



City of Bradford Metropolitan District Council

Needs Assessment

Children and young people with Special Educational Needs and Disabilities (SEND)

April 2023

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1 Executive Summary

1.1 Background

What is a Joint Strategic Needs Assessment?

A Joint Strategic Needs Assessment (JSNA) is a review of the current and future health and social care needs of a defined community. This JSNA is focusing on people aged 0 to 25 years living with Special Educational Needs and Disability (SEND) in Bradford.

The JSNA aims to identify ways to improve the health and wellbeing of the local population and reduce inequalities. A JSNA should collect data from a range of sources including national and local datasets, and incorporate the voices of service users and stakeholders into the process.

What are Special Educational Needs and Disabilities?

Special Educational Needs and Disability (SEND) is a term used to describe a learning difficulty or disability resulting in a child or young person needing additional health and education support. The four broad areas of needs of children and young people with SEND are:

1. Communication and interaction
2. Cognition and learning
3. Social, emotional and mental health difficulties
4. Sensory and/or physical needs

More details about the different types of SEND can be found in the Introduction section of the JSNA chapter.

What support is offered to children and young people with SEND?

There are two types of educational support available to children and young people with SEND:

- SEN support
- Education, health and care (EHC) plan

Bradford offers a range of educational provision to meet the needs of children and young people with SEND. This includes provision in both Local Authority Maintained Schools and Academies including:

- Mainstream Schools
- Special Schools
- Resourced Provisions led by the school (RP-SL)
- Resourced Provisions led by the Local Authority (RP-LA)

- Local Authority Additionally Resourced Centres (ARC's)
- Early Years Enhanced Specialist Provision (EYESP)

Local services provide additional support to children and young people with SEND and their families. More information about the support and services offered can be found in the Introduction section of the JSNA chapter.

1.2 Overview of Bradford and the SEND population

Bradford District is a large metropolitan area with a population of over half a million people. Bradford has one of the youngest population's in England and is ethnically diverse, with one in four people living in the District describing themselves as Asian / Asian British ethnic origin, compared to less than 1 in 10 people in England as a whole.

Bradford District is one of the most deprived local authorities in England, although deprivation varies greatly across the District. The life expectancy of people living in Bradford is lower than national and regional averages. Around 1 in 3 children under 16 years old in Bradford are living in absolute low income families.

As of January 2022 there were 104,563 pupils attending schools in Bradford, 17,407 (16.6%) of these were identified as having SEND. A SEND diagnosis is more common among pupils in Bradford who are male, require social care provision, are eligible for free school meals and attend schools in the most deprived areas of Bradford. Pupils with a SEND diagnosis tend to have worse life outcomes on average, including educational and health outcomes, than pupils with no identified SEND. This highlights the importance of early identification and support of children and young people with SEND in Bradford, enabling them to flourish and maximise their potential. Different types of SEND needs may become apparent throughout the life course.

1.3 Current Developments of SEND services in Bradford

There are a range of services offered to support children and young people with SEND living in Bradford provided by the public, private and voluntary sectors. These services include health care, educational support, information and advice services, local forums and opportunities for children and young people with SEND to become involved in local projects and decision making. More information can be found in the 'What assets does Bradford have for children and young people with SEND?' section of the JSNA.

In 2022, the CQC and Ofsted inspected SEND services in Bradford and although finding many strengths in the local SEND system, they also found some significant areas of weakness in areas including the Local Offer website and communication between stakeholders. This feedback has been listened to and steps to improve

performance in these areas is currently being implemented or in development, such as a refresh of the Local Offer website. More information can be found in the 'Voices of Children and Young People with SEND, their families and stakeholders' section of the JSNA.

1.4 Recommendations

Data and evidence presented in this JSNA chapter highlights that the following recommendations should be implemented in Bradford:

- Minimise the long-term wider impact of COVID-19 on children with SEND
- Ensure mental and physical health promotion is inclusive of the SEND population and will meet their needs
- Ensure there is adequate support for increasingly prevalent SEND conditions and EHC plans to manage the current and future demand for SEND services
- Ensure there is equitable diagnosis of SEND for all children in Bradford and it is done as early as possible
- Ensure SEND provision is universal and proportionately distributed across Bradford relative to need
- Ensure pupils with SEND maximise their time in school and have access to a range of post-16 opportunities
- Continue to improve the experience of the SEND system and life in Bradford for children and young people with SEND and their families

A detailed description of the recommendations can be found in the 'Recommendations' section of the JSNA chapter.

2 Introduction

2.1 What are Special Educational Needs and Disabilities?

Special Educational Needs and Disability (SEND) is a term used to describe a learning difficulty or disability resulting in a child or young person needing additional support; this can be from health, education and/or social care.

A more detailed description of SEND can be found in the Definitions section of the Appendix.

2.2 What factors are associated with SEND?

Research has highlighted that there are certain genetic and environmental factors during childhood which are likely to increase the risk of developing certain special educational needs and disabilities (1). By understanding these factors, strategic and targeted support can be implemented across services in Bradford to minimise risk and provide early help to children who have a higher chance of developing SEND.

Pre- and perinatal factors

Biological and environmental factors during pregnancy and shortly after birth may increase the risk of a child developing SEND. Biological factors include genetic mutations during foetal development resulting in conditions such as Down's syndrome. Data from Born in Bradford highlights that 3% of babies in their study were born with a birth defect, almost double the national average (around 1.7%) (2). Environmental factors include maternal alcohol and drug use during pregnancy which can result in Foetal Alcohol Spectrum Disorder (FASD). There is no local data providing the proportion of pregnancies where mothers used alcohol or drugs, but national estimates from 2018/19 suggest that about 4.1% of mothers drank alcohol and 1.4% of mothers used drugs during early pregnancy (3).

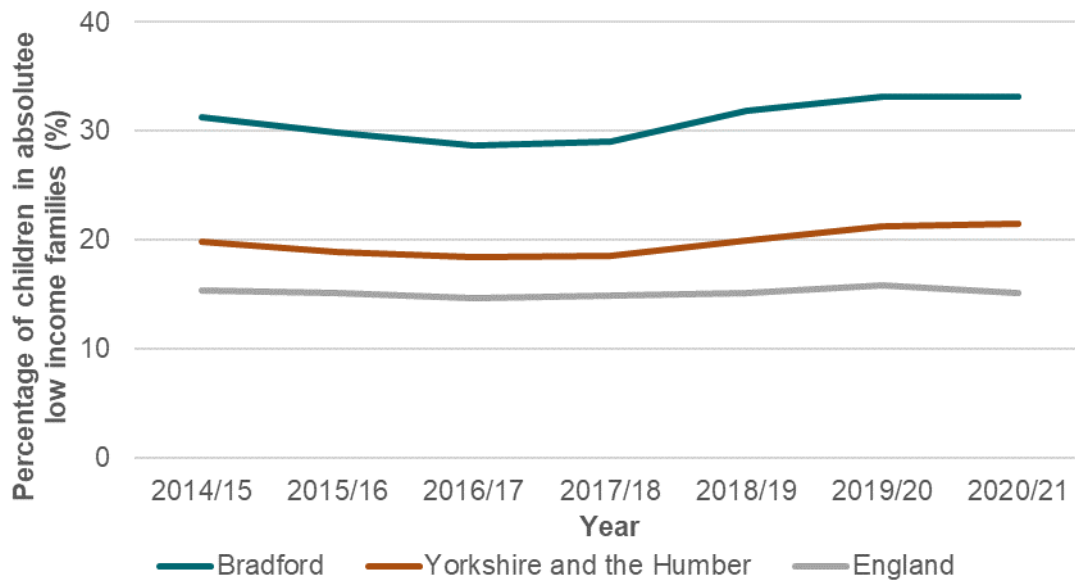
A premature birth (born before 37 weeks of gestation) is another risk factor for SEND development and is associated with impaired brain development. Risk is significantly increased for babies born before 32 weeks' gestation. Risk of SEND development may be further exacerbated, particularly for summer babies, as children are typically placed in school year groups according to their actual birthday rather than expected due date. In Bradford during 2018-20, out of every 1,000 births, 79.8 were premature. This is similar to regional (79.9 per 1,000) and national (79.1 per 1,000) averages (3).

Social background

There is evidence suggesting that children from more deprived social backgrounds have an increased risk of developing SEND.

In 2020/21, 33.2% of children under 16 years old in Bradford were living in absolute low income families¹. This is more than twice the national average (15.1%) and higher than the average for Yorkshire and the Humber (21.5%). The proportion of children in Bradford in relative low income families has been increasing since 2017/18 and the gap has been widening from the national average (Figure 2.1) (3).

Figure 2.1: Percentage of children under 16 in absolute low income families, Bradford, Yorkshire and the Humber, and England, 2014/15 to 2020/21.



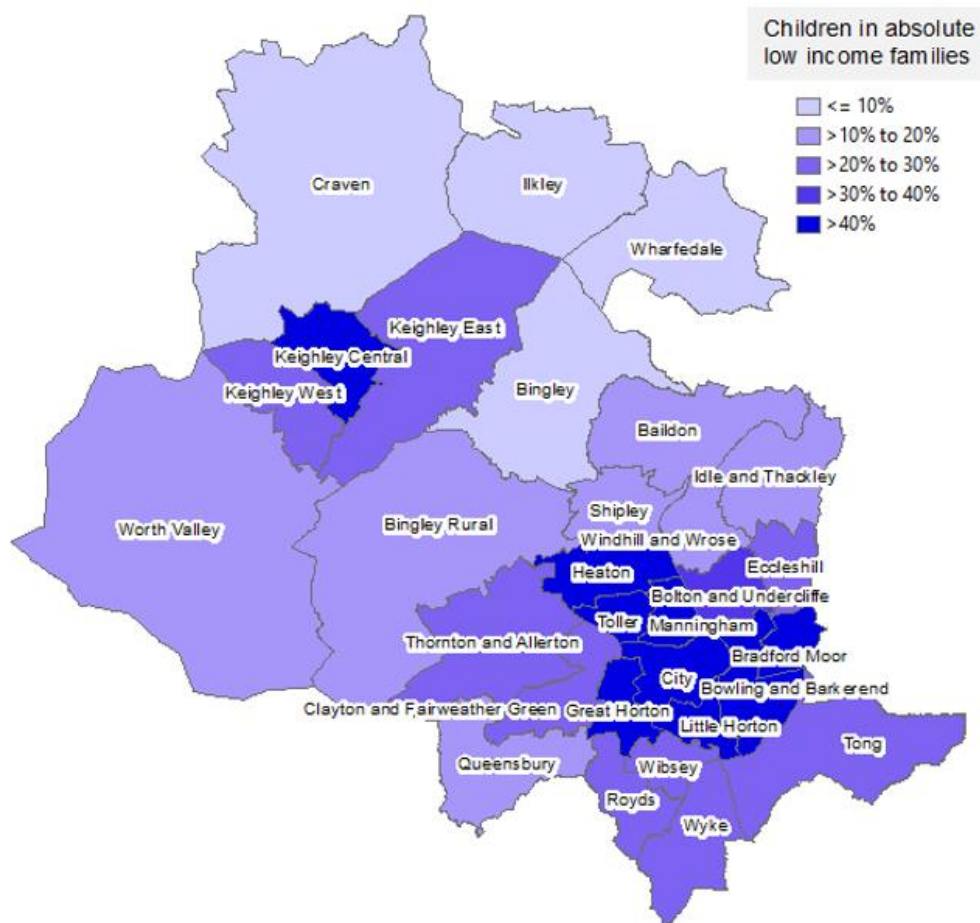
Source: *Fingertips*, Office for Health Improvement and Disparities

The proportion of children living in poverty across Bradford varies by ward (

Figure 2.2). In 2020/21, the proportion of children under 16 in absolute low income families varied from 4% in Wharfedale ward to 59% in Manningham ward. Wards where over 40% of children live in absolute poverty are concentrated around Bradford City Centre and Keighley Central ward (4).

¹ Absolute low income uses the 60% median income threshold in 2010/11 and fixes this in real terms (in line with inflation). An absolute low income family is any family below this threshold before housing costs who have claimed one or more of Universal Credit, Tax Credits or Housing Benefit at any point in the year.

Figure 2.2: Map of the percentage of children under 16 years old in absolute low income families by ward, Bradford, 2020/21.



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Free school meal eligibility is often used as a proxy measure for deprivation. In Bradford during 2021/22, 27.1% of all pupils were eligible for free school meals, higher than the regional (24.8%) and national (22.5%) averages (3).

Gender

Boys are around twice as likely to receive SEND support than girls in England. However for some learning difficulties research suggest that this may be due to girls' needs being less obvious as they are less likely to display poor behaviour (1).

Ethnicity

Research has shown that even after accounting for social background, ethnicity is related to the likelihood of a child being identified with SEND, and the type of SEND varies with ethnicity (1). Driving factors could include cultural differences which may lead to greater difficulties in SEND identification or varied levels of participation in early interventions.

Nationally, Travellers of Irish Heritage and Black Caribbean pupils had the highest rates of EHC plans, whereas Chinese and Indian pupils had the lowest.

Adverse life events

Research has shown that children with learning disabilities are more likely to be exposed to more potentially adverse life events compared to their peers. They are also more likely to be negatively affected than their non-disabled peers when exposed to adversity (5). These life events include, but are not limited to, inadequate nutrition, poor housing conditions, exposure to environmental toxins, family, peer and community violence, parenting difficulties and family instability. It is thought that increased risk of exposure to adverse life events is likely to result from the combined effects of the association between child learning disability and poverty and discrimination faced by people with learning disabilities. Therefore, adverse life events are not solely a risk factor associated with the development of SEND, but also an outcome of children with SEND.

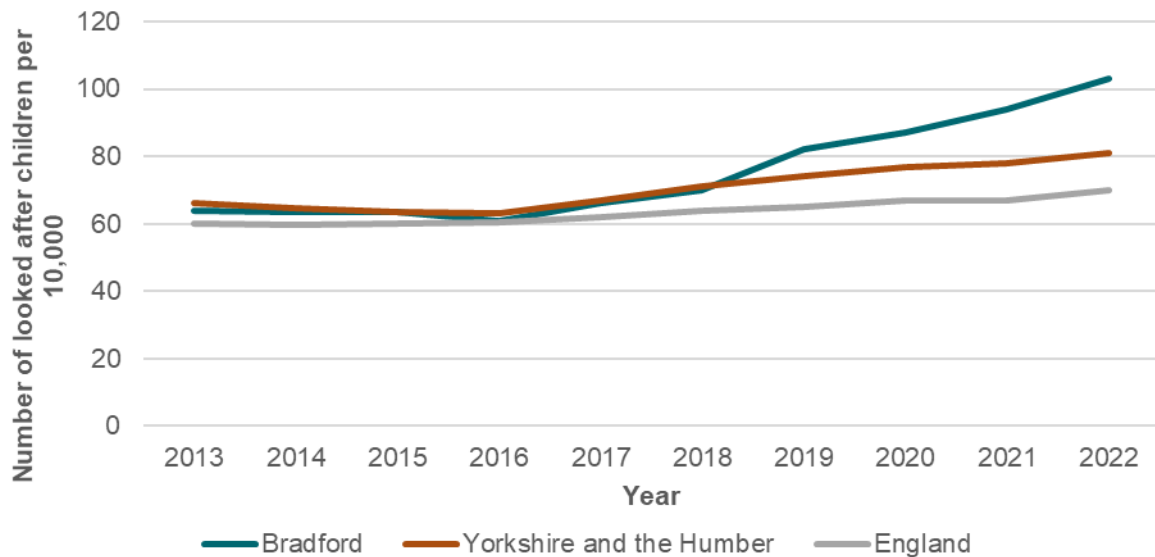
Social care provision

Children requiring social care provision are more likely to be identified as having SEND. The three main types of social care provision are:

1. **Looked after children** – children housed by the Local Authority.
2. **Children in need** – children who are unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired, without the provision of services. They may also be disabled.
3. **Child protection plan** – this is put in place by a local authority where there has been investigation into possible abuse or neglect and the child may be suffering or likely to suffer significant harm.

The number of looked after children in Bradford has been increasing since 2018 at a faster rate than the regional and national averages, reaching 103 looked after children per 10,000 children in 2022 (Figure 2.3) (6).

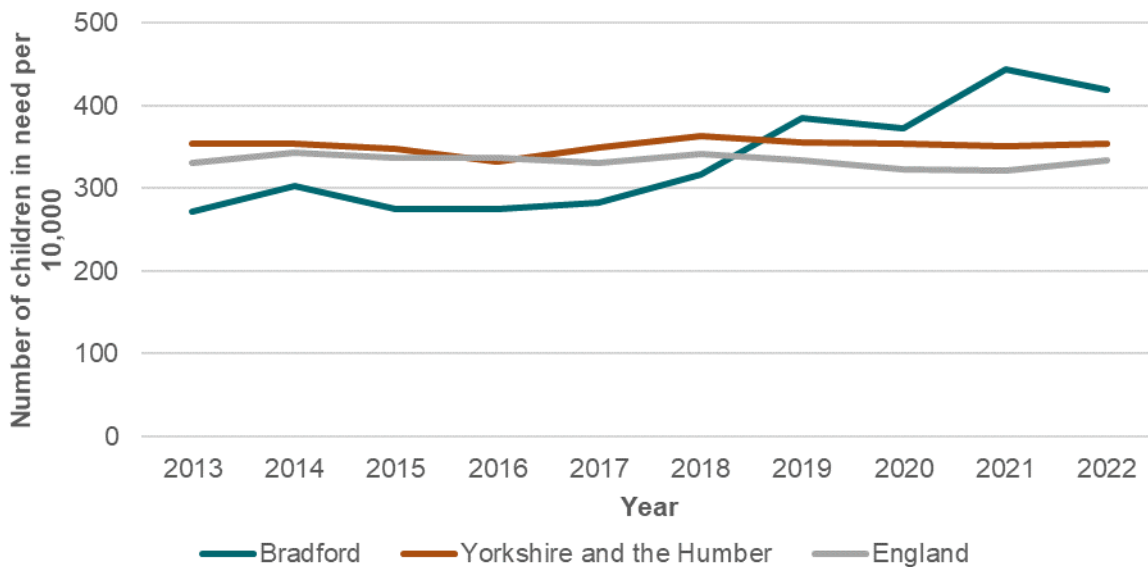
Figure 2.3: Number of looked after children (aged under 18 years) per 10,000, Bradford, Yorkshire and the Humber and England, 31st March 2013 to 2022.



Source: *Children looked after in England including adoptions, Department for Education*

There are more Children In Need in Bradford than the regional and national average and this gap has been widening since 2020 (Figure 2.4). As of 31st March 2022 there were 419.2 children in need per 10,000 children under 18 years old in Bradford (7).

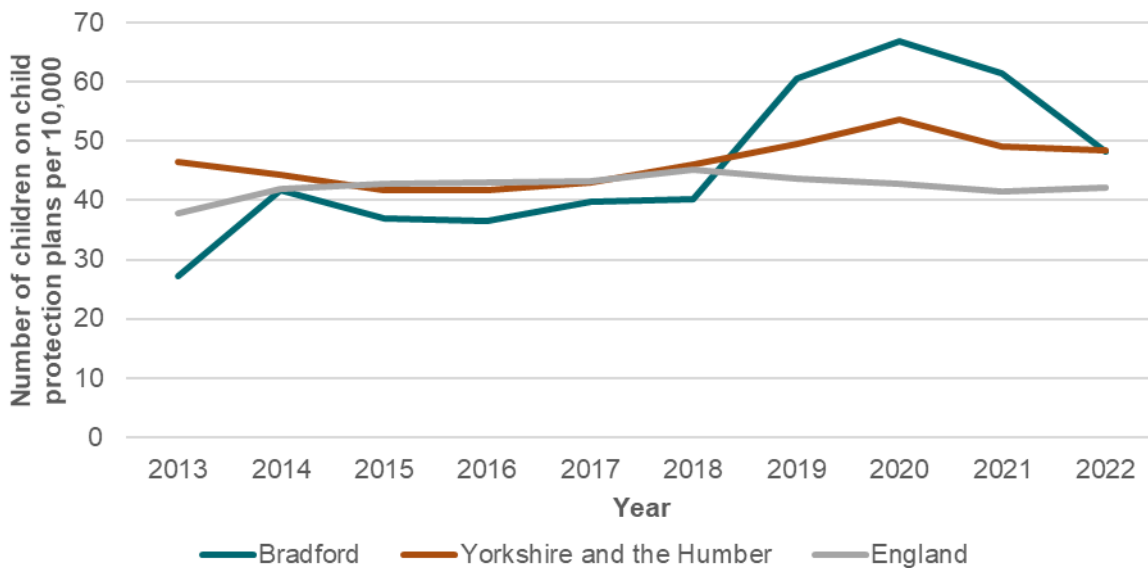
Figure 2.4: Number of Children In Need (aged under 18 years) per 10,000, Bradford, Yorkshire and the Humber and England, 31st March 2013 to 2022.



Source: Characteristics of children in need, Department for Education

As of 31st March 2022, there were 48.2 children per 10,000 children under 18 years old on child protection plans in Bradford, the lowest rate since 2018 but still above the national average (Figure 2.5) (7).

Figure 2.5: Number of children on child protection plans (aged under 18 years) per 10,000, Bradford, Yorkshire and the Humber and England, 31st March 2013 to 2022.



Source: Characteristics of children in need, Department for Education

2.3 Local Strategic Context

Bradford Council SEND strategy for children and young people, 2018 to 2022

This strategy sets out the vision and strategic priorities to support children and young people with SEND and their families in Bradford (8). The main aims of the strategy are that:

- Children and young people with SEND will achieve improved outcomes
- Children and young people will have timely access to good quality schools, colleges and services
- The SEND reforms will be fully embedded across the district
- Feedback from children, young people and families will show more they feel supported by education, health and social care services.

The strategy will be reviewed annually and is a 'live' document that responds to the needs of children with SEND and their families.

Bradford Strategic Plan 2022 – Sufficiency of Specialist Places for Children and Young People

The report sets out the analysis process that the Intelligence & Sufficiency Service undertake to enable the Local Authority to plan and ensure the sufficiency of specialist places across the district and provides an overview of the following information:

- The current specialist provision available.
- The number of children and young people with an EHCP.
- The most prevalent primary needs of the children and young people with an EHCP.
- The projected growth of children and young people with an EHCP based on local and national data.
- Whether or not there are sufficient specialist places for particular primary needs within each constituency, to meet current and projected demands.
- The type of provision that is projected to be required e.g. Resourced Provisions, Special Schools or Enhanced Early Years Specialist Provision.

The report highlights the projected scale of growth and the number of specialist places required to meet projected increase in demand. In order to assess and ensure that there are sufficient specialist places for statutory school aged children, the report predominantly looks at school-aged children and young people with an EHCP.

Bradford SEND Joint Commissioning Strategy, 2020 to 2023

This strategy outlines how partners across education, health and care in Bradford will work together with children and young people identified as having SEND and their families to plan, design and deliver support (9). They will utilise innovative approaches and ensure effective use of collective knowledge and resource. This process includes a collective review of current service delivery arrangements,

including engagement with service users to identify further developments that are required.

Adverse Childhood Experiences (ACEs) Trauma and Resilience Strategy, 2021

This strategy was developed by Better Start Bradford and its partners, with the aim for Bradford to move forward with becoming a trauma informed and ACE aware city (10). The main aspirations of the programme are:

- A focus on early intervention and prevention, resilience and adversity
- ACE aware and trauma-informed Bradford workforce and community
- A workforce that is equipped to adequately support people who have been affected by ACEs
- Embedding ACE awareness into relevant policies, strategies, and commissioning processes
- For all organisations to implement an approved model of restorative supervision to support the health and wellbeing of the workforce
- Sharing best practice, learning from each other and being better together

The Early Help Strategy for Children and Families in Bradford, 2020 to 2022

This strategy was developed to support children and families with multiple and more complex needs. It focuses on promoting early help to all children in Bradford, wherever they live and at any point in their life, to stop problems from escalating with referral and intervention to children's social care services (11).

Bradford District Plan 2021 to 2025

This plan is owned and shaped by the Wellbeing Board. The District Plan sets the direction for the family of partnerships that lead key areas of work for the District (12). There are five main priority outcomes:

- Children have the best start in life
- Residents achieve good health and wellbeing
- Sustainable economic growth and decent work for all
- Safe, sustainable and inclusive communities
- Action at all levels to address climate and environmental change

Bradford Council Plan 2021 to 2025

The priority outcomes for the Bradford Council Plan (13) are:

- Better skills, more jobs and a growing economy

- Decent homes
- Good start, great schools
- Better health, better lives
- Safe, strong and active communities
- A sustainable district
- An enabling council

Bradford and Airedale Joint Health and Wellbeing Strategy, 2018 to 2023

This strategy is owned by the Bradford and Airedale Health and Wellbeing Board. The title of the strategy is 'Connecting People and Place' to reflect that where individuals live shapes their health and wellbeing as much as who they are and the choices they make (14). The main outcomes of the strategy are:

- Our children have a great start in life
- People in Bradford District have good mental wellbeing
- People in all parts of the district are living well and ageing well
- Bradford District is a healthy place to live, learn and work

Interim Children and Young People's Plan, 2021 to 2022

Bradford's interim plan will run until the five year Children and Young People's plan has been developed after joint consultation and engagement with stakeholders across the District (15). The strategic aims of the plan are:

- Good start and great schools
- Better health, better lives
- Better skills, more good jobs and a growing economy
- Safe, sustainable and active communities
- Safeguarding the most vulnerable and supporting families
- Participation and voice

The National Strategic Context can be found in the Appendix.

2.4 Funding System

Education provision

Funding for SEN provision in educational settings is from three main sources (16):

1. All schools receive money for each pupil, based on actual pupil numbers (weighted using the Age Weighted Pupil Unit). Some of this money is for general SEN provision.
2. There is a dedicated SEN budget (known as the notional SEN budget) provided by the local authority which is distributed to schools using a formula based on criteria including deprivation and attainment factors. Government guidance states that schools should provide up to the first £6,000 of additional support for children with SEN annually.
3. Schools can request additional funding if they are responsible for children requiring very expensive provision that would require a large amount of the SEN budget. This is known as the 'high needs block' or 'top-up funding' and is managed by the local authority.

Personal budgets

A personal budget is the amount of money identified by the local authority to deliver the support set out in a child's EHC plan. It offers more control to children and families about the SEND services they receive to best support the child's individual needs. Personal budgets can include resources from education, health and/or social care services.

A personal budget can be requested during the drafting of an EHC plan or once the EHC plan has been issued and is under review. A young person with an EHC plan can ask for their own Personal Budget after the end of the school year in which they become 16. A personal budget can include any top up funding and SEN funding managed by the school or college if the Head Teacher/Principal agree.

Families and young people can manage a personal budget using:

- direct payments - individuals receive the cash to contract, buy and manage a service themselves.
- an arrangement (or notional budget) - the school or college, or local authority hold the funds and will commission the support specified in the plan.
- third party arrangements: funds are paid to and managed by an individual or organisation on behalf of the child's parent or the young person.
- A combination of direct payments, arrangement or third party arrangement

Continuing care

Some children and young people with SEND will also have very complex health needs that cannot be met by existing universal or specialist services alone. Children with these complex health needs are entitled to a continuing care package up to their 18th birthday. When a young person reaches 18, the adult NHS continuing healthcare arrangements apply if the young person is eligible.

After a child has been assessed for a continuing care need, a multi-agency decision-making panel will consider the evidence and develop a package of care for the child

if suitable. The package of care will be kept under regular review by commissioners and should be considered alongside the EHC plan where appropriate to produce a single set of needs and outcomes.

3 Characteristics and trends of identified SEND among children and young people in Bradford

The majority of data in this section has been extracted from the Department for Education's annual School Census (17). This includes information about all children who attend state-funded nursery, primary, secondary (including sixth forms), special schools and pupil referral units. Further education institutions such as colleges are not included and only part of the dataset includes data from independent schools.

As EHC plans can continue until a child is 25 years old, data from the Department for Education's annual SEN2 return (18) has been used to provide additional information about young people who are no longer in school but have an EHC plan in place.

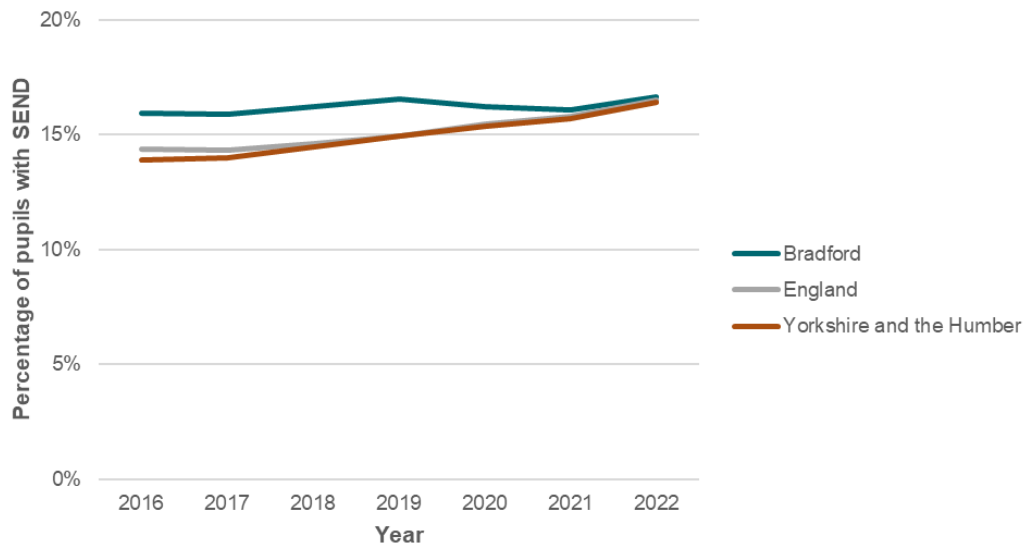
Data sources will be listed beneath all figures and charts for transparency. Please note that although a child attends a school in Bradford, they may not necessarily live in Bradford.

3.1 Prevalence of SEND

As of January 2022, there were 17,407 pupils attending school in Bradford identified as having SEND, representing 16.6% of all pupils. The percentage of pupils with SEND has remained relatively steady but shown a slight increase in Bradford since 2016, unlike regional and national trends which have been increasing at a faster rate (Figure 3.1) (17).

Local data shows that as of December 2022, there were 19,495 children and young people aged 0-25 years living in Bradford identified as having SEND (4).

Figure 3.1: Percentage of pupils identified as having SEND attending school in Bradford, Yorkshire and the Humber and England (as at January each year), 2016 - 2022

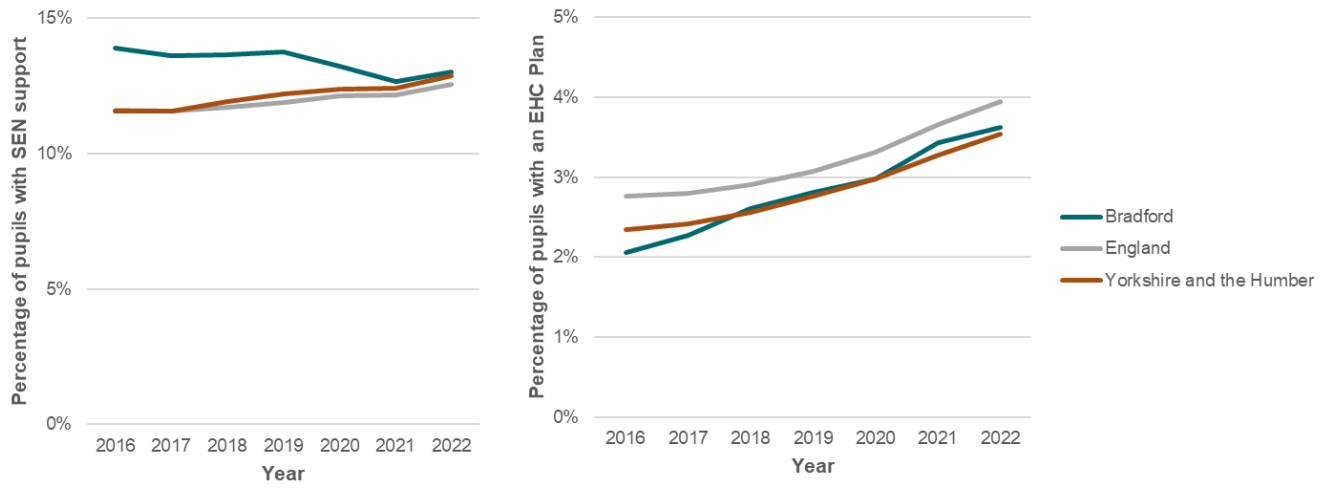


Source: School Census, Department for Education, 2022

As of January 2022, there were 3,784 pupils with an EHC plan and 13,623 pupils receiving SEN support attending school in Bradford. The percentage of pupils with an EHC plan has been increasing at a similar rate to regional and national trends since 2016, whereas the percentage of pupils receiving SEN support has been decreasing and is now similar to regional and national averages (

Figure 3.2) (17).

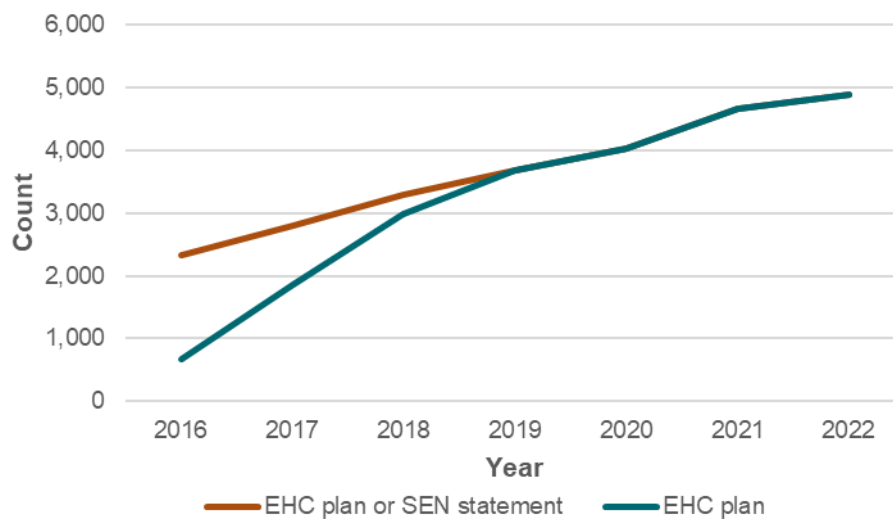
Figure 3.2: Percentage of pupils with SEN support or an EHC plan attending school in Bradford, Yorkshire and the Humber and England (as at January each year), 2016 - 2022



Source: School Census, Department for Education, 2022

Including young people up to 25 years old who have left school but still have an EHC plan in place, as of January 2022 there were 4,891 children and young people living in Bradford with an EHC plan. The number of EHC plans has been increasing over time in Bradford (Figure 3.3) (18).

Figure 3.3: The number of EHC plans or SEN statements for children and young people aged 0 to 25 years living in Bradford, 2016 to 2022.



Source: SEN2, Department for Education, 2022

3.2 Projected prevalence of SEND

Internal modelling undertaken clearly indicates that additional specialist places are required to be developed over the coming years in response to continued growth in the number of EHCPs and wider demographic changes in the school population.

As can be seen throughout the Strategic Plan 2022 – Sufficiency of Specialist Places, there are many variables that affect the current and future projections of required specialist places in order to meet the needs of children and young people with SEND across the Bradford District.

Several of the below variables are referred to throughout the report:

- There is a significant number of children and young people across the Bradford District on SEND Support. The data shows that there has been a marginal reduction in the number of children and young people between 0 – 25 over the last year compared with the previous year's data. Projections show that a proportion of this cohort will transfer onto a EHCP in the future, therefore increasing the overall EHCP cohort.
- Increase in the number of EHCP's.
- Increase in the number of EHCP assessments.
- High level of occupancy in established specialist provisions.

It is forecasted that once a child or young person has moved into the EHCP cohort they will remain in that cohort. By analysing the flow of children and young people across each stream of SEND provision we forecast that there will be an increase in the number of children and young people that will require access to a specialist place.

Using a growth model for EHCP's based on an average seen in the past three year's data (2019-2022), the Local Authority projects the following:

- the number of children and young people between 0 - 25 with an EHCP in Bradford will increase by 8.05% or 427 in the twelve months to October 2023.
- based on the average over the past two years (2020 – 2022), 68.4% of the above cohort will be of statutory school age, this would mean that by October 2023 this cohort would amount to 3,923.

The modelling clearly indicates that additional SEND specialist places are required to be developed in response to the continued growth in the numbers of children and young people requiring EHCP's and due to the current/projected high levels of occupancy.

The forecast is regularly updated and tested against the latest available data including the tracking of the SEND cohort throughout all phases of education.

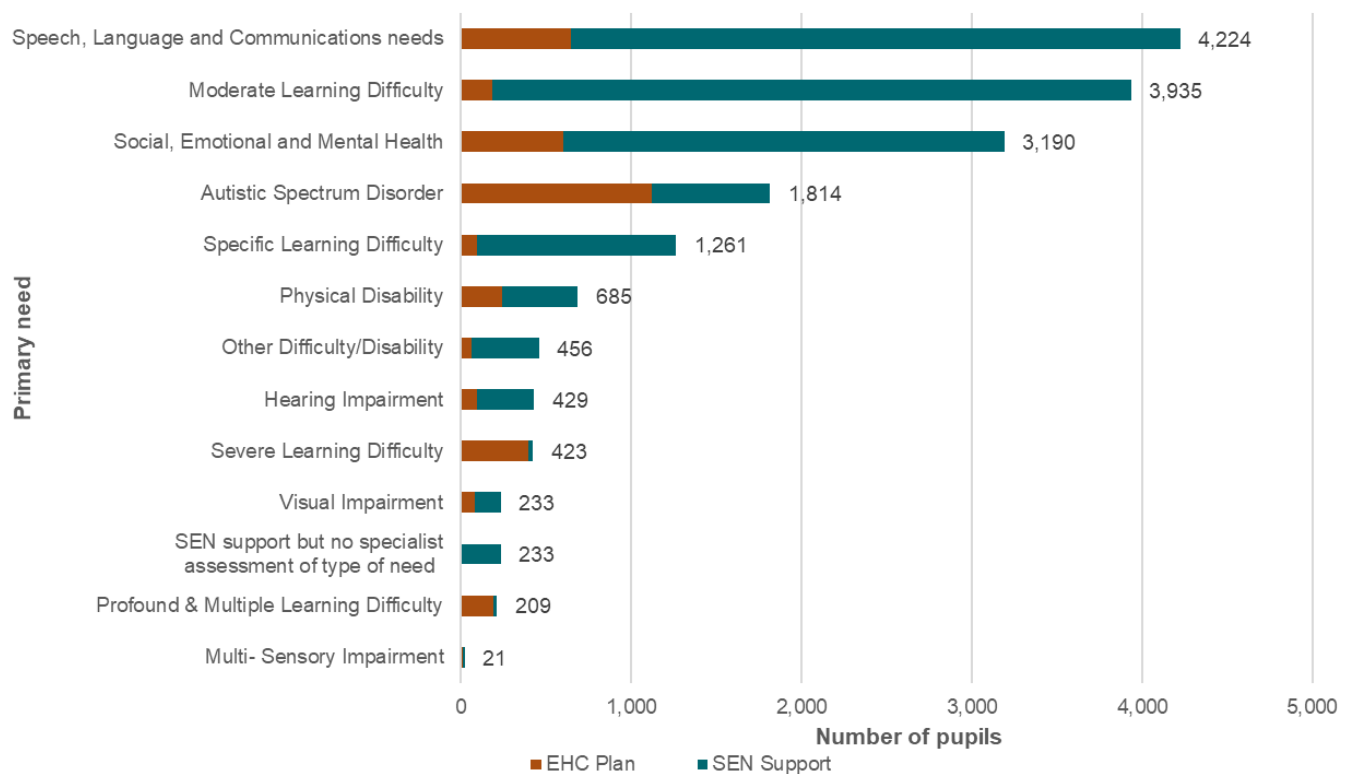
Further details can be found in the Strategic Plan 2022 (19).

3.3 Primary and Secondary SEND needs

When a child is assessed for SEN support or an EHC plan, their primary need is identified from one of the following broad categories: communication and interaction, cognition and learning, social, emotional and mental health difficulties or sensory and physical needs (further explained in the Introduction section and listed in Figure 3.4). Secondary needs may also be recorded. As the identification of needs is partly due to the subjectivity of the practitioner, need identification may vary between practitioners, areas and over time. This variation should be considered when interpreting the following data.

Speech, Language and Communications needs were the most common primary need for pupils attending school in Bradford identified as having SEND in January 2022 (Figure 3.4). For pupils requiring SEN support, Moderate Learning Difficulty was the most common primary need, accounting for 28.0% of all SEN support. For pupils with EHC plans, Autistic Spectrum Disorder was the most common primary need, accounting for 30.2% of all EHC plans among pupils attending school in Bradford. This breakdown is similar to the national picture (17).

Figure 3.4: Primary type of need by SEND cohort, pupils attending school in Bradford, January 2022.

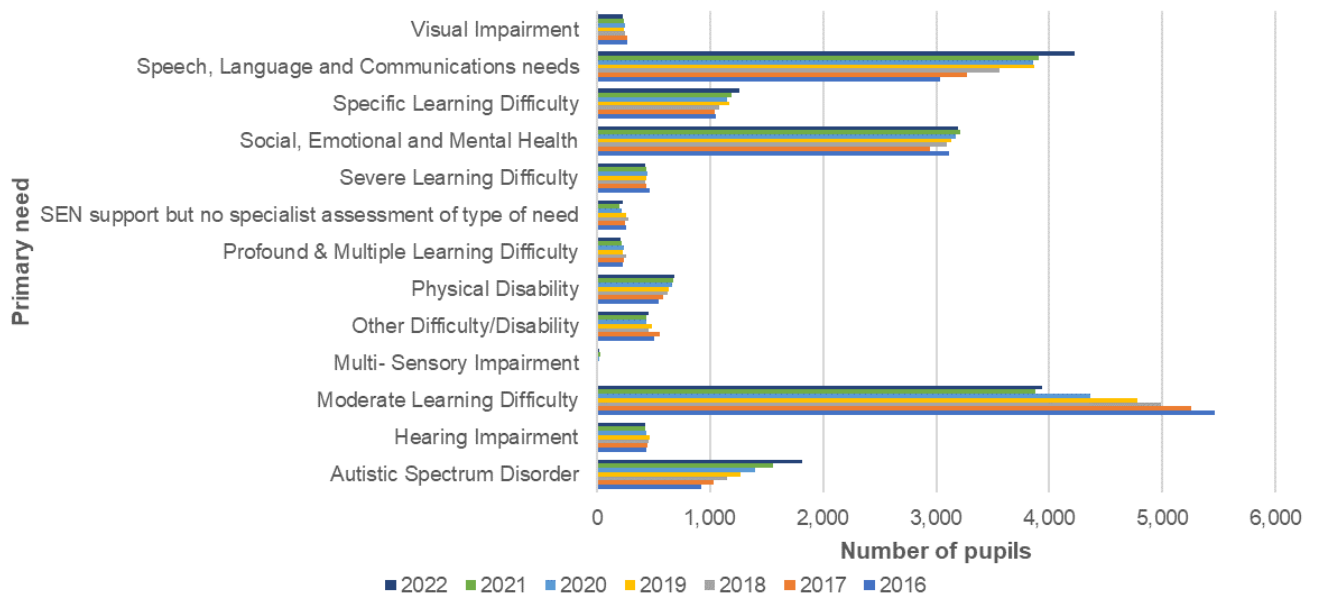


Source: School Census, Department for Education, 2022

The largest increases were observed for Speech, Language and Communication needs and Autistic Spectrum Disorder. The following categories have shown a decrease in the number of pupils: Moderate Learning Difficulty; Severe Learning Difficulty; Other Difficulty/Disability; Profound & Multiple Learning Difficulty; SEN

support but no specialist assessment of type of need; Visual Impairment and Hearing Impairment. The number of pupils attending school in Bradford with Autistic Spectrum Disorder as their primary need has shown the largest percentage increase (96.1%) (17). Note that additional investment to autism assessment capacity in 2022 may explain some of this increase.

Figure 3.5: Primary type of need of SEND pupils over time, pupils attending school in Bradford, January 2016 to 2022.



Source: School Census, Department for Education, 2022

In January 2022, 20.3% of pupils attending school in Bradford requiring SEN support also had a secondary need. In comparison, pupils with an EHC plan were almost twice as likely to have a secondary need (39.6% had a recorded secondary need). The most common secondary need for pupils requiring SEN support was Moderate Learning Difficulty, whereas for pupils with an EHC plan it was Speech, Language and Communications needs (Table 3.1) (17).

Table 3.1: Breakdown of secondary need by pupils requiring SEN support and those with an EHC plan, pupils attending school in Bradford, January 2022.

	SEN support		EHC Plan	
	Number of pupils	Percentage of all secondary needs	Number of pupils	Percentage of all secondary needs
Secondary need				
Specific Learning Difficulty	212	7.8%	54	3.7%
Moderate Learning Difficulty	740	27.2%	197	13.4%
Severe Learning Difficulty	15	0.6%	192	13.0%
Profound and Multiple Learning Difficulty	3	0.1%	37	2.5%
Social, Emotional and Mental Health	626	23.0%	193	13.1%
Speech, Language and Communications needs	579	21.3%	380	25.8%
Hearing Impairment	52	1.9%	37	2.5%
Visual Impairment	40	1.5%	106	7.2%
Multi-sensory impairment	7	0.3%	10	0.7%
Physical Disability	117	4.3%	110	7.5%
Autistic Spectrum Disorder	131	4.8%	116	7.9%
Other Difficulty or Disability	122	4.5%	40	2.7%
SEN support but no specialist assessment of type of need	72	2.7%	0	0.0%
All secondary needs	2,716	100%	1,472	100%

Source: School Census, Department for Education, 2022

3.4 Characteristics of the SEND population

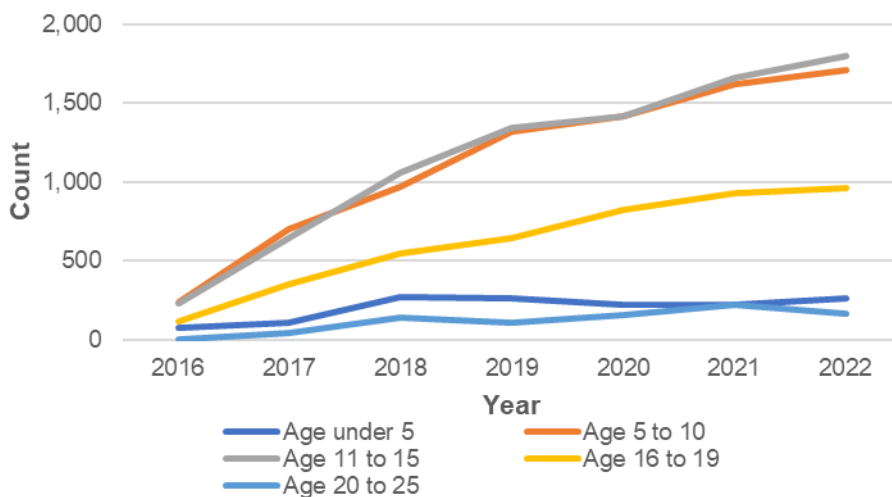
3.4.1 Gender

Special educational needs are more prevalent in boys than girls among pupils attending school in Bradford. In January 2022, 16.8% of boys received SEN support compared to 9.6% of girls, and 5.2% of boys had an EHC plan compared to 2.1% of girls. These percentages are similar to national and regional averages (17).

3.4.2 Age

The largest number of EHC plans are among children aged 5 to 10 and 11 to 15 living in Bradford and the counts have been increasing fastest in these age groups (Figure 3.6). The age group with the lowest number of EHC plans is young people aged 20 to 25 years (18).

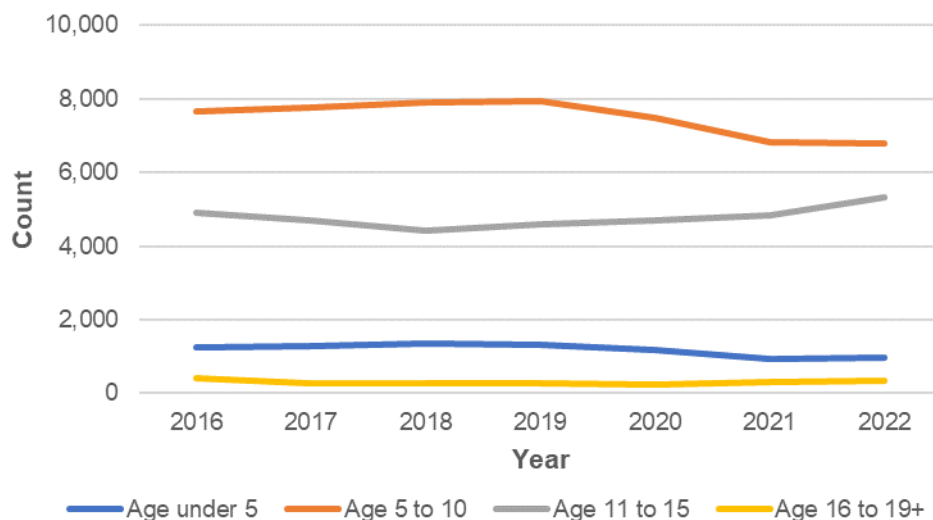
Figure 3.6: The number of EHC plans by age group, Bradford, 2016 to 2022.



Source: SEN2, Department for Education, 2022

The largest proportion of SEN support is provided to pupils attending school in Bradford aged 5 to 10 and 11 to 15 years old and this has been consistent since 2016 (Figure 3.7) (17).

Figure 3.7: The count of pupils requiring SEN support by age group, pupils attending school in Bradford, 2016 to 2022.



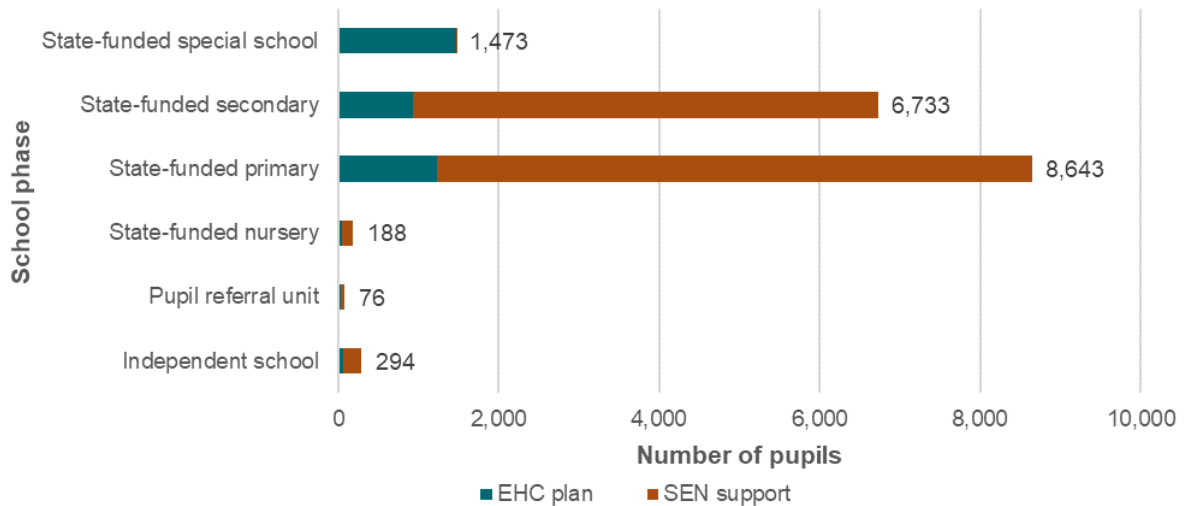
Source: School Census, Department for Education, 2022

3.4.3 School phase

As of January 2022 among pupils attending school in Bradford, the largest number of pupils identified as having SEND were in state-funded primary schools (n = 8,643). There are 8 state-funded special schools in Bradford and they were responsible for the largest number of pupils with an EHC plan (n = 1,469). Only 3.2% of pupils

identified as having SEND were in either a state-funded nursery, independent school or pupil referral unit (Figure 3.8) (17).

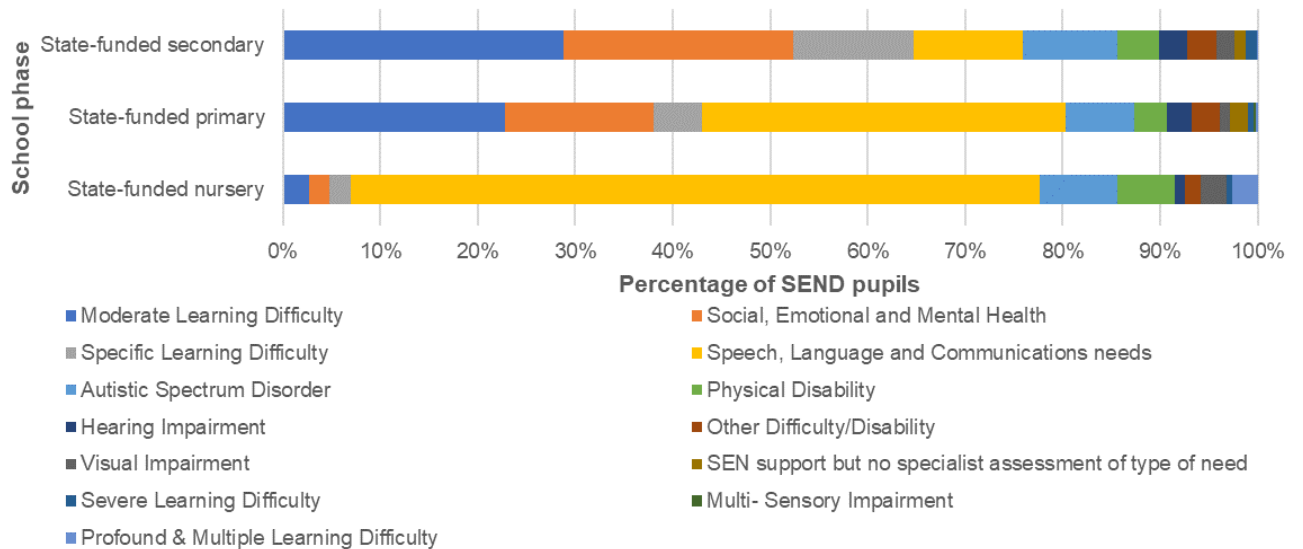
Figure 3.8: Number of pupils identified as having SEND in each school phase by SEND support type, pupils attending school in Bradford, January 2022.



Source: School Census, Department for Education, 2022

The composition of the primary need of pupils identified as having SEND changes with school phase among pupils attending school in Bradford (Figure 3.9). Speech, Language and Communication needs were the most common primary need among SEND pupils in state-funded nursery and primary schools, whereas Moderate Learning Difficulty was the most common primary need in state-funded secondary schools. The percentage of SEND pupils with Social, Emotional and Mental Health and Specific Learning Difficulty also increases with school phase (17).

Figure 3.9: The percentage of pupils identified as having SEND by primary need and school phase, pupils attending school in Bradford, January 2022



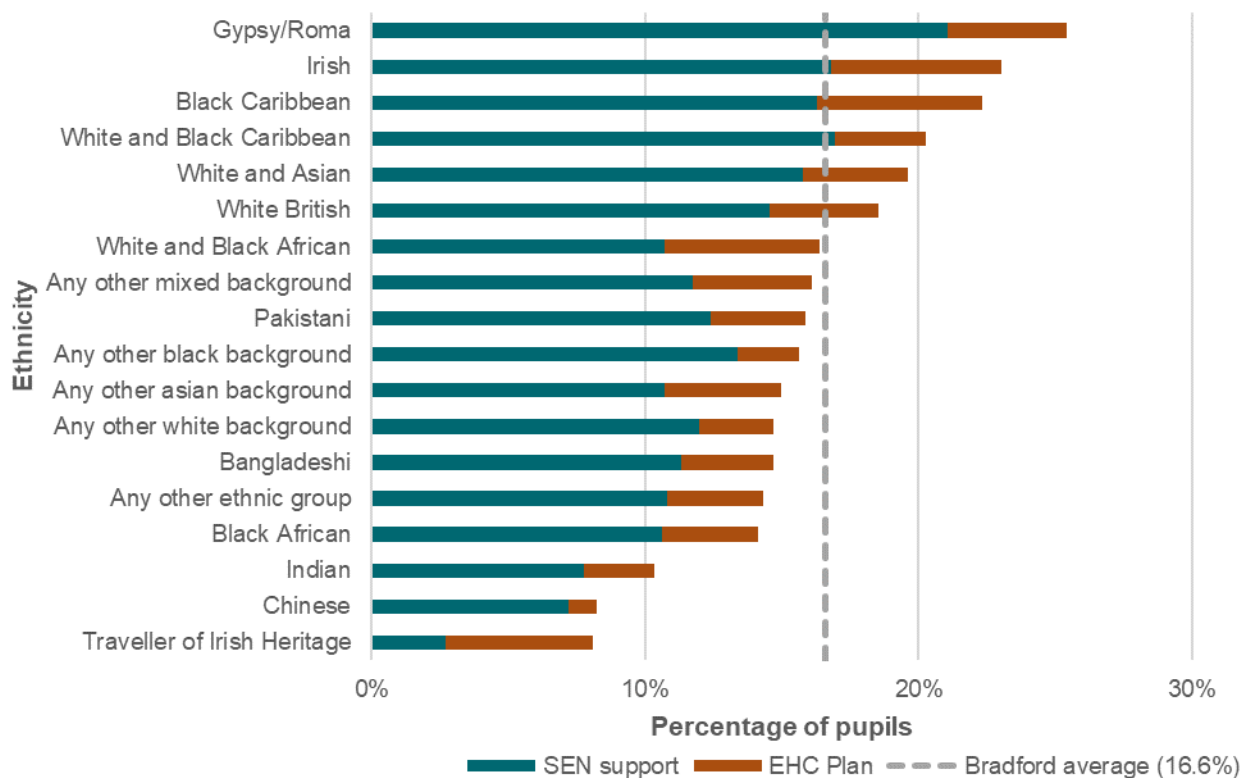
Source: School Census, Department for Education, 2022

3.4.4 Ethnicity

Gypsy/Roma, Irish and Black Caribbean pupils attending school in Bradford had the highest percentage of pupils identified as requiring SEN support or an EHC plan as of January 2022 (25.4%, 23.0% and 22.3% respectively). Travellers of Irish Heritage, Chinese and Indian pupils had the lowest percentage of pupils identified as requiring SEN support or an EHC plan in January 2022 (8.1%, 8.2% and 10.3% respectively) (

Figure 3.10) (17).

Figure 3.10: The percentage of pupils identified as requiring SEN support or an EHC plan by ethnicity, pupils attending school in Bradford, January 2022



Source: School Census, Department for Education, 2022

3.4.5 English as a first language

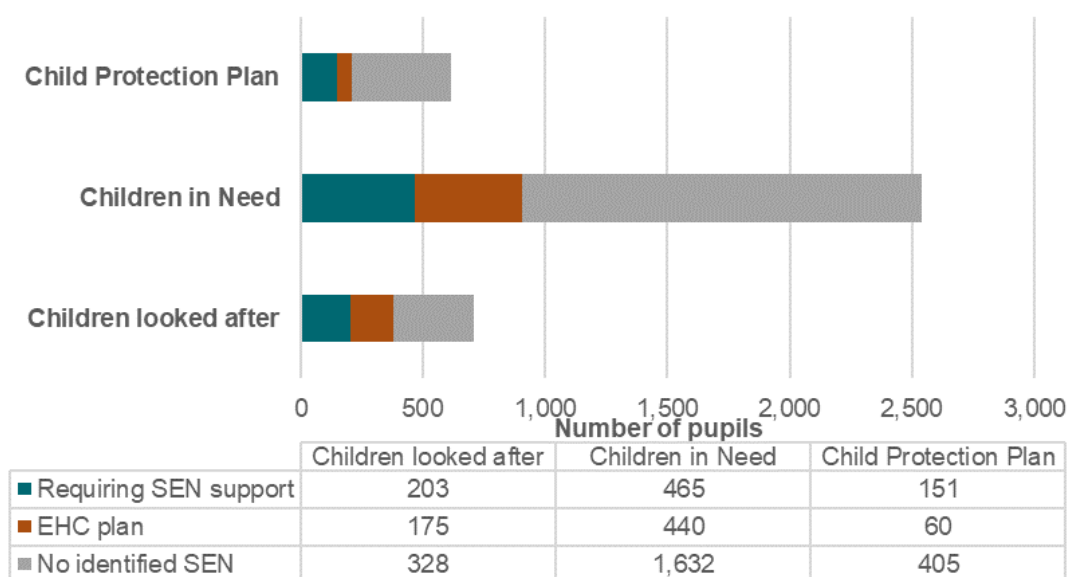
As of January 2022, the percentage of pupils attending school in Bradford who were identified as requiring SEN support is similar when comparing pupils whose first language is English (13.3%) and pupils whose first language is a language other than English (13.2%). This is more equitable than the national averages (13.1% of pupils whose first language is English receive SEN support compared to 9.8% of pupils whose first language is a language other than English) (17).

As of January 2022, the percentage of pupils attending school in Bradford with an EHC plan is slightly higher among pupils whose first language is English (3.9%) compared to pupils whose first language is a language other than English (3.3%). There is a similar difference between the national average (4.1% of pupils whose first language is English have an EHC plan compared to 3.1% of pupils whose first language is a language other than English) (17).

3.4.6 Social care provision

In Bradford during 2020/21, 53.5% of looked after children were identified as having SEND, over three times higher than the all pupil average for children attending school in Bradford (16.6%). 35.7% of children in need were identified as having SEND and 34.3% of children with child protection plans were identified as having SEND, both twice as high as the all pupil average (Figure 3.11). These differences are similar to the national average (20).

Figure 3.11: The number of children requiring social care provision by type of provision and type of SEND need, Bradford, 2020/21.



Source: Outcomes for children in need, including children looked after by local authorities, Department for Education, 2022

3.4.7 Free school meal eligibility

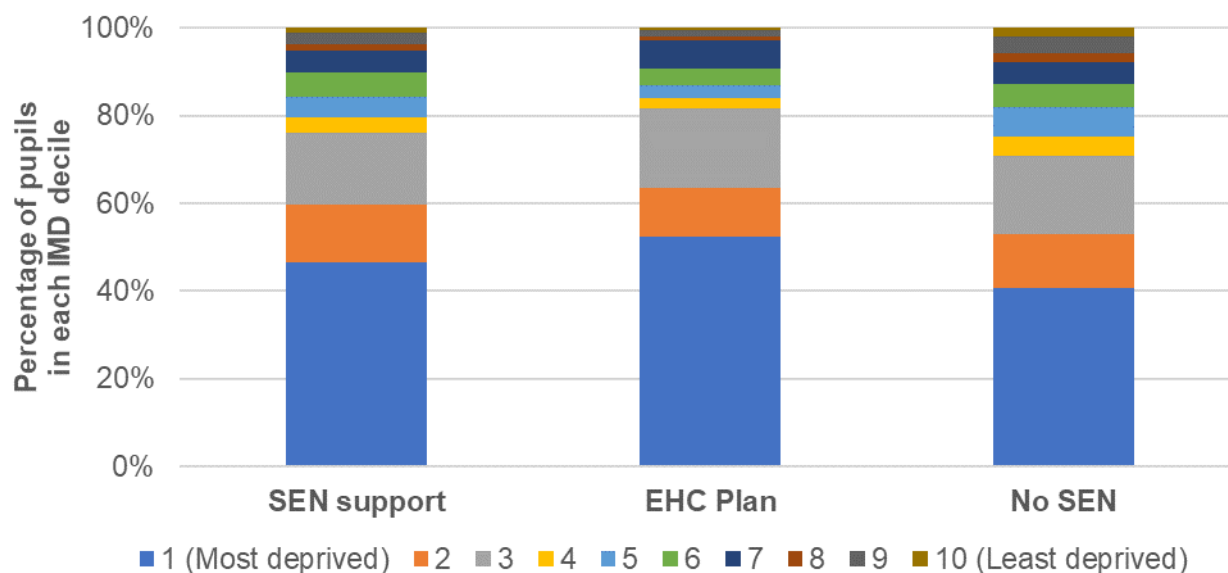
Pupils identified as having SEND are more likely to be eligible for free school meals in Bradford than pupils with no identified SEND, which follows national trends. Among children attending school in Bradford, 40.5% of pupils identified as having SEND were eligible for free school meals in January 2022 compared to 24.7% of pupils with no identified SEND (17).

3.4.8 Deprivation

As information is only published showing the deprivation decile of schools' locations in Bradford, not the deprivation decile of the pupils' home addresses, the location of schools in Bradford, particularly special schools and resourced provisions, needs to be considered when interpreting the following data as it could be skewing the findings.

Schools in the more deprived areas of Bradford have a disproportionate number of pupils requiring SEN support or who have an EHC plan (Figure 3.12). As of January 2022, over half of pupils (52.5%) with an EHC plan in Bradford attended a school in one of the 10% most deprived areas of the country according to the Index of Multiple Deprivation (IMD). 46.6% of pupils requiring SEN support also attended a school in IMD decile 1 (most deprived), compared to 40.6% of pupils with no identified SEND (17).

Figure 3.12: Percentage of pupils attending schools in each IMD decile by SEN status, Bradford, January 2022.

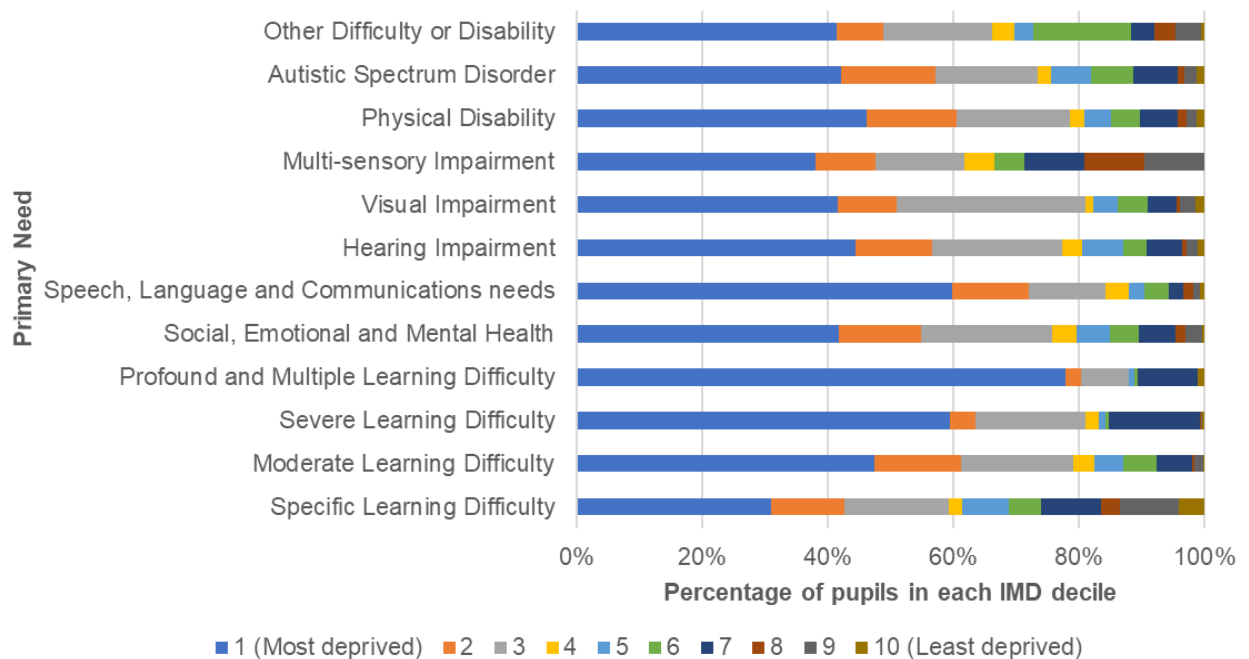


Source: School Census, Department for Education, 2022

The proportion of pupils identified as having SEND attending schools in Bradford in each deprivation decile differs by primary need, with some primary needs such as Profound and Multiple Learning Difficulty having a higher proportion of pupils

attending schools in the most deprived IMD decile than others such as Specific Learning Difficulty (Figure 3.13) (17).

Figure 3.13: The percentage of pupils identified as having SEND attending schools in each IMD decile by primary need of the pupils, Bradford, January 2022.



Source: School Census, Department for Education, 2022

3.4.9 School location

The percentage of pupils identified as having SEND varies by ward, with schools in Heaton ward having the highest prevalence (24.4%) and schools in Wharfedale ward having the lowest (7.6%). Table 3.2 shows the number and percentage of pupils attending school in Bradford requiring either SEN support or an EHC plan (17). A more detailed breakdown by the primary need of pupils in each ward is found in the

Appendix (Table 9.1 and Table 9.2), with the majority of wards showing a breakdown similar to the Bradford average. The data is available based on the location of pupils schools, not their home address, which should be considered when interpreting the data as higher proportions may be due to the location of special schools and resourced provisions in Bradford.

Table 3.2: Number and percentage of pupils requiring SEN support or an EHC plan by location of school in Bradford, January 2022.

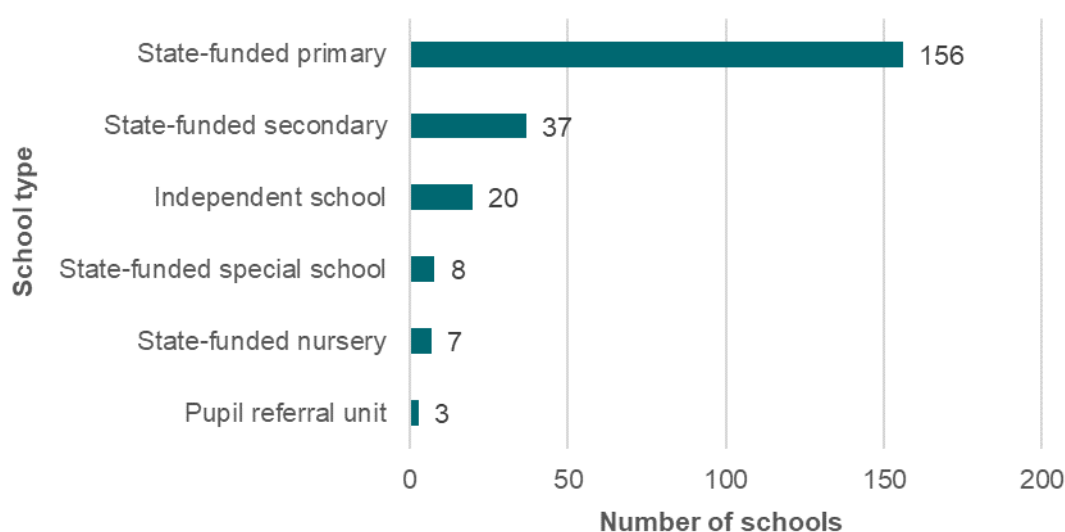
Ward	Total pupils	Number requiring SEN support	Number requiring EHC plan	Number requiring SEN support or EHC plan	SEN support (%)	EHC plan (%)	SEN support or EHC plan (%)
Heaton	5,688	942	444	1,386	16.6%	7.8%	24.4%
Bradford Moor	4,816	784	252	1,036	16.3%	5.2%	21.5%
Great Horton	4,542	563	402	965	12.4%	8.9%	21.2%
Keighley Central	3,638	425	345	770	11.7%	9.5%	21.2%
Bowling and Barkerend	6,333	954	267	1,221	15.1%	4.2%	19.3%
Bingley Rural	5,272	737	278	1,015	14.0%	5.3%	19.3%
Keighley East	1,354	199	55	254	14.7%	4.1%	18.8%
Shipley	2,933	422	123	545	14.4%	4.2%	18.6%
Wyke	2,093	336	52	388	16.1%	2.5%	18.5%
Manningham	5,702	888	157	1,045	15.6%	2.8%	18.3%
Eccleshill	1,599	221	72	293	13.8%	4.5%	18.3%
Keighley West	3,646	498	166	664	13.7%	4.6%	18.2%
Windhill and Wrose	1,322	155	55	210	11.7%	4.2%	15.9%
Tong	3,522	495	60	555	14.1%	1.7%	15.8%
Royds	2,984	391	73	464	13.1%	2.4%	15.5%
Little Horton	5,547	741	117	858	13.4%	2.1%	15.5%
Queensbury	2,408	316	48	364	13.1%	2.0%	15.1%
Idle and Thackley	3,610	484	47	531	13.4%	1.3%	14.7%
City	5,839	742	115	857	12.7%	2.0%	14.7%
Thornton and Allerton	3,768	464	89	553	12.3%	2.4%	14.7%
Toller	4,270	537	87	624	12.6%	2.0%	14.6%
Bolton and Undercliffe	5,605	622	178	800	11.1%	3.2%	14.3%
Wibsey	1,772	217	28	245	12.2%	1.6%	13.8%
Baildon	1,209	141	19	160	11.7%	1.6%	13.2%
Clayton and Fairweather Green	3,961	400	82	482	10.1%	2.1%	12.2%
Ilkley	3,209	320	61	381	10.0%	1.9%	11.9%
Craven	1,366	127	15	142	9.3%	1.1%	10.4%
Worth Valley	1,374	108	24	132	7.9%	1.7%	9.6%
Washburn	115	10	1	11	8.7%	0.9%	9.6%
Bingley	3,939	309	61	370	7.8%	1.5%	9.4%
Wharfedale	1,127	75	11	86	6.7%	1.0%	7.6%
Bradford Total	104,563	13,623	3,784	17,407	13.0%	3.6%	16.6%

Source: School Census, Department for Education, 2022.

3.4.10 SEND provision in schools

Out of the 231 schools in the Bradford District, only 6 schools reported having no children and young people requiring SEN support or with an EHC plan, highlighting that provision is required throughout the district in all school settings. Figure 3.14 shows a breakdown of the school types across Bradford, the schools reporting no SEND were all independent schools.

Figure 3.14 Number of schools in Bradford District by school type, January 2022.



Source: School Census, Department for Education, 2022

3.5 Identification of need

Early identification of need benefits a child's future. It allows early medical treatment where required and care support packages to be put in place, increasing the chances of children to be healthy and reach their academic potential.

3.5.1 Newborn physical examination screening

In 2020/21, 98.3% of eligible newborn babies in Bradford received a physical examination. This is higher than both the national (97.3%) and Yorkshire and the Humber (97.3%) values (3).

3.5.2 Newborn hearing screening

In 2020/21, 98.6% of eligible newborn babies in Bradford received a hearing examination. This is higher than both the national (97.5%) and Yorkshire and the Humber (97.6%) values (3).

3.5.3 Health visitor service delivery

The Health Visiting Service leads on the delivery of the 0-5 years section of the Healthy Child Programme (HCP) which was set up to improve the health and wellbeing of children and young people. This is done through health and development reviews, health promotion, parenting support and screening and immunisation programmes.

In 2021/ 22, the service was under pressure due to the impact of COVID-19, budget reductions, and workforce issues. As a result of this, the percentage of children in

Bradford who received a 2 to 2½ year review was over 30 percentage points less than the national and regional averages (Table 3.3). The proportion of babies and younger children receiving health visiting checks are closer to the national and regional averages, with Bradford performing better than average for the 6 to 8 weeks and 12 month reviews (21).

Table 3.3: The percentage of children that received various health checks during 2021/22 in England, Yorkshire and the Humber and Bradford.

	England	Yorkshire and the Humber	Bradford
Percentage of births that receive a New Birth Visit	97.4%	97.6%	94.3%
Percentage of infants who received a 6 to 8 week review by the time they were 8 weeks	81.5%	85.4%	93.5%
Percentage of children who received a 12 month review by the time they turned 12 months	71.9%	86.5%	83.1%
Percentage of children who received a 2 to 2½ year review	74.0%	77.7%	42.4%

Source: Health visitor service delivery metrics experimental statistics, OHID, 2022

Since then, further investment has been put in place, and the Health Visiting Service has designed and implemented a detailed improvement plan. The Service has improved significantly on their 2021/22 position, seeing 81.5% of all eligible children to deliver their health checks by the age of 2.5 years in Quarter 2 of 2022/23 (4).

In Quarter 2 of 2022/23, of those children receiving a 2 to 2 ½ year review, Bradford had a similar or slightly lower proportion of children achieving the expected level of development in the 2 to 2 ½ year review than regional and national averages (22).

Table 3.4 presents the results across the five domains of development using the using the Ages and Stages Questionnaire (ASQ-3).

Table 3.4: The percentage of children at or above the expected level in the five domains of development during their 2 to 2 ½ year review during Quarter 2 of 2022/23 in England, Yorkshire and the Humber and Bradford.

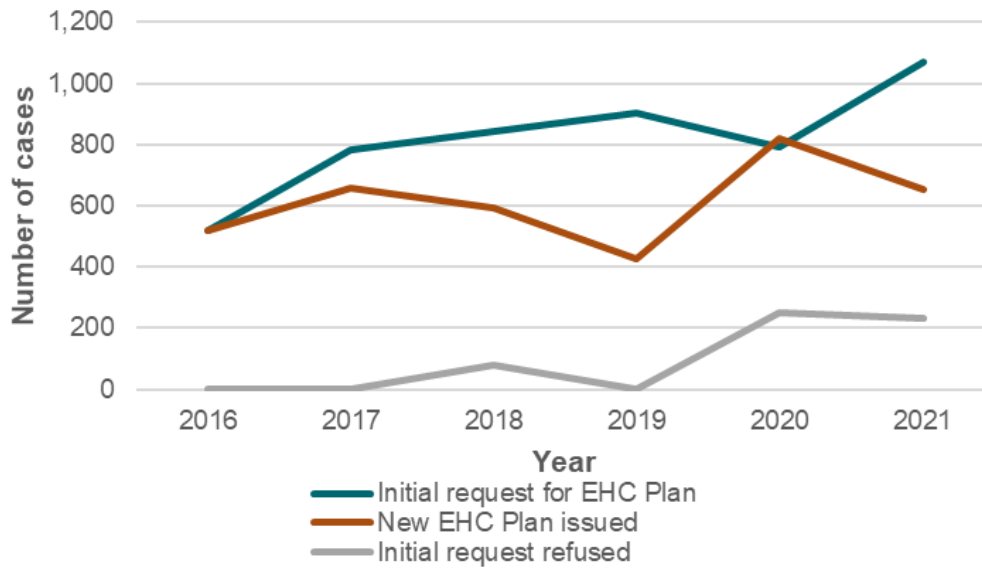
Percentage of children at or above the expected level in...	England	Yorkshire and the Humber	Bradford
Communication skills	85.5%	88.4%	85.5%
Gross motor skills	92.8%	94.8%	92.2%
Fine motor skills	92.4%	94.6%	92.0%
Problem solving skills	91.8%	93.5%	90.2%
Personal to social skills	90.4%	93.0%	89.5%
All five areas of development	79.4%	82.8%	77.1%

Source: Child development outcomes at 2 to 2 and a half years, OHID, 2023

3.6 SEND assessment process

In Bradford during 2021 there were 1,070 initial requests for a statutory assessment for an EHC plan, the largest number since the time series began in 2016 (Figure 3.15). There were 521 new EHC plans issued in 2021, which was lower than in 2020, and 232 initial requests for an EHC plan statutory assessment were refused, a similar number to 2020 (18).

Figure 3.15: Request status for EHC plan, Bradford, 2016 to 2021.

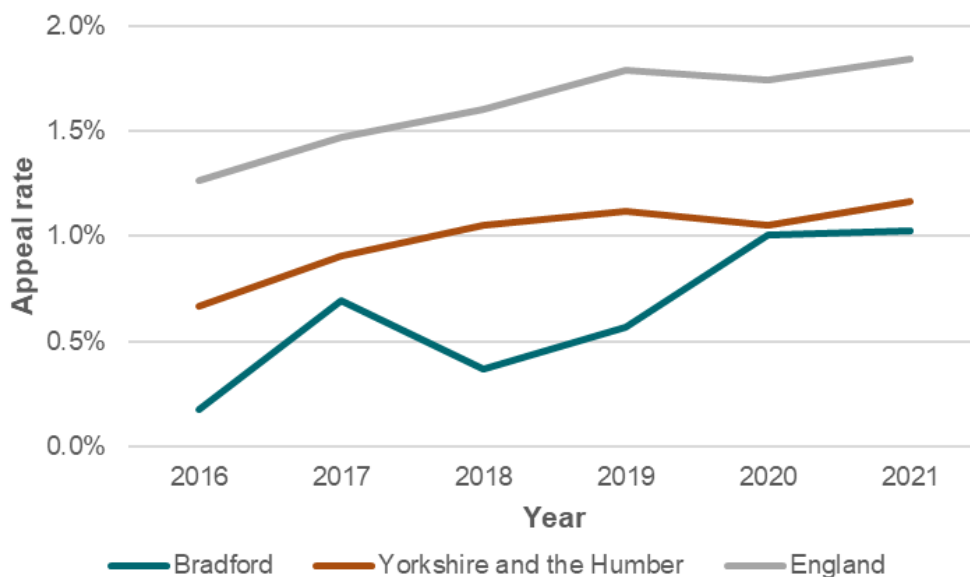


Source: SEN2, Department for Education, 2022

There has been an improvement in the percentage of EHC plans that are issued within the 20 week time limit in Bradford, with 80.7% being issued within 20 weeks during 2021, almost twice the 2016 percentage (44.0%) and higher than the national average (59.9%) (18).

Parents, carers and young people can register an appeal with the SEND tribunal for multiple reasons including if they are unhappy about the contents of the plan or there is a refusal to assess. Bradford has had a lower than average appeal rate (percentage of appealable decisions that were appealed) since 2016, but it has been increasing over time (Figure 3.16) (23).

Figure 3.16: Appeal rate of EHC plan appealable decisions, Bradford, Yorkshire and the Humber and England, 2016 to 2021.



Source: Tribunal Statistics Quarterly, Ministry of Justice, 2022

A cost-effective alternative to a SEND tribunal is mediation, whereby a trained impartial person acts as a referee in the dispute. The number of mediation cases in Bradford has been increasing over time, from 12 in 2016 to 103 in 2021 (

Table 3.5). In 2021, 28 of these mediation cases were then followed by an appeal to the tribunal, suggesting 72.8% were successfully mediated, a slightly lower percentage than the national average (74.5%), but similar to the regional average (72.9%) (18).

Table 3.5: Number and percentage of mediation cases and those that were followed by appeals to the tribunal in Bradford, Yorkshire and the Humber and England, 2016 to 2021.

Year	Mediation cases	Mediation cases followed by appeals to Tribunal	Percentage of mediation cases followed by appeals to Tribunal		
	Bradford	Bradford	Bradford	Yorkshire and the Humber	England
2016	12	0	0.0%	20.9%	25.3%
2017	51	20	39.2%	26.2%	25.2%
2018	50	12	24.0%	20.2%	26.4%
2019	0	0	0.0%	18.0%	25.1%
2020	81	6	7.4%	15.7%	26.7%
2021	103	28	27.2%	27.1%	25.5%

Source: SEN2, Department for Education, 2022

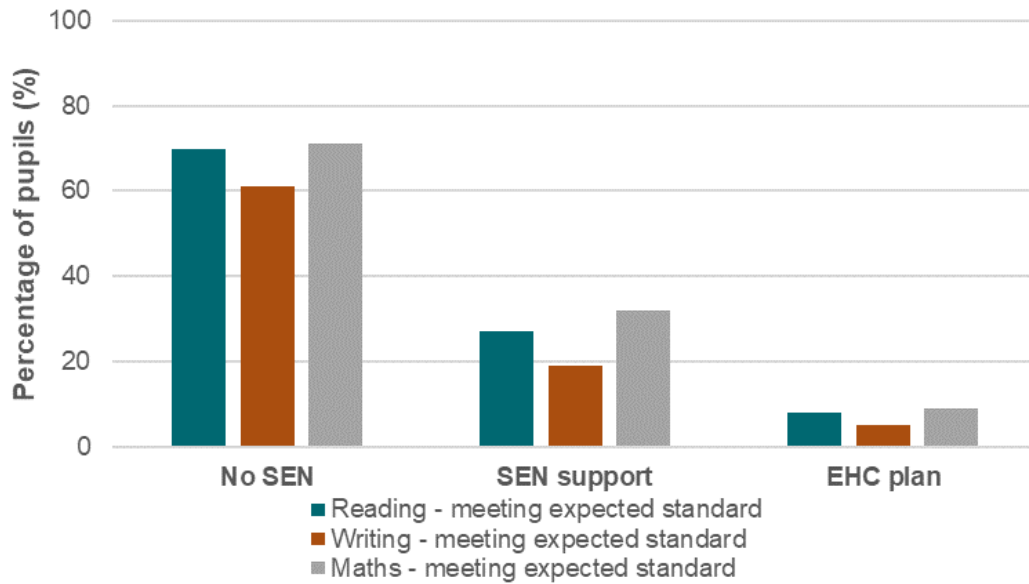
3.7 Outcomes for children and young people with SEND

3.7.1 Educational attainment

Key Stage 1 (KS1) describes the period between ages 5 and 7 years, at the beginning of primary school. Among pupils attending school in Bradford during 2021/22, over half of pupils with no identified SEND met the expected standard in each category of reading, writing and maths (

Figure 3.17). In contrast, only around a quarter of children requiring SEN support met the expected standard, and less than 10% of children with an EHC plan met the expected standard. This highlights that the educational attainment gap for pupils with SEND begins in the early years. These figures were similar to or slightly below national averages (24).

Figure 3.17: Percentage of key stage 1 pupils meeting the expected standard in reading, writing or maths at Key Stage 1 by SEN status, pupils attending school in Bradford, 2021/22.

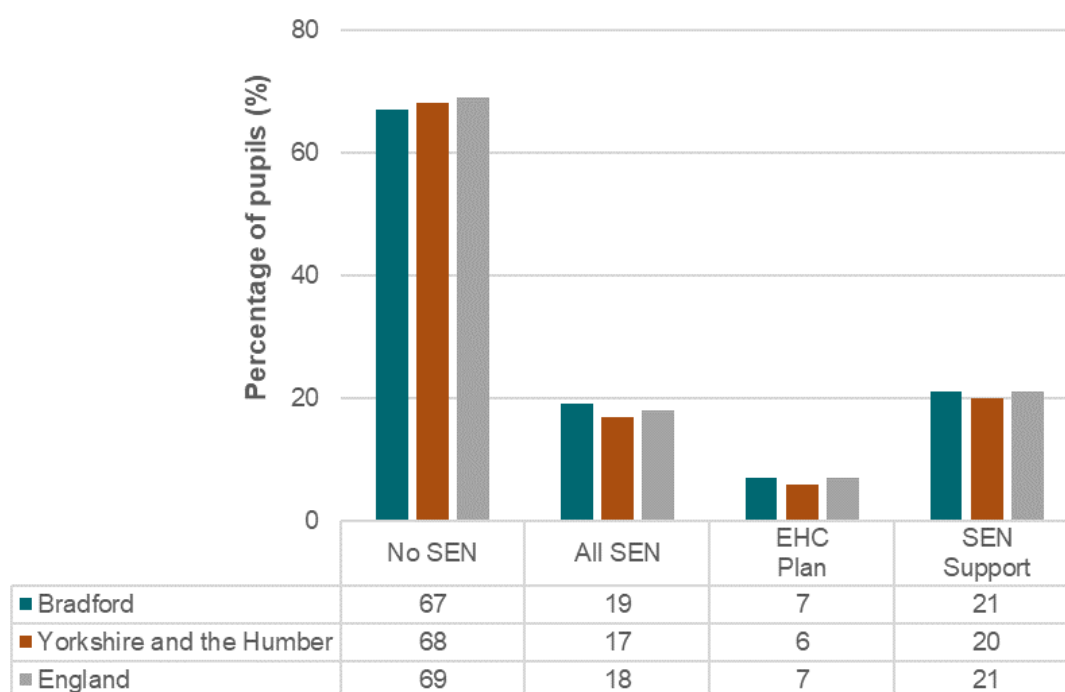


Source: Key stage 1 and phonics screening check attainment, Department for Education, 2022

Key Stage 2 (KS2) describes the period between ages 7 and 11 years, at the end of primary school. Among pupils attending school in Bradford during 2021/22, 18% of pupils identified as having SEND reached the expected standard in reading, writing and maths, compared to 69% of pupils with no identified SEND. Only 7% of pupils with an EHC plan reached the expected standard, compared to 21% of pupils requiring SEN support. These percentages were similar to regional and national averages (

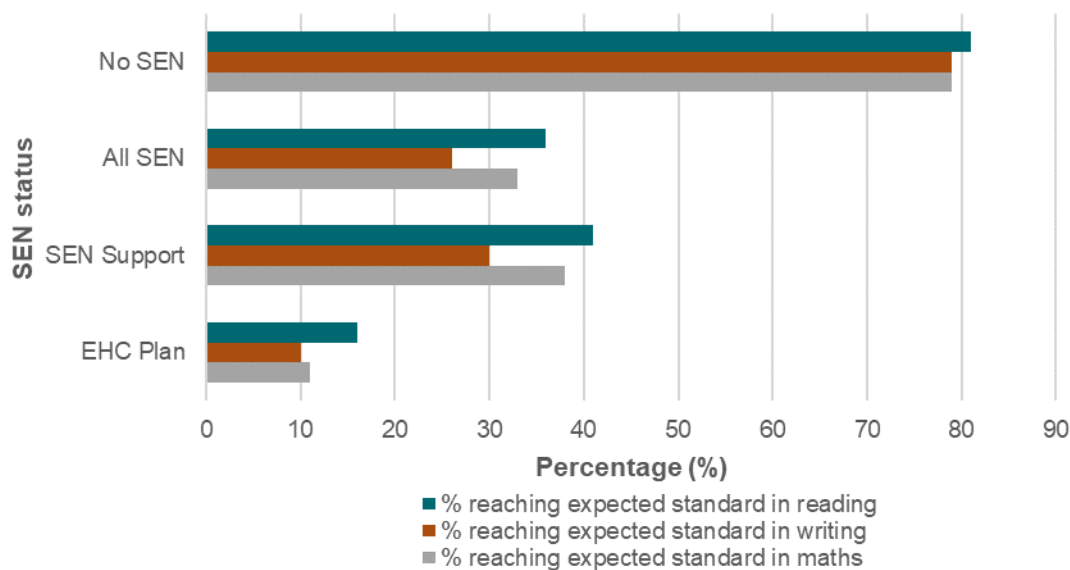
Figure 3.18). When looking at subject specific outcomes, the attainment gap is lowest in reading and highest in writing (Figure 3.19) (25).

Figure 3.18: Percentage of pupils reaching the expected standard in reading, writing and maths at Key Stage 2 by SEN status, pupils attending school in Bradford, Yorkshire and the Humber and England, 2021/22.



Source: Key stage 2 attainment, Department for Education, 2022

Figure 3.19: Percentage of pupils reaching the expected standard in reading, writing or maths at Key Stage 2 by SEN status, pupils attending school in Bradford, 2021/22.



Source: Key stage 2 attainment, Department for Education, 2022

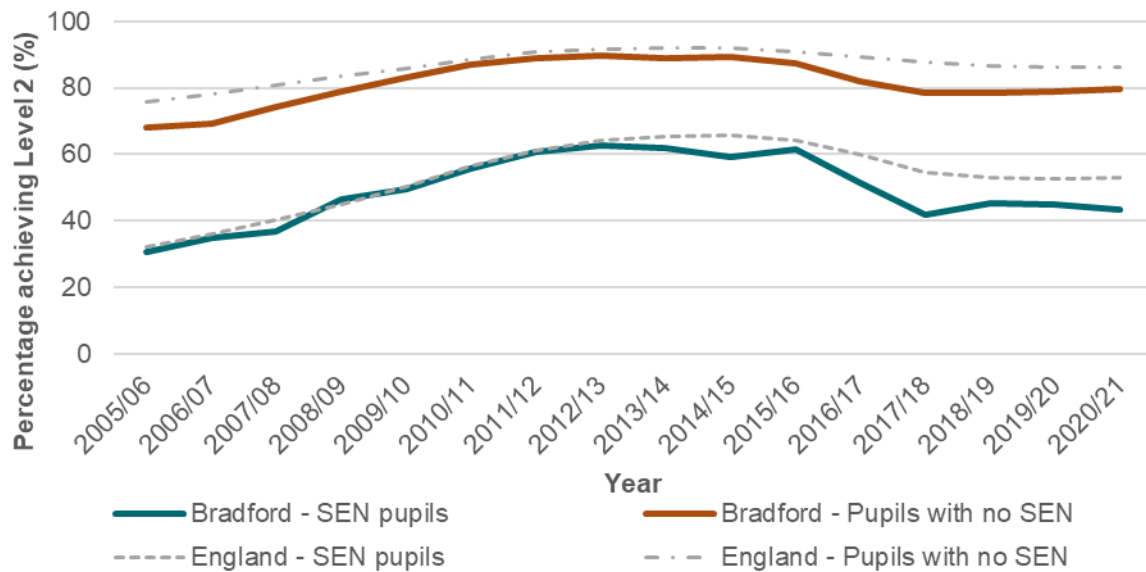
Key Stage 4 (KS4) spans from 14 -16 years, culminating in GCSEs (or their equivalents). Among pupils attending school in Bradford during 2021/22, 25.0% of students identified as having SEND achieved grades 4 or above (a pass) in English and mathematics GCSEs, compared to 67.0% of students with no identified SEND. These values are lower than the national average, although the percentage point difference between them is similar (nationally, 33.7% of students with SEND achieved grades 4 or above in English and Mathematics, compared to 75.9% of those with no identified SEND) (26).

3.7.2 Attainment by age 19

Among pupils attending school in Bradford during 2020/21, 43.5% of students aged 19 years identified as having SEND had achieved Level 2, which is the attainment of five or more GCSEs at grades A* - C / 9 - 4 (including English and Maths) or equivalent qualifications. This is 36.1 percentage points lower than the percentage of students achieving Level 2 with no identified SEND (79.7%) (27). This gap had been narrowing since 2007/08, but began to widen in 2015/16 (Figure 3.20), with the disproportionate impact of COVID-19 on SEND pupils as a possible reason for the widening of the gap in 2020/21, including impacts of remote learning and teacher assessed grades being used rather than national examinations.

The Bradford average Level 2 attainment was similar to national averages for both students with and without identified SEND until 2016/17 where attainment decreased among pupils attending school in Bradford at a faster rate than the national average. In England during 2020/21, 53.1% of students aged 19 years with identified SEND had achieved Level 2, almost 10 percentage points higher than the corresponding figure for pupils attending school in (43.5%) (27).

Figure 3.20: Percentage of pupils achieving Level 2 at age 19 years by SEN status, pupils attending school in Bradford and England, 2005/06 to 2020/21.

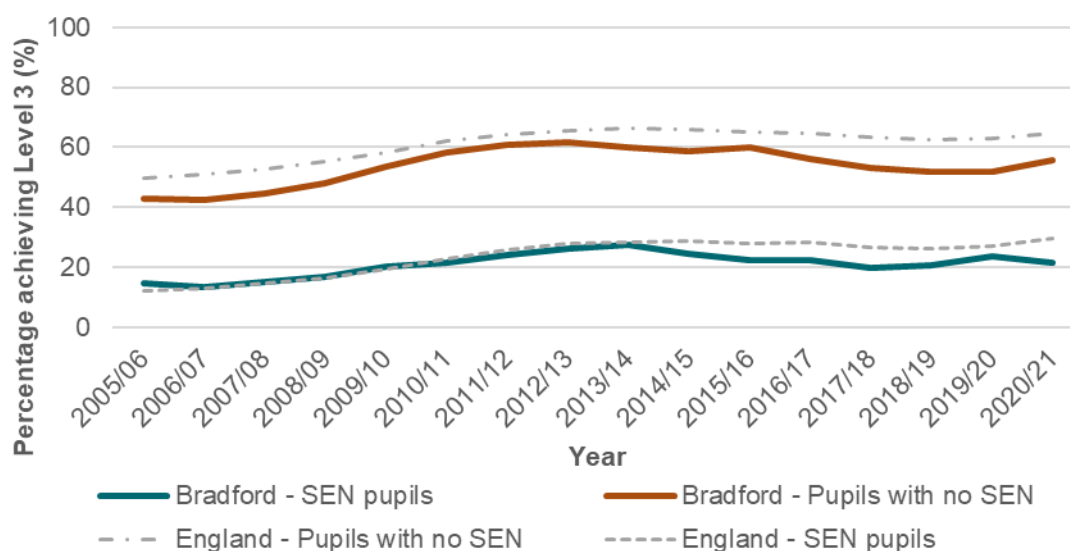


Source: Level 2 and 3 attainment for age 16 to 25, Department for Education, 2022

Among pupils attending school in Bradford during 2020/21, 21.5% of students aged 19 years with identified SEND had achieved Level 3, which is the attainment of two or more A-levels or equivalent qualifications. This is 34.3 percentage points lower than the percentage of pupils achieving Level 3 with no identified SEND (55.8%). This gap widened since 2005/06, but then began to narrow in 2016/17, although it has widened again in 2020/21 (Figure 3.21), possibly due to the disproportionate impact of COVID-19 on students with SEND, including impacts of remote learning and teacher assessed grades being used rather than national examinations.

The Bradford average Level 3 attainment was similar to national averages for students both with and without SEND until 2014/15 where attainment decreased among pupils attending school in Bradford at a faster rate than the national average. In England during 2020/21, 29.6% of students aged 19 years with identified SEND had achieved Level 2, 8 percentage points higher than the Bradford average (21.5%) (27).

Figure 3.21: Percentage of students achieving Level 3 at age 19 years by SEN status, pupils attending school in Bradford and England, 2005/06 to 2020/21.



Source: Level 2 and 3 attainment for age 16 to 25, Department for Education, 2022

3.7.3 Destination of school leavers

Among pupils attending school in Bradford during 2020/21, young people identified as having SEND were less likely to continue on to further education, employment or apprenticeships after key stage 4 than those with no identified SEND. 86.8% of young people identified as having SEND went onto education (82.7%), employment (2.5%) or apprenticeships (1.6%) compared to 92.0% of those with no identified SEND (87.2%, 2.3%, 2.4% respectively). These percentages are lower than the national average (89.3% for pupils identified as having SEND and 94.7% for pupils with no identified SEND) (28).

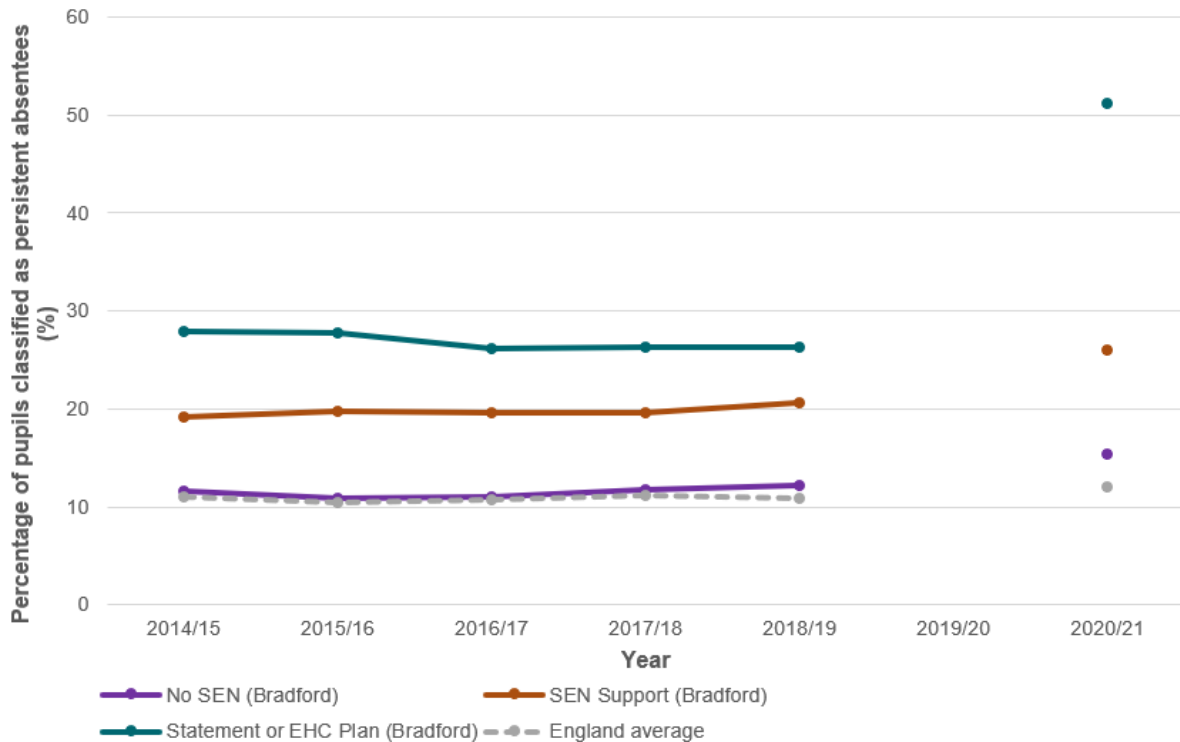
3.7.4 School Absences

Persistent absentees are defined as pupils who have missed 10% or more of school sessions due to authorised or unauthorised absence. Missing school sessions can have a negative impact on pupils' attainment and future life outcomes.

Since 2014/15, pupils attending school in Bradford with statements or EHC plans have consistently had the highest persistent absentee rate, over double the rate of pupils with no identified SEND, and pupils requiring SEN support also had a higher rate than pupils with no identified SEND. Bradford has a higher persistent absentee rate than the overall national average (Figure 3.22) (29).

Due to the disruptions of COVID-19 on educational establishments, no data has been published for 2019/20 and caution should be taken when comparing 2020/21 data to previous years. The 2020/21 timepoint in Figure 3.22 highlights that the impact of COVID-19 on absence rates was highest amongst pupils with statements or EHC plans.

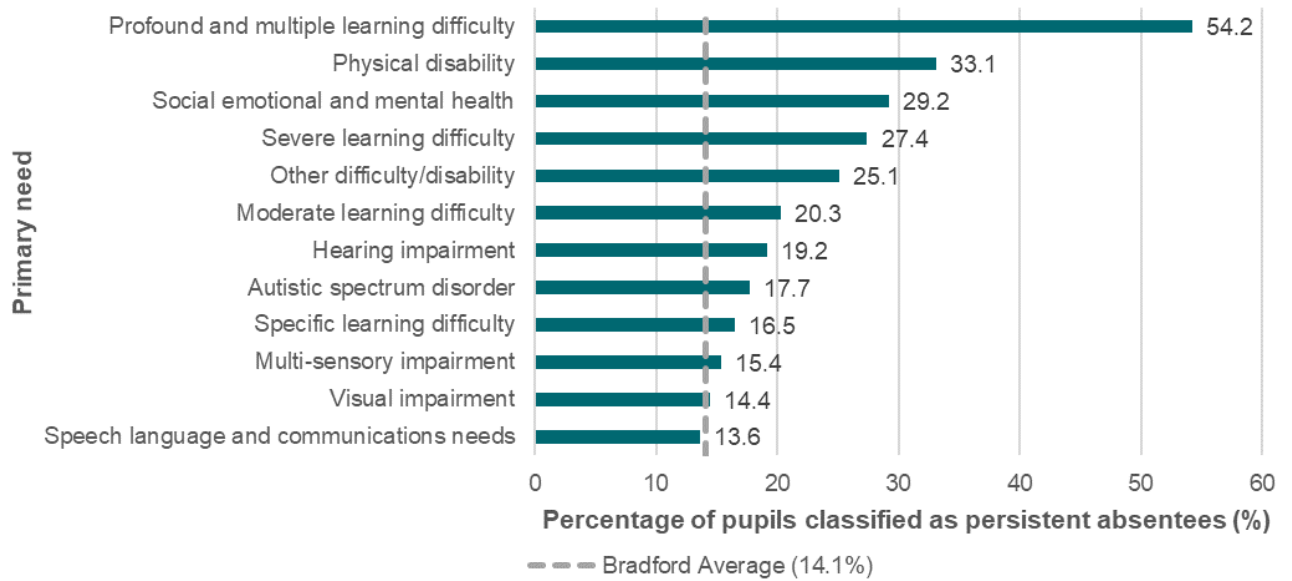
Figure 3.22: Percentage of pupils classified as persistent absentees by SEN classification, pupils attending school in Bradford, 2014/15 to 2020/21.



Source: Pupil absence in schools in England, Department for Education, 2022

Among pupils attending school in Bradford during 2018/19 (this timepoint was chosen to prevent the impacts of COVID-19 affecting the data), SEND pupils with Profound and Multiple Learning Difficulties as their primary need had the highest persistent absentee rate of 54.2% (Figure 3.23). This was followed by pupils whose primary need was a Physical Disability (33.1%) and Social, Emotional and Mental Health (29.2%). All primary need categories apart from Speech, Language and Communication Needs had a higher rate of persistent absence than the overall Bradford average (14.1%) (29).

Figure 3.23: Percentage of pupils identified as having SEND classified as persistent absentees by primary need, pupils attending school in Bradford, 2018/19.

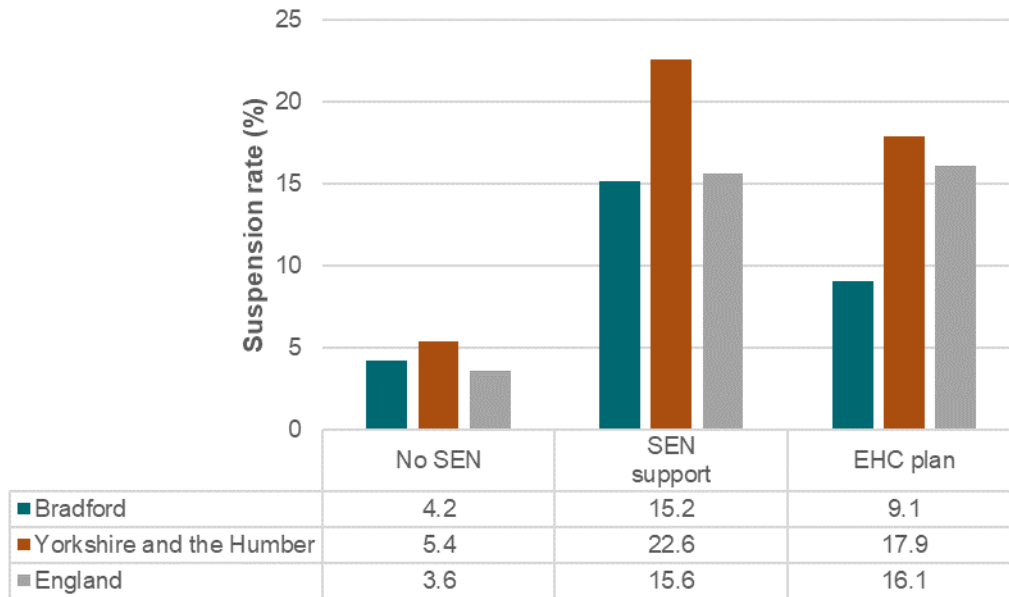


Source: *Pupil absence in schools in England, Department for Education, 2022*

3.7.5 School suspensions and exclusions

During 2018/19, the rate of suspension of pupils identified as having SEND was over twice (for pupils with an EHC plan) or three times (for pupils requiring SEN support) as high as the rate among pupils with no identified SEND among pupils attending school in Bradford (Figure 3.24). Bradford has a lower rate of suspension of all pupils than the average for Yorkshire and the Humber, and a lower rate than the national average for pupils with an EHC plan (30).

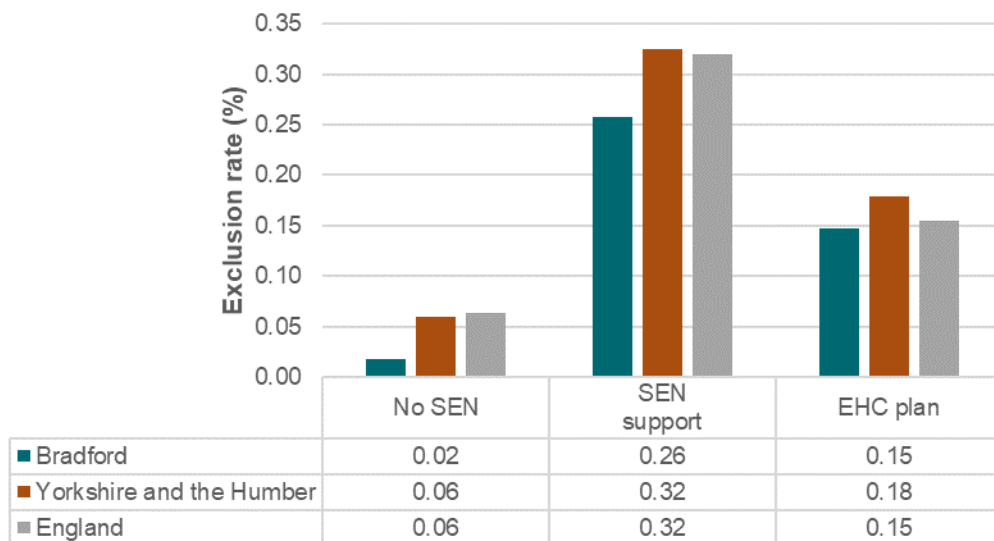
Figure 3.24: Suspension rate from school by SEN status, pupils attending school in Bradford, Yorkshire and the Humber, and England, 2018/19.



Source: *Permanent exclusions and suspensions in England, Department for Education, 2022*

During 2018/19, the rate of exclusion of pupils identified as having SEND was much higher than the rate among pupils with no identified SEND among pupils attending school in Bradford (Figure 3.25). Bradford has a lower rate of exclusion of all pupils than the average for Yorkshire and the Humber and England (30).

Figure 3.25: Exclusion rate from school by SEN status, pupils attending school in Bradford, Yorkshire and the Humber, and England, 2018/19.



Source: *Permanent exclusions and suspensions in England, Department for Education, 2022*

3.7.6 Criminal Justice System

Children with special educational needs are more likely to enter the criminal justice system, with Social, Emotional and Mental Health being the most prevalent SEND condition, followed by Moderate Learning Difficulties (31). One reason for this is due to childhood criminal exploitation (CCE) whereby an individual or criminal group deliberately target vulnerable children and manipulate them to participate in criminal activities (32).

People with physical and learning disabilities are more likely to suffer from domestic violence and abuse than the general population and are less likely to report it. National data from 2021 indicates that 8.2% of all domestic violence and abuse cases referred to the Multi-Agency Risk Assessment Conference (MARAC) involved a victim who had a physical or learning disability (32).

Possible reasons that people with special educational needs are more vulnerable to being exploited and abused include poor understanding of social 'rules', the inability to recognise good or bad behaviour, school exclusions and feelings of social isolation. Children with SEND are often limited in opportunities to learn about health relationships as they are more likely to have been excluded from sex and relationships education (SRE) due to schools not deeming it important, time off school, or parents removing them from these lessons.

A recent national government report (31) found that 80% of children who had been cautioned or sentenced for an offence, and 87% of those cautioned or sentenced for a serious violence offence, had been recorded as ever having SEN. 95% of children whose offending had been prolific had been recorded as ever having SEN. This compares to 45% of the all-pupil population had been recorded as ever having SEN at some point up to the end of Key Stage 4.

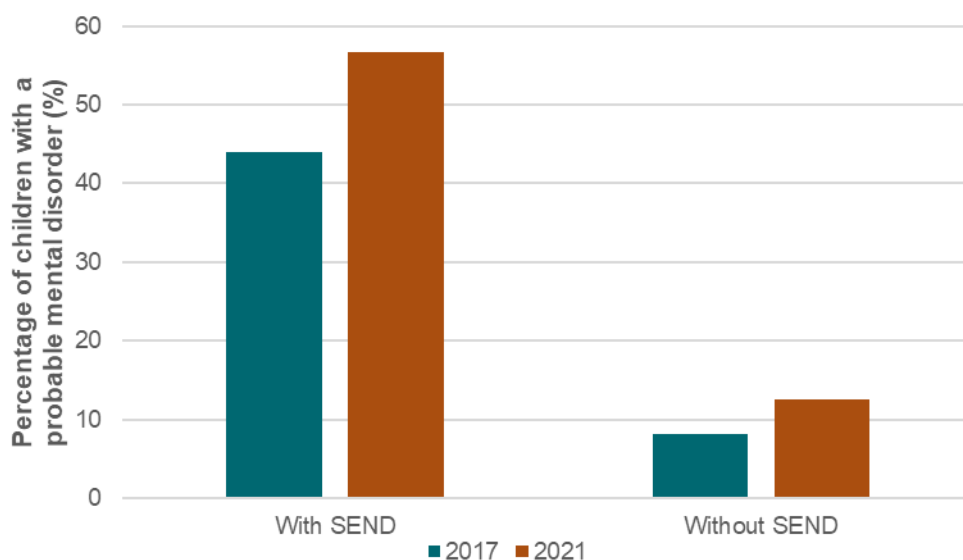
In Bradford as of January 2023, 47 children and young people in the Youth Justice System had an EHC plan which is 28% of the total Youth Justice System caseload in Bradford. 83% of these EHC plans were for social, emotional and mental health needs (4).

3.7.7 Mental Health

The prevalence of mental health disorders is higher among children with SEND compared to children with no identified SEND (

Figure 3.26). In 2021, over half of 6 to 16 year olds identified as having SEND had a probable mental disorder (56.7%, compared with 12.5% of those without). The prevalence has increased in both groups from 2017 to 2021, highlighting the negative impact of the COVID-19 pandemic on all children's mental health (33).

Figure 3.26: Percentage of children aged 6 to 16 years with a probable mental disorder, by SEND status, England, 2017 and 2021.



Source: *Mental health of children and young people in England, NHS Digital, 2021*

3.7.8 Physical Health

Obesity

Childhood obesity is associated with a number of physical and mental health conditions such as asthma, diabetes, musculoskeletal problems and depression. An obese child is more likely to become an obese adult, increasing the risk of future health conditions including coronary heart disease, stroke, type 2 diabetes, and some types of cancer.

A higher proportion of people, including children, with learning and physical disabilities in England are obese compared to the general population (34) (35). This is sometimes due to particular conditions that make it harder to control weight, such as Prader-Willi Syndrome and physical disabilities, or particular medications that are needed to manage their needs. But individuals with disabilities are often at higher risk of obesity due to poorly balanced diets and low levels of physical activity, partly due to systemic barriers.

Research from the Millennium cohort study in 2016 found that amongst 11 year olds, 31% of children in the study with intellectual disabilities were obese, compared to 21% without intellectual disabilities (36).

Dental health

Children and young people with SEND are more likely to have poorer oral health and higher levels of unmet dental needs compared to the general child population. This is partly because some SEND conditions can make children more prone to dental diseases, and treatment can be more difficult to manage amongst the SEND population due to factors including cooperation ability and anxiety. Children and young people with SEND may not have the ability to recognise or communicate if they are having symptoms such as dental pain, delaying treatment or early interventions.

Poor oral health can have a negative impact on general health. A main risk factor for aspiration pneumonia, a type of chest infection which are common causes of premature death among children with learning disabilities, is poor oral hygiene. This highlights the importance of prioritising dental health amongst the SEND population (37).

Data collected by Public Health England in 2014 showed that oral hygiene is generally poorer in children attending special schools, with more children having visible plaque at both age 5 and age 12 compared to their mainstream counterparts (4% compared to 2% and 20% compared to 10% respectively). Although children in special schools have slightly lower levels of tooth decay than children in mainstream schools, the number of 5-year-old children at special schools who have had one or more teeth extracted due to tooth decay is double that of those in mainstream schools (6% and 3% respectively). Children in special schools with a behavioural, emotional or social difficulty had the highest levels of tooth decay (38).

Although there is no published data specifically about the oral health of children identified with SEND in Bradford, among all 5 year olds in Bradford in 2018/19, 36% had experience of visually obvious dental decay, higher than national and regional averages (3).

Long-term conditions

Many children with SEND have one or more long-term conditions and associated physical health needs. Bradford Council has access to the Sussex Tool data which provides a detailed breakdown about the health needs of children and young people attending Special Schools in Bradford.

Table 3.6 shows some of the data available in the tool focussed on complex long-term health conditions and health needs. Other diagnoses are available but are not presented due to small numbers.

Table 3.6 Number of pupils attending Special Schools in Bradford with certain health conditions and health needs, 2022

	Number of pupils
Child with complex neuro-disability: autonomic storming; dystonia; severe spasms; VP shunt.	460
Child with epilepsy – seizure profile and protocol including ketogenic diet; Vagus Nerve Stimulation therapy	268
Child with respiratory management: ventilation, artificial airway; oxygen; suction; choking risk	73
Child requires enteral feeding nursing intervention including changing jejunostomy/gastrostomy tubes	171
The child needs medicines given at school everyday	124
The child needs medicines given at school some days/occasionally	488

Source: Sussex Tool, internal data, 2022

3.8 Activity level of SEND services

Table 3.7 shows how the workload of local services that support children and young people with SEND in Bradford has changed since 2019/20, split by hospital trust (Bradford or Airedale). The numbers of referrals and contacts of the majority of services decreased in 2020/21, likely due to the impact of COVID-19, but have since recovered. However, some services have not fully recovered to pre-pandemic levels (4).

Table 3.7: Trends in the activity levels of SEND services in Bradford by hospital trust, 2019/20 to 2021/22.

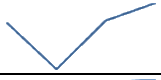


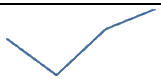
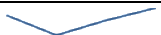
	Metric	Hospital Trust	2019/20	2020/21	2021/22	Trend
Children's Occupational Therapy	Total Referrals	ANHSFT	357	342	362	
		BTHFT	269	208	225	
		Total	613	550	587	
	New Contacts	ANHSFT	279	270	292	
		BTHFT	182			
		Total	461			
Children's Physiotherapy	Total Referrals	ANHSFT	724	482	614	
		BTHFT	1,638	881	1,155	
		Total	2,362	1,363	1,769	
	New Contacts	ANHSFT	557	415	502	
		BTHFT	1,307	767	785	
		Total	1,864	1,182	1,287	
Children's Speech and Language Therapy (SALT)	Total Referrals	ANHSFT	1,497	1,288	1,578	
		BDCFT	3,837	2,775	3,713	
		Total	5,334	4,063	5,291	
CAMHS	Referrals	Total		3,204	6,055	
Community Paediatrics	Total Referrals	Airedale	418	360	514	
		BTHFT CDC Paeds	429	346	506	
		BTHFT Comm Paeds	1,041	596	806	
	New Attendances	Airedale	327	343	299	
		BTHFT CDC Paeds	364	334	393	
		BTHFT Comm Paeds	662	539	453	
Paediatric Audiology	Paediatric Hearing Assessments	ANHSFT	263	397	466	
	Child Assessments	BTHFT	4,610	2,849	3,446	
Neurodevelopmental Assessment	Total Referrals	ANHSFT, BTHFT and BDCFT		1,132	1,997	

Notes: The following acronyms have been used: ANHSFT (Airedale NHS Foundation Trust), BTHFT (Bradford Teaching Hospital Foundation Trust), BDCFT (Bradford District Care NHS Foundation Trust), CDC (Child Development Service)

Source: Local service data, City of Bradford Metropolitan District Council, 2022.

Table 3.8 presents the number of referrals received and allocated to Bradford's Social, Communication and Learning (SCIL) team, broken down by specialism. The SCIL team focus on equipping mainstream schools and settings to identify and effectively support children and young people with SEND. In the academic year 2019-20 there was a reduction in the number of referrals allocated. This was due to referrals being on hold during lockdown from March to July 2020. Referrals have since recovered to pre-pandemic levels (4).

Table 3.8: Trends in the number of referrals received and allocated by the Social, Communication, Interaction and Learning (SCIL) team in Bradford, September to July 2018/19 to 2021/22.

	2018/19	2019/20*	2020/21	2021/22	Trend
Social, Communication, Interaction and Learning (SCIL) team	1,907	1,112	1,964	2,254	
Communication & Interaction	524	237	507	546	
Learning Support	354	294	415	398	
Early Years Schools and private, voluntary and independent providers	550	297	616	757	
Social, Emotional & Mental Health	479	284	426	553	

* In the academic year 2019-20 there was a reduction in the number of referrals allocated. This was due to referrals being on hold during lockdown from March to July 2020.

Source: Local service data, City of Bradford Metropolitan District Council, 2022.

4 Evidence of what works for children and young people with SEND

The exact needs of each child and young person with SEND will be unique, therefore what works best will vary between individuals. There are a number of evidence-based approaches to support the education, health and care needs of children and young people with SEND which are outlined in the following section.

4.1 Early identification of need

Identification of SEND should occur as early as possible to enable appropriate provisions to be implemented, minimising gaps in life outcomes between children with and without SEND. Focus should be put on identifying SEN within early years' settings when possible, before a child starts school. Health professionals also have an important role to play in early identification of SEND through neonatal screening programmes and the Healthy Child Programme.

Research from the Education Policy Institute (39) highlights that access to SEND support and identification of SEND is highly variable at a school level across England. The report found that the following groups of children had a reduced chance of being identified with SEND:

- Attending academy schools
- Living in the most disadvantaged areas of the country
- Who move school and/or are frequently out of school
- Who have suffered abuse or neglect

4.2 Supporting children in mainstream school

The following evidence-based recommendations have been compiled by the Education Endowment Foundation (40).

Create a positive and supportive environment for all pupils without exception

An inclusive school removes barriers to learning and participation, provides an education that is appropriate to pupils' needs, and promotes high standards and the fulfilment of potential for all pupils.

Schools should:

- promote positive relationships, active engagement, and wellbeing for all pupils;
- ensure all pupils can access the best possible teaching; and
- adopt a positive and proactive approach to behaviour.

Build an ongoing, holistic understanding of your pupils and their needs

Schools should aim to understand individual pupil's learning needs using the graduated approach of the 'assess, plan, do, review' approach. Assessment should be regular and purposeful rather than a one-off event, and should seek input from parents and carers as well as the pupil themselves and specialist professionals. This should help to prevent disproportionate exclusions of pupils with SEND which negatively impacts their attainment.

Ensure all pupils have access to high quality teaching

Good teaching for pupils with SEND is good teaching for all. Research suggests a group of teaching strategies that teachers should consider includes:

- flexible grouping;
- cognitive and metacognitive strategies;
- explicit instruction;
- using technology to support pupils with SEND; and
- scaffolding (temporary support that is removed when it is no longer required).

Complement high quality teaching with carefully selected small-group and one-to-one interventions

Small-group and one-to-one interventions can be a powerful tool but must be used carefully to prevent creating a barrier to the inclusion of pupils with SEND. High quality teaching should reduce the need for extra support, but it is likely that some pupils will require structured, targeted interventions to make progress. Interventions should be carefully targeted through identification and assessment of need.

Work effectively with teaching assistants

Effective deployment of teaching assistants (TAs) is critical. School leaders should pay careful attention to the roles of TAs and ensure they have a positive impact on pupils with SEND. TAs should supplement, not replace, teaching from the classroom teacher.

4.3 Supporting the needs of children and young people with SEND

The National Institute of Health and Care Excellence (NICE) have produced a number of evidence-based guidelines to support children and young people with SEND. These guidelines should be considered by commissioners and healthcare providers when funding and developing services. These guidelines include:

- Disabled children and young people up to 25 with severe complex needs: integrated service delivery and organisation across health, social care and education (NG213) (41)
- Social, emotional and mental wellbeing in primary and secondary education (NG223) (42)
- Looked-after children and young people (NG205) (43)
- Autism spectrum disorder in under 19s: support and management (CG170) (44)
- Attention deficit hyperactivity disorder: diagnosis and management (NG87) (45)
- Depression in children and young people: identification and management (NG134) (46)
- Learning disabilities and behaviour that challenges: service design and delivery (NG93) (47)
- Autism spectrum disorder in under 19s: recognition, referral and diagnosis (CG128) (48)
- Antisocial behaviour and conduct disorders in children and young people: recognition and management (CG158) (49)
- Mental health problems in people with learning disabilities: prevention, assessment and management (NG54) (50)
- Transition from children's to adults' services for young people using health or social care services (NG43) (51)
- Challenging behaviour and learning disabilities: prevention and interventions for people with learning disabilities whose behaviour challenges (NG11) (52)
- Social and emotional wellbeing: early years (PH40) (53)

5 What assets does Bradford have for children and young people with SEND?

The following section highlights some of the assets that exist in Bradford to support children and young people and their families with SEND. The Local Offer, described below, contains the comprehensive list of services.

5.1 The Local Offer

It is a statutory requirement for all local authorities to publish a Local Offer after the implementation of the Children and Families Act in 2014. The Local Offer brings together information about SEND provision in Bradford across education, health and social care for children and young people (0 to 25 years) with SEND, including those who do not have EHC plans.

The Local Offer has two key purposes:

- to provide clear, comprehensive, accessible and up-to-date information about the available provision and how to access it; and
- to make provision more responsive to local needs and aspirations by directly involving children with SEND, their parents and carers, and service providers in its development and review.

Bradford's Local Offer can be accessed via the following website:

<https://localoffer.bradford.gov.uk/>

Information about the Local Offer is made available in a number of formats, including read aloud and printable resources.

The Local Offer provides a comprehensive list of all SEND-related services in Bradford, some of these assets are highlighted below.

5.2 SEND ambassadors

SEND Ambassadors are children and young people in Bradford who work with Bradford Council to help identify and address barriers for children and young people with SEND in the area, through supportive relationships and small group work. The recently appointed SEND Children's Participation Officer is looking to broaden the voice of children and young people with SEND, to enhance the Local Offer, raise aspirations of children and young people with SEND and encourage engagement in learning, employment and training.

5.3 Bradford SENDIASS

The Bradford Special Educational Needs and Disabilities Information Advice and Support Services (SENDIASS) offer information, impartial advice and support for parents and carers of children and young people with SEND. Under the Children & Families Act (2014) (54) it is a legal requirement that all Local Authorities have a SEND IAS Service. The SENDIASS staff help parents and children to work together with schools and the local authority so that they have a good understanding of what support is needed and to make sure that it is put in place. Information and support can also be provided around health and social care needs in relation to SEND.

5.4 0-25 Specialist Teaching & Support Service (STaSS)

Bradford Council provides a range of specialist teaching and support services to schools and Private, Voluntary and Independent Early Years settings as part of its offer and statutory duties for children and young people aged 0-25 years with SEND. The STaSS service is comprised of:

- Social, Communication, Interaction, Learning Team (SCIL)
- Low Incidence Team (Sensory Service)
- Local Authority led Specialist Resourced Provisions
- Medical Needs and Home Education Service

Bradford also have a Children's Complex Health or Disabilities Team (CCHDT) who provides Social Care support for children and families in need as a result of the child's complex health or disabilities.

An additional service is the School Transport service which assists children and young people with getting to school via means such as minibuses, taxis or walking escorts.

More information can be found on the Bradford Schools Online website (55).

5.5 The Parents' Forum for Bradford and Airedale

The Parents Forum for Bradford and Airedale (PFBA) is an independent and parent lead group, representing families of children and young people up to 25 years' old who have disabilities or additional needs, in the Bradford and Airedale district. The PFBA works to enable better access to information about services, and to improve channels of communication between services, professionals and parents and carers, as set out in the SEND Code of Practice and the Children's and Families Act 2014. The PFBA is one of 152 Parent Carer Forums across England and is a member of the National Network of Parent Carer Forums, which collectively represents 110,000 members. The PFBA was registered as a charity in 2010.

5.6 Child and Adolescent Mental Health Service, Bradford

Bradford's Child and Adolescent Mental Health Service (CAMHS) supports children and young people from pre-school years up to 16 years of age, (or up to 18 years of

age if still in school) where there are severe and long standing concerns about emotional well-being and behaviours.

5.7 Special schools

Special schools provide an education for children and young people with SEND, usually with an EHC plan, whose needs cannot be met within a mainstream setting. Admission to special schools is through the Local Authority SEND placement panel that consult the schools and decide the most appropriate placement. There are eight special schools in Bradford:

- Beckfoot Phoenix
- Chellow Heights Special School
- Co-op Academy Southfield
- High Park School
- Beechcliffe Special School
- Co-op Academy Delius
- Hazelbeck Special School
- Oastlers School

5.8 Resourced Provisions

Resourced Provisions (RP) are within a mainstream school/academy, designed to provide specialist and targeted support for children and young people with an Education, Health and Care Plan. Children accessing a RP will be on the roll of the mainstream school and will be fully supported by the specialist staff and the staff of the mainstream school working in partnership. The children and young people have access to both mainstream provision and the Resourced Provision, dependent on individual needs and will therefore be eligible to access all activities and opportunities available to all school pupils.

The RPs have dedicated space within the school which is for the sole use of the children and young people accessing the provision. It is important to understand that they are not separate to the school, nor are they are not special schools or units. Their purpose is to offer specialist support to enable the children and young people to access a mainstream education.

In Bradford there are three delivery models for Resourced Provisions. Specialist provision can either be school led or Local Authority led. These provisions are known as:

- Resourced Provision – School Led (RP- SL)
- Resourced Provision – Local Authority Led (RP-LA)
- Additionally Resourced Centre – Local Authority Led (ARC-LA)

Resourced Provisions (LA) and Additionally Resourced Centres are led by the Council's Specialist Teaching and Support Service, having the overall strategic lead and responsibility for all of the LA led Resourced Provisions in the Bradford District.

Resourced Provisions led by the school are staffed and managed by the school/academy.

5.9 Early Years Enhanced Specialist Provision (EYESP)

Currently the Local Authority maintains six Nursery Schools across the District which deliver integrated Early Years Enhanced Specialist Provision for children aged 2 - 5 years. These specialist places are delivered alongside mainstream nursery school places. The children that access these provisions have an Education, Health and Care Plan. The EYESP's are led by the Local Authority Nursery Schools who receive additional funding from the local authority specifically for the purpose of the provision.

5.10 Specialist Inclusion Project

The Specialist Inclusion Project is a team that specialises in Short Breaks services for young people with disabilities aged 8 to 18 years throughout the Bradford District. The team offer after-school provision and holiday provisions, including residential Summer Camps. The team work closely with a wide range of statutory and voluntary services across the district to ensure a good range of activities and provision are in place for SEND young people in the Bradford District. The team currently support 346 young people per week in afterschool or weekend-based short breaks.

5.11 Special Needs Objective Outreach Project (SNOOP)

SNOOP is a charity which provides a wide range of services to support children and young adults with additional needs and disabilities aged 2-25+ years and provides support and information to their parents or carers. Their aim is to help a child to develop their social skills and independence skills via a range of activities using a person centred approach.

5.12 The Friends & Family Hubs - Thinking BIG

The Friends & Family Hubs are a place for friends and family members of children and young people with SEND to connect, share information and learn new skills. They are supported by the National Lottery and run by Thinking BIG, a not-for-profit Community Interest Company promoting social inclusion, opportunity and wellbeing. They run training and community engagement sessions with the aim to make a positive difference to local services and people's lives.

5.13 Airedale and Wharfedale Autism Resource (AWARE)

AWARE is a parent-run group supporting families with children and young people on the autistic spectrum. They can support and advise families about relevant local services and run a wide range of events and activities for children, young people, parents and carers.

5.14 Carers' Resource

Carers' resource is an independent charity that provides support for carers across the Bradford, Harrogate and Skipton districts. They offer carers' wellbeing reviews to identify needs and explore support options. They have a support group for parent carers where they share information about local services and support. They also provide online webinars and peer support groups for parent carers.

5.15 SEND Strategic Partnership Board

The purpose of the SEND Strategic Partnership Board is to act as a Strategic Governance Body to oversee the delivery of the SEND Reforms across the Local Area. The Membership of the Board is reflective of the Local Area and includes representation from key stakeholders.

The Board will receive progress reports from operational Workstreams, tasked with delivering key elements of the SEND Reforms and in turn will report progress and risks in line with the agreed Governance structure. Co-production is fundamental to all activities relating to the role of the SEND Strategic Partnership Board and associated Workstreams.

In addition, a host of universal and targeted services for children and young people in Bradford exist, such as:

- Better Start Bradford
- Born in Bradford
- Bradford Child Development Service
- Children, Young People and Families Programme
- Living Well Schools
- Public Health 0-19 Children's Services
- Youth in Mind
- Youth Service

(Note this is not an exhaustive list.)

6 Voices of Children and Young People with SEND, their families and stakeholders

6.1 SEND inspection in Bradford - CQC/Ofsted

In March 2022 there was an inspection of SEND services in Bradford by the CQC and Ofsted (56). Inspectors spoke with children and young people with SEND, parents and carers, service providers, Bradford Council and NHS officers. Inspectors looked at a range of information about the performance of the area and reviewed performance data and evidence about the local offer and joint commissioning.

As a result of the inspection it was decided that a Written Statement of Action was needed due to significant areas of weakness in practice. Some of the main strengths and areas for development outlined by the inspectors are listed below.

Strengths:

- Leaders now recognise the importance of using the experiences of families to inform strategic decisions. The Parents' Forum for Bradford and Airedale (PFBA) and Aware are parent and carer groups with powerful voices in the area.
- Leaders and further education providers work together closely to ensure that there is a broad post-16 provision offer to meet a wide range of additional needs. The number of young people with an EHC plan who progress to further education, employment or training is high.
- The number of children and young people with an EHC plan and those at SEND support who are permanently excluded from school is low.
- Health practitioners have introduced new initiatives to support children, young people and their families in the early years. These are improving therapeutic relationships and contributing to the early identification of speech and language needs well.
- Leaders have developed multilingual approaches to assessment where children, young people or their families speak English as an additional language.
- Leaders established local recovery groups to support children and young people with SEND whose lives were affected by COVID-19.

Areas for development:

- Leaders do not gather the voice of children and young people with SEND as much as they need to.
- There is poor communication between stakeholders across education, health and care.
- The quality of EHC plans is variable, including plans which do not fully describe the provision that children and young people with SEND need.

- There is inconsistent delivery of the 0 to 19 health visiting, school nursing and specialist nursing services. This limits the early identification of children and young people's additional needs.
- Children and young people wait too long for assessments, treatment and diagnosis. There is insufficient support for children and young people with SEND who are waiting for provision, services, diagnosis or equipment.
- Education, health and care services do not work together well. The arrangements for joint commissioning are underdeveloped.
- The provision for social activities, respite care and short breaks is variable. Parents and carers of deaf children say there are no clubs or activities where staff use British Sign Language. Some children and young people with SEND struggle to access parks and other community facilities.
- The local offer does not contain the right information about the SEND services that are available across the area. It is difficult to navigate and hard for people to find the information they need.

A steering group from across the system is in place and meeting regularly, and is working hard to address these areas for development in partnership.

6.2 SEND outcomes framework

During 2020, six outcomes for children and young people with SEND have been developed through the collaboration of children and young people with SEND and their families, health professionals, and the Council for Disabled Children. The aim is to embed the outcomes across Bradford. These outcomes are:

- I am loved and cared for by those around me and supported if and when I need it
- I feel supported and safe
- I am confident and able to achieve my dreams
- I am valued and accepted in society
- My voice is heard and I'm able to live my life to the fullest
- I try to remain positive and stay healthy

6.3 SEND Green Paper Feedback

As part of the national government SEND review, stakeholders in Bradford were consulted about the changes they would like to make to SEND provision (57). Key themes that emerged from this consultation were:

- Ensure there is a uniform and joined up approach in the delivery of SEND provision and services

- Parents and carers of children with SEND would benefit from training and tools to help support and engage them

6.4 Local Offer Annual Report 2021/22

As the CQC/Ofsted inspection of SEND services in Bradford had been carried out prior to the 2021/22 Local Offer Annual Report and stated that the Local Offer website was currently not fit for purpose, three recommendations were made in the annual report (58):

1. We are aware that information on the website requires ongoing quality auditing and our mantra will be 'Quality over Quantity' and 'Universal accessibility', ensuring we continue to work effectively across the partnership and meet the needs of our families. Work on this initiative is underway and will be an ongoing activity.
2. Our upcoming website refresh project will address and resolve current navigation challenges using suggestions and feedback from stakeholders and employing current best practice in website design.
3. Ofsted recognise that changes are being made, and will continue, to improve the accessibility of information by improvements to the search engine, website design and navigation methods employed on the Local Offer website.

6.5 Children and Young People's Survey

This local survey was conducted in 2022 and provided children in young people with SEND in Bradford with an opportunity to speak openly about current local services and what improvements they would like to see in the future. Findings from the survey suggested that children with SEND would like more opportunities to be involved in a school council or children and young people's forum, and they would like to use email and other online platforms to have their say about local services.

6.6 Family Hub Feedback

A wealth of feedback on events run by family hubs in Bradford has been collated from families of children and young people with SEND. The events include weekly coffee mornings, cook and eat sessions and carers resource sessions.

The feedback includes:

- "Thank you for giving us inner strength to sound out a voice of vulnerability into strength"
- "Every week I feel supported, more connected to myself and my child."

- From an early help coordinator: “A parent from a secondary school I met on a Drop in Coffee event ... was tearful and desperate for help. She told me she felt grateful for the support offered (by the Family Links Additional Needs Nurturing Programme). She can’t wait to join the group to learn about behaviour.”

6.7 Coproduction work feedback

Partners across Bradford continuously work together to better understand the lived experiences of families with SEND. To help support this, Parent/Carer Network groups coproduced a survey with Bradford Council in 2022. The survey gathered the views and lived experiences of 112 families with SEND. 44% of parent/carers who responded stated that they were comfortable with their EHC plan and provision but raised concerns about the contribution and input into EHC plans from social care and health, as well as the way plans are being implemented in schools (4).

A set of co-production values have been developed in collaboration with children and young people and parent/carers in Bradford. These are:

- Communication - Using easy to understand language to inform and update families and providers.
- Partnership - Families and providers working together.
- Transparency - Being open, honest and realistic.
- Respect - Respecting everyone’s opinions.
- Accountability - Being clear who is responsible.

6.8 SEND Ambassadors and Apprentices

The recently appointed SEND Children’s Participation Officer will continue to work with a number of young people in Bradford including those who work for Healthy Minds, Youth In Mind, Transforming Care and SEND. They are a powerful voice for Bradford’s SEND community, regularly collaborating with key partners and stakeholders across the District.

7 Recommendations

1. Minimise the long-term wider impact of COVID-19 on children with SEND

Evidence suggests that COVID-19 has disproportionately impacted the educational and health outcomes of children and young people with SEND in Bradford compared to their peers with no identified SEND. Approaches should be used to ensure that this impact is not sustained in the long-term and there is adequate resilience building to minimise the impact of future adverse life events among children and young people with SEND.

1a. Further research should be undertaken to explore why children and young people with SEND have been disproportionately affected by COVID-19, and where improvements in SEND-related services are needed to address this.

1b. The legacy and ongoing impact of COVID-19 and associated lockdowns must be taken into account for any service redesign or development.

2. Ensure mental and physical health promotion is inclusive of the SEND population and will meet their needs

Evidence shows that children and young people identified as having SEND have poorer physical and mental health outcomes compared to their peers with no identified SEND.

2a. All health promotion support and campaigns in Bradford should be inclusive of the SEND population in order to meet their needs and reduce the disparities in health outcomes. This includes using accessible and inclusive language and imagery, and ensuring accessible opportunities for health improvement are easily available.

2b. There should be multiple opportunities for children and young people with SEND to become involved in a wide range of clubs and activities both in and out of school, increasing their sense of belonging and activity levels.

3. Ensure there is adequate support for increasingly prevalent SEND conditions and EHC plans to manage the current and future demand for SEND services

The number of children and young people with EHC plans is forecast to increase over the next decade in Bradford which will place additional pressure on SEND services. The mix of SEND conditions is also changing over time.

3a. SEND services in Bradford need to ensure that they adapt to meet the needs of the future and current SEND population and services are adequately resourced and monitored.

3b. EHC plans must be coproduced with all relevant service providers including schools, social care and the health service, enabling them to accurately describe the needs of the individual.

3c. Annual reviews of EHC plans should be promptly published so SEND provision can be amended as necessary.

4. Ensure there is equitable diagnosis of SEND for all children in Bradford and it is done as early as possible

Key health service delivery that can identify SEND, such as the Health Visiting Service and the School Nursing Service, should be universally provided to all children and young people in Bradford. This would enable SEND to be identified equitably amongst all sociodemographic groups in Bradford, giving all children the best start in life and reducing inequities in life outcomes.

4a. Work to deliver against the Written Statement of Action for 0-19 services in Bradford to improve universal provision of routine health checks, screening, school-based education, and integration of services within family hubs.

5. Ensure SEND provision is universal and proportionately distributed across Bradford relative to need

The vast majority of schools in Bradford have at least one pupil requiring SEN support or an EHC plan. Schools in the most deprived areas of Bradford have the highest proportion of pupils identified as having SEND.

5a. Ensure that SEND training and support is available and accessible to staff in all schools across the District.

5b. Ensure that proportionately more SEND resources are invested in more deprived areas to achieve equitable service provision and opportunities across the District.

5c. The delivery of SEND services should be of a consistent quality across the District, such as the quality of EHC plans and access to school nursing teams.

6. Ensure pupils with SEND maximise their time in school and have access to a range of post-16 opportunities

Evidence shows that children and young people identified as having SEND in Bradford have worse educational attainment outcomes than their peers, impacting their future life outcomes. This may be partly due to the fact that pupils identified as having SEND are more likely to be absent from school and suspended or excluded than pupils with no identified SEND. It has also been highlighted (in the Ofsted/CQC report) that there is a shortage of drivers and escort staff to take pupils identified as having SEND to and from school.

6a. Work with schools and colleges to reduce suspensions and exclusions of pupils with SEND and improve attendance.

6b. Increase provision of the home-to-school transport offer to maximise time spent in school.

6c. Ensure that there are accessible and varied post-16 opportunities for young people with SEND to begin the transition to adulthood, enabling them to live happy and independent adult lives.

7. Continue to improve the experience of the SEND system and life in Bradford for children and young people with SEND and their families

There are plans and services in place to increase the influence of children and young people with SEND and their families in strategic decision-making and joint commissioning.

7a. Sustain and implement this collaborative approach across all SEND services in Bradford, listening to and acting on the voices of children and families of children with SEND.

7b. All local services must consider the population of babies, children, young people and adults with SEND in their service design and throughout the planning of local public spaces.

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9 Appendix

9.1 Additional data

Table 9.1: Percentage breakdown of SEND pupils by primary need in each ward, Bradford, January 2022

Ward	Specific Learning Difficulty	Moderate Learning Difficulty	Severe Learning Difficulty	Profound and Multiple Learning Difficulty	Social, Emotional and Mental Health	Speech, Language and Communication needs	Hearing Impairment	Visual Impairment	Multi-sensory Impairment	Physical Disability	Autistic Spectrum Disorder	Other Difficulty or Disability	SEN support but no specialist assessment of type of need
Baildon	17.5%	5.6%	0.6%	0.0%	25.0%	28.1%	0.6%	0.6%	1.3%	4.4%	6.9%	8.8%	0.6%
Bingley	16.5%	15.4%	1.9%	0.5%	15.7%	13.0%	3.0%	0.8%	0.0%	3.5%	16.8%	2.2%	1.6%
Bingley Rural	13.3%	17.6%	5.7%	2.1%	19.0%	8.8%	2.2%	1.2%	0.3%	4.1%	16.5%	5.8%	3.4%
Bolton and Undercliffe	2.9%	28.8%	0.6%	0.0%	19.6%	20.5%	8.6%	4.3%	0.1%	5.0%	7.4%	0.6%	1.6%
Bowling and Barkerend	3.7%	32.2%	0.1%	0.2%	28.7%	19.6%	1.7%	0.9%	0.0%	5.7%	5.5%	1.2%	0.6%
Bradford Moor	1.0%	28.8%	3.1%	3.8%	8.6%	39.2%	1.5%	0.3%	0.1%	3.7%	9.1%	0.8%	0.2%
City	6.2%	22.9%	1.2%	0.1%	14.5%	35.9%	3.5%	1.2%	0.2%	4.1%	5.4%	2.0%	2.1%
Clayton and Fairweather Green	5.6%	30.1%	1.0%	0.0%	14.5%	30.1%	2.1%	1.7%	0.2%	5.0%	7.1%	1.5%	1.2%
Craven	5.6%	16.9%	0.0%	0.0%	29.6%	28.2%	2.8%	1.4%	0.0%	2.8%	4.9%	5.6%	2.1%
Eccleshill	3.8%	26.6%	1.4%	0.0%	14.7%	36.9%	1.0%	0.3%	0.3%	2.0%	9.6%	2.0%	1.4%
Great Horton	10.8%	12.5%	13.0%	4.7%	18.5%	18.1%	2.1%	1.8%	0.0%	4.1%	13.3%	0.9%	0.2%
Heaton	6.6%	24.5%	3.6%	3.5%	14.8%	18.0%	1.7%	1.2%	0.1%	3.8%	17.7%	2.9%	1.2%
Idle and Thackley	15.1%	29.4%	0.2%	0.2%	15.3%	16.9%	2.1%	1.7%	0.0%	3.8%	12.4%	2.1%	0.9%
Ilkley	31.0%	11.5%	0.3%	0.5%	17.6%	10.5%	3.1%	1.6%	0.5%	1.8%	10.0%	5.5%	3.7%
Keighley Central	2.7%	17.9%	6.1%	3.0%	22.3%	18.6%	2.2%	1.8%	0.1%	5.3%	16.5%	3.0%	0.4%
Keighley East	2.0%	13.4%	1.2%	0.0%	18.5%	40.9%	2.8%	2.8%	0.0%	4.7%	9.8%	2.0%	2.0%
Keighley West	12.0%	12.5%	2.6%	2.3%	22.0%	21.7%	2.7%	2.0%	0.2%	4.7%	14.3%	2.6%	0.6%
Little Horton	4.1%	17.1%	0.5%	0.5%	16.2%	42.3%	2.4%	1.4%	0.0%	5.6%	4.3%	1.9%	2.7%
Manningham	2.1%	28.5%	1.3%	0.1%	13.8%	25.8%	1.8%	1.1%	0.2%	1.7%	3.9%	3.3%	1.1%
Queensbury	8.5%	28.0%	0.3%	0.0%	25.3%	21.2%	3.6%	1.1%	0.0%	4.4%	6.6%	1.1%	0.0%
Royds	6.5%	22.2%	0.6%	0.0%	22.6%	18.5%	1.7%	0.6%	0.0%	3.9%	9.7%	4.3%	6.3%
Shipley	8.4%	12.7%	2.4%	0.0%	26.4%	15.8%	1.1%	1.5%	0.0%	2.9%	27.7%	1.1%	0.0%
Thornton and Allerton	9.2%	26.0%	1.4%	0.2%	18.3%	26.6%	2.9%	1.6%	0.0%	1.8%	6.0%	6.0%	0.0%
Toller	4.6%	21.6%	0.5%	0.5%	15.2%	42.0%	4.3%	1.1%	0.3%	3.0%	3.7%	2.2%	0.8%
Tong	4.3%	28.6%	0.4%	0.2%	23.2%	27.4%	1.4%	0.7%	0.0%	3.6%	8.3%	1.6%	0.2%
Washburn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Wharfedale	14.0%	31.4%	1.2%	0.0%	10.5%	16.3%	0.0%	0.0%	0.0%	4.7%	9.3%	2.3%	0.0%
Wibsey	3.3%	33.5%	0.0%	0.0%	13.9%	29.8%	0.8%	1.6%	0.0%	2.0%	8.2%	2.4%	4.5%
Windhill and Wrose	3.8%	13.3%	0.5%	0.0%	14.3%	30.0%	1.4%	0.0%	0.0%	5.7%	9.0%	3.3%	1.0%
Worth Valley	11.4%	23.5%	3.0%	0.0%	15.9%	19.7%	1.5%	0.8%	0.0%	2.3%	19.7%	2.3%	0.0%
Wyke	12.9%	21.9%	0.5%	0.0%	21.4%	17.5%	2.1%	0.3%	0.3%	3.9%	10.8%	7.2%	1.3%
Bradford Total	7.2%	22.6%	2.4%	1.2%	18.3%	24.3%	2.5%	1.3%	0.1%	3.9%	10.4%	2.6%	1.3%

Source: School Census, Department for Education, 2022.

Table 9.2: Number of pupils in each ward with SEND by primary need, Bradford, January 2022

Ward	Total SEN support or EHC plan	Specific Learning Difficulty	Moderate Learning Difficulty	Severe Learning Difficulty	Profound and Multiple Learning Difficulty	Social, Emotional and Mental Health	Speech, Language and Communication needs	Hearing Impairment	Visual Impairment	Multi-sensory Impairment	Physical Disability	Autistic Spectrum Disorder	Other Difficulty or Disability	SEN support but no specialist assessment of type of need
Baildon	160	28	9	1	0	40	45	1	1	2	7	11	14	1
Bingley	370	61	57	7	2	58	48	11	3	0	13	62	8	6
Bingley Rural	1,015	135	179	58	21	193	89	22	12	3	42	167	59	35
Bolton and Undercliffe	800	23	230	5	0	157	164	69	34	1	40	59	5	13
Bowling and Barkerend	1,221	45	393	1	2	351	239	21	11	0	69	67	15	7
Bradford Moor	1,036	10	298	32	39	89	406	16	3	1	38	94	8	2
City	857	53	196	10	1	124	308	30	10	2	35	46	17	18
Clayton and Fairweather Green	482	27	145	5	0	70	145	10	8	1	24	34	7	6
Craven	142	8	24	0	0	42	40	4	2	0	4	7	8	3
Eccleshill	293	11	78	4	0	43	108	3	1	1	6	28	6	4
Great Horton	965	104	121	125	45	179	175	20	17	0	40	128	9	2
Heaton	1,386	91	340	50	48	205	249	24	17	1	52	245	40	17
Idle and Thackley	531	80	156	1	1	81	90	11	9	0	20	66	11	5
Ilkley	381	118	44	1	2	67	40	12	6	2	7	38	21	14
Keighley Central	770	21	138	47	23	172	143	17	14	1	41	127	23	3
Keighley East	254	5	34	3	0	47	104	7	7	0	12	25	5	5
Keighley West	664	80	83	17	15	146	144	18	13	1	31	95	17	4
Little Horton	858	35	147	4	4	139	363	21	12	0	48	37	16	23
Manningham	1,045	22	298	14	1	144	270	19	12	2	18	41	35	12
Queensbury	364	31	102	1	0	92	77	13	4	0	16	24	4	0
Royds	464	30	103	3	0	105	86	8	3	0	18	45	20	29
Shipley	545	46	69	13	0	144	86	6	8	0	16	151	6	0
Thornton and Allerton	553	51	144	8	1	101	147	16	9	0	10	33	33	0
Toller	624	29	135	3	3	95	262	27	7	2	19	23	14	5
Tong	555	24	159	2	1	129	152	8	4	0	20	46	9	1
Washburn	11	0	0	0	0	0	0	0	0	0	0	0	0	0
Wharfedale	86	12	27	1	0	9	14	0	0	0	4	8	2	0
Wibsey	245	8	82	0	0	34	73	2	4	0	5	20	6	11
Windhill and Wrose	210	8	28	1	0	30	63	3	0	0	12	19	7	2
Worth Valley	132	15	31	4	0	21	26	2	1	0	3	26	3	0
Wyke	388	50	85	2	0	83	68	8	1	1	15	42	28	5
Bradford Total	17,407	1,261	3,935	423	209	3,190	4,224	429	233	21	685	1,814	456	233

Source: School Census, Department for Education, 2022.

9.2 Definitions

Special Educational Needs (SEN)

The 2015 SEND Code of Practice (59) states that children and young people have Special Educational Needs if they “have a learning difficulty or disability which calls for special educational provision to be made for him or her”.

A child of compulsory school age or a young person is defined as having a learning difficulty or disability if they:

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

A child under compulsory school age has special educational needs if they are likely to fall within the definitions above when they reach compulsory school age or would do so if special educational provision was not made for them.

Disabilities

The 2010 Equality Act (60) defines someone with a disability as having “a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities”.

‘Long-term’ is defined as one year or more and ‘substantial’ is defined as more than minor or trivial. This definition includes sensory impairments (including those affecting sight or hearing), and long-term health conditions such as asthma, diabetes, epilepsy, and cancer. Children and young people with such conditions do not necessarily have SEN, but under the SEND Code of Practice 2014 if a disabled child or young person requires special educational provision to be made for them they are categorised by the SEN definition above.

Areas of Need

The 2015 SEND Code of Practice (59) identified four broad areas of need and support for children and young people with SEN:

- **Communication and interaction** – This includes Speech, Language and Communication Needs (SLCN) and Autistic Spectrum Disorder (ASD). This may include difficulty understanding, difficulty processing the social norms and socialisation or difficulty in communicating their wants and needs.

- **Cognition and learning** – This encompasses Moderate Learning Difficulties (MLD), Severe Learning Difficulties (SLD), Profound and Multiple Learning Difficulties (PMLD) and Specific Learning Difficulties (SpLD) including dyslexia and dyspraxia. Children and young people are said to have learning difficulties when they learn at a slower pace than their peers, even with appropriate differentiation.
- **Social, emotional and mental health difficulties** - This encompasses a range of social and emotional difficulties experienced by young people which can manifest in many ways such as challenging or disruptive behaviour, or becoming withdrawn and isolated. Underlying reasons for these behaviours can include mental health problems (including anxiety and depression), substance misuse, self-harm, eating disorders and medically unexplained physical symptoms. There may be specific conditions or disorders contributing to these difficulties including attention deficit disorder, attention deficit hyperactivity disorder or attachment disorder.
- **Sensory and/or physical needs** - This includes Visual Impairment (VI), Hearing Impairment (HI), Multi-Sensory Impairment (MSI) and Physical Impairment Disability (PID) which require additional support to enable them to access the opportunities available to their peers.

Many children have more than one area of need, and these needs and level of support required can change over time.

Level of support

There are two types of educational support available to children with SEND:

- **SEN support** - support given to pupils with SEN that is additional or different to that provided as part of the school's usual curriculum. This may involve a class teacher and SEN co-ordinator receiving advice and support for external specialists. Students receiving SEN support do not have an education health and care plan in place.
- **Education, health and care (EHC) plan** - An EHC plan is put in place after a formal assessment of their education, health and care needs. This needs assessment can be done upon the request of the child's parents, the child themselves or the educational institution. The EHC plan is a legal document which outlines a child's needs and the extra help they require. A young person can have an EHC plan until they are over 25 years old.

In addition, Bradford provides a wide range of services to support children and young people with SEND and their families, outlined on Bradford's Local Offer website (61).

9.3 National Strategic Context

The following national publications are crucial to design and shape service provision for children and young people with SEND across England.

Children and Families Act, 2014

The Children and Families Act (54) introduced a number of changes to legislation around services for vulnerable children and young people, including those with SEND. The aim of the changes was to establish greater levels of collaboration between education, health and social care services, and to enable personalisation of services to give families more control over the welfare of their child.

New provisions put in place by the Act included:

- **Birth to 25** – SEND support was extended from compulsory school aged children to all children and young people up to the age of 25 years.
- **Education, health and care (EHC) plans** – EHC plans replaced statements of SEN and are based on a single assessment process with contributions from practitioners from different agencies.
- **Local offer** - Local authorities are required to publish a detailed directory of the local support available for children and young people with SEND. The aim is to make it easier for parents/carers to access the services they need.
- **Personal budgets** - Parents/carers have the right to request a personal budget to enable them to directly purchase some or all of the provision set out in their child's EHC plan.
- **Coproductio**n – Parents/carers and children should be involved in discussions about all aspects of the support put in place to meet the outcomes outlines in the EHC plan. Organisations must also work with families to coproduce any SEND plans or policies which will impact them.
- **Multi-agency support** – There should be a system-wide response across education, health and social care to assess, plan and commission provision for children with SEND.
- **Impartial advice, mediation services and tribunals** – Families of children and young people with SEND are entitled to free confidential and impartial advice relating to SEND, commissioned by the local authority. Mediation services are commissioned as a way to resolve issues without the need for tribunal appeals where possible, but parents/carers and young people have a

right to appeal decisions made about their education, health and social care provision via a SEND tribunal.

SEND Code of Practice, 2015

The SEND Code of Practice (59) was published to explain the legal duties of SEND provision of local authorities, health bodies, schools and colleges under the Children and Families Act.

Ofsted and CQC framework for inspection of local area services for SEND, 2016

In May 2016, the Office for Standards in Education, Children's Services and Skills (Ofsted) and the Care Quality Commission (CQC) adopted a new inspection framework for the inspection of local areas' effectiveness in identifying and meeting the needs of children and young people with SEND. Each local area will be inspected at least once during a five-year period (62).

The inspections focus on three main aspects:

- Identifying children and young people with SEND
- Assessing and meeting the needs of children and young people with SEND
- Improving outcomes for children and young people with SEND

The findings of the inspection are reported in a letter to key agencies in the local area, but are not graded unlike other inspections. If inspectors have significant concerns about a local area's performance the local authority is required to produce a Written Statement of Action explaining how those concerns will be dealt with.

The latest SEND inspection in Bradford was during March 2022 (56) and found significant areas of weakness in the area's practice, therefore a Written Statement of Action is required.

Ofsted and CQC Area SEND inspections: framework and handbook, 2022

A new inspection framework came into practice on 1st January 2023 (63). The purpose of inspection is to:

- provide an independent, external evaluation of the effectiveness of the local area partnership's arrangements for children and young people with SEND
- where appropriate, recommend what the local area partnership should do to improve the arrangements

All local areas will continue to receive a full inspection at least once during a 5-year period. However, the frequency and type of inspection activity in any individual local area will be based on previous inspection outcomes and any relevant additional information received by Ofsted and the CQC. Inspections will take place over three weeks, and will focus on outcomes for children and young people with SEND.

SEND Green Paper, 2022

The 2022 SEND review (64) is a response to the recognition that the current SEND system is failing to deliver for children, young people and their families. The Green Paper sets out proposals for a system that offers children with SEND the opportunity to thrive by providing access to the right support, in the right place, and at the right time.

The review identified three key challenges facing the current SEND system:

1. Navigating the SEND system and alternative provision is not a positive experience for too many children, young people and their families.
2. Outcomes for children and young people with SEND or in alternative provision are consistently worse than their peers across every measure.
3. Despite the continuing and unprecedented investment, the system is not financially sustainable.

SEND and alternative provision improvement plan

This national policy paper (65) sets out the government's plans to change the SEND and alternative provision system in England and follows the SEND Green Paper. The plan includes:

- responses to feedback
- improvements that will be made as a result of the feedback
- proposals that will be tested and reviewed

The best start for life: a vision for the 1,001 critical days, 2021

This national policy paper outlines six areas for action to improve the health outcomes of all babies in England from conception to age 2 (66). These are:

- seamless support for families: a coherent joined-up Start for Life offer available to all families
- a welcoming hub for families: family hubs as a place for families to access Start for Life services
- the information families need when they need it: designing digital, virtual and telephone offers around the needs of the family
- an empowered Start for Life workforce: developing a modern skilled workforce to meet the changing needs of families
- continually improving the Start for Life offer: improving data, evaluation, outcomes and proportionate inspection
- leadership for change: ensuring local and national accountability and building the economic case

NHS Long Term Plan, 2019

The NHS Long Term plan aims to improve the quality of patient care and health outcomes throughout the NHS. Chapter two of the plan focusses on what actions the NHS will take to strengthen its contribution to prevention and health inequalities. This includes a pledge that the NHS will do more to ensure that all people with a learning disability, autism, or both can live happier, healthier, longer lives (67).