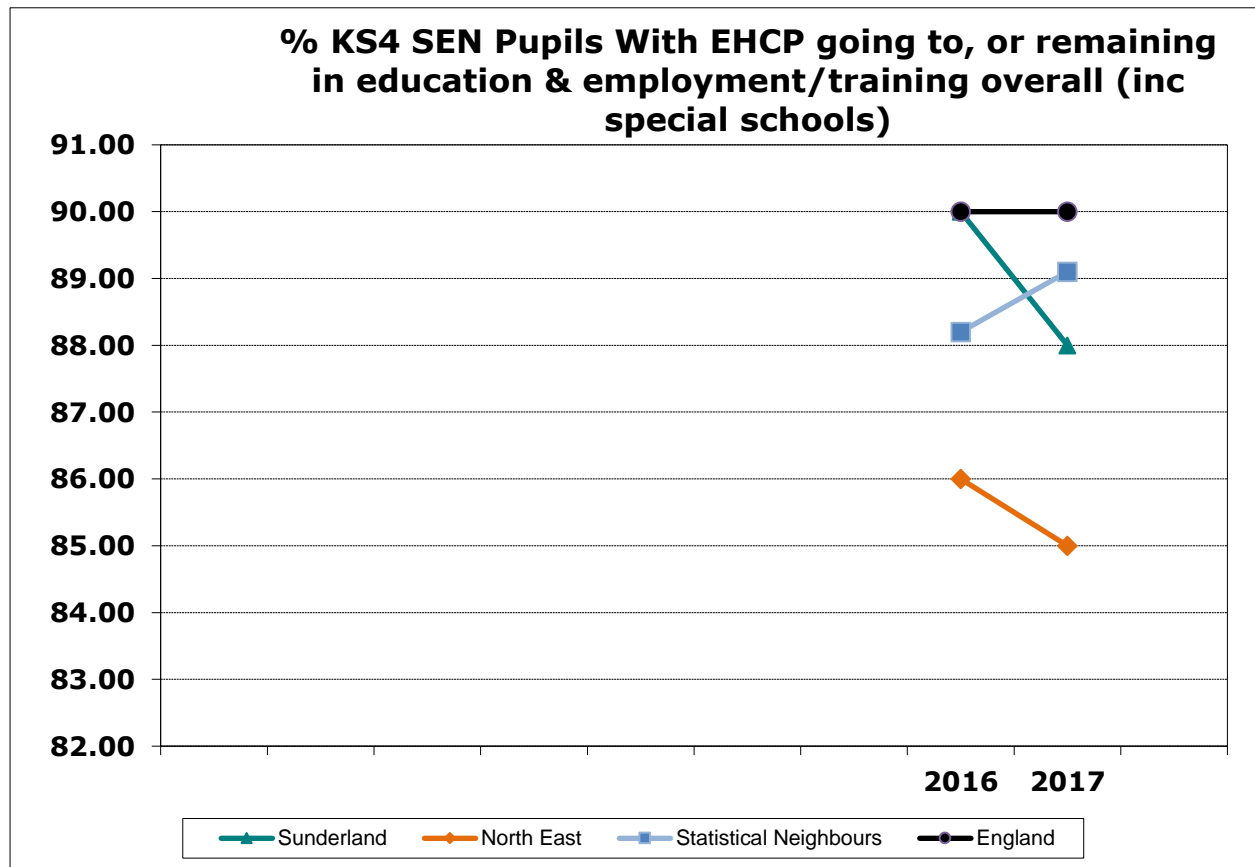
The views of Headteachers, SENCOs, children and young people, caregivers, support services, and children's mental health professionals will be instrumental in outlining any recommendations to Together for Children.

The University research also cited Ofsted (2013) and that they encourage effective multi-agency working to avoid any unlawful forms of exclusion. To this end, the University's recommendation was that school leaders refresh their understanding of statutory duties relating to children missing from education to ensure that they are fulfilling their role (Recommendation 31) and for the council to appoint a senior officer responsible for obtaining and collating data on children missing from education to ensure they are meeting their statutory obligations.

8. YOUNG PEOPLE WITH SPECIAL EDUCATIONAL NEEDS AND/OR DISABILITIES REMAINING IN EDUCATION, EMPLOYMENT OR TRAINING

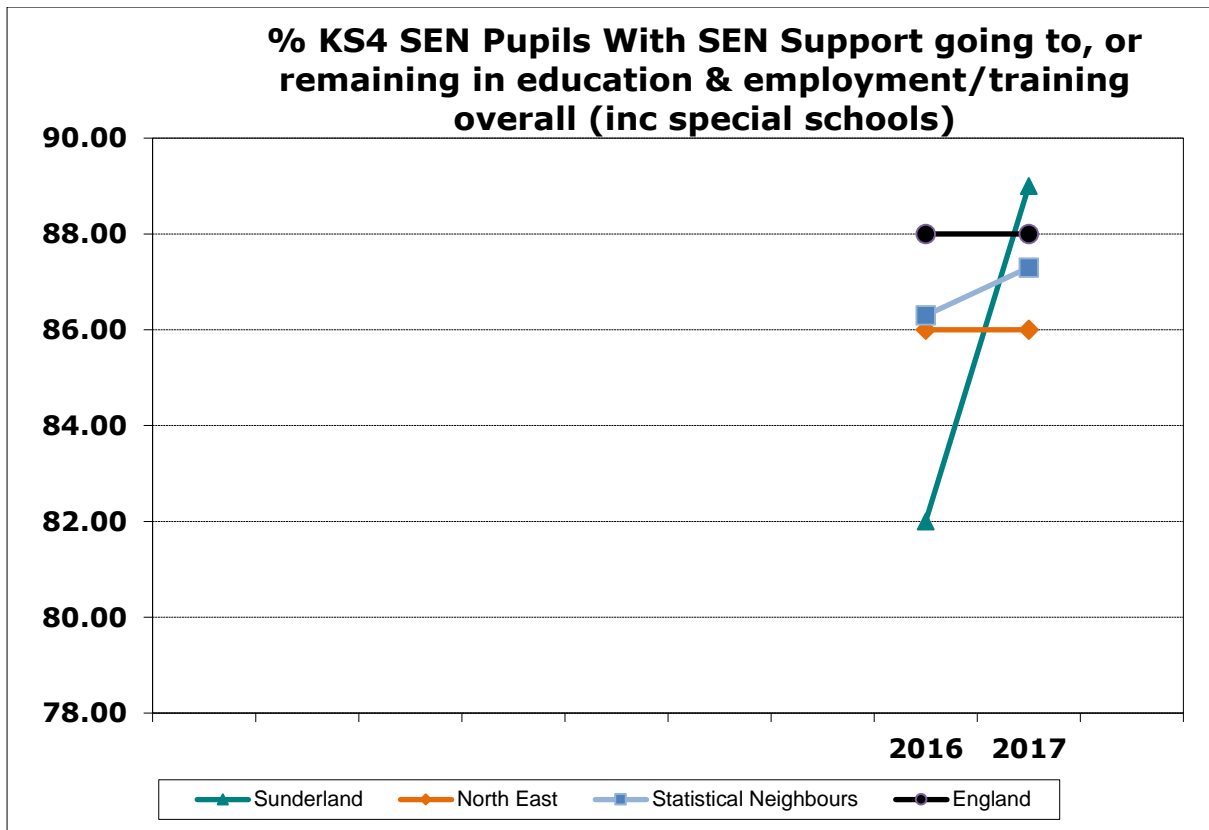
8.1 Young people with EHCP in EET

In 2017, 88% of young people in Key Stage 4 with an **EHP** remained in Education, Employment or Training. This was a 2 percentage point decrease on the previous year and is also 2 percentage points lower than the national average, 1 percentage point below statistical neighbours but 3 percentage points above the regional average.



8.2 Young people at SEN Support in EET

In 2017, 89% of pupils in Key Stage 4 receiving **SEN Support** remained in Education, Employment or Training. There was a 7 percentage point increase on the previous year and puts Sunderland 1 percentage point above the national average, 1.7 percentage points above statistical neighbours and 3 percentage points above the regional average.



Action: The challenge going forward is to ensure all young people with SEND leaving Key Stage 4 remain in Education, Employment or Training so that they can achieve the very best outcomes beyond compulsory school age.

8.3 Post-16 destination data

Progression & Destination Summary 16-17 - 17-18																														
16-17 Level	Learners	Progression														Destination								Positive Destination %						
		Entry Level	Level 1	Level 2	Level 3	A.S Level	A-Level	Level 3 (Year 1)	Level 3 (Year 2)	Level 3 (Access)	Level 4	Level 5	Level Unknown	Apprentice (Level 2)	Apprentice (Level 3)	Apprentice (Higher)	Apprenticeship (External)	FE (External)	HE (External)	Traineeship (External)	Employed (16+ hrs)	Employed (<16 hrs)	Voluntary work		Other	Not Employed (Looking)	Not Employed (Not Looking)	Unable to contact	Not known	
Entry Level	861	17.8%	10.0%	8.8%	0.1%					0.2%	0.1%		0.3%	0.1%	0.1%		0.1%	2.8%	0.1%		35.5%	2.0%	0.7%	0.9%	7.8%	12.4%				79.8%
Level 1	1,540	1.5%	5.5%	22.4%	1.3%	0.1%		0.3%		0.3%	0.1%		0.1%	0.8%			2.1%	1.9%	0.9%	0.1%	48.8%	2.7%	0.6%	0.3%	4.9%	5.3%				89.7%
Level 2	4,210	0.7%	1.3%	30.4%	6.6%	0.0%		3.7%		0.9%	0.1%		0.1%	0.5%	0.5%	0.0%	0.9%	1.2%	0.7%	0.1%	39.5%	2.4%	0.2%	0.4%	5.9%	3.8%				90.3%
Level 3	930	0.3%	0.9%	5.3%	30.6%	0.4%	0.2%	0.9%	0.3%	0.3%	4.5%	0.4%		1.1%	0.2%	0.2%	3.3%	2.4%	8.9%	0.2%	29.6%	4.3%	0.2%		3.1%	2.3%				94.6%
AS Level	232				14.2%	1.3%	70.3%	7.3%	1.3%		0.9%			0.9%			1.3%	0.9%	0.4%		1.3%									100.0%
A-Level	192		0.5%		0.5%		4.7%			0.5%	1.6%			1.6%			4.7%	1.0%	73.4%		7.3%			1.0%	2.1%	1.0%				96.9%
Level 3 (Y)	517		0.6%	1.9%	1.4%	0.8%		3.1%	75.4%		0.2%			1.2%	0.4%		4.3%	2.1%	0.8%		4.3%	0.6%		0.2%	1.5%	1.4%				97.1%
Level 3 (Y)	413		1.0%	3.1%	2.2%			0.2%	3.6%		20.3%			1.0%	0.2%		3.4%	0.5%	43.6%	0.2%	11.6%	1.2%	1.0%	0.7%	4.1%	1.9%				93.9%
Level 3 (A)	412	0.2%		3.6%	0.2%					1.0%	6.1%							0.5%	57.0%		25.5%	3.4%			0.2%	2.2%				97.6%
Level 4	659	0.3%	0.2%	1.7%	0.2%					0.2%	48.3%			0.2%		0.3%			17.5%		23.7%	7.7%								100.0%
Level 5	48				2.1%						2.1%										85.4%	10.4%								100.0%
Level Unk	21		4.8%										38.1%				28.6%	4.8%			9.5%		4.8%	4.8%		4.8%				95.2%
Traineeship	0																													0.0%
Apprentice	1,045		0.2%	2.4%	0.3%			0.1%		0.1%	0.2%			55.5%	1.8%		1.1%	0.3%	0.2%		32.4%	0.9%		2.0%	2.2%	0.4%				97.4%
Apprentice	503	0.4%	0.2%	1.8%	0.2%						2.2%			0.2%	45.3%	0.2%	1.0%	0.2%	0.6%	0.2%	43.3%	0.8%		0.8%	2.2%	0.4%				97.4%
Apprentice	99															70.7%	1.0%				28.3%									100.0%
	11,682																													92.4%

The data above, from Sunderland College, sets out the progression and destination of pupils attending the College between 2016/17 and 2017/18. It shows that 86.6% of learners with SEN progressed to a positive destination in 2017-18. This is a considerable improvement of 5.9 percentage points on the previous academic year 2016-17, based on a comparable number of learners. 96% of learners with an EHCP went onto a positive destination in 2017-18.

9. MEETING NEED

COMMUNICATION AND INTERACTION

AUTISM SPECTRUM DISORDER

Children and young people with ASD are likely to have particular difficulties with social interaction. They may also experience difficulties with language, communication and imagination, which can impact on how they relate to others.

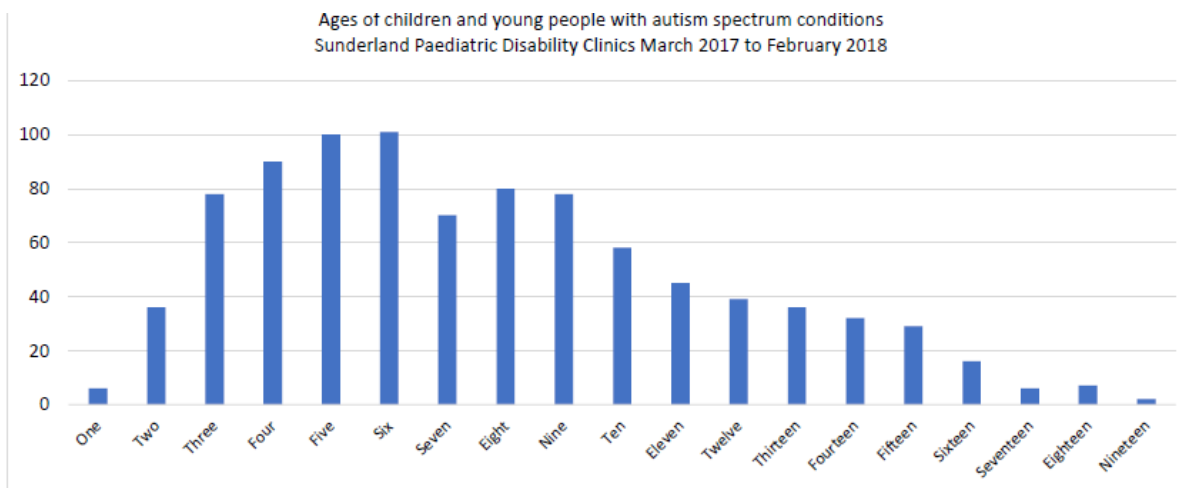
Prevalence

There has been a marked increase in the number of children and young people presenting with ASD over the last four decades which is attributed to:

- improved recognition and detection;
- changes in study methodology;
- an increase in available diagnostic services and a widening of the diagnostic criteria;
- increased awareness among professionals and parents;
- growing acceptance that autism can coexist with a range of other conditions.

It is estimated that autism occurs in 1% of children and young people (Autism in children, young people and adults, NICE, June 2013). This being the case we could expect to see around 830 children, young people and adults (aged 0-25) in the city presenting with Autism Spectrum Conditions based on 2017 mid-year estimates and 742 in educational settings. There are in fact over 1000 children attending Sunderland schools who have an EHCP or are receiving SEN support for Autism Spectrum Conditions.

The rate of children and young people with ASD in Sunderland schools is considerably higher than the regional, statistical neighbour and national averages. This could be attributed to the fact that we have an excellent education offer which attracts families of children with autism to move in to the city to access this. In addition, health services in the city make every effort to identify and diagnose children by the age of 9. There were 1309 children and young people assessed in Sunderland Paediatrics clinics because of concerns about impaired social communication between March 2017 and February 2018. Of these, 909 (69.4%) were identified to have an autism spectrum condition. Most of the children under 9 years old, were new patients, although some were review patients. In addition, some of the children seen towards the end of the year may still be awaiting diagnosis and so the figure of 909 may increase. A video explaining the data can be found [here](#).



Because of high diagnosis rates, in 2017/18 there was a review of the ASD Diagnostic Pathway to ensure that the thresholds were being appropriately applied, the pathway complied with the NICE guidance and that it supported the EHCP process across clinical teams. Going forward we need to review the effective implementation of the revised pathway.

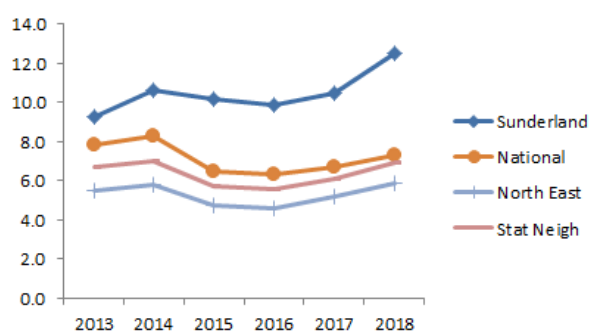
In addition, Sunderland University recommends that the Council reviews all recording and tracking procedures for these children with autism to ensure their needs are optimally met. The local offer should include service provision, quality information, guidance and signposting to support children and families (Recommendation 4).

Pupils on roll in Sunderland schools

At 12.5%, Sunderland has a high rate of children with ASD on the roll of primary schools, compared to 7.3% nationally, 6.9% for statistical neighbours and 5.9% across the North East. Sunderland's rate has steadily increased over the five year period from 2013, and is 3.2 percentage points higher in 2018, while the comparator rates show fluctuations over the same period with small changes of up to 0.5%.

% Pupils on Roll in Primary School with Autism

	2013	2014	2015	2016	2017	2018
Sunderland	9.3	10.6	10.2	9.9	10.5	12.5
National	7.8	8.3	6.5	6.3	6.7	7.3
North East	5.5	5.8	4.7	4.6	5.2	5.9
Stat Neigh	6.7	7.0	5.7	5.6	6.1	6.9



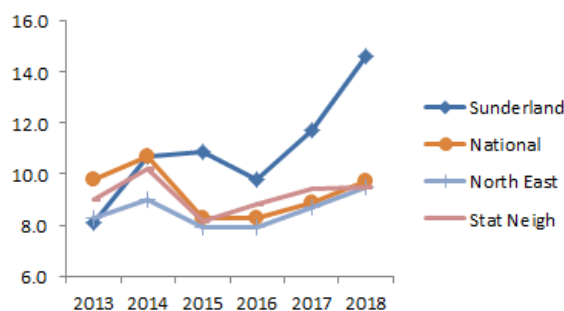
Sunderland University recommends that the Council to take note of the high prevalence rate of ASD diagnoses in children currently in KS2, to provision plan as they progress through education into KS3. This will require an audit of teachers' knowledge and understanding of the indicators and evidence based practice related to approaches to learning in meeting the needs of children identified with ASD (Recommendation 26)

The percentage of secondary school pupils with ASD has increased from 8.1% in 2013 to 14.6% in 2018, well above all comparators by around 5 percentage points. Whilst Sunderland saw a 6.5 percentage point increase between 2013 and 2018, the north east

saw a 1.2 percentage point rise, statistical neighbours a 0.5 percentage point rise and national actually dropped 0.1 percentage point.

% Pupils on Roll in Secondary School with Autism

	2013	2014	2015	2016	2017	2018
Sunderland	8.1	10.7	10.9	9.8	11.7	14.6
National	9.8	10.7	8.3	8.3	8.9	9.7
North East	8.3	9.0	7.9	7.9	8.7	9.5
Stat Neigh	9.0	10.2	8.2	8.8	9.4	9.5

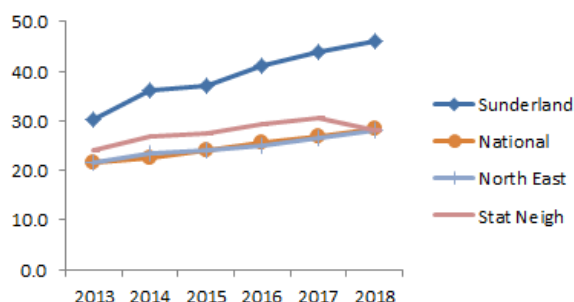


Special schools

Across our special schools, the proportion of children with autism increased from 30.1% to 46.1% over a six year period, that is a 16 percentage point increase. We remain highest by far compared to our north east and statistical neighbours, who are closer to the national rate and saw only small increases by comparison.

% Pupils on Roll in Special School with Autism

	2013	2014	2015	2016	2017	2018
Sunderland	30.1	36.2	37.2	41.0	44.0	46.1
National	21.5	22.5	24.0	25.6	26.9	28.5
North East	21.7	23.5	23.9	24.9	26.5	28.2
Stat Neigh	24.0	26.9	27.6	29.3	30.5	28.2



MEETING NEED

Schools

There are two special schools in Sunderland:

- Columbia Grange School for children aged 3-11 with severe learning difficulties and/or an autism spectrum disorder
- Barbara Priestman Academy for young people aged 11-19 with ASD and complex learning difficulties.

There are also resourced provisions attached to the following mainstream schools for pupils with autism spectrum conditions:

- Biddick Academy
- Farringdon Community Academy
- Usworth Colliery Primary School.

We work very hard in Sunderland to ensure the needs of children and young people can be met in mainstream schools, whilst maintaining an appropriate special school offer. However in that last five years we have seen a significant shift in parents' preference for specialist provision. This, coupled with the increasing numbers of children and young people being diagnosed with autism, has led to the decision to build a new **Free School for Autism**. The

new school will provide an additional 96 specialist places for children aged 5 -16 with Autism Spectrum Conditions. The school is scheduled to open in September 2020.

Sunderland University recommends that because of the high number of children identified with ASD the Council should review all provision for children identified with ASD to inform future planning and CPD needs of staff over the next 5 years (Recommendation 11). The building of a new school goes some way to ensuring adequate provision, but further work will be undertaken to review provision at other sites and to deliver appropriate CPD.

The University research also recommends that additional analysis is conducted into where there needs to be additional provision particularly in terms of nursery and school placements and where the children and young people reside. This should inform capacity building within the Autism Outreach Team. The local offer needs to be reviewed to ensure it effectively signposts families to support and services (Recommendation 27).

Autism Outreach Team

The Autism Outreach Team (AOT), has been operating since 2005 when it provided support for 342 pupils. This number has steadily grown and in 2017 it supported 1,528 pupils - an increase of around 450%. With ever-increasing demand in this area, new ways of delivering support need to be designed without compromising quality. To that end, it is proposed that all schools identify an Autism Champion to work closely with the AOT and we will provide training to enable this.

Actions

- Integrated therapies to be delivered from the newly established free school for children and young people with autism spectrum conditions to ensure that more children remain in the city than move out, to out of city placements
- Fully implement and review the new ASD diagnostic pathway
- Establish Autism Champions in every school
- Together for Children to review all recording and tracking procedures for children with ASD to ensure their needs are optimally met (Recommendation 4).
- The local offer should include service provision, quality information, guidance and signposting to support children with ASD and their families (Recommendation 4).
- Review all provision for children identified with ASD to inform future planning and CPD needs of staff over the next 5 years (Recommendation 11).
- Take note of the high prevalence rate of ASD diagnoses in children currently in KS2, to provision plan as they progress through education into KS3. This will require an audit of teachers' knowledge and understanding of the indicators and evidence based practice related to approaches to learning in meeting the needs of children identified with ASD (Recommendation 26).
- Conduct additional analysis into where there needs to be additional provision particularly in terms of nursery and school placements and where the children and young people reside, this should inform capacity building within the Autism Outreach Team. The local offer needs to be reviewed to ensure it effectively signposts families to support and services (Recommendation 27).

SPEECH, LANGUAGE & COMMUNICATION NEEDS

Children and young people with speech, language and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives.

Prevalence

The points below are the estimates from [Communications Trust](#) in relation to the prevalence of Speech, Language and Communication Needs, with the number we could expect to see in Sunderland – based on January 2018 population estimates – shown in brackets:

- 50% of children in areas of social disadvantage start school with a language delay;
- 7% (4,023) of children aged 0-19 will have a speech and language impairment.
- At least 3% (1,724) of children and young people aged 0-19 will have speech, language and communications needs linked with other impairments e.g. ASD, Specific Learning Difficulties.

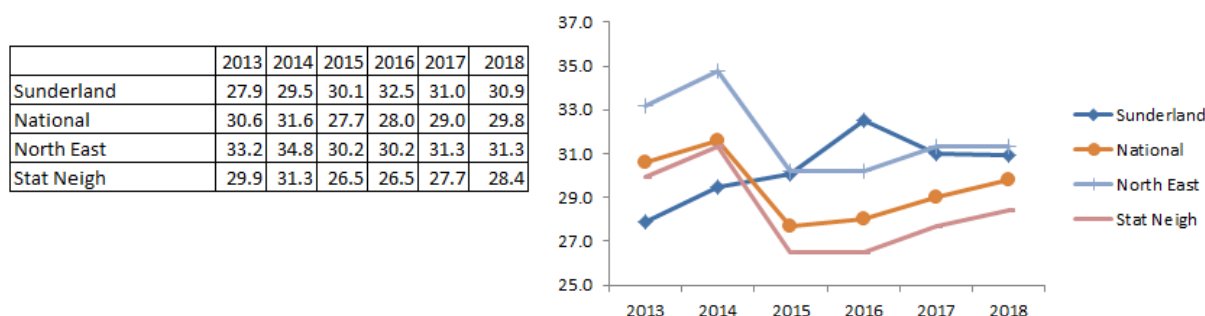
There are actually only 1,260 children on roll in a Sunderland school with SLCN identified as a primary need. This is well below what the Communications Trust estimate, but is fairly close to comparator rates.

The rates of identification for SLCN have stayed fairly constant over the last 5 years and this remains the third most prevalent primary need of children identified with SEND in Sunderland.

Pupils on roll in Sunderland schools

There has been a steady increase in rates of children with SLCN on roll at primary schools in the city. Sunderland is now higher than the national and statistical neighbour averages but slightly lower than the regional average; all comparators have seen a decline in numbers on roll in the last 5 years.

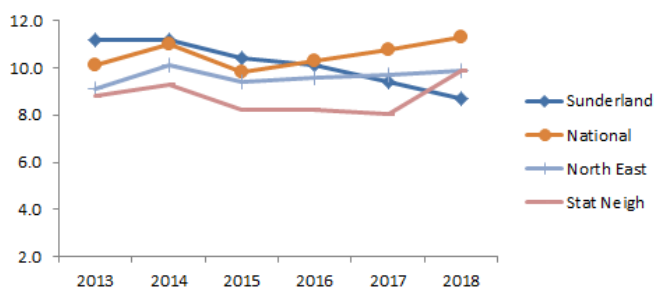
% Pupils on Roll in Primary School with a Speech, Language & Communication Need



There was a reduction in the rates of young people attending secondary schools with a SLCN from 11.2% in 2013 to 8.7% in 2018. Sunderland is lower than the national, regional and statistical neighbour averages, all of whom have seen a steady increase in numbers.

% Pupils on Roll in Secondary School with a Speech, Language & Communication Need

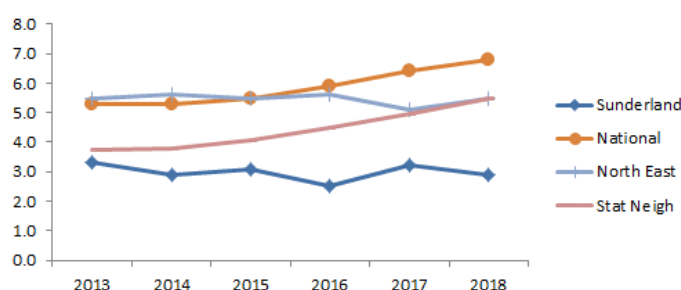
	2013	2014	2015	2016	2017	2018
Sunderland	11.2	11.2	10.4	10.1	9.4	8.7
National	10.1	11.0	9.8	10.3	10.8	11.3
North East	9.1	10.1	9.4	9.6	9.7	9.9
Stat Neigh	8.8	9.3	8.2	8.2	8.1	9.9



Children and young people in Sunderland special schools with SLCN as a primary need has been consistently low between 2013 and 2018 and rates are significantly lower than regional (5.5%), statistical neighbours (5.5%) and national (6.8%) averages.

% Pupils on Roll in Special School with a Speech, Language & Communication Need

	2013	2014	2015	2016	2017	2018
Sunderland	3.3	2.9	3.1	2.5	3.2	2.9
National	5.3	5.3	5.5	5.9	6.4	6.8
North East	5.5	5.6	5.5	5.6	5.1	5.5
Stat Neigh	3.7	3.8	4.1	4.5	4.9	5.5



The number of children identified with SLCN significantly reduces between primary and secondary school. This is likely to be as a result of the formal and full-time nature of the learning environment in Key Stage 1 accelerating children's language skills. The research conducted by the University of Sunderland in 2017 recognised a "dramatic reduction" in rate of identification between Year 1 and Year 6, by Year 7 only 1.69% of all children in Sunderland are identified with SLCN which indicates that the early years and early primary age phases are effectively supporting children in developing age-appropriate speech, language and communication skills. The research recommends, however, that an exercise be undertaken to understand the availability and quality of non-formal educational provision in the early years, across communities in Sunderland, to ensure that children are being supported to develop age-appropriate language and communication skills before entering formal, full-time education.

MEETING NEED

Schools

There are four specialist language units in Sunderland schools:

- Highfield Community Primary School – 10 places
- Northern Saints Primary School – 10 places
- New Penshaw Academy – 10 places
- Hetton School – 10 places.

Current practice is to conduct an assessment of a child or young person's needs after they have taken up their place at a specialist language unit. In many cases, assessments determine that SLCN is not the primary need. To ensure that this specialist resourced

provision is being used to maximum effect, services must work with the child or young person, family and host school to carry out a full cognitive assessment before placement in a specialist Speech and Language provision.

Speech and Language Therapy Service

The table below sets out the total numbers of contact by Sunderland SALT Service with children (across inpatient and outpatient and community settings)

	<u>2015/16</u>	<u>2016/17</u>	<u>2017/18</u>
New referral contacts	1683	1735	1687
Review/regular therapy contacts	15174	14795	14223
<u>TOTAL</u>	<u>16857</u>	<u>16530</u>	<u>15910</u>

There is some variation as a result of fluctuations in staffing levels and also changes in complexity of clients.

Early Help Service

The Early Help Service promotes the 2-year old early education offer to families to ensure that disadvantaged children can access nursery at an earlier stage; this will allow them to access effective speech and language provision as early as possible. To increase the proportion of 2-year olds accessing early education, TfC is developing social media messages with a local tech company, Geek Talent, and linking this with support for parents, with a particular focus on helping parents return to the labour market.

Training

Health Visitors and early years settings will be offered access to training from the Early Years Team and specialist Speech and Language Therapists, to identify need, where appropriate. This is in keeping with the city's early help ethos and will allow schools to improve the outcomes for even more children at the end of the EYFS.

Actions

- To provide training to nurseries, playgroup leaders, parents and carers, in collaboration with speech and language therapists, on how to create language rich environments (Recommendation 13)
- Together for Children to undertake a geographical mapping exercise of the children on the SEN register with a primary need of SLCN, to locate their local community and identify links between the level of need and the services available in their area through the local offer. This would better inform forward planning and early intervention to reduce the high levels of prevalence on entry into formal education (Recommendation 9).
- Revise current practice so that young people taking up a place at a specialist Speech and Language provision have a full assessment of their needs to ensure that SLCN is their primary need.
- Offer Health Visitors and early years settings access to training from the Early Years Team and specialist Speech and Language Therapists, to identify need.

COGNITION AND LEARNING

Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation. Learning disabilities cover a wide range of needs, including: Specific Learning Difficulties such as Dyslexia, Dyspraxia, Dyscalculia; Moderate Learning Difficulties (MLD); Severe Learning Difficulties (SLD), through to Profound and Multiple Learning Disabilities (PMLD), where children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment.

SPECIFIC LEARNING DIFFICULTIES

Prevalence

Examples of Specific Learning Difficulties are Dyslexia, Dyspraxia and Dyscalculia

- Dyslexia is thought to affect around 10% of the population, 4% severely
- Dyspraxia is thought to affect around 10% of the population, 4% moderately and 2% severely
- Dyscalculia is thought to affect around 6% of the population
(<https://www.bdadyslexia.org.uk/educator/what-are-specific-learning-difficulties>)
(<https://www.understood.org/en/learning-attention-issues/child-learning-disabilities/dyspraxia/dyspraxia-by-the-numbers>)
<http://www.aboutdyscalculia.org/>

Based on these estimates we could expect to see:

- 8,313 children and young people and adults aged 0-25 with Dyslexia, 3,325 of these severely affected
- 4,250 children and young people (nursery through to Year 11) with Dyslexia, 1,700 of these severely affected
- 8,313 children and young people with Dyspraxia, 3,325 of these moderately affected and 1,662 severely affected
- 4,250 children and young people (nursery through to Year 11) with Dyspraxia, 1,700 of these moderately affected and 850 severely affected
- 4987 children and young people and adults aged 0-25 with Dyscalculia and 2,543 of statutory school age

Research by University of Sunderland found that, based on estimates made by the Driver Youth Trust, Sunderland presents with a significant under-identification of SpLD. They found that in 2017, 10.32% of children and young people were receiving support in schools for Specific Learning Difficulties. This compares with 15.6% of children and young people nationally representing a 5.28 percentage point gap.

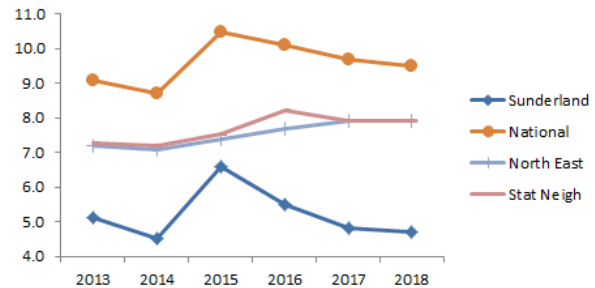
The recommendation in the research report (Martin-Denham, et al. 2017) was for Together for Children to work closely with nursery/school leaders and SENCOs to ensure that all children with SpLD have their needs assessed and identified by an Educational Psychologist or other trained professional (Recommendation 5). In addition, Together for Children should respond to the under identification of SpLD by evaluating the effectiveness or impact of arrangements for identifying and assessing the needs of specific groups of children and young people with SpLD across provision in Sunderland. This will require the provision of school based training on neurodiversity (Recommendation 6).

Pupils on roll in Sunderland schools

In 2018, 4.7% of the children in primary schools were identified as having a specific learning difficulty. This is a fall from 5.1% in 2013. Sunderland is significantly lower than the north east average of 7.9%, national average of 9.5% and statistical neighbour average of 7.9%.

% Pupils on Roll in Primary School with a Specific Learning Difficulty

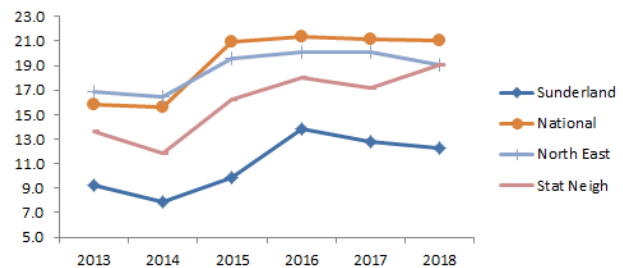
	2013	2014	2015	2016	2017	2018
Sunderland	5.1	4.5	6.6	5.5	4.8	4.7
National	9.1	8.7	10.5	10.1	9.7	9.5
North East	7.2	7.1	7.4	7.7	7.9	7.9
Stat Neigh	7.3	7.2	7.5	8.2	7.9	7.9



In secondary schools, there has been an increase in pupils with Specific Learning Difficulties between 2013 and 2018 from 9.2% to 12.3% and as with primary schools, Sunderland is significantly lower than the north east, regional, national and statistical neighbour averages.

% Pupils on Roll in Secondary School with a Specific Learning Difficulty

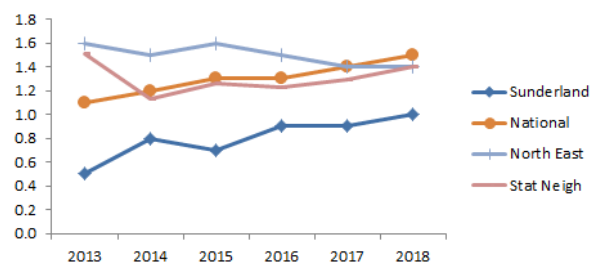
	2013	2014	2015	2016	2017	2018
Sunderland	9.2	7.9	9.9	13.8	12.8	12.3
National	15.8	15.6	20.9	21.4	21.1	21
North East	16.9	16.5	19.6	20.1	20.1	19.1
Stat Neigh	13.7	11.9	16.3	18.0	17.1	19.1



There are very few children and young people with Specific Learning Difficulties in special schools - the needs of children and young people with this condition are largely met in mainstream schools. Across special schools in Sunderland, the rate increased slightly from 0.5% in 2013 to 1% in 2018, and we are broadly in line with regional, national and statistical neighbours.

% Pupils on Roll in Special School with a Specific Learning Difficulty

	2013	2014	2015	2016	2017	2018
Sunderland	0.5	0.8	0.7	0.9	0.9	1
National	1.1	1.2	1.3	1.3	1.4	1.5
North East	1.6	1.5	1.6	1.5	1.4	1.4
Stat Neigh	1.5	1.1	1.3	1.2	1.3	1.4



MEETING NEED

Schools

There is no special or resourced provision in mainstream schools for Specific Learning Difficulties. Children and young people do, by and large, attend their local school and their needs are met here through schools own SEN provision.

Actions

- Together for Children to work closely with nursery/school leaders and SENCOs to ensure that all children with SpLD have their needs assessed and identified by an Educational Psychologist or other trained professional (Recommendation 5).
- Together for Children to respond to the under identification of SpLD by evaluating the effectiveness or impact of arrangements for identifying and assessing the needs of specific groups of children and young people with SpLD across provision in the City. This will require the provision of school based training on neurodiversity (Recommendation 6).

OTHER LEARNING DIFFICULTIES

The SEN Code of Practice 2015 separates Learning Difficulties into categories, depending on their severity and complexity. These are Moderate Learning Disabilities, Severe Learning Disabilities and Profound and Multiple Learning Disabilities.

Prevalence data is set out below and this is followed by separate sections in relation to the learning disabilities outlined above, including local data, services and commissioning intentions/actions.

Prevalence

The Foundation for People with Learning Disabilities estimates:

<https://www.mentalhealth.org.uk/learning-disabilities/help-information/learning-disability-statistics-/187687>

- there are 286,000 children (180,000 boys, 106,000 girls) age 0-17 in the UK with a learning disability (based on current figures this would be approximately 2% of the population).
- Approximately 200,000 children in England are at the School Action Plus stage of assessment of SEN or have a Statement of SEN and have a primary Special Educational Need (SEN) [sic] associated with a learning disability. Of these, four out of five have a moderate learning difficulty, one in twenty have profound multiple learning difficulties.
- 89% of children with moderate learning difficulty, 24% of children with severe learning difficulty and 18% of children with profound multiple learning difficulty are educated in mainstream schools (Source: [People with Learning Disabilities in England 2011](#))

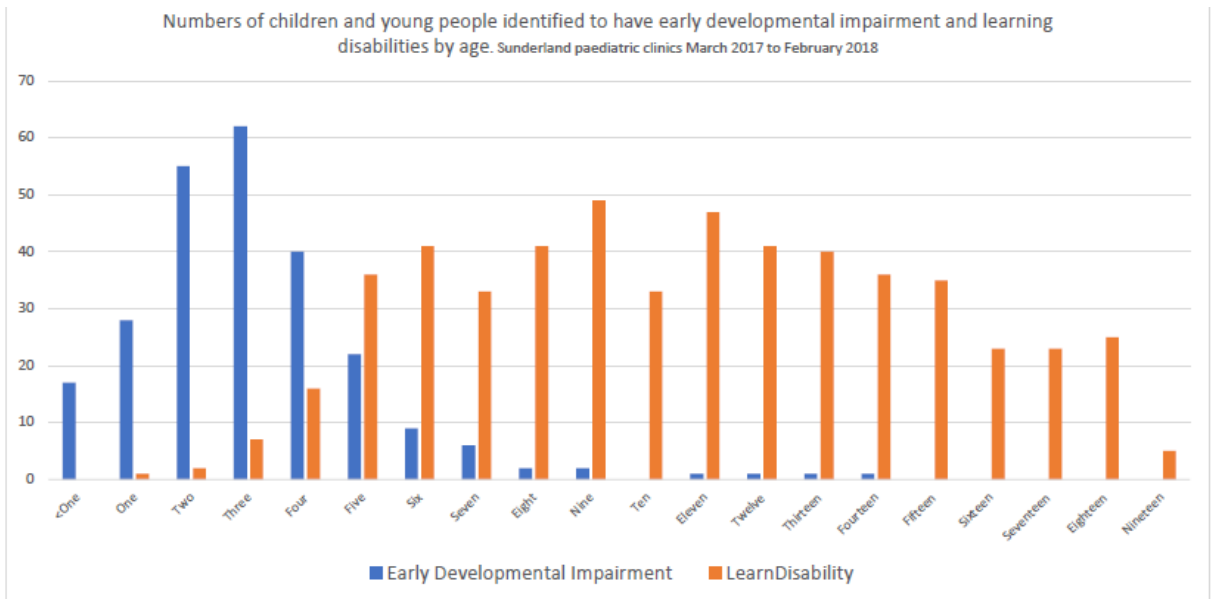
Using these figures, based on current population estimates, we could expect to see

- 1,089 children and young people in Sunderland aged 0-17 with a learning disability
- 923 children at statutory school age with a primary need of learning disabilities, 746 of whom will have a Moderate Learning Disability and 46 with a Profound and Multiple Learning Disability

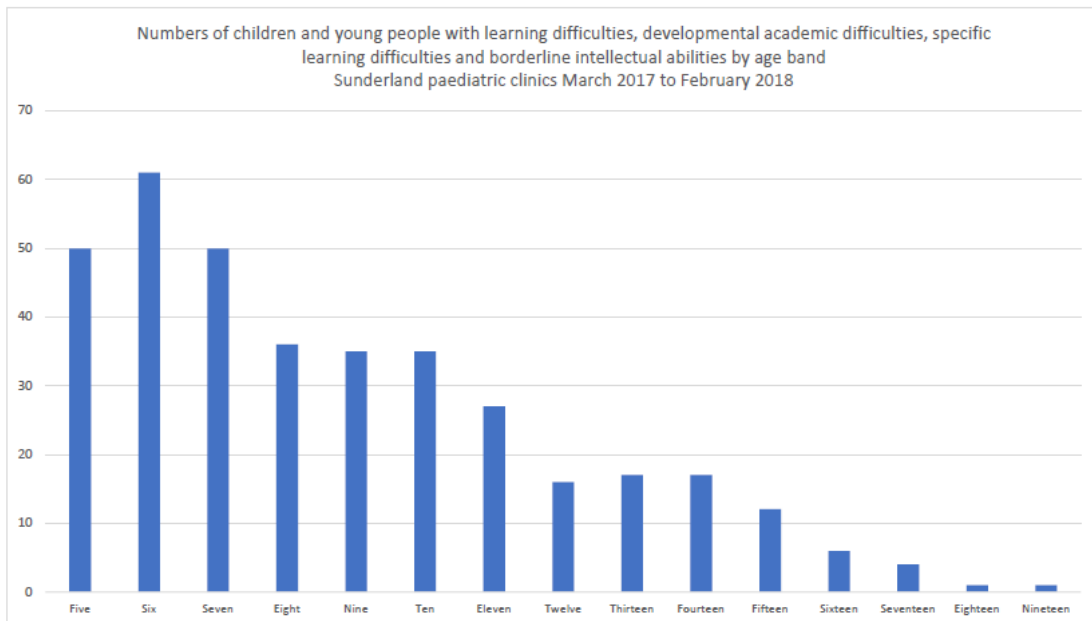
The actual figures are:

- 1442 children and young people in Sunderland with a Moderate Learning Disability
- 195 children and young people in Sunderland with a Severe Learning Disability
- 43 children and young people in Sunderland with a Profound and Multiple Learning Disability.

Of the 4680 children and young people seen in Sunderland paediatric consultations between March 2017 and February 2018, 780 (16.7%) were identified to have early developmental impairment (a term that is supposed to be reserved for those under four years of age, when it is not possible to be confident about identification of learning disability) or a learning disability. Of these, 247 were described to have early developmental impairment and 534 as having a learning disability.



There were 2905 children and young people aged 5 to 19 years old seen in Sunderland paediatric consultations between March 2017 and February 2018. Of these, 369 (12.7%) were recorded as having learning difficulties, developmental academic difficulties, specific learning difficulties or borderline intellectual abilities.



More information and an explanation of the data for children and young people with learning disabilities seen in paediatrics clinics in the city between March 2017 and February 2018 can be found [here](#).

MODERATE LEARNING DISABILITIES

MLD remains the most prevalent SEND in Sunderland. However research by Sunderland University found that there has been a notable decrease in the prevalence of Moderate Learning Difficulties (MLD) across Sunderland, falling from 7.68% in 2013 to 4.37% in 2017, as a percentage of all children educated in Sunderland. It is expected that as a primary need this will continue to decrease in prevalence. Nevertheless, one of the recommendations from the research was for Together for Children to examine with SENCOs their knowledge and understanding of Moderate Learning Difficulties and to use this information to plan CPD to support educational contexts in accurate identification to meet the needs of children and young people with MLD (Recommendation 1).

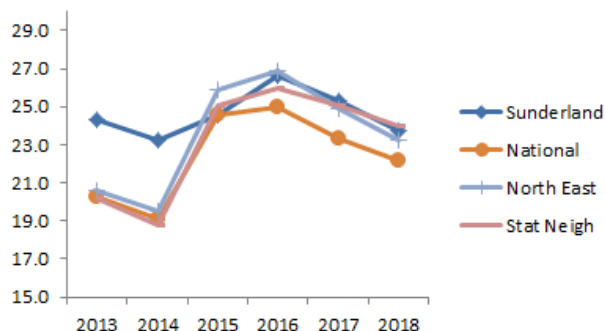
The research also recommends that random audit of children and young people identified with MLD is carried out, not only to understand the range of needs within the sample, but to assess the accuracy of the identification (Recommendation 2).

Pupils on roll in Sunderland schools

In primary schools, the rate has fallen from 24.3% in 2013 to 23.7% in 2018 and is broadly in line with comparators.

% Pupils on Roll in Primary School with a Moderate Learning Difficulty

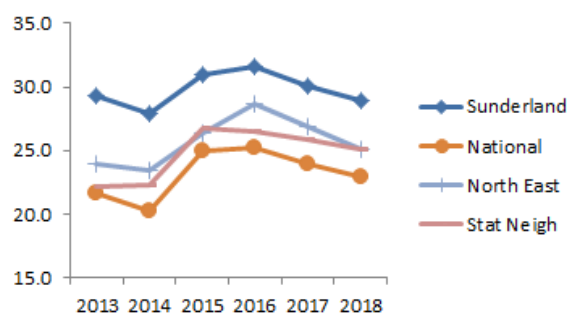
	2013	2014	2015	2016	2017	2018
Sunderland	24.3	23.2	24.6	26.6	25.3	23.7
National	20.3	19.1	24.6	25.0	23.3	22.2
North East	20.6	19.5	25.9	26.9	24.9	23.2
Stat Neigh	20.1	18.8	25.1	26.0	25.1	24



Across secondary schools there was a decrease from 29.3% in 2013 to 28.9% in 2018, though Sunderland is still higher than all comparators.

% Pupils on Roll in Secondary School with a Moderate Learning Difficulty

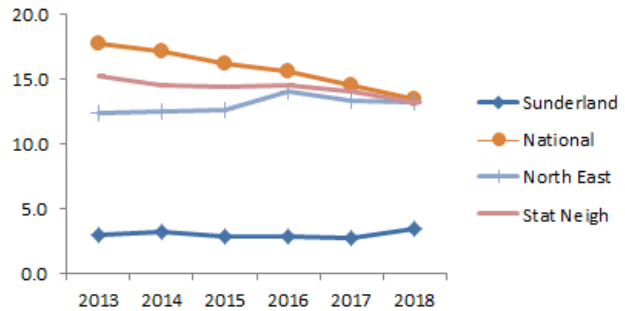
	2013	2014	2015	2016	2017	2018
Sunderland	29.3	27.9	30.9	31.6	30.1	28.9
National	21.6	20.3	24.9	25.2	24.0	22.9
North East	24.0	23.4	26.4	28.6	26.9	25.1
Stat Neigh	22.1	22.3	26.7	26.5	25.9	25.1



Sunderland has an exceptionally low rate of children and young people with MLD attending special schools. The majority of children and young people have their needs met in the mainstream sector. In 2018, there was a slight increase to 3.4% compared to 2.9% in 2013, although this is significantly lower than all comparators.

% Pupils on Roll in Special School with a Moderate Learning Difficulty

	2013	2014	2015	2016	2017	2018
Sunderland	2.9	3.2	2.8	2.8	2.7	3.4
National	17.8	17.2	16.2	15.6	14.5	13.5
North East	12.4	12.5	12.6	14.0	13.3	13.2
Stat Neigh	15.3	14.5	14.4	14.6	14.1	13.2



MEETING NEED

Schools

There is no special or resourced provision in mainstream schools for Moderate Learning Difficulties. Children and young people do, by and large, attend their local school and their needs are met here through schools own SEN provision.

Language and Learning Partnership

The Language and Learning Partnership (LLP) is a joint intervention service between health and education that aims to meet the identified language and learning needs of children across Sunderland who are experiencing difficulty accessing learning within mainstream settings. This can include children with MLD. The LLP is managed by Sunningdale School and a multi-agency strategic group is in place to oversee activity.

Actions:

- Work with SENCOs to examine their knowledge and understanding of Moderate Learning Difficulties and to use this information to plan CPD to support educational contexts in accurate assessment and identification to meet the needs of children and young people with MLD (Recommendation 1)
- Carry out a random audit of children and young people identified with MLD to understand the range of needs within the sample and to assess the accuracy of the identification (Recommendation 2).

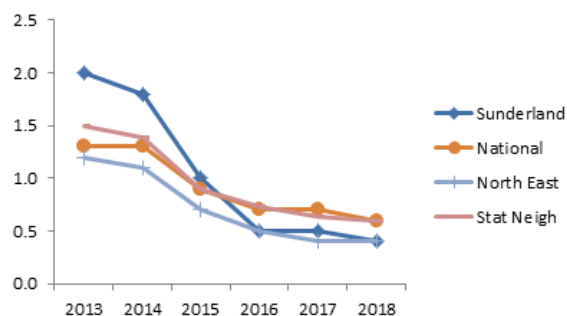
SEVERE LEARNING DIFFICULTIES

Pupils on roll in Sunderland schools

As can be seen in the charts below, very few children and young people with SLD attend mainstream schools and that rate has fallen in the six years to 2018.

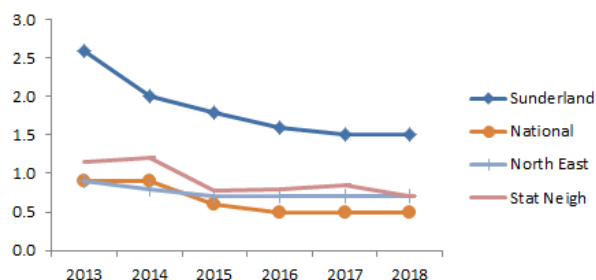
% Pupils on Roll in Primary School with a Severe Learning Difficulty

	2013	2014	2015	2016	2017	2018
Sunderland	2.0	1.8	1.0	0.5	0.5	0.4
National	1.3	1.3	0.9	0.7	0.7	0.6
North East	1.2	1.1	0.7	0.5	0.4	0.4
Stat Neigh	1.5	1.4	0.9	0.7	0.6	0.6



% Pupils on Roll in Secondary School with a Severe Learning Difficulty

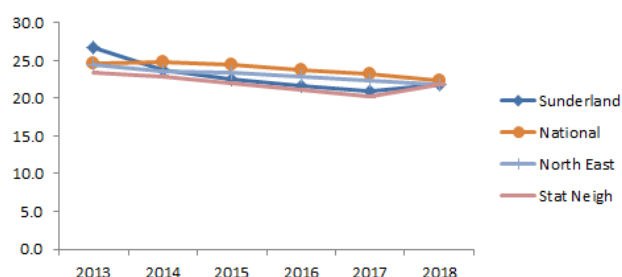
	2013	2014	2015	2016	2017	2018
Sunderland	2.6	2.0	1.8	1.6	1.5	1.5
National	0.9	0.9	0.6	0.5	0.5	0.5
North East	0.9	0.8	0.7	0.7	0.7	0.7
Stat Neigh	1.2	1.2	0.8	0.8	0.8	0.7



Across special schools, there was a reduction from 26.8% in 2013 to 21.9% in 2018, although this is higher than regional and statistical neighbours but lower than national.

% Pupils on Roll in Special School with a Severe Learning Difficulty

	2013	2014	2015	2016	2017	2018
Sunderland	26.8	23.7	22.6	21.6	21.0	21.9
National	24.7	24.8	24.4	23.8	23.2	22.4
North East	24.4	23.6	23.4	22.8	22.3	21.8
Stat Neigh	23.4	22.8	22.0	21.1	20.2	21.8



MEETING NEED

Schools

There are two special schools in Sunderland that cater for children and young people with severe learning difficulties:

- Sunningdale School 2-11 Children with profound and multiple learning difficulties and severe learning difficulties (110 places)
- Portland Academy 11-19 Children with severe learning difficulties.

In addition, there are two Curriculum Access Provisions (CAP) at:

- Academy 360
- Washington School

Continued review of commissioned places is carried out on an annual basis to ensure that we have the capacity to meet need. A review of curriculum delivery is being carried out between Academy 360 and Washington School to ensure consistency of approach between settings.

Actions

- To act upon the findings of the review of curriculum delivery being carried out by Academy 360 and Washington School.

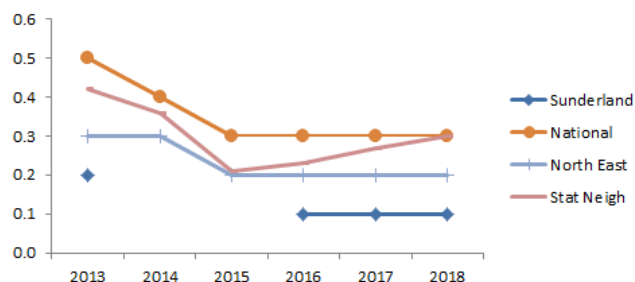
PROFOUND AND MULTIPLE LEARNING DIFFICULTIES

Pupils on roll in Sunderland schools

As can be seen in the charts below, very few children and young people with PMLD attend mainstream schools and that rate has fallen in the five years to 2018.

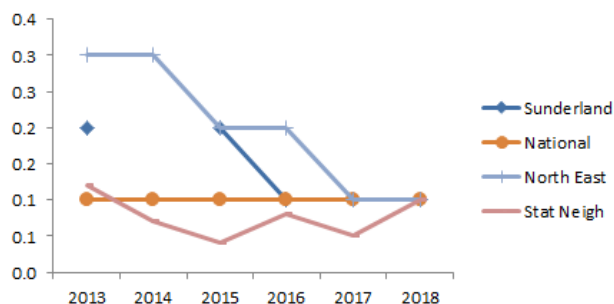
% Pupils on Roll in Primary School with a Profound & Multiple Learning Difficulty

	2013	2014	2015	2016	2017	2018
Sunderland	0.2			0.1	0.1	0.1
National	0.5	0.4	0.3	0.3	0.3	0.3
North East	0.3	0.3	0.2	0.2	0.2	0.2
Stat Neigh	0.4	0.4	0.2	0.2	0.3	0.3



% Pupils on Roll in Secondary School with a Profound & Multiple Learning Difficulty

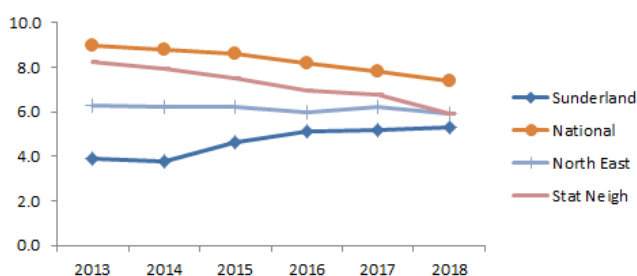
	2013	2014	2015	2016	2017	2018
Sunderland	0.2		0.2	0.1	0.1	0.1
National	0.1	0.1	0.1	0.1	0.1	0.1
North East	0.3	0.3	0.2	0.2	0.1	0.1
Stat Neigh	0.1	0.1	0.0	0.1	0.1	0.1



The rate across special schools in Sunderland has increased from 3.9% in 2013 to 5.3% in 2018, although still lower than regional, national and statistical neighbours.

% Pupils on Roll in Special School with a Profound & Multiple Learning Difficulty

	2013	2014	2015	2016	2017	2018
Sunderland	3.9	3.8	4.6	5.1	5.2	5.3
National	9.0	8.8	8.6	8.2	7.8	7.4
North East	6.3	6.2	6.2	6.0	6.2	5.9
Stat Neigh	8.3	7.9	7.5	7.0	6.8	5.9



MEETING NEED

Schools

There are two special schools in Sunderland that cater for children and young people with profound and multiple learning difficulties:

- Sunningdale School 2-11 Children with profound and multiple learning difficulties and severe learning difficulties
- Portland Academy 11-19 Children with profound and multiple learning difficulties and severe learning difficulties

SOCIAL, EMOTIONAL & MENTAL HEALTH

Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.

It is important to address these issues as early as possible, as over half of mental health problems in adult life (excluding dementia) start by the age of 14 and 75% by the age of 18.

Prevalence

Approximately one in four children will have some form of mental health problem, 15% will have mild, early stage problems; 7% will have moderately severe problems; 2% will have complex and severe problems and less than 0.1% will have very serious problems.

Based on population estimates, we could reasonably expect to see:

- 20,782 children, young people and adults aged 0-25 and 10,600 of compulsory school age with some form of mental health problem at any one time
- 12,470 would have mild, early stage problems (6,360 compulsory school age)
- 5,820 would have moderately severe problems (2,300 compulsory school age)
- 1,660 would have complex and severe problems (850 compulsory school age)
- Less than 85 would have very serious problems (around 42 compulsory school age).

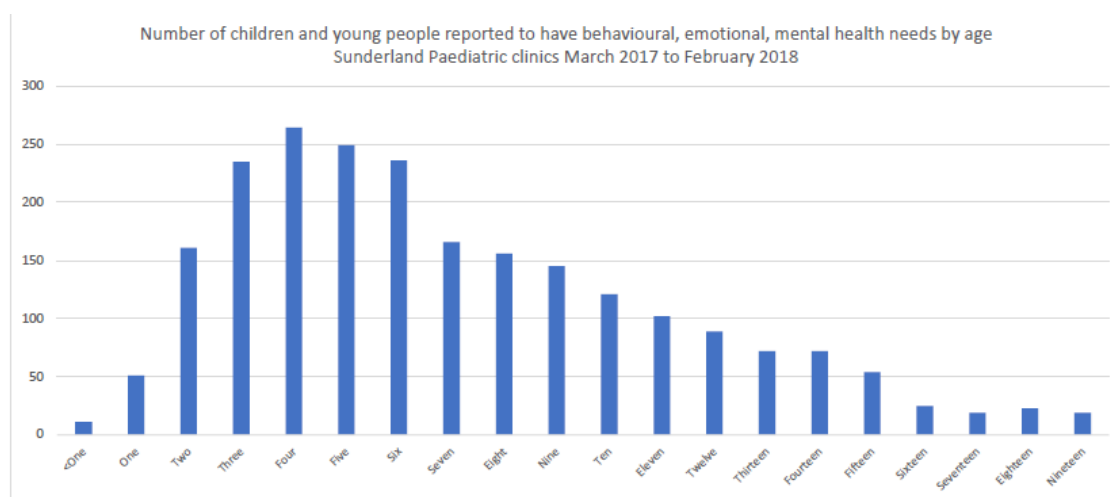
The NHS Digital report [Mental Health of Children and Young People in England, 2017](#), found that:

- One in eight (12.8%) 5 to 19 year olds had at least one mental disorder when assessed in 2017
- Specific mental disorders were grouped into four broad categories: emotional, behavioural, hyperactivity and other less common disorders. Emotional disorders were the most prevalent type of disorder experienced by 5 to 19 year olds in 2017 (8.1%)
- Rates of mental disorders increased with age. 5.5% of 2 to 4 year old children experienced a mental disorder, compared to 16.9% of 17 to 19 year olds. Caution is needed, however, when comparing rates between age groups due to differences in data collection. For example, teacher reports were available only for 5 to 16 year olds (full details can be found in the [Survey Design and Methods Report](#))
- Data from this survey series reveal a slight increase over time in the prevalence of mental disorder in 5 to 15 year olds (the age-group covered on all surveys in this series). Rising from 9.7% in 1999 and 10.1% in 2004, to 11.2% in 2017
- Emotional disorders have become more common in five to 15 year-olds – going from 4.3% in 1999 and 3.9% in 2004 to 5.8% in 2017. All other types of disorder, such as behavioural, hyperactivity and other less common disorders, have remained similar in prevalence for this age group since 1999

Locally, data from City Hospitals shows that out of the 4680 individual children and young people seen in the Paediatrics Unit between March 2017 and February 2018, 1581 (33.8%) children and young people were described as having needs in the areas of behaviours, emotions and mental health. Of these:

- 315 (19.9%) were described by the high-level term 'behavioural difficulties'

- 424 (26.8%) were described as displaying disruptive behaviours
- 1168 (73.9%) were described as having disorders of emotions, mood or anxieties
- 289 (18.3%) had disordered attention
- 79 (5%) had confirmed ADHD.
- 41 (2.6%) had tic disorders including Tourette’s Syndrome.
- 10 (0.6%) had eating disorders.
- 16 (1%) had depression
- 76 (4.8%) self-injured themselves
- 11 (0.7%) had been assessed to have insecure attachment.



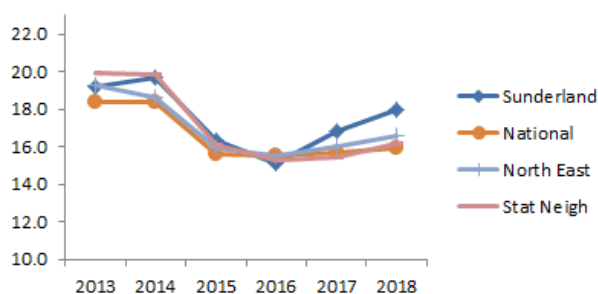
Pupils on roll in Sunderland schools

Research by University of Sunderland found that there was a particularly high prevalence of children identified with Social, Emotional and Mental Health difficulties in the city. Due to an increase in prevalence of SEMH between 2016 and 2017, and the fact that prevalence rates were 14.03% above the national average for children with an EHCP, it made a series of recommendations to Together for Children which are detailed in the “Action” section below.

The rate of children and young people with SEMH as a primary need on roll at a Sunderland primary school has reduced in the five years to 2018, though at a slightly slower pace than most areas in the region. Sunderland, at 18% has a slightly higher rate of young people in primary schools with SEMH than regional (16.6%), national (15.9%) and statistical neighbours (16.2%).

% Pupils on Roll in Primary School with Social & Emotional Needs

	2013	2014	2015	2016	2017	2018
Sunderland	19.2	19.7	16.3	15.1	16.8	18
National	18.4	18.4	15.6	15.5	15.7	15.9
North East	19.3	18.6	15.9	15.5	16.0	16.6
Stat Neigh	20.0	19.8	16.1	15.3	15.4	16.2

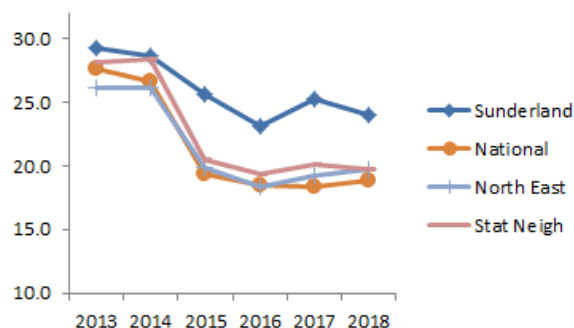


As in primary schools, the rate of children and young people on roll at a secondary school has reduced in the five years to 2018, though at a significantly slower pace than most areas

in the region. This means that Sunderland, at 24%, has a significantly higher rate of young people in secondary schools with SEMH than regional (19.7%), national (18.9%) and statistical neighbours (19.7%).

% Pupils on Roll in Secondary School with Social & Emotional Needs

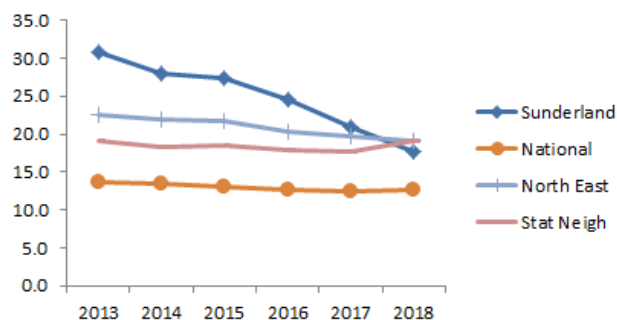
	2013	2014	2015	2016	2017	2018
Sunderland	29.3	28.7	25.6	23.1	25.2	24
National	27.7	26.7	19.3	18.5	18.4	18.9
North East	26.1	26.1	19.9	18.4	19.2	19.7
Stat Neigh	28.2	28.4	20.5	19.4	20.2	19.7



The rate across special schools in Sunderland has fallen significantly since 2013 to 17.6%, below regional and statistical neighbours, but still higher than national.

% Pupils on Roll in Special School with Social & Emotional Needs

	2013	2014	2015	2016	2017	2018
Sunderland	30.8	28.0	27.4	24.5	21.0	17.6
National	13.6	13.4	13.0	12.6	12.5	12.6
North East	22.6	21.9	21.8	20.4	19.7	19.1
Stat Neigh	19.0	18.4	18.5	18.0	17.7	19.1



More information regarding Sunderland paediatric clinic data, specifically in relation to behavioural and/or mental health needs can be found [here](#).

In response to the rising numbers of children and young people receiving special education support for SEMH difficulties, the University of Sunderland made a number of recommendations to ensure the needs of children and young people with SEMH were identified and met within the city, and those recommendations are set out in the Actions below.

MEETING NEED

Schools

There are two special schools in Sunderland that cater for children and young people with social, emotional and mental health difficulties:

- North View Academy 4-11 - Children with emotional and behavioural difficulties and/or an autism spectrum disorder
- The New Bridge Academy 11- 18 - Children with emotional and behavioural difficulties.

There are also a number of alternative provisions, as follows:

- Key stage 1 nurture provision – 12 part time places & 6 full time places
- Key Stage 2/3 Link school – 48 pupils
- Key Stage 4 Link School - 74 places.

Additional support for schools

Together for Children is working with all schools to support them in identifying children and young people presenting with SEMH as early as possible. As a result, we have:

- established a mental health lead role in a number of schools
- signed up to the Psychological Wellbeing Practitioner pilot
- established CAMH school cluster meetings
- developed a school charter mark for mental health in partnership with Sunderland Youth Parliament
- Youth Parliament has developed a mental health app to support children and young people who are experiencing mental health difficulties.

These areas of improvement must now be expanded to all schools across the city.

Furthermore, to support schools with SEN Support, the ELSA (Emotional Literacy Support Assistant) programme has been introduced in a small number of schools in Sunderland from October 2018. Seven schools have signed up in the first instance, with the hope that this can be rolled out across the city in the future, once it has been evaluated and lessons learned are implemented.

Mental Health Services

Community Child and Adolescent Mental Health Services (CAMHS)

This service is provided by South Tyneside NHS Foundation Trust and is jointly commissioned by Sunderland CCG and Sunderland City Council to provide evidence based therapeutic services for children, young people with moderate levels of mental health need and to increase the capacity of universal services to meet needs locally the mental health needs of children, young people and their families.

In the twelve months from November 2017 to October 2018 the CAHMS service received 1169 referrals, and delivered 3,873 contacts. There were 172 group sessions with 1096 attendances. These figures refer to all referrals. It is not currently possible to disaggregate those young people with SEND.

Children and Young People's Service (CYPS)

Sunderland CCG commissions Northumberland Tyne and Wear Mental Health Foundation Trust to deliver CYPS, which provides specialist emotional and mental health support to children, young people and their families (a full description of the support delivered is included in Section 10 of this document).

In the twelve months from November 2017 to October 2018 CYPS received 2506 referrals, of which 1990 were accepted into the service. These figures refer to all referrals. It is not currently possible to disaggregate those individuals with SEND.

The service continues to work with commissioners to address referral pressures, develop their model of care, improve access waiting times, improve flow through the service and support the high numbers of children and young people requiring urgent appointments.

CYPS provides the assessment pathway for a range of neuro developmental disorders such as ADHD (Attention Deficit Hyperactivity Disorder). The pathways for assessing these conditions are highly resource intensive, with 45% of service capacity resourcing the ADHD pathway. A recent review of this pathway has identified that over one third of children and young people referred to NTW CYPS for an assessment of ADHD did not receive a diagnosis of ADHD. Therefore the existing pathway has been subject of a multi-agency review, and in line with NICE guidelines, a new pathway has been proposed to ensure that children, young people and families are offered appropriate psychosocial support including parenting and school based social, emotional, behavioural and learning support in advance of assessment for ADHD.

Washington Mind

Washington Mind is a well-established and well respected organisation in Sunderland, working with young people aged 11-25 years who live in the city and who often experience a complex range of issues. Referrals are accepted from young people, families and professionals.

In the twelve months from November 2017 to October 2018 Washington Mind received 698 referrals, and delivered 2,002 contacts. These figures refer to all referrals. It is not currently possible to disaggregate those young people with SEND.

In order to be able to disaggregate the numbers of children and young people accessing commissioned mental health services, Sunderland CCG will improve their data collection and reporting systems.

It is also fair to note that there are challenges in relation to waiting times for mental health services across the piece, not just for children and young people with SEND, and the [Children and Young People's Mental Health and Wellbeing Transformational Plan 2015-2020](#) makes provision to address this issue.

Good practice

In January 2018, Sunderland CCG ran a mental health and emotional well-being conference to a wide range of practitioners to aide a better understanding of the CAMH system and the various tiers of support available from the different services.

Actions

- Due to an increase in prevalence of SEMH between 2016 and 2017, it is recommended that Together for Children supports a focus on early identification of SEMH and ensure that all educational settings in Sunderland are equipped to support children and young people with this primary need (Recommendation 3).
- For partners to review existing models of effective multi-agency working and explore means by which greater collaboration between clinical teams, educational psychologists, SENCos and CAMHS can work together to support early intervention in educational contexts, by identifying geographical and age related hotspots for SEMH difficulties (Recommendation 7)
- Together for Children to use the National Data to monitor the prevalence rates of SEMH in Sunderland to inform future service planning and CPD needs of educational contexts.
- Due to the high rate of SEMH prevalence in Year 11 at 6.03% of all children in Sunderland, the Council should analyse the number of children in education,

employment and training 16-18 years to identify the level of need and inform provision planning based on findings (Recommendation 8)

- Together for Children to further investigate and analyse the specific needs of children identified with SEMH in Sunderland and to develop, in conjunction with TaMHS, a good practice model for use in early years setting to address the range of SEMH needs. This would require appropriate staff training on identification for optimum implementation to occur (Recommendation 14).
- Identify a key person with responsibility for promoting multi-agency working between CYPS, Paediatricians and CAMHS, to undertake initial assessments of children presenting with Social, Emotional and Mental Health difficulties concurrently, wherever possible. This will ensure that needs are clearly understood and plans swiftly drawn up to meet them (Recommendation 19).
- Assess children and young people in a PRU context on entry, to ensure that their range of needs are identified early (Recommendation 22)
- Analyse whether some children taught in specialist/alternative provision could have their needs met in an inclusive mainstream environment through effective early identification and assessment of need and staff training (Recommendation 29)
- For the Council to expand their data set from broad area of need to primary and additional needs for the children and young people in a PRU. This should also include a chronology of each child and young person in terms of their particular difficulties and strategies used to support their SEMH needs and a reintegration to mainstream package(s). The City Council should consider the viability of the educational psychology service providing a psychological service across all PRU provision to facilitate effective integration into mainstream through person centred approaches (Lawrence, 2011). (Recommendation 33)
- Examine effective **alternative provision models** that support children and young people in achieving good educational and social outcomes over the next 5 years (Recommendation 34).
- For the Council to collate data on which educational contexts are excluding children and young people on fixed or permanent basis to carry out a debrief with these schools to analyse the factors leading to the exclusions. This would allow the Council to target training to support schools in addressing early signs of behavioural difficulties which lead to SEMH difficulties (Recommendation 35)
- Evaluate the success of the revised pathway for ADHD to understand whether it is having a positive impact of the appropriateness of referrals in to NTW CYPS.
- Roll out the Mental Health Lead Role in all schools
- Roll out the learning from the Psychological Wellbeing Practitioner pilot across the city
- Ensure CAMH school cluster meetings are established in every locality
- Roll out the school Charter Mark for Mental Health across the city.
- Roll out the learning and good practice elements of the ELSA programme across the city.
- CCG to develop systems to disaggregate data in relation to children and young people with SEND from overall CAMHS data.

SENSORY AND/OR PHYSICAL DIFFICULTIES

SENSORY IMPAIRMENT

Sensory impairment relates to disabilities with vision, hearing or both (multi-sensory).

Visual impairment prevalence

Research shows that while there are studies estimating prevalence of visual impairment in the older population there is very little data on younger age groups in the UK, including younger adults. The RNIB sight loss data tool estimates that in 2015:

- 49 per 100,000 children and young people aged 0-16 were blind, equating to 25 young people in Sunderland based on 2017 mid-year population estimates
- 149 per 100,000 children who are partially sighted, equating to 77 young people in Sunderland based on 2017 mid-year population estimates
- 46 per 100,000 young people aged 17-18 who are blind, equating to 3 young people in Sunderland based on 2017 mid-year population estimates
- 154 per 100,000 young people aged 17-18 who are partially sighted, equating to 9 young people in Sunderland based on 2017 mid-year population estimates
- 51 per 100,000 young people aged 19-25 who are blind, equating to 13 young people in Sunderland based on 2017 mid-year population estimates
- 152 per 100,000 young people aged 19-25 who are partially sighted, equating to 39 young people in Sunderland based on 2017 mid-year population estimates.

Prevalence in Sunderland

Of the 4680 children and young people seen in Sunderland paediatric consultations, 126 (2.7%) had a visual impairment. Of these:

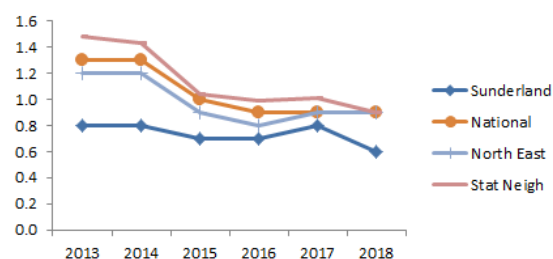
- 26 children and young people with vision impairments had cerebral vision impairments
- 8 children and young people had severe, bilateral vision impairments
- 12 children and young people had partial vision impairments.

Pupils on roll in Sunderland schools

The graphs below detail the numbers of children and young people on roll at a Sunderland school with a sensory impairment as their **primary need**. Many children and young people with sensory impairments also have other disabilities, and it is generally those disabilities that are recorded as the primary need. It needs to be recognised therefore that there are other children and young people in Sunderland who need support for sensory difficulties that are not reflected in these figures.

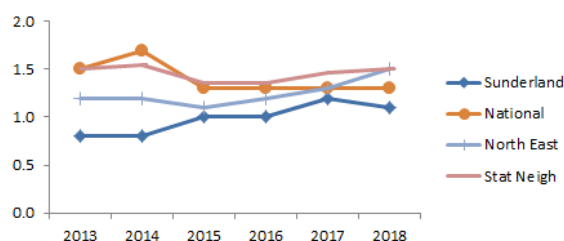
% Pupils on Roll in Primary School with a Visual Impairment

	2013	2014	2015	2016	2017	2018
Sunderland	0.8	0.8	0.7	0.7	0.8	0.6
National	1.3	1.3	1.0	0.9	0.9	0.9
North East	1.2	1.2	0.9	0.8	0.9	0.9
Stat Neigh	1.5	1.4	1.0	1.0	1.0	0.9



% Pupils on Roll in Secondary School with a Visual Impairment

	2013	2014	2015	2016	2017	2018
Sunderland	0.8	0.8	1.0	1.0	1.2	1.1
National	1.5	1.7	1.3	1.3	1.3	1.3
North East	1.2	1.2	1.1	1.2	1.3	1.5
Stat Neigh	1.5	1.5	1.4	1.4	1.5	1.5



No children or young people with a visual impairment attended a special school during 2013 to 2018.

Hearing Impairment prevalence:

The National Service Framework for Children estimates that prevalence of permanent hearing loss is nearly two per 1,000 children at age 9-16 years. In Sunderland this equates to around 45 children and young people.

The NHS Framework also states that one out of every 1,000 babies are born with permanent deafness or hearing impairment that significantly affects their language and social development. A further one per 1,000 have a deafness with some effect on language and social development. In Sunderland there were 278,000 live births in 2016, so we could expect 278 of these babies to be born deaf or with a significant hearing impairment and a further 278 to have deafness with some effect on language and social development.

The Consortium for Research into Deaf Education (CRIDE) survey for 2017 estimate that there are 3.5 children and young people (0-19) per 1,000 who are deaf (all levels of deafness). This equates to around 200 children and young people in Sunderland (based on 2017 mid-year population estimate).

Prevalence in Sunderland

Of 4680 children and young people seen in Sunderland paediatric consultations, 145 (3.1%) had hearing impairments. Of these:

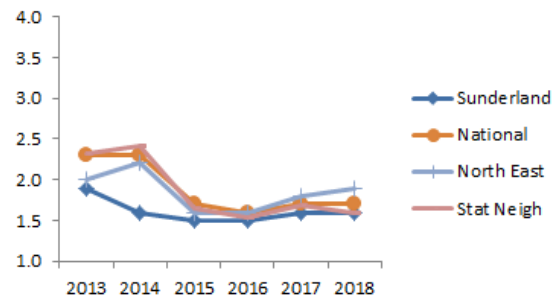
- 19 had profound hearing impairment, of whom 9 had cochlear implants and
- 8 used hearing aids.
- 12 children and young people had severe hearing impairment, all used hearing aids.
- 31 children and young people had mild or moderate hearing impairment, of whom 11/31 were recorded to use hearing aids.
- 68 children and young people were recorded to have conductive hearing impairments, of whom 16 were recorded to use hearing aids.

Pupils on roll in Sunderland schools

At primary level, Sunderland is lower than comparators at 1.6%.

% Pupils on Roll in Primary School with a Hearing Impairment

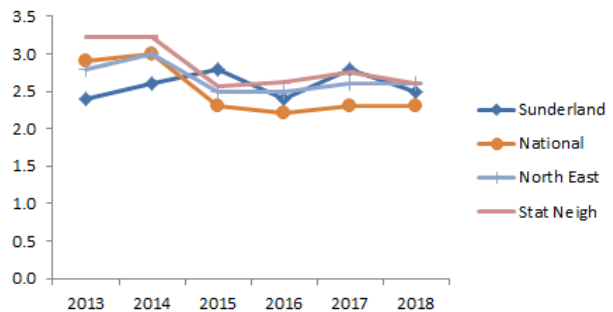
	2013	2014	2015	2016	2017	2018
Sunderland	1.9	1.6	1.5	1.5	1.6	1.6
National	2.3	2.3	1.7	1.6	1.7	1.7
North East	2.0	2.2	1.6	1.6	1.8	1.9
Stat Neigh	2.3	2.4	1.6	1.5	1.7	1.6



At secondary level, Sunderland is lower than regional and statistical neighbours at 2.5%, but higher than national.

% Pupils on Roll in Secondary School with a Hearing Impairment

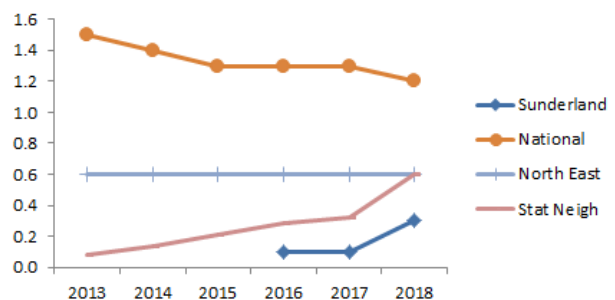
	2013	2014	2015	2016	2017	2018
Sunderland	2.4	2.6	2.8	2.4	2.8	2.5
National	2.9	3.0	2.3	2.2	2.3	2.3
North East	2.8	3.0	2.5	2.5	2.6	2.6
Stat Neigh	3.2	3.2	2.6	2.6	2.8	2.6



Within special schools in Sunderland, there are a small number of children with a hearing impairment, lower than all comparators, especially the national average.

% Pupils on Roll in Special School with a Hearing Impairment

	2013	2014	2015	2016	2017	2018
Sunderland				0.1	0.1	0.3
National	1.5	1.4	1.3	1.3	1.3	1.2
North East	0.6	0.6	0.6	0.6	0.6	0.6
Stat Neigh	0.1	0.1	0.2	0.3	0.3	0.6

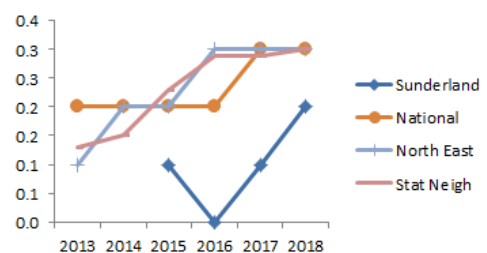


Multi-sensory impairment

Pupils on roll in Sunderland schools

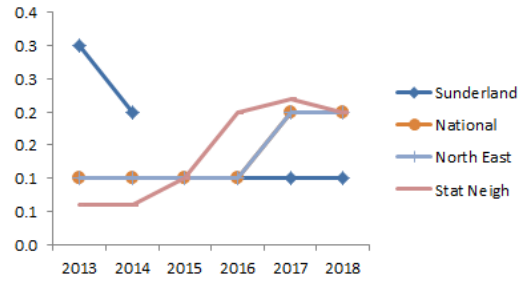
% Pupils on Roll in Primary School with a Multi-Sensory Impairment

	2013	2014	2015	2016	2017	2018
Sunderland			0.1	0.0	0.1	0.2
National	0.2	0.2	0.2	0.2	0.3	0.3
North East	0.1	0.2	0.2	0.3	0.3	0.3
Stat Neigh	0.1	0.2	0.2	0.3	0.3	0.3



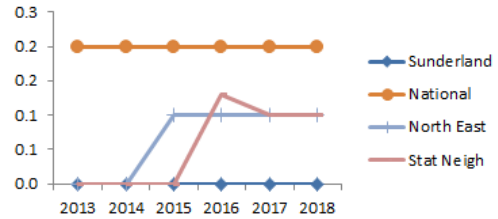
% Pupils on Roll in Secondary School with a Multi-Sensory Impairment

	2013	2014	2015	2016	2017	2018
Sunderland	0.3	0.2		0.1	0.1	0.1
National	0.1	0.1	0.1	0.1	0.2	0.2
North East	0.1	0.1	0.1	0.1	0.2	0.2
Stat Neigh	0.1	0.1	0.1	0.2	0.2	0.2



% Pupils on Roll in Special School with a Multi-Sensory Impairment

	2013	2014	2015	2016	2017	2018
Sunderland	0.0	0.0	0.0	0.0	0.0	0
National	0.2	0.2	0.2	0.2	0.2	0.2
North East	0.0	0.0	0.1	0.1	0.1	0.1
Stat Neigh	0.0	0.0	0.0	0.1	0.1	0.1



MEETING NEED

Schools

In Sunderland there are two schools with specialist resourced provisions for hearing impairment attached to them, these are:

- Thorney Close Primary School – 9 places
- Sandhill View School.

The numbers of children and young people accessing this provision has reduced significantly over the last four years. The majority of children and young people with hearing impairment attend mainstreams schools.

Currently we have no children with a visual impairment as their primary need in our specialist provision. All children with VI as a secondary or subsequent need are supported by the Children’s Sensory Team within their mainstream school, in line with the minimum quality standards. The Team have identified a number who require habilitation training which will take place in the home, education settings, public spaces and transitions between spaces. As a result the local area is looking to commission this service with effect from 1 September 2018 (the new academic year).

All children with MSI in Sunderland attend schools within the city.

Actions

Commission habilitation services for identified children and young people with VI.

PHYSICAL DISABILITY, LONG TERM AND LIFE LIMITING CONDITIONS

Prevalence

Disability

The Thomas Coram Research Unit (TCRU) estimates that the mean percentage of disabled children in English local authorities is between 3% and 5.4%. (1,826 – 3,286 based on 2016 mid-year population estimates),

Long Term conditions

Diabetes:

The national audit for paediatric diabetes (2015/16) gives an estimated prevalence of Type 1 diabetes in children and young people aged 0-15 of 3,114 per 100,000. This equates to 1,511 children and young people in Sunderland based on 2017 mid-year estimates.

Asthma:

The British Lung Foundation (2012) data gives the estimated prevalence of asthma in children and young people age 0-15 as:

- 3,114 per 100,000 in children aged 0-5, equating to 580 in Sunderland
- 10,079 per 100,000 in children aged 6-10, equating to 1572 in Sunderland
- 15,899 per 100,000 in children and young people aged 10-15, equating to 2273 in Sunderland.

Epilepsy:

Young Epilepsy estimated prevalence of Epilepsy in children aged 0-4 is 1 in 509 and 1 in 220 for children and young people aged 0-18. This equates to 30 and 261 children and young people in Sunderland.

Cerebral Palsy

The estimated prevalence of children and young people aged 0-17 with cerebral palsy is 2 per 1000, which equates to 109 in Sunderland.

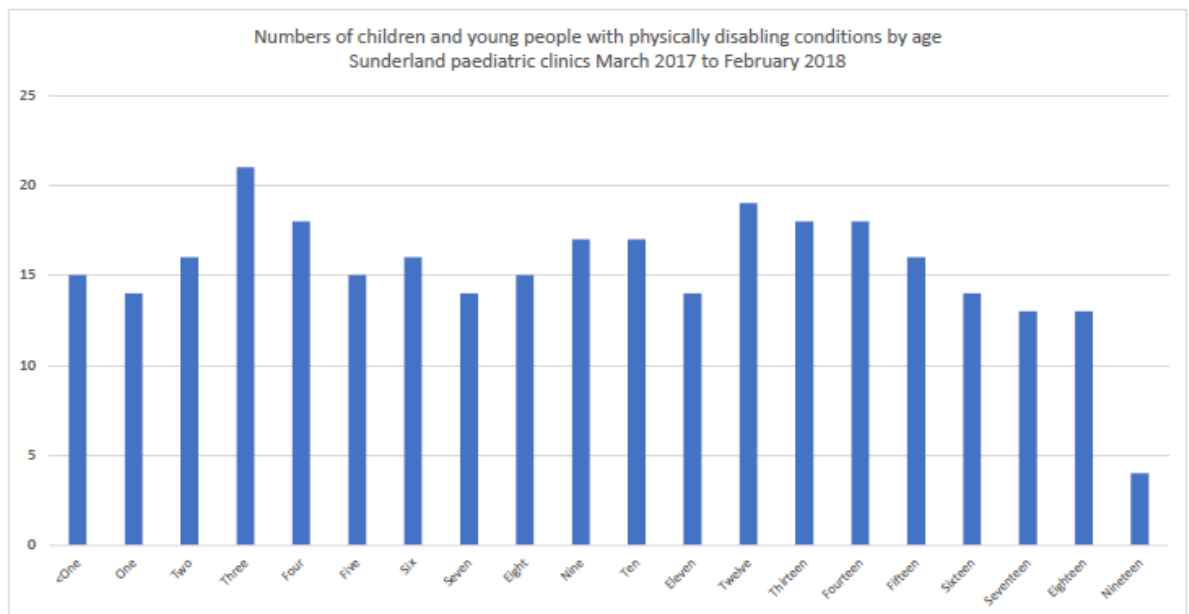
Life Limiting Conditions

The 2009/10 estimated prevalence of children and young people with life limiting conditions aged 0-19 is 32 per 10,000, which equates to 195 children and young people in Sunderland.

The 2013-15 incidence of cancer in children and young people was 161.5 per million, which equates to 7 children and young people in Sunderland.

The number of children estimated to require palliative care service is 16 per 10,000, which equates to 97 children and young people in Sunderland.

Of the 4680 children and young people seen in Sunderland paediatric consultations, 307 (6.6%) had physically disabling conditions.



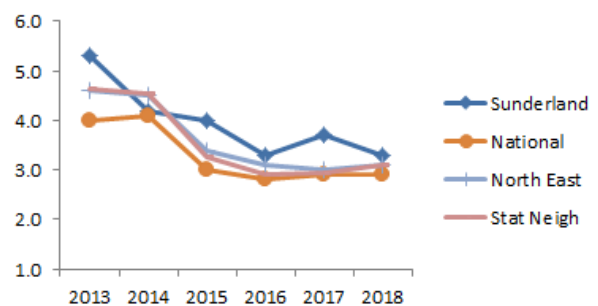
More information regarding children and young people with physical disabilities and life-limiting conditions attending Sunderland paediatrics clinics can be found [here](#).

Pupils on roll in Sunderland schools

A fall from 5.3% in 2013 to 3.3% in 2018 can be identified across primary schools in Sunderland, although higher than all comparators.

% Pupils on Roll in Primary School with a Physical Disability

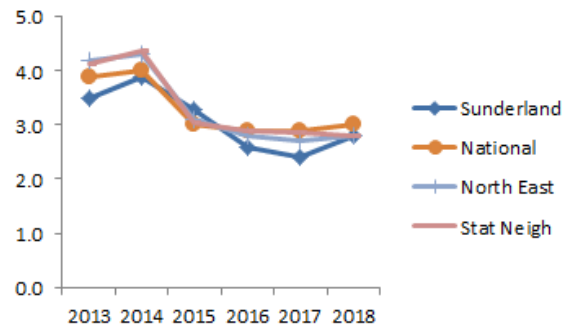
	2013	2014	2015	2016	2017	2018
Sunderland	5.3	4.2	4.0	3.3	3.7	3.3
National	4.0	4.1	3.0	2.8	2.9	2.9
North East	4.6	4.5	3.4	3.1	3.0	3.1
Stat Neigh	4.6	4.5	3.3	2.9	2.9	3.1



A fall from 3.5% in 2013 to 2.8% in 2018 can be identified across secondary schools in Sunderland, matching regional and statistical neighbours and lower than national.

% Pupils on Roll in Secondary School with a Physical Disability

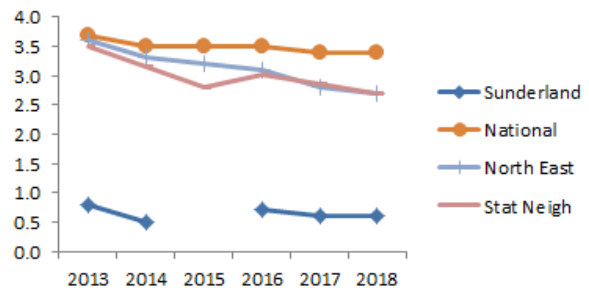
	2013	2014	2015	2016	2017	2018
Sunderland	3.5	3.9	3.3	2.6	2.4	2.8
National	3.9	4.0	3.0	2.9	2.9	3
North East	4.2	4.3	3.1	2.8	2.7	2.8
Stat Neigh	4.1	4.4	3.0	2.9	2.9	2.8



A fall from 0.8% in 2013 to 0.6% in 2018 can be identified across special schools in Sunderland, which is significantly lower than all comparators.

% Pupils on Roll in Special School with a Physical Disability

	2013	2014	2015	2016	2017	2018
Sunderland	0.8	0.5		0.7	0.6	0.6
National	3.7	3.5	3.5	3.5	3.4	3.4
North East	3.6	3.3	3.2	3.1	2.8	2.7
Stat Neigh	3.5	3.2	2.8	3.0	2.9	2.7



MEETING NEED

Schools

Sunderland has a specialist hub where children and young people with physical and/or medical difficulties can access mainstream education in the city and be fully included in school life. Provided by Oxclose Community Academy, Oxclose Primary Academy and Oxclose Nursery, the hub comprises a range of highly skilled and highly qualified teachers, support staff and health professionals all based on site.

After approximately £11 million investment, diverse personalised learning opportunities are now available for students at Oxclose Community Academy in its new Learning Resource Centre at the heart of the school.

The majority of children with physical and/or medical needs attending the school are referred by their Paediatrician although referrals are accepted from all settings and agencies when it is considered that their condition significantly affects their ability to effectively access the curriculum and /or the school environment independently

10. SERVICES

EDUCATION SERVICES

Autism Outreach Team

The Autism Outreach Team (AOT), based at Columbia Grange School, comprises a Speech and Language Therapist, an Educational Psychologist and an Occupational Therapist, all working together to improve outcomes for children and young people on the autism spectrum. They work with schools, parents and other professionals to:

- develop the overall ASD school provision in the city
- provide training to children, parents and professionals on techniques to manage ASD
- improve the wellbeing of children with ASD
- support individual children, young people and their families.

The team also works with Health and Social Care to deliver a joint assessment framework as part of the diagnostic pathway for children with autism throughout the city.

It was judged as an outstanding service by Ofsted in 2011 and was given the 2011 award for 'Innovation and Development' by Sunderland NHS.

Behaviour Support Service

The Behaviour Support Service works under the leadership of the Link School supporting children and young people in Key Stages 2, 3 and 4. The service works with maintained schools and academies to improve behaviour and ensure that young people engage in education. In doing so it aims to achieve positive outcomes for young people and their families and supports the schools it works with to develop a culture of positive behaviour management.

Its established model of integrative practices allows the service to work in partnership with a wide range of services including Early Help, health services and mental health organisations. The team also works with schools and families to enable them to take responsibility for improving the behaviour of young people to ensure that they are able to fulfil their potential.

Children's Sensory Team

The Children's Sensory Team supports the successful inclusion of children and young people aged 0-19 with a long term medically diagnosed sensory impairment or a physical disability. They work with schools and settings providing specialist assessment, teaching, advice and interventions specifically around low incidence disabilities and support children and young people to access the curriculum and be fully involved in school life. The team also works with parents and young people in the home to ensure young people can achieve inclusion within the communities in which they live.

Early Help Team

Early help and intervention is a vital part of any SEND system to ensure that children, young people and their families get the help and support they require at the earliest opportunity.

Together for Children's Early Help service has developed an Early Help Strategy which outlines the core offer for all children, young people and families. It also includes a Toolkit, part of which is the Threshold documentation to be used by professionals.

In addition, an Early Help SEND Pathway for families of children aged 0-4 who are not in statutory education has been developed. Practitioners support families through this process so that they get the help and support they need to manage their child/children's condition in the home, including offering universal and targeted parenting programmes.

For schools, the "Including All Children and Young People" guidance document for children with special educational needs provides a framework on what is expected of them in supporting children and young people, as part of a graduated response, within the school setting.

All schools and academies receive funding to provide SEN support in school. Further work needs to be carried out with schools and settings, particularly where young people have a level of special educational needs but don't meet the requirements for an EHCP, to ensure that schools and settings offer the right level of support to meet needs. Nationally, parents and carers report that they do not have the confidence that schools will meet the needs of their children at SEND Support.

Early Years Area SENCo Team

The Early Years Area SENCo Team provides support, advice, training and information to nursery schools, day nurseries and childminders. The team promotes support for staff working in early years schools and settings, empowering them to meet the needs of children in their care. They also advise on inclusive practices for children aged from birth to five and in particular those children with SEND in order to ensure that all children are fully included.

Educational Psychology Service

The Educational Psychology Service is based in Together for Children and aims to build and sustain positive change and provide children and young people of Sunderland with opportunities to succeed as effective learners and confident contributors to society. The team comprises qualified and experienced psychologists all of whom are Health and Care Professions Council registered with particular areas of specialist expertise.

Service contribution is evidence-based and is delivered in a wide range of settings. Practice utilises specialist psychological methods and approaches to identify and evaluate children's strengths and needs, enrich educational achievement, promote inclusion and advocate for the psychological well-being of families in Sunderland. Psychologists provide expert knowledge and skills related to special educational needs and disability. The team delivers interventions and training, working alongside children and young people aged up to 25 years, school staff, families and other agencies to support and facilitate change. An immediate response to critical incidents and emergencies affecting the school community is acknowledged within its areas of responsibility.

A commissioned service offer exists which is highly competitive across the region and is valued by those schools and organisations choosing this resource. Feedback from users is invited and valued to maintain high standards and ensure customer satisfaction.

Language and Learning Partnership

The Language and Learning Partnership (LLP) is a joint intervention service between health and education that aims to meet the identified language and learning needs of children across Sunderland who are experiencing difficulty accessing learning within mainstream settings. The LLP was set up in 2010 with the responsibility for the operational leadership and management of the service delegated to Sunningdale School. A Strategic Group is in

place with representation from the school and Speech and Language Therapy team, while the local authority provides advice and accountability for ensuring the LLP provides an effective service that positively impacts on outcomes for children across the city.

Portage Service

The Portage Service is an early intervention service to meet the identified physical, cognitive and developmental needs of children between the ages of 0-3 in Sunderland with the most complex needs.

The Service provides support to nurseries and schools to develop SEND provision and strengthen their capacity to meet the needs of children and young people in their settings. They provide specialist resources to support child development, internal and external training for parents and professionals and, where necessary, lead the EHCP process for individual children. As a result of this early support children have the best possible opportunity to progress and succeed.

A strategic group with representation from Sunningdale School, the Portage Service, Local Authority and Children's Centre's, provides advice and accountability for ensuring the Portage Service provides effective early intervention and signposting that impacts on outcomes for children across the city.

Home to School Transport

Together for Children provides Home to School Transport for children and young people with special educational needs who attend a named school that is 2 miles from their home in the primary sector and 3 miles in the secondary sector. If families live within these boundaries, transport may also be offered based on the type of special educational need or specific medical needs.

As at 25 September 2018, 841 children and young people were receiving home to school transport, broken down as follows:

- 6 nursery age children
- 278 in the primary sector
- 376 in the secondary sector
- 181 in the Post-16 sector.

Together for Children also provides a mileage allowance, through the School Transport Mileage Rate, which is more cost effective for the organisation than dedicated private transport. As at 25 September, 48 families had requested the allowance.

In addition, Together for Children funds 1.5 FTE staff, based at Barbara Priestman Academy, to provide Independent Travel Training. The programme has been in place for two years and staff have worked with 38 young people in both 2016/17 and 2017/18, with successful outcomes for many of those involved. The scheme operates on an invest to save model, the outcomes of which are:

- In 2016/17 £42,500 was invested, £61,142 was saved with a net saving of £18,642
- In 2017/18 £45,250 was invested, £64,790 was saved with a net saving of £19,540.

These figures are the in-year savings only. In the long term, not only are many young people travelling independently, but as a result of this there are long term savings in this area.

SOCIAL CARE SERVICES

Children with Disabilities Service

The Children with Disabilities Service, within Together for Children, undertakes assessments with the purpose of meeting the needs of children and young people who have a permanent and severe disability. This includes:

- ensuring they are safeguarded
- supporting them to engage in appropriate activities that enable their families to have a break from caring
- working with those whose behaviour presents a severe challenge to families and services
- providing overnight short breaks.

The services are intended to support families and use their strengths to enable children and young people to fulfil their potential.

In October 2018, 249 young people received a service from this team. The Ofsted report, published in July 2018, recognised that social workers knew the children that they worked with well and that their records are clear and detailed and include the views of the child. However, Ofsted recommended that the needs of disabled children should be reassessed so that managers and staff in the service could not be sure that children were safe and that parents were supported to meet children's additional needs.

Short Breaks Service

Short Breaks give disabled children and young people the opportunity to participate in enjoyable leisure activities while also giving their parents/carers a break from their caring role. As at October 2018, 39 children were accessing short breaks at Sea View Road and 12 with foster carers. From December 2018 short breaks were provided by Grace House as opposed to Sea View Road. From 1 December 2018, it became a commissioned service from Sunderland Care and Support and from 8 December 2018, residential breaks moved to Grace House.

Disabled Children Register

There were 371 children and young people signed up to the DCR as at January 2019. Together for Children promotes sign up to the DCR through the Local Offer and offers families a free MAX Card. With this card families can enjoy free or discounted rates on various venues, such as castles, zoos, bowling alleys, etc. The aim is to provide a sense of community through stimulating learning experiences and enjoyable days out for everyone.

In addition, the more families signed up, the better the organisation can plan and deliver services based on need.

Transitions Team

It is well known that transitioning from a children's to an adult's service approach is very difficult for children, young people and their families and feedback from parents in the city reinforces this position in Sunderland, particularly in terms of health and social care provision.

To support children, young people and families through the transitions journey Sunderland has refreshed the Transitions Management Group. This group, whilst led by Adult Social Care, is a multi-agency group which demonstrates the commitment to improving the pathway for young people and their families throughout transition. The areas for early improvement include:

- A review of the Terms of Reference to ensure all partners are included and are working towards the same goals. This is now complete.
- Review the “Multi-Agency Preparing for Adulthood Protocol and Pathway for children and young people with SEND”. This protocol sets out the roles, responsibilities and accountability of all partners – particularly education, health and social care – whilst making sure the young person and their families are at the heart of the process. The protocol will be reviewed to ensure it is fit for purpose and fully implemented.
- Develop a process for collecting data and recording outcomes for young people who are transitioning.

HEALTH SERVICES

Autism Assessment and Diagnostic Service

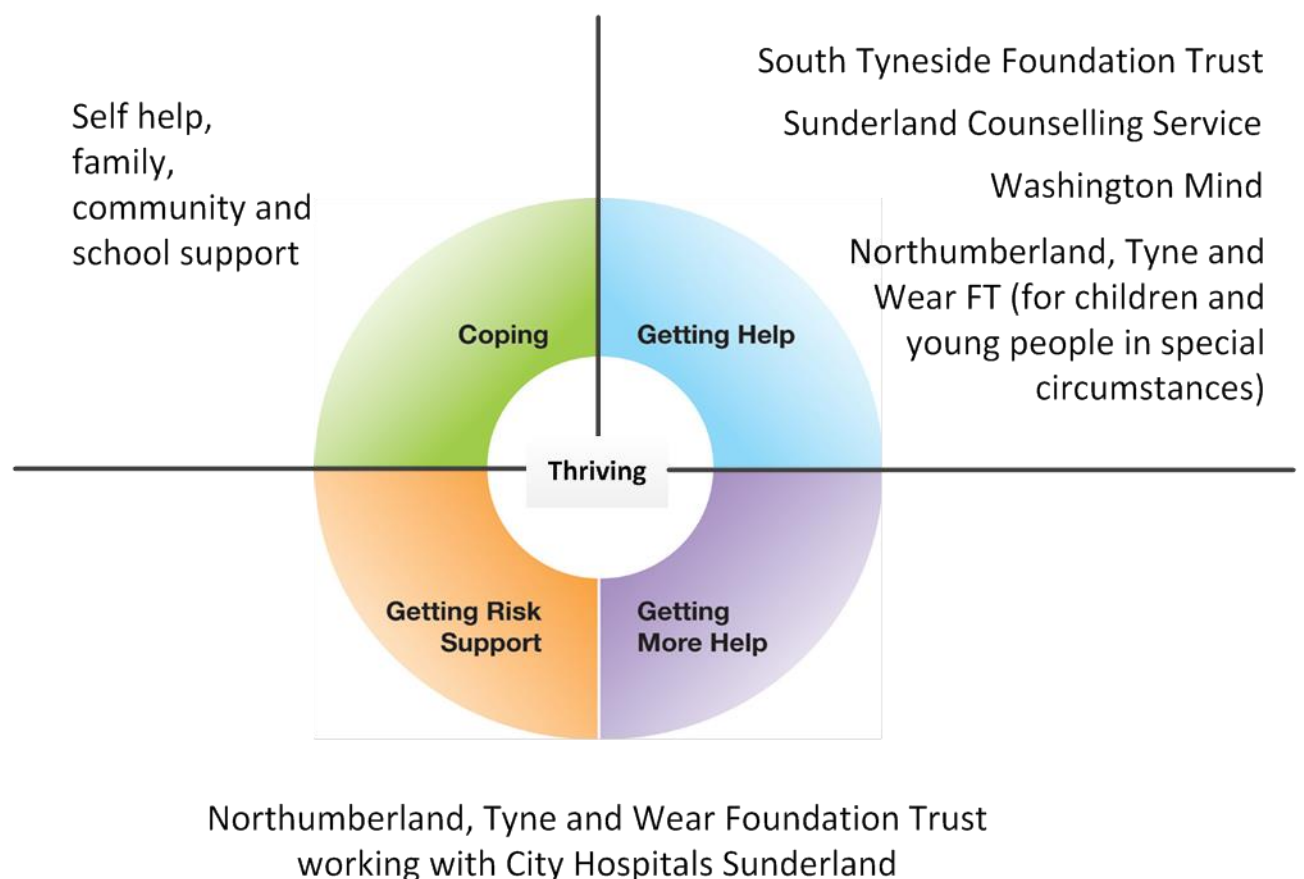
Autism assessment and diagnostic services are provided by City Hospitals Sunderland and the Children and Young People's Service (CYPS) from Northumberland and Tyne and Wear (NTW) Mental Health Trust. The service is available to children and young people aged 0-18 years (young people aged 18-25 access adult services).

Children's Community Nursing Team

This team provides support in the community for children with a range of disabilities and life limiting, long term conditions. Children are seen in a range of settings including schools and educational establishments.

Children and Young People's Mental Health Services (CAMHS)

Children and young people's mental health services in Sunderland are based on the Thrive model, where needs are categorised as 'Thriving and Coping', 'Getting Help', 'Getting more help' and 'Getting risk support'. The Thrive model is a national approach. Services in Sunderland align to these domains as follows:



Community Child and Adolescent Mental Health Service (CCAMHS)

The service is provided by South Tyneside NHS Foundation Trust and is jointly commissioned by Sunderland CCG and Sunderland City Council to provide evidence based therapeutic services for children, young people and their families with moderate levels of

mental health need and to increase the capacity of universal services to meet needs locally the mental health needs of children, young people and their families. The service collects a broad range of nationally recognised outcomes and experience of service measures to inform clinical provision and service development and demonstrate improved outcomes for children and young people. This service only accepts referrals from professionals. Working in partnership with Sunderland Counselling Service, the service provides:

- Individual and group work, brief intervention, parenting support, talking therapies and counselling
- Training, consultation and joint work to increase the capacity of universal service providers to meet the mental health needs of children, young people and their families.

Working with commissioners the service undertakes a process of improvement; most recently this has included:

- The successful bid and implementation of the Children and Young People's Improving Access to Psychological Therapies (CYP IAPT) programme.
- The recruitment of 7 Psychological Wellbeing Practitioners financed via investment awarded as part of the CYP IAPT programme.
- Implementation of the electronic care record
- Assessment by Young Health Assessors against Your Welcome criteria
- Worked with schools to establish School Cluster meetings, provide mental health expertise to cluster groups, established CAMHS School Link role, providing clinical expertise in development of the mental health charter mark.

Children and Young People's Service (CYPS)

Sunderland CCG commissions Northumberland Tyne and Wear Mental Health Foundation Trust to provide CYPS. NTW accepts referrals from both individuals and professionals. The service delivers:

- Specialist services for children, young people and their families with severe and complex mental health needs (2% of population)
- Intensive Home Treatment Services for children, young people and families with acute or highly complex and severe mental health needs - to prevent hospital admission
- Multi Systemic Treatment Services - to support children, young people and their families with complex behavioural, mental health and social care needs
- Community Eating Disorder Services
- Assessment of young people who present via the Emergency Department at Sunderland Royal Hospital
- Support for children, young people and families in special circumstances with moderate levels of mental health need including those who:
 - have learning disabilities
 - are or have been looked after or accommodated including those who have been adopted
 - have been neglected or abused or are part of a child protection plan
 - have a learning or physical disability
 - have chronic, enduring or life limiting illness
 - have substance misuse issues
 - are at risk of, or have been involved in offending
 - are homeless or who are from families who are homeless
 - have parents with problems including domestic violence, illness, dependency or addiction.

The service proactively uses a broad range of tools to measure patient outcomes and support clinical and service improvements, including CORC recognised outcomes, and is

able to demonstrate improved patient outcomes. In addition the service is commissioned to provide training, consultation, in-reach, outreach and opportunities for joint working with targeted service providers e.g. Youth Offending Service (YOS) and Looked after Children (LAC), substance misuse services, paediatrics.

NTW CYPS was rated as outstanding by CQC.

The service continues to work with commissioners to address referral pressures, develop their model of care, improve access waiting times, improve flow through the service and support the high numbers of children and young people requiring urgent appointments.

Washington Mind

Washington Mind also delivers services to young people aged 11 – 25 years across Sunderland and they accept referrals from young people, families and professionals. Young people and Washington Mind have developed an app called Reasons2, which is a free app to help improve mental health. This app has been downloaded by almost two thousand people to date. Mental health information for young people can be found at: <http://www.washingtonmind.org.uk/our-services/ypp/>.

Mental health services for children and young people across the city include one to one and group sessions, online approaches and drop in sessions. Approaches are evidence based and include different interventions such as systemic practice, cognitive behavioural therapy and interpersonal psychology to name but a few.

In response to young people identifying that they wanted to be seen in non-stigmatising, non-medical 'neutral' settings, sessions are delivered in a range of community settings including Pop Recs which is an independent coffee / record shop / art space / live music venue. As well as offering counselling and group work, Washington Mind also offers screen printing, zine making, poster making/graphic design, creative writing, photography, and guitar lessons.

Support and training is also delivered to parents, carers and professionals.

Nationally Commissioned Services

NHS England currently commissions services for children with highly complex, severe or persistent mental health needs (0.075%). These are predominantly in-patient services and are provided by the two major mental health trusts in the region as follows:

- Tees Esk and Wear Valley (TEWV) Regional Eating Disorder Service for Children and Young People
- Northumberland Tyne and Wear Mental Health Foundation Trust (NTW) Regional CAMHS and Learning Disability Services including intensive care, in-patient and Neuro-Development Disorder Service

NHS England operates a national bed management system and meets with CCG commissioners on a regular basis to monitor activity.

Sunderland has well developed Intensive Community Treatment Services and Community Eating Disorder Services which is reflected in relatively low number of admissions to in-patient services.

As part of Transforming Care NHS England have reported a number of incidences of children and young people with learning disabilities or on the autism spectrum from

Sunderland who have either been readmitted or had delayed discharge due to limited social care support in the community.

Locally, a Multi-Agency Risk Management Group has been established to maintain the Dynamic Risk Register and to ensure a co-ordinated multi-agency response to meeting the needs of children with complex needs including those with learning disabilities or with autism spectrum disorder as part of Transforming Care.

Designated Medical Officer

The Designated Medical Officer/Clinical Officer role is shared between a disability paediatrician and lead for commissioning for children and young people at Sunderland CCG. The latter attends to all aspects of commissioning, including agreeing funding for packages of care and out of area placements. The DMO:

- receives all communications from the SEND team at Together for Children and ensures that paediatric assessments are undertaken in a timely way and medical advice submitted within statutory timescales
- reviews all Education, Health and Care Plans and makes a decision about whether each child or young person meets the criteria to have a learning disability identified
- ensures that those identified with a learning disability have their medical records flagged to indicate this and a letter is sent to the GP to ask them to add the child or young person to the practice learning disability register. This is so that reasonable adjustments can be made in the event of healthcare being required and so that from 14 years+ the young person can access their annual GP enhanced offer learning disability health check and 'flu immunisation
- is part of the SEND Strategic Partnership and takes a population view of the needs of children and young people with SEND as well as ensuring pathways of care are appropriate.

Hearing Services

Children's Hearing Assessment and Hearing Aid clinics are available at Sunderland Royal Hospital, Washington Health Centre and also at Palmersville Community Hospital, which is part of South Tyneside Foundation Trust. They offer a full range of assessment and treatment of hearing difficulties, including provision of aids to support hearing and referral to other services if appropriate. Separate clinics are offered for children aged 0-5 and 5-18. There are specialist clinics for the provision of FM/remote microphone technology and for child-adult transition services. Support clinics are also held in the school environment.

Ophthalmology

City Hospitals Sunderland offers a full ophthalmology service providing for all ages and all ophthalmic conditions with the exception of ophthalmic oncology / retinal blastoma.

Speech and Language Therapy Service

City Hospitals Sunderland offers Speech and Language Therapy for children, young people and adults of all ages. Speech and language therapists help children and young people to develop:

- attention and listening
- play skills
- understanding and using spoken language
- recognising and producing correct speech sounds

- using language and communication socially
- other ways of communicating, e.g. using signing, symbols, communication aids
- voice production
- fluency
- feeding, eating and drinking and swallowing.

SEND School Nursing Team

This team is based within the Special Schools and offers support for children with complex health needs attending special and mainstream schools in Sunderland and provides assessment for those children who are Sunderland residents located elsewhere.

Specialist Services

There are also a number of generic services provided, children with SEN access these. There are specialist teams for Diabetes, Epilepsy, Respiratory, Allergy, Gastroenterology problems and Chronic Fatigue Syndrome

A specialist SEND review has been commissioned and will take place in January 2019. The review will consider the range, effectiveness and impact of services available to support children and young people with SEND. The SEND Strategic Partnership will consider the findings of this review and take forward any actions for improvement as appropriate.

There is also a wide range of voluntary and third sector organisations providing services for families with children who have special educational needs. These are included in Together for Children's [SEN Information Pack](#).

11. NEXT STEPS

This Joint Strategic Needs Assessment is owned by the SEND Strategic Partnership and we view it as a live document. We will take responsibility for updating and publishing new information as the landscape for children with SEND changes.

The needs assessment provides data and information around the basic issues of meeting the needs of children and young people with special educational needs, i.e. health, education and social care.

In order to build a holistic picture of additional needs, the Partnership commits to drawing together additional information in relation to:

- Education, Employment and Training post 16, so that a rich understanding can be gathered of the numbers of young people going to college, university, apprenticeships, etc. linked to their SEND
- Housing
- Youth Justice
- Teenage pregnancy
- Substance misuse
- Alternative provision such as home and hospital
- Cross cutting issues such as joint training for SEND practitioners and the provision of therapies.

ACKNOWLEDGEMENTS

The SEND Partnership would like to thank all those who have supported us in pulling together this Joint Strategic Needs Assessment by providing data and information and sharing their views. These organisations include:

Autism in Mind
Including Autism
Sunderland City Council
Parent Carer Forum
Together for Children
Sunderland CCG
City Hospitals Sunderland
Northumberland, Tyne and Wear Mental Health Foundation Trust.