



Self Assessment

Derby City Local Area Partnership

LIVING MY
BEST LIFE

Introduction

Derby is a compact city, very proud of its innovative past with an ambition to continue this in the present day, creating opportunities for all.

We are home to 261,400 residents according to the 2021 census, which was an increase from 2011. Whilst Derby is a relatively small city, it's culturally diverse with just over 66% of the population from a White British background and 15% from an Asian/Asian British ethnic background according to the latest census. 87.1% of Derby residents speak English as their first language, which is lower than the national average of 90.8%.

Derby has areas of high deprivation with one in three residents living in an area regarded as one of the top 20% most deprived in England. Around 96,000 people live in areas classed as within the 20% most deprived in the country and there are increasing levels of poverty in the city, including growing rates of child poverty. This as we know directly impacts on the achievement rates of children and young people (ref Child of the North) and their specific abilities in relation to social communication and emotional regulation. The prevalence of this has been amplified through the impact of the pandemic, creating greater demand across education, health and care (ref Ofsted reports).

Leaders across the city recognise the challenges that many local areas have been facing in making sure that there is an inclusive 'system' in place that supports children and young people with special educational needs and/or disabilities and those accessing alternative provision, and their families/carers, to deliver the very best outcomes for them.

Over the last two years the Area Inclusion Partnership has worked alongside over 1000 people including parents and carers, young people, the third sector and those working in education, health and care services to consider the success and impact of the SEND Strategy 2020-2023 to assess where we are in meeting the duties in the Code of Practice 2015 and meeting the needs of children and young people in the City. These conversations have shaped this self-assessment and led to the development of the [Area Inclusion Plan 2025-2028](#) and video link [Local Area Inclusion Plan for Derby City](#)) to ensure that '*every child and young person in Derby lives their best life*'.

We will continue this co-production with our 100 young SEND ambassadors, our Parent/Carer Forum Derby SEND Voice, staff across education, health and care to understand what we need to do and how we need to do it, and if we are making a difference.

In Derby:



There are just over **88,000** people in the city aged 0-25 years.
38% of children live in poverty in Derby, with **22%** of those aged 0-15 years living in low-income families.



There are **107** schools in Derby, and there are **three main NHS Trusts serving the population of Derby City and Southern Derbyshire including acute hospital services, mental health and specialist community services** - Derbyshire Community Healthcare Services (DCHS), Derbyshire Healthcare NHS Foundation Trust (DHCFT) and the University Hospitals of Derby and Burton NHS Foundation Trust (UHDBT).





46,582 young people in the city are school aged, with **4,271** Education, Health and Care Plans maintained by Derby City Council alongside **6,729** children and young people receiving SEN Support. **46 permanent exclusions, 3928 suspensions, 51 Children Missing Education, 726 Electively Home Educated in 2024/5**

A summary of our local area partnership

Derby City Council and Derby and Derbyshire Integrated Care Board (ICB) are jointly responsible for the commissioning of services that meet the needs of individuals in Derby with SEND. There has been a stable leadership across the partnership since the last formal inspections of SEND services in 2019 and 2021, with multiple examples of leaders seeking ways to strengthen collaborative working, including formal co-location, which commenced in April 2024.

The Strategic Director People Services (DCS) has been in post since 2015, and holds statutory responsibilities for Adult Social Care, supporting a life-long view of services and impact, and co-chairs the JUCD Children and Young People's Delivery Board. The leadership of health partners has similarly been largely stable, with both senior commissioners and the SRO for SEND having been involved with delivering SEND services in Derby City for several years. There has been a DMO function in place since 2015 with a full-time Designated Clinical Officer for SEND in post since 2017.

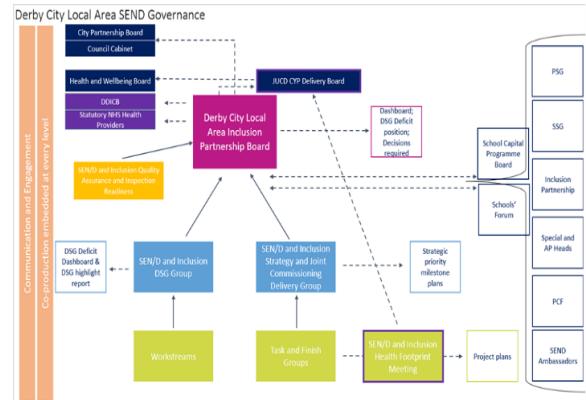
The Chair and Vice-Chair of the Local Area SEN/D and Inclusion Partnership Board are a professor of SEND from the University of Derby and the elected lead member for children, inclusion and skills, respectively. The Strategic Director of People's Services is a member of the board along with the co-chairs of the parent carer forum, leaders from, health providers, education sector and leaders from across the local authority including S151 officer, Directors and senior officers from children's, adult social care, public health, learning and Inclusion and Skills, and NHS Derby and Derbyshire. The chairs of the early years and school strategic partnerships, and FE also sit on the Board. Thematic reviews are undertaken in the Joint Strategy group to support the implementation and impact analysis of the system and to shape the new commissioning framework.

Co-creation and insight are both integral to our governance model, thus there are an extensive number of 'networks' that underpin our formal decision-making spaces. Including those of headteachers, parent/carers. Health providers and children and young people to ensure an up-to-date and accurate understanding of experiences of the system in Derby. Leaders are committed to **learning and improvement**, and through the Local Area Inclusion Partnership Board, leaders shape priorities, consider joint commissioning arrangements and review evidence on the difference made.

We are passionate about knowing and understanding needs and emerging needs in the City, whether that be for those with SEND or those for whom deprivation impacts significantly on their ability to succeed. Consequently, we have adopted a compassionate enquiry for our JSNA. The key findings are included in this evaluation under the Needs section.

A summary of our journey since Derby's last formal SEND inspections

Derby City's last formal SEND inspection was in 2019, under the previous inspection framework. There were 5 areas of development identified and in 2021, upon a revisit, it was noted that the partnership had made considerable progress in all identified development areas. Including producing a shared strategy to articulate



the future of services for children and young people with SEND in Derby. Table 1 below outlines those 5 areas of development, the context they are set within and what the latest developments are against those areas.

Table 1

2019 Development areas	Current context	Latest developments and progress
Local area leaders had failed to take the joint commissioning actions required to implement the disability and special educational needs reforms across education, health and social care	Stable leadership, ensuring the foundations made between 2019 and 2021 are enhanced. This has driven improvement across all thematic areas in the reforms.	<ul style="list-style-type: none"> Updated Insight dashboard to shape decisions, new JSNA, new Joint commissioning strategy Joint strategy meetings seek to understand emerging needs and establish pilots or aligned commissioning activity. Active Young Ambassadors programme Active Derby SEND Voice
There was no overarching co-produced strategy for improving provision for, and outcomes of children and young people with SEND	<ul style="list-style-type: none"> New coproduced Local Area Inclusion Plan 2025 in place succeeding the SEND Strategy 2020 Operational forums and groups e.g. IYFA, Behaviour Strategy, SENCO forum enable responsive system Working groups ensure coproduction 	<ul style="list-style-type: none"> Co-produced strategic outcomes, with on-going engagement with parents, young people, education settings, health and care to deliver priorities. Families First initiative inclusive of SEND Inclusion Strategy Group and Charter 0-7 Early Years Strategy PFA Strategy
There were a number of significant weaknesses in the processes, timeliness, quality and outcomes of Education Health and Care (EHC) plans (EHCP)	<p>At the end of August 2025:</p> <ul style="list-style-type: none"> 100% of EHCPs issued in 20wks in last 2 months – 35% YTD 67% of feedback from parents/carers received on issue of plans was positive or neutral 51% of reviews completed on time in the last 12-months Number of pupils with an EHC plan has increased by 36% over the last 3-years 	<ul style="list-style-type: none"> A system reset on ‘inclusion’, including associated funding and interventions in schools, to meet needs earlier. Review of the SEND Team and associated processes to improve quality and efficiencies; exploring the use of AI technology. Greater focus on effective communications and building relationships with families and schools.
There was long-standing systemic issues resulting in long wait times for some key specialist assessments	<ul style="list-style-type: none"> ND average wait time - 67 weeks, 1530 waiting SaLT average wait – 6 weeks The number of disabled children are currently waiting for a LA OT assessment is 24 with the longest current waiting time from referral to assessment for a disabled child still on the waiting list at 24 weeks. 	<ul style="list-style-type: none"> Service pathway transformation activities remain on-going, with examples of supporting activities whilst CYP wait for specialist NHS assessments to mitigate risks of longer than target waiting times. Examples of service co-production. Successful business case for ND transformation over 3 years – joint responsibility Independent research commissioned to work with system stakeholders including CYP and parent/carers to better understand demand and to meet needs earlier Collaboration working between Community Paediatricians, SLT's & Early support groups run by HV's within the Family Hubs to support pre-school children with social communication needs at the earliest point.
There was poor parental engagement and high levels of parental dissatisfaction	<ul style="list-style-type: none"> New Parent Carer Forum (PCF) in development with funding identified for Coordination post Family Hubs 	<ul style="list-style-type: none"> Established framework for co-production, with service and strategic examples over the last year, Monthly meeting with Education, Health and social Care senior management for PCF to bring areas of

concerns and for the service to update the PCF on what work the teams are working on.

- Families First initiative and Family Hubs

What is it like to be a child or young person in Derby with SEND in 2025?

Young people have told us they want to remain in their local areas, with their peer groups. They want to feel a sense of belonging, they want more things to do, and they want to be able to succeed and thrive.

Parents/carers have identified that they need more support to meet the needs of their children earlier, which they believe can only be met through an ECHP. Whilst 73% of all new plans enable children to remain in their local mainstream schools, some parents of children with communication and interaction needs believe that their children's needs can only be met in the independent sector and occasionally do not feel like their children belong in school.

How do we understand and respond to the needs of children and young people.

Central to any local area providing services that appropriately meet needs, is a clear and shared understanding of what these are. The Partnership Board worked collaboratively to develop a multi-agency insight dashboard that is refreshed monthly, where updates are available. This complements the new joint strategic compassionate enquiry that has been developed linking the dashboard and insight packs to key hypotheses to support the shaping of further joint commissioning activity. The focus has been on how we can collectively across education, health and care and other services look to intelligently provide support earlier thereby improving experiences and impact on children and families.

Through a review of needs, communication and interaction consistently feature as underlying primary type of need for those children and young people assessed at 'SEN support', and for an EHCP. Referrals to the speech, language and communication therapy (SLT) pathway have increased consistently year-on-year; significantly since COVID and further impacted by the increase in EHCNA requests & increase in referrals for ND assessments. The last two years have focused on understanding the root cause of needs, exploring solutions whilst addressing underperformance has enabled the partnership to establish a clear action plan, central to which is generating a cultural change to understanding how to meet needs, from a medical model to a social model.

Position: Needs

It is evident from all referral points into the system, applications for SENIF, referrals for EHCP requests, inclusion referrals and referrals for health assessments, that communication and interaction feature as the prevailing need followed by SEMH in Derby.

- Special Educational Needs Inclusion Fund (SENIF) referrals for under 4's supported 709 children in 2023/4. In 2024/25, the fund supported 619 children. Over 80% of requests are for children needing support relating to either speech and language or communication and social interaction.
- S23 notifications – 2024/5 we received 330 health notifications. Over 85% of these were related to concerns around communication and interaction—frequently referencing challenges with sensory processing and emotional regulation. A smaller proportion also highlighted issues linked to cognition and learning, or developmental delay.
- Primary need referrals for EHC needs assessments highlight presenting needs as communication and

interaction, with 50.6% of all young people with an ECHP identified either as autistic or with speech, language and communication needs.

- Derby has a high proportion of children and young people who are deaf, predominately supported by the Royal School for the Deaf. Audiology data for hearing assessments in Derby from April 2025: 383 waiting for a first appointment, average waiting time 12.4 weeks. Whilst there is no national target for screening, access to hearing assessments are critical for children to succeed and thrive, as in part we know that characteristics linked to communication and interaction are demonstrated when hearing is affected.
- The majority of children and young people who have communication and interaction identified needs will be identified for neurodevelopmental condition assessments: Whilst we acknowledge children and young people in Derby still wait too long for ND assessments, and where appropriate a diagnosis, NHS providers and the local authority have a joint recovery plan in place that have begun to impact on waiting lists

ND Referral numbers: <ul style="list-style-type: none">○ August 2024 = 28 – compared to June 2025 = 108○ Average for the 11 months from August 2024 to June 2025 = 105	ND average wait times: <ul style="list-style-type: none">○ August 2024 = 46 weeks○ June 2025 = 69 weeks	ND number waiting: <ul style="list-style-type: none">○ August 2024 = 1332○ June 2025 = 1530
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Action:

To ensure services can meet needs at the right time in the right place, are underway,

A. **ND assessment recovery plan:** The recovery plan is producing an overall downward trend in referrals. The areas of focus are designed to address both frequency and demand of referral which will subsequently reduce wait times, but also to explore whether development delay due to social issues is driving demand. This includes:

1. **ND Hubs** which is available to all those with or without a diagnosis. The Neurodiversity (ND) Community Hub, located at St James' Centre in the City, provide pre and post diagnostic support through advice, support and information; mitigating risks associated with long waiting times, with early evidence showing that this is having a positive impact and supporting improved experiences, as well as meeting need at an earlier point which in some cases mitigates the need for an assessment.

Since the opening of the ND Hub in 2023:

- 321 Hub Sessions have taken place
- 776 people have attended Hubs, with 457 of those being children and young people
- The ages of attendees range from 2 years – 25 years (high proportion 3-16)
- 100% of people asked said they had a better understanding of available services
- 99% of people asked reported they felt more supported
- 100% of people asked reported that they felt welcome and safe at the Hub

2. A pilot to address the long waiting lists for an ND assessment has applied a [new triage](#) programme that September 2025

seeks to understand the drivers leading to increased referrals for ND assessments in early years, whether the diagnostic pathway is the right one for them and ultimately, receive support at the earliest opportunity regardless of diagnosis. The pilot targeted 2 years olds referred by health visitors and GPs for an ND assessment. For ND assessments/referrals, 163 Children were seen during the initial pilot from September 2024 to February 2025. Those who required an ND assessment did not need to wait for their referral to be triaged. The average time from triage to diagnosis for children on the pathway was 4 months (c.17 weeks) . The remaining children being supported through a new targeted Intervention First programme to address speech language and communication, social interaction and emotional regulation in the early years sector along with support in the family hubs for child development.

Whilst this pilot targeted 2-year-olds, the expansion will be to 3–4-year-olds in 2025/6 AY . Dovetailing with the SEN Inclusion Fund (SENIF) targeted work. This work sits across both the Family Hub strategy and the Area Inclusion Partnership Plan that seeks to enable the sector to focus more on child development and consider children's dynamic learning and development across pre-birth – 7, meeting needs earlier at the right time and in the right place, and within environmental contexts.

3. To further support children, health practitioners have developed an '[understanding my Autism/ADHD toolkit](#) to help school-aged children and their families better understand their autism diagnosis.
4. SLC provision has improved markedly with the implementation of [PINS](#). The delivery of our PINS Project has built on the role out of AET across all schools, sensory specialist training, play therapy and ELSA; and understanding the difference between ND, trauma and attachment as part of a graduated response, enabling schools to provide support at the earliest opportunity helping to reduce the need for referrals to specialist neurodiversity assessment services . 6 schools have implemented PINS in 2024/5 with 6 more in 2025/6.

"The involvement of the Parent Carer Forum has been really powerful, and parental engagement has really developed"

"Sharing and understanding lived experience has changed approaches to support"

"Every teacher is a teacher of SEND and every person in the school has a good understanding of inclusion/individual needs"

- B. Derby City Council & NHS SLT services have worked on many different approaches to support schools with guidance, tools and training necessary to strengthen this offer over the years. A well-established Speech & Language pathway ensures clear identification and intervention and our Family Hubs hold a Centre of Excellence for speech and language (Balanced Systems). Recently strategic support has been endorsed to use "[the balanced system" framework](#) to create a more integrated offer across the Local Area through five strategic outcomes of: family support, environmental enhancement, building workforce capacity and skills, early identification, appropriate and timely interventions. as a consequence [Early Talk Boost](#) is being launched as a City-Wide approach on 2025/6 AY, which was successful in Derby when it was introduced pre-pandemic.

Derby has a published [Start for Life Offer](#), for both universal and targeted services, which provides information on services that assist in the early identification of need(s). Families across the city benefit from many options of support from pre-birth onwards, and professionals have worked innovatively

together, aided by national funding to provide settings where children, young people and their families can access more services (e.g., the Solihull Offer is now available to all families). The Derby City Family Hubs play a supportive role in the early identification and support of children and families with SEND. Our highly skilled workforce includes SEN and ASC Champions across the city who have received both formal and informal SEND training. We work closely with the Royal School for the Deaf Derby and have a team member currently working towards Level 2 in BSL.

The impact of this focused work on communication and interaction has contributed to improved access to universal and targeted interventions. The current average wait for a specialist speech and language therapy assessment, for both SLC and social communication/autism pathways, is **6 weeks**.

However, details from the earliest point – ASQ3 checks – presents a different picture, and implies that EYFS outcomes should be higher than they are at reception age, if the assessment baseline from the ASQ3 can accurately reflect the five assessment criteria in GLD.

At the 2.5 health check in March 2025 96.3% of children underwent the ASQ3 across the 5 domains, with 82.6% achieving above threshold in all 5 domains. That is an increase of 2.2% from March 2024.

- Details show that in both years the achievement rate in communications skills remained the lowest achievement score with 2024- 86.6% 2025 – 86.5%
- All other areas were measured at above 90% in 2025
 - Fine and gross motor skills 94.8%
 - Problem Solving – 93%
 - Personal and social development – 93.3

The achievements at 2.5 years old do not correlate when we look at GLD assessments for 4-5 year olds, which was 64% in 2024/5 AY. We believe a significant factor in Derby City is that the assessments at 2.5 are not integrated and are undertaken only by health visitors, using a questionnaire with parents of children. No observations are undertaken in early years settings

Action: Given this position, we are

1. 2.5 check, moving to an integrated check;
2. Look at revisiting the coaching of health visitors in executive functioning skills and undertake checks at 3 for those not accessing pre-school
3. implementing SCERTS across the 0-7 cohort, directly targeting children with identified additional executive functioning skills needs in the early years sector.

Position Needs: Adolescence

Post pandemic we have seen an increase in ND assessment referrals, alongside a reduction in the executive functioning skills of children and young people, key skills that are fundamental for a child or young person to succeed and thrive in society and in learning. Similarly, when you track into **adolescence, executive functioning** once again becomes a key trigger for needs reflecting the development of the adolescent brain, and environmental influences; and displays through referrals to the CAMHS and ND assessments for ADHD, and an EHC assessment request for SEMH at year 7, and an increase in suspensions and exclusions at SEN Support.

The Public Health school nursing service provides an annual insight into the wellbeing of students in Derby through the use of The Lancaster Model (TLM). 6134 young people responded to the annual survey in 2024/5 academic year. The number of children and young people experiencing anxiety was 63% in

2024/25.

The Derby and Derbyshire Mental Health JSNA for children and young people (July 2025) has identified that National evidence shows a **doubling in probable mental disorders*** from:

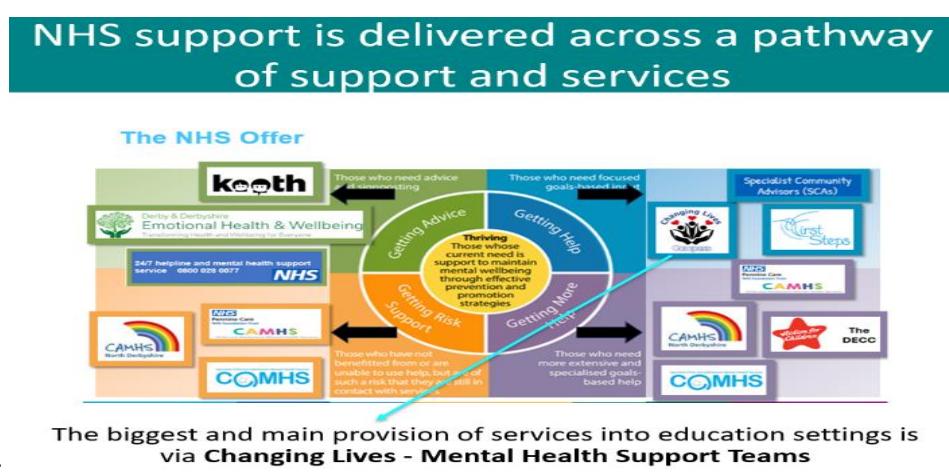
- 12% of CYP aged 8-16, and 10.1% of those aged 17-19 (2017-2023)
- 20.3% of CYP aged 8-16, and 23.3% of those aged 17-19 (2017-2023)

The JSNA also points to bullying as a cause of concern and mental health issues. School based surveys report that **almost half of secondary school aged children have been bullied** in Derbyshire (40%).

Currently there are 97 children and young people waiting to be assessed by CAMHS and the average waiting time is 12 weeks.

Action :

1. Key recommendations to address needs earlier include **focussing on transitions** across all schools and settings. Transition periods (entering school, primary to secondary, leaving care, adolescence and leaving home/care are key risks and opportunities to mental health and wellbeing)
2. To continue to strengthen the **range of support** required in **enabling better mental health**, the pathway includes:



1. **Kooth:** As part of the graduated offer for Mental Health NHS Derby + Derbyshire ICB commission Kooth to provide universal online emotional and mental health support for children and young people (up to 25yrs) in Derby City.. There are no wait times to access this support. For Derby city there where 702 new registrations from April 2024 to June 2025 with 871 logins registered between April 2025 and June 2025. Kooth also delivered 1251 hours of targeted intervention (to deliver chats, messages direct and indirect clinical contacts) or community support (moderation of content on the website from uploads made by Derby CYP) to Derby City CYP from April 2024 to June 2025
2. **Compass:** NHS Derby and Derbyshire ICB commission Compass to provide early intervention and targeted treatment for children and young people with mental health needs via the school based Mental Health Support Teams and the community based Early Intervention and Targeted Support service. This means that 100% of children and young people in Derby City have access to early intervention and targeted support for mental health.
 - **Compass Changing Lives – Mental Health Support Teams in education settings** On 8th Sept 2025 there were 10 children/young people waiting for an assessment with an MHST in the City. Between August 2024 to July 2025 the mean average waiting time across all Derby City MHSTs for an assessment and to commence the service was 32 days/4 weeks.

- **Compass Changing Lives – Early Intervention and Targeted Support Service**

Available to those children and young people who attend an education setting which does not yet have access to an MHST. The EITSS team covers both the City and South Derbyshire and it is not possible to separate out data for the City only CYP. On 8th Sept 2025 there were 39 children/young people were waiting for an assessment with the City and South Derbyshire EITSS team. Between August 2024 to July 2025 the mean average waiting time across the City and South Derbyshire EITSS team for an assessment and to commence the service was 46 days/7 weeks

3. **Eating Disorder Services – First Steps ED and CAMHS ED.** NHS Derby and Derbyshire ICB commission early intervention and prevention support for Eating Disorders from First Steps ED and specialist eating disorder service provision from CAMHS ED.

- **First Steps ED.** In 2024/25 First Steps ED received 389 CYP referrals across Derbyshire and Derby City. The maximum wait time is 5 weeks.
- **CAMHS ED.** The NHSE Access and Wait Time Standard for Children and Young People's Specialist Community Eating Disorder Services require that 95% of Urgent cases are assessed and commence a NICE concordant treatment within one week of referral, and 95% of routine cases are assessed and commence a NICE concordant treatment within four weeks.

4. Recognising the issue of resilience, or managing anxiety, the secondary PHSE network has begun to develop a PHSE curriculum with a focus on resilience.

5. To address more complex issues, we are looking at the family based interventions for adolescents with emotional dysregulation as part of the Families First programme, such as the Enhanced Family Therapy programme jointly funded by NHS and the LA to support those at risk of permanent exclusion due to dysregulation/adolescent executive functioning, as identified as a key priority to support children to remain in school by the Behaviour Strategy Group. This is based on the results of the Enhanced Family Therapy Programme from DDCIB, a targeted commissioned service was established in the Bridge Street PRU in 2021. The project was launched into 35 primary schools by supporting circa 400 primary aged pupils and their families. The outcome of this project

- Improved child's behaviour, self-esteem and self-regulation.
- Improved children's emotional health and wellbeing and social skills
- Improved emotional health and wellbeing of families including family functioning and stability
- 99.25% of pupils remained in their mainstream setting.

6. NHS Derby and Derbyshire ICB has approved a Business Case to provide investment for DHCFT CAMHS service expansion and development to address the internal waits routine CAMHS services, this includes:
 - a. Increased investment in routine CAMHS to increase capacity to provide specialist MH assessment, treatment and therapeutic interventions
 - b. A Service Development Improvement Plan that includes updating service specifications, quality reporting and data reporting along with a demand and capacity approach for benchmarking

Position: Demand

Improving the experiences of families has been at the centre of understanding demand in the system.

Derby has experienced significantly high referral rates for EHCNA compared to neighbouring LAs and statistical neighbours. Year on year increases represents 775 new requests in 2023, up from 620 in 2022 and 531 in 2021. Requests continued to rise and in 2024 were at 795. However, we have seen a reduction in requests in 2025, with a forecast of 715 requests, of which we are forecasting on current activity 450 to progress to a plan. Given that the overview of 2025 is that on average 85% progressed to an assessment go

onto a plan.

To understand the need in the system a stock check was undertaken on referrals for an EHCNA requests, the review demonstrated that for several referrals an absence of details sufficient to progress to a full EHC assessment by 50%. A review of plans also has evidenced that a significant number of the EHCPs issued at the point of high demand could have been met through a graduated approach, inclusive curriculum and reasonable adjustments delivered at SEN support.

This disparity led us to review the whole EHCNA and planning process, benchmarking against LAs operating high levels of compliance to the Code of Practice. Changes have been implemented in discussion with SENCos and health providers to shift towards meeting the needs of children earlier, at the right time in the right place.

We have redrafted the graduated approach, created a needs led banding matrix and invested in the statutory and advisory teams to ensure that capacity is in place and effective advice is being given to settings and parents and carers regarding identifying SEND and meeting those needs at the right time with the right support. This has included utilising allied specialist teaching staff for assessments and interventions to support improved strategies in schools.

When an EHC needs assessment or plan is declined a "moving forward together meeting" is offered to schools and families to ensure an appropriate path to support where appropriate, is in place to address needs discussed at our multi-disciplinary Inclusion Support Panel. These are strengths-based meetings, where schools and parents, supported by the local authority, can work together to formulate an action plan that supports the right way for the child's needs to be met. Additionally, where a plan is declined a SEN support plan is produced to support the school and parents to understand what and how needs can be met without specialist support. However, the number taken up during 2024/25 academic year was under 50%. This issue will be a focus in 2025/26, with an increased number of school visits in place to identify how children's needs are being met earlier and how these can be strengthened.

In a recent survey 56% of respondents either agree or strongly agree that MFT's are a useful part of the Statutory process for supporting families.

"We have had a lovely response from Derby SAL and this has helped us to develop our graduated response.

Between 2022-2024, 280 plans were delayed which negatively impacted on the experiences of young people and their families, as children and young people did not receive the right support at the right time.

Despite the issues of timeliness, monthly data reporting since 2019, shows that NHS service locally consistently provide health advice into the EHCP needs assessment process within the 6 wk target with average performance of between 84-100% against target. The quality of health advice is audited 2x yearly across all NHS Trusts including SLT, OT, PT, CAMhs & Paediatric services shows compliance of between 94-100%.

Action:

1. The recovery plan was implemented in 2024 and within 12 months, April 2025, all plans that had experienced over 21 week delays were finalised and issued. From May/June 2025 no plans were over 21 weeks.

2. **Timeliness** for EHCP finalised plans have begun to improve and completions excluding exceptions hit 100% in July, August and September 2025, with a forecast cumulative year timeliness of over 50%. This has been achieved after a 12-month recovery programme for delayed plans utilising additional agency staff and expanding the establishment team.

3. Focused work to improve the **quality** of EHC plans has been running coterminously with the work to address timeliness, with a sharper focus on SMART outcomes, a new SMART Plan template and Annual Review template. Thereby addressing the variability in the quality of children and young people's EHC plans in Derby. Quarter 1 data indicated plans were predominately at requires improvement as there was insufficient information on PFA and the voice of the child wasn't the golden thread in the plans. Work with the teams to ensure these areas are addressed have been delivered.

4. **Annual Reviews** timeliness has been affected by both the demand in the system and the focus on progressing delayed plans. 65% of AR for the AY 2024/5 have been completed. We have an Annual Review recovery plan and this is monitored by the Team Manager on a weekly basis.. Dedicated staff have been allocated to address timeliness, with a lens on looked after children, those known to the youth justice service, electively home educated and those receiving an education other than at school package.

5. It must however be noted that these demand pressures significantly impacted on timeliness of the EHCP process and consequently impacted on communication, an increase in complaints, tribunals and reports to the LGOSC over 2022-2024. Over 2025 The numbers of complaints have now plateaued and the type of instruction from LGOs has moved from significant penalties to nominal payments for issues on slow communication. Our tribunal flow still remains with parents challenging the decision of the local authority for a placement in the local offer, as opposed to non S41 schools.

6. Arising from the deep dive into delayed plans, **tribunals, complaints and LGO's**, was the recognition that some children had been removed from school without plans being finalised, or parents rejecting the school the child was placed in without a new school being agreed. In most cases parents stated they wanted their children to attend independent special schools. Refreshed S19, Elective Home Education, Attendance policies and supporting children with health needs policies were revised and refreshed, to ensure that all services had a clear understanding of the regulations and responsibilities to address children not being in school. Additionally, the council invested in the local offer – see below – and also increased the specialist interventions and support for SENCO's in mainstream schools. Where the complaints were linked to a 'no to assess' or 'no to plan', the LA refreshed its approach to mediation, and ensured compliance with regulations. Despite this, in nearly all cases tribunals and LGOs agreed with parents.

As we move to implementing Artificial Intelligence (AI), there will be a clear improvement in the consistency of quality of assessments and plans, as well as supporting the maintenance of completion of Plans in time and annual reviews. We envisage that this will release the statutory SEND team from the burden of bureaucracy to being more involved in settings to meet needs earlier and closer work with parents and children. AI will support the production of whole school as well as individual provision maps to be generated and also direct the type of professional development or interventions required in schools.

Local Offer position

A key issue suppressing the numbers of children remaining in the local offer, has been parents feeling disgruntled with the offer, and also that demand for specialist places was outstripping supply

Action.

1. The development of specialist school provision has been driven by the evidence of primary needs. Work has commenced on a **£24m capital programme of school developments**, which includes:
 - the development of additional enhanced resource provisions in mainstream schools (200+ places), strengthening the mainstream first model (seven new primary and three new secondary), to allow for more children to get the specialist support they require at a local school within their community
 - the expansion of existing special schools and AP (200 places), by making use of satellite provisions and remodeling existing sites increasing space, alongside acquiring a new building for our health needs alternative provision that has been redesignated to ASD and health needs meeting the needs of children with ASD and high anxiety. This will ensure sufficiency of provision in the city and enable an improved offer for children facing barriers in accessing education due to their health needs
 - capital improvements to existing schools, which is improving the inclusive environment of our mainstream and special schools, to retain children in mainstream or existing specialist provision.
2. To support ongoing development of the system to meet needs earlier a priority within the Local Area Inclusion Plan is to develop the capacity and confidence of mainstream provision to meet needs through a whole system **workforce development plan** and a clear direction to move away from a medicalized model to a social model of SEN with a greater focus on child development; inclusive curriculum, right support at the right time and inclusive practice supported by specialist across health, education and care.

In April 2023 we launched the AET Autism Advocates Training programme as part of the Autism in Schools project starting with 9 schools. Following a successful pilot programme this was rolled out to all schools from September 2023. 65% of schools have been trained in AET. These schools are now able to offer quality assured training to school staff as needed. Early adopters of the programme are more able to support autistic learners and make less referrals for support. Following this we have established short courses that includes:

- Developing inclusive leadership in schools, executive functioning, Way to Play (playing joyously and purposefully with young autistic children).
- 60 SEND mini-guides. SENCO Quote:

This (the STEPS mini-guides) is fantastic, thank you! Not only will the mini-guides be an invaluable reference resource, they will also be great for staff training. Thank you again STEPS Team.

I just wanted to say that this (the STEPS mini-guides) is FABULOUS! A great addition to help our staff meet the ever-demanding needs of some of our children. Well done to the team!

Training is enhanced through regular **SENCO** events, with the most recent forum having over 90 attendees; SENCO school cluster groups and a new SENCO toolkit. *'Just to let you know that we've been largely impressed with some of the changes we are seeing in SEND provision and organisation across the city. I thought you would like to know. It is obvious that there is a lot of work going on to improve communication, provision and access' from a head teacher (Sept 2025)*

3. Derby has an **innovative, sector-led approach to inclusion** delivered in partnership with the local authority, schools and Derby County Community Trust. The vision is to ensure every school's culture and practice is inclusive and consistent, enabling better outcomes for children through relational practice and a sense of belonging. In 2022, we launched the Derby City Schools' Inclusion Charter, which has acted as a common code of practice with five key principles to inclusion, and almost every school in Derby (103 out of 107) has pledged to commit to the Charter, working together to advocate and develop inclusive practices and belonging across schools in the City. To date over 2000 school staff trained in

attachment and trauma; 35 schools involved in relational approaches within schools; 20 schools involved in “Nature explorers” work with a focus on CWSW; 5 schools supported in employing TAs to work with CWSW; 24 staff trained in play therapy; 35 staff trained in drawing and talking. The Inclusion Strategy Group website enables direct access of staff within schools to ongoing training and development opportunities. 2025 is seen as a year of consolidation for the training, alongside the restructuring of LA inclusion and SEND teams to enable a more holistic approach to children and families, and interventions. Due to the programme of belonging and inclusion, there has been a significant impact on supporting young people to remain in schools. Annually this is enhanced through an inclusion conference where over 300 attended in June 2025.

4. Health training Training for school staff to support pupils with medical conditions in school is provided by the NHS TEACH team and specialist nursing teams for long term conditions such as Diabetes, Epilepsy and asthma.

For pupils with poor gross and fine motor skills identified by schools. In Derby, school have access to our targeted "Physical Literacy Programme" designed by local NHS physiotherapists to improve core stability and coordination. This helps children and young people increase levels of physical development and has been shown to improve handwriting and increase levels of progress in English and Maths. training is supported by Derby City School sports partnership (DCSSP) . Schools can also use the specially designed "Active Hands are achieving hands programme" a targeted programme designed by our NHS Occupational Therapists also for use in schools with training tutorial for schools video: derbyshirehealthcareft.nhs.uk

5. Local Offer online presence has been strengthened. Clear guidance documents are in place including for the EHCNA and Planning process and Pathways into Adulthood.

Position Complex Needs

For children and young people with **complex needs** there has been a sustained approach to meeting needs:

1. Commissioning arrangements are aligned between education, health and care, coordinated by the Complex Case Panel for complex individual cases for a targeted cohort, focused on making sure that needs are met, with a number of examples locally of strategic commissioning developments to support in areas of identified need that is a complex cases panel incorporating Involvement from the Integrated Care Board, Children's Social Care, Adult Social Care, SEND and Children's Commissioning. This ensures children's joint education, health and social care needs are assessed and understood and funding and commissioning arrangements are agreed for those children to meet identified needs. We have 7 young people supported by EHC Plans who are jointly funded with Social Care and or Health.

2. Children with Disabilities can access Direct Payments as an alternative provision where there is an assessed social care need. This is managed through the Integrated Disabled Children Service to ensure consistency of coordination for parents, carers and families. Parents and carers of children with disabilities are also able to access Personal Health budgets where there is an assessed health lead and a budget can be used for families and carers to purchase their choice of care provision. This offers greater choice and flexibility in meeting children's health and social care needs. 30 children and young people access direct payments.

3. The number of disabled children are currently waiting for a local authority OT assessment is 24, average current waiting time from referral to assessment for a disabled child is 7 weeks. The team is now working with a full complement of staff and when reviewing performance with previous years of full

capacity, waiting times should be addressed.

4. Open to Children's Social Care with EHCPs (June 2025)

- Child Looked After – 80
- Child In Need – 116
- Child Protection – 26
- Early Help - 54
- Children with disabilities (where known) (January 2025) EHCPs – 1375 and SEN Support – 181

The ILACS Ofsted report 2025 notes:

“Experienced and knowledgeable social workers, across initial response, locality teams and the integrated disabled children’s service, visit children and skillfully undertake creative direct work to meet the varying presenting needs of children. Workers use a range of communication methods with children. For disabled children, this includes Makaton, Picture Exchange Communication System (PECS), widgets and symbols. Children are supported to express their likes, dislikes and wishes as a result.

Strong and determined partnership working provide holistic support for disabled children. Housing services, occupational therapy and social care work together to help children with complex needs to remain living in their family home when it is safe to do so. Where an individual pupil requires the support of an adult in school, to provide care due to medical conditions, via an Individual Health Care plan (IHCP), training for education staff is provided by the NHS TEACH team or NHS specialist nursing teams e.g. epilepsy, asthma, diabetes.”

5. NHS Derby and Derbyshire ICB, Derby City Local Authority and Health providers have worked in partnership to develop local pathways to support national processes to ensure that CYP with Learning Disabilities and/or Autism have the appropriate care at the right time to prevent them being admitted to a T4 Inpatient setting. In Derby City the Dynamic Support Process (DSP) and Care (Education) and Treatment Reviews (C(E)TR) are underpinned by a local Escalation Pathway. The Escalation Pathway is managed by the Integrated Care System's Escalation Team that are hosted by Derbyshire Healthcare Foundation Trust (DHcFT) and its role is to work alongside the Multi-Disciplinary Teams (MDT) involved in providing care and treatment for CYP with LD+A. The MDTs are made up of the health and social care professionals supporting the CYP and the aim of the Escalation Pathway is to ensure that the MDT are providing CYP with LD+A with the appropriate care at the right time to avoid the need for a T4 inpatient admission. If the CYP is moving towards crisis then the Escalation Team are able to refer them into Bronze, Silver or Gold Escalation Meetings, which have representation from senior leads from across the Integrated Care System with the authority to make urgent decisions about care and treatment.

6. The impact of these processes and pathways are that over a 12 month period there have been 29 CYP referred on to the **Dynamic Support Register** with the majority of them being RAG rated as Amber. During the same period 9 C(E)TR and 3 LAEP were held with only 2 CYP being admitted to a T4 Inpatient setting.

7. When children known to Childrens Social Care have assessed SEND needs, and are potentially Care Act eligible, there is an existing pathway between **Children's and Adults Social Care** for referral, assessment and delivery of Preparing for Adulthood services. This is supported by system led referrals, tracking and a forum process which integrates colleagues across Commissioning, Children's/Adults Social Care Services, Health colleagues and SEND to ensure integrated pathways and transition planning for children potentially eligible for Adult Social Care services and ensure smoother transition of service

provision for children and young people. This has been augmented in the last 18 months by a steering group to oversee operational delivery. 17 young people are currently in transitional arrangements.

8. Children Social Care and Integrated Care Board commissioning are working on specialist home models for children with complex needs and who may be in more restrictive living arrangements without this provision. As of April 2025, the Council was supporting 366 adults in **Supported Living settings**. The Preparing for Adulthood adult social care team determined in a recent data modelling exercise, that there are currently 38 individuals aged 16-23 years of age that would be suitable for a place in this specialist setting at the level of needs we anticipate the setting to support i.e. low to medium level Learning Disability (LD), Neurodiversity (ND) and Autism (A). The Local Authority Cabinet have recently approved the development of a supported accommodation provision in the City.

9. For young people with physical disabilities the wait for **assisted technology** implementation in mainstream schools particularly for VI has led to a refocus of the VI teams work to focus on preparation for adulthood by supporting young people to be independent learners through assistive technology. Over the last 12 months **87** young people have accessed aides to support their independence. Our processes and systems are clear and efficient. No child has been left waiting unnecessarily for the specialist equipment they need to access their educational entitlement. The provision of specialist equipment includes specialist work chairs, toilet frames, radio aids, canes and individual learner laptops for VI learners. Specialist teachers, advisors and practitioners in the Specialist Teaching and Psychology Service (STePS) ensure equipment is provided promptly and setting staff know how to use it safely and effectively.

10. *Young people experience **transitions across many different health services**, mainly from services for children and young people into adult services, and Derby is increasingly commissioning health services from 0-25 years to ensure that we can support and prepare younger adults to achieve strong outcomes (e.g., speech, language and communication, mental health services, all age wheel chair services, SLCN, OT/PT, roll out of young adult services, AAC, specialist community equipment). There is also a clear eligibility criterion (Care Act 2014) in place to support in the **effective transition of young people into adult social care services, with planning commencing at the age of 14 years**, to ensure that young people and their families are appropriately prepared. If a referral meets the Preparing for Adulthood (PFA) Team's eligibility criteria an Adult Social Care Assessment will be offered. Once the referral has been accepted and assessed as meeting the PFA criteria the PFA team will continue to work with young people up to the age of 25. The Joined-Up Care Derby Multi-Agency Transition Network Group has brought together representatives from children's and adult services across health and social care to meet and discuss transition and transition planning for young people (YP) in their own organisations. The network agreed a set of overarching principles of transition which should be the consistent and integrated, regardless of service type.*

This whole system approach aims to achieve the deliverables outlined in the NHS Long Term Plan for integrated CYP services, the local SEND offer for young adults with continuing care needs. The network shares learning and best practice, identifies system wide service gaps and looks to find solutions. whole system principle of improving transition service provision that was consistent for young people, would have a long-term impact on engagement improving their health, education, and wider life outcomes. The Network has reviewed transition services locally against NHSE/Education and Local Authority transition service specifications/strategies, It has undertaken a whole system audit of 16yrs+ services across service provision, identifying gaps informing the transition action plan as well as developing a transition toolkit to support the adoption of the guiding principles

Work is presently underway to strengthen our approach to transitions from 14 onwards, to ensure that EHC plans are focused on preparation for adulthood and have greater alignment with transitional plans

from children to adult services (social care and health). As well as the City Partnership's approach to the Derby Promise which enables children and young people to effectively explore the future world of work, with industry led curriculum, skills and knowledge sharing and the carving of jobs for those with SEND.

Action : Where there are gaps there are actions to address these areas:

1. Whilst we have an expert by experience led Learning Disability Partnership panel, we are currently unable to disentangle the global development delay and **learning disability pathway** due to the interruption caused by the national reforms on health partnerships and ICBs. This along with the **Down Syndrome pathway** will be developed through 2026 as part of the PFA pathway priority in the Local Area Inclusion Plan. There are currently 105 young people under 25 with Down Syndrome.
2. Waits for **wheelchairs**. The recovery plan long waits for wheelchairs have been identified and the details for all the children and young people, affected have been collated. Each child or young person has an individual action plan and the ICB is working with the new service provider to implement the plans at pace.
3. Financial year to date figure (2025/6) for completion of **LD Annual Healthcheck** (AHC) for young people in Derby City with a Learning Disability is 66% so there is a multi-agency team including representation from Primary Care and NHS Providers working to increase the uptake of LD AHC.
 - Monthly reports are produced which display the Calculating Quality Reporting System (CQRS) data for LD AHC in graphs for the Derbyshire system, at Primary Care Network (PCN) level and for individual practices.
 - PCN level reports are shared monthly via the Derbyshire GP Provider Board, along with any LD AHC updates and signposting to resources and support.
 - The LD AHC reports are updated monthly as the new figures are received to act as ongoing prompt to practices and enable closer tracking of PCN and practice performance. Work taking place to clarify reliability of this data.
 - Work has commenced to support primary care to signpost to the LD Strategic Health Facilitation Team (LD SHFT) and build links with education so LD AHC are flagged at EHCP reviews.
 - A joint press release was published on Down's Syndrome day to encourage people with a learning disability to have their LD AHC.
 - Work is ongoing to strengthen links and encourage close working across the local system.
 - Links are also being developed within the East Midlands Region to share of good practice and so learning can be incorporated into local practice.
 - Once it has been received national data for 2024/25 will be used to offer targeted support for those PCNs/practices which may benefit, with support from public health, education, VCSE and other partners.
 - Links have been made with Derby City Council's LD&A Healthcare Improvement Project which includes work on LD AHC, whilst the project is focusing on adults it will cover 14-18 year olds.
 - The LD SHFT continue to provide awareness sessions to primary care staff about the importance of inviting this age group in for AHC's and how they need to take into consideration the timing of appointments, our suggestion is to offer outside of school hours and outside of term time.
 - The LD SHFT have a range of accessible resources to support the "have you had your annual health check?"

Position: Outcomes

At the 2.5 health check in March 2025 96.3% of children underwent the ASQ3 across the 5 domains, with 82.6% achieving above threshold in all 5 domains. That is an increase of 2.2% from March 2024

However, year on year analysis demonstrates that there is no correlation between the 2.5 year old check and GLD outcomes.

The percentage of Derby schools and settings' EYFS children who achieved a good level of development (64.8% in 2025) was lower than the national (67.7%) and our comparator authorities' (65.0%). Derby schools and settings' are nationally ranked 124th out of 153 LAs in this indicator.

For these younger age group attainment measures, Derby's SEN pupil results are ranked in the top half of all English local authorities (10th highest for EYFS). An analysis of performance across Derby City schools demonstrates that in the five wards of highest deprivation the level of need is so great that it suppresses the overarching achievement rate for Derby City. **With schools in our most deprived ward achieving below 50% at GLD.**

Phonics national 80%, Derby 77% and comparator LAs 79% - same as 2025

At Key Stage 2 . Derby ranks in the bottom half of all L.A.s on this measure. Reading Writing and Maths, Derby performed worse than in 2024 by 2% at 54%, compared to national at 61% and comparator LAs at 58%.

In 2024 at Key Stage 4 Derby pupils with no SEN needs perform worse when compared to other areas, as do those on SEN support. EHCP pupils achieve similar results for Attainment 8 score and average Ebacc points score but a lower proportion achieve a strong pass in English and Maths. At this age group Derby's SEN pupil results are ranked near the bottom of all English local authorities but have improved on last year's position.

In 2024 a much lower proportion of Derby 19-year-olds, including those on SEN support and with EHCPs, achieve level 2 and level 3 qualifications (not specifying English and Maths) than in all benchmark areas. This was the same in previous years.

The **Virtual School** ensures that Special Educational Needs and Disabilities (SEND) and Inclusion are at the heart of its provision. 64% of children and young people who are 'looked after' have identified SEN/D needs, a cohort of 202 CYP. The Virtual School proactively identifies and assesses the needs of each student, working closely with social workers, carers, schools, and external specialists to implement effective, individualised support plans.

At all stages care experienced children with SEND do better in Derby compared to the national.

- Phonics – 46% compared to 37%
- Key Stage 2 RWM – 25% compared to 17%
- Attainment 8 – 13.9% compared to 12.9%
- Progress 8 - -1.11 compared to -1.51

ILACS Ofsted Inspection report 2025 notes:

'There is a coordinated approach to ensuring that children, especially those with vulnerabilities or special educational needs and/or disabilities (SEND), are educated full time in schools'.

There are strong working relationships between education, health and care partners in the city and the **Youth Justice Service**, ensuring that the needs of children and the experience of them and their families

are central to planning. 26 young people known to YJS have an EHCP.

The recent **HMIP Youth Justice** inspection 2025 report notes:

“HMIP found examples where work had been completed with parent or carers to help them better understand and appropriately respond to their children’s neurodiverse needs.

Inspectors found consistent evidence of practitioners taking care during planning to explore with both children and their parents or carers what might get in the way of their engagement. For example, they discussed needs relating to literacy, poor eyesight, anxiety, attention deficit hyperactivity disorder (ADHD), speech, language, communication, and neurodiversity.

Inspectors found several examples of effective planning that had been suitably informed by children’s education, health and care plans”

Action

1. We have established a priority working group focusing on **Inclusive Curriculum** with the aim of developing a repository of good practice; communities of practice in cluster groups to develop personalised and adapted curriculum. Chaired by the Chair of the Area Inclusion Partnership Board and includes the Research School.
2. An analysis of achievement by school has identified several schools where achievement rates for all pupils, boys, girls, disadvantaged, EAL and SEN have highlighted significant areas of progress for some at GLD, Phonics, KS2 in 2025 and sustained delivery from 2024. Working with these schools we will be working with the early years and primary strategy groups to establish clusters/ triads, **supporting school to school support**. Evidence of impact can be seen in how a triad between Cavendish Close, Alvaston Infants and Oakwood Infants has significantly sustained GLS and Phonics results.
3. Once we have a picture of **KS4 and 5** results at school level we shall be working with the secondary strategy group to explore opportunities within a similar vein.
4. **Transition** has featured as a key issue across all areas noted above. As such specific transition activity will be established across each phase. For children with SEN and those engaged in AP.

Position: Preparation for adulthood (PFA)

Whilst PFA outcomes are embedded in all EHCPs; there has been an increased focus on year 9 through annual reviews for students with SEND, but also for all young people. For those known to specialist social care, and who are going to progress into adult social care, as noted above there is a clear pathway of provision in place.

To enable the achievement of the outcomes established by young people we launched the Derby Promise in 2024 with young people, galvanising partners to support our young people to reach their goals. The Derby Promise aims to bring together the opportunities across the city closer to young people and ensure that every young person in the City are enabled to live their best life.

Derby is well positioned as a member of the East Midlands Combined County Authority (EMCCA), a UNESCO learning city and a city with rich industrial heritage. The Derby Promise combines a network of businesses, educational and cultural organisations – together with the Council – provide meaningful opportunities for children, young people and adults from primary school right through to further and adult education and into employment, including a targeted focus on those young people with special educational needs and disabilities. Annually the vocational profiling activity provides a lens into the aspirations of Derby young people. This supports the planning for young people to access careers experiences, build their skills and explore the future of work, leaving them confident and ambitious about their place in Derby’s future.



Derby Promise Roundtable – young people from St Clares Special School and the Young Mayor, outlining their ambition for young people in Derby.

In the first year of operation the Derby Promise was live across all schools, engaging over 4000 children and young people in careers events, including children with SEND and those attending AP. Dream Fest was just one event.

<https://youtu.be/QmeGUrDtYYs?feature=shared>

NEET status with SEND all age groups benchmarking:

In March 2025, Derby had lower proportions of both year 12 and 13 pupils with SEND engaged in education or training compared to regionally and nationally. This was 4-5% lower in Derby for years 12 and 13 combined. The proportion who were known to be NEET was 7% higher for this age group in Derby than regionally and nationally. Derby had only 0.2% recorded as current activity not known, due to carrying out better tracking than other authorities to determine where young people with SEND are attending.

For those aged 18, 19 and 20-24 with SEND, Derby had significantly higher proportions engaged in education or training. The proportion who were known to be NEET was more than twice as high in these older age groups. Of 89 pupils who were open to the youth offending service in March 2025, 20 were recorded as NEET.

This represents 22.5%. Of these 20, 7 had EHCPs, 8 received SEN support and 5 had no identified SEN.

Participation

There are several **post 16 pathways** across Derby that includes supported internships and employment and education pathways. This includes young people accessing

A) Adult Learning provision

- 315 ASF funded enrolments for 19-25 year olds, of which 87 self-declared a learning difficulty/disability
- 71 Multiply enrolments (DALS and partners) of which 29 self-declared a learning difficulty/disability

B) In 2024/5 there were a further 318 in sixth form settings and in Derby College and 68 young people with SEND on a variety of into work pathways.

Our supported internship and employment forum established in 2024, has brought together a range of providers from the FE, community, independent training provider and adult learning sectors. We have developed and provided individualised support for employers in response to needs, the development of inclusive recruitment policies, through delivering autism education trust training to local employers, supporting learners with learning disability and addressing unmet trauma and attachment, and social, emotional and mental health in the workplace. This is supported through our robust disability confident scheme.

November 2025 will see the launch of our new Skills Centre for young people with SEN/D. Based at Friar Gate Studios, education providers and commercial entities have been invited to co-habit in a centre focused on supporting economically active citizens, particularly those with SEND, and moving them closer to the labour market. Created after consultation with 100 young SEND ambassadors and the Derby SEND Voice (SEND parent/carer forum), the new site provides an aspirational space for young people to gain practical support, confidence and independence as they're guided towards the world of work. This successful transition into the labour market and other opportunities will support young people in moving away from being service users, thriving

within their local community.

Journey to Work

In 2025 we have been able to pilot an innovative NDTi programme to support 16-19 year olds without an EHCP, and predominately from AP, and implement a youth trailblazer project targeting care experienced and young people with SEND to secure employment. A target to engage 200 young people has been set for 2025/6 academic year, with a 50% target of SEND, in 3 months we have reached 45% of beneficiaries with SEND.

Harry is 20 he has autism, He was referred to our SEND Supported Employment Officer (SEO), by DWPs specialist Work Coach.

Harry wanted to work as an Apprentice in Early Years. The SEO referred Harry to DBC to gain a Level 1 qualification in Communication in Health and Social Care Early Years and Childcare. Harry achieved the qualification but still lacked the experience to secure an apprenticeship.

Harry was enrolled onto Derby City Council Journey 2 Work Programme. There were two Early Years opportunities on offer. Harry was invited to interview. The SEO supported Harry to prepare for interview. Tuybia attended the interview with Harry.

Harry secured a place on the programme at Little Angels Nursery St Andrews! SEO went with Harry to the placement to get him used to the new environment. The J2W commenced in May 2025. The SEO visited Harry at his new placement he was so engaged, the children loved him! and the manager was very positive.

Following Journey to Work; Harry worked with Tuybia and secured a Level 1 Apprenticeship in Early Years at The Old Forge Nursery in Findern where he is now working.

Harry said "I am really pleased SEO spoke to me about Journey to Work Programme and grateful for all her support. The Journey to Work gave me the skills and experience to get to where I wanted to be..."

Working with the DWP we have been able to secure a transition programme for those receiving benefits, so that there is no drop in income whilst on training or waiting for the first salary.

Position: Alternative Provision

The Local Authority provides and uses a range of Alternative Provision for children and young people in Derby for a variety of reasons including meeting the Section 19 duties. The Council also works closely with schools who also commission a range of AP as turnaround or transitional support.

The City has 3 successful full time alternative provisions; Derby Pride Academy (DPA) which was found to be outstanding in Autumn 2024, Bridge Street School which was inspected and was graded good in all areas in Autumn 2024 and Castle School the Health Needs Provisions which was deemed good in March 2023.

Across Derby City the three schools feature heavily in networks and collaborate effectively with other partners.

In April 2024, over 70 schools attended a conference on alternative provision (AP) in the City, learning from the thematic reviews. From this, schools have been working with the Council and health to explore essential developments that are needed to meet the three-tier model for alternative provision, as well as to identify those who are 'EHE', Electively Home Educated, and ensure that every child and young person is receiving a level of education that is appropriately challenging and supporting young people to access future opportunities and positive outcomes.

We use a range of AP for children and young people and includes those who cannot attend school due to medical needs and those children who have been permanently excluded.

- Day six provision following permanent exclusion. We commission RESPCT Bridge Street
- Pupils who are unable to attend school due to health reasons, we commission RESPECT Castle School health needs PRU
- Through Fair Access (new to the city and hard to place we commission 20 Fresh Start PLUS).

Our focus remains on ensuring an inclusive system, and a staying put approach, and a system based on supporting young people to belong, with mainstream preference is at the core of the Local Area Inclusion Plan. The local authority has reconfigured services into one Inclusion Service. A dedicated inclusion and school attendance team has been established that is inclusive of an IYFA team to ensure a coordinated single point of access for care, health, schools and families. This team works alongside the New Communities team and Virtual School, enabling a focused programme of multiagency work around vulnerable children, especially those known to social care or previously known to social care (90% of all suspensions). There is a robust, long standing In-Year Fair Access process and Behaviour Panel supporting schools to maintain low exclusions, hold each other to account and identify additional pathways of support for young people. The panels ensure that the alternative provisions (AP) utilised are fit for purpose.

Key achievements:

- Permanent exclusions have reduced from 91 in 2018/19 to 46 in 2024/25 (37 secondary, 9 primary), despite a national upward trend. 9 (5 primary , 4 secondary) exclusions overall through the academic year 24/35 for children and young people with EHCP and 39 with SEN Support (SEN support 2 primary, 37 secondary).
- Offers of placements through Behaviour Leads Meetings have risen sharply, from 12 in 2020/21 to 109 in 2024/25, reflecting much broader engagement across schools
- Fresh Start and Fresh Start PLUS are now established as meaningful early interventions, with 297 referrals since the strategy began. While challenges remain in sustaining placements, schools are increasingly working in partnership to support managed transitions.
- From September 2022, the primary and secondary Behaviour Strategy Steering Groups joined together to create a collaborative approach, supporting children and young people either within their existing schools or through well-managed transitions.
- The introduction of the Behaviour Strategy Panel and Multi-Agency Panel in September 2024 has strengthened citywide support, providing advice, strategies, and therapeutic pathways to keep pupils in education. Primary referrals have focused on early intervention and therapeutic support, while secondary referrals highlight more complex challenges at Key Stages 3 and 4.
- A total of 120 (**69- Primary, 51- secondary**) have been supported through the strong IYFA panel and behaviour strategy interventions. These figures include (**EHE Y11 DPA and Pre-Lexis pathways**)

Challenges

- Sustainability of Fresh Start placements remains a concern: of the 32 placements in 2024/25, 44% have broken down, 22% were sustained, and 34% remain ongoing.
- Secondary schools face greater difficulties in maintaining placements, with 16% of referrals resulting in permanent exclusion and over a quarter directed into alternative provision.
- There have been 3,516 fixed-term exclusions (suspensions) in Derby schools in 2024/25 to date (at 07/07/2025). Of the 353 suspensions from primary schools, 99 had EHCPs, 159 were on SEN support and 8 were undergoing assessment. Of the 3,163 suspensions from secondary schools 216 had EHCPs, 1,179 were on SEN support and 8 were undergoing assessment.
- A small number of schools contribute fewer offers of placements at Behaviour Leads Meetings, placing a disproportionate burden on others.

Priorities for 2025/26

- Strengthen therapeutic and preventative pathways in secondary schools to reduce reliance on AP and exclusions.
- Improve sustainability of Fresh Start placements through enhanced transition planning and the sharing of good practice.

- Ensure equitable participation from all schools in Behaviour Leads Meetings and Panels.
- Monitor and review the impact of new panel referral limits and streamlined processes to ensure they remain effective.

Professionals within school settings across the city are working to ensure that children and young people with SEND are **supported to access education and wider support**, with levels of absences in Derby schools comparable to national levels

The Local Area Inclusion Partnership Board keeps a keen eye on the position of children not in school, challenging the partnership to explore how together they are enabling better oversight of children with additional needs, those on a parttime timetable, in alternative provision, and their outcomes. Hence this being a key priority for the partnership.

The range of AP also includes providers who can support young people who cannot attend school due to medical needs and those children who have been permanently excluded. A new **Emotionally Based School Non-Attendance (EBSNA) pathway** is in place that is successfully enabling children and young people to access wrap around support, and through the DPEIA 67 schools have engaged in a comprehensive CPD programme of support for children and young people's with EBSNA. Of those attending:

92% of teachers have reported that they feel the CPD has prepared them to be more inclusive and to improve attendance.

48% of parents say they feel more confident in schools to be able to support their children; and one school reported:

'We have seen pupils who were absent for much of last year at 95% attendance so far this academic year'.

In the summer term 2025 the Inclusion Service ran a survey to gather views of the impact of the EBSNA pathway after the first full academic year since it was newly introduced in September 2024 as part of the focus on non-attendance due to health needs. Overall, in schools EBSNA has had a positive impact and commonly it has enabled;

1. More inclusive school ethos and less punitive approaches to attendance
2. Better understanding of EBSNA by staff
3. More engagement is needed with parents to distinguish additional needs vs. EBSNA and EBSNA pathway as an early intervention.

Fresh Start PLUS processes are designed to create opportunities for pupils to be successful in another school setting, where appropriate, and gives school leaders alternative strategies to add to their Inclusion Graduated Response, ultimately helping to reduce multiple suspensions and permanent exclusions. 30 young people (10 primary, 20 secondary) were supported through this process in 2024/25 AY.

Attendance. In the academic year 24/25 the attendance of those on SEN Support was (92.9% primary, 85.6% secondary) and of those with EHCP (89.5% primary, 83% Secondary). This is largely in line with the national data, primary SEN Support 92.8% and EHCP 89.5%. Whilst the attendance rate of students in the secondary years on SEN Support is higher at 95.1% than national at 86.2%.

The attendance and inclusion of vulnerable groups is monitored through targeting support meetings (TSM) based on a locality model lead multiagency approach by the Inclusion and School Attendance Team.

Action: Of concern and is a priority is attendance in alternative provision, which was 56% in 2025/6

Part-time timetables 332 (11 reception, 123 primary, 198 secondary) children and young people were reported to be on a part-time timetable during the academic year 24/25. Of these 110 had SEN status and 32 had social care involvement. Most (163) of the part-time timetables were put in place due to mental health needs. This was to support re-integration back into full-time education offer. The largest cohort were the Y8 learners (53). All the children in the reception year had additional needs where the part-time timetable was in place in support of transition from nursery. The revised Part-time Timetable and Reintegration Plan Notification portal will be launched in September 25 with improved reporting on any alternative provision that might be in place when on time limited and monitored reduced education offer

With respect to CME there are comprehensive systems in place to locate and ensure children access education. Currently (September 2025) there are 51 are CME . With respect to CME and part time timetables, the [ILACS Ofsted report 2025](#) notes:

“The vast majority of children missing in education are located quickly because there is cooperation between local authority teams, other local authorities and external agencies. When children are placed on part-time timetables, the same teams are proactive in making sure that these are short term, and that support is in place to make sure that children return to full-time education as soon as possible.”

As a system we are very much aware of the number of children and young people that have over the last three years become **electively home educated**. Currently 726 (sept 2025) and 72 have an EHCP. A deep dive into the intelligence and detailed conversations with parents/carers have identified key areas for action to enable young people to return to education and be secure and confident that their children can be successful.

Our **action plan** to reduce this number and culture of withdrawal from school includes:

1. Addressing school accountability with targeted meetings at each new notification with challenge
2. IYFA panel for those re-entering the system, to return from school of origin (where appropriate)
3. Mobilization of 5 pathways back into education including commissioned provision for years 10-11; As a result of the conversation with parents about outcomes for those home educated, a taster day at Broomfield College was held in July 2025 for secondary age learners and their families to raise awareness with the Derby College Post-16 offer. A suite of activities in partnership with the Derby City EHE Team and Derby College is planned for the academic year 25/26 to support EHE learners with Post-16 options.
4. Targeted triage for EHE and regular visits for vulnerable groups;
5. Targeted work at phase transfer; and parents/carers sessions in Family Hubs.

The [ILACS report](#) in 20205 notes:

“When children are electively home educated, information is shared effectively between teams to make sure that support is provided when needed, especially when there are other risks and vulnerabilities.”

Quality assurance arrangements for alternative provision have historically been commissioned via a third party within Derby, but a wider Quality Assurance Framework and Directory, implemented in the 2024/25 academic year, to cover Independent Schools for pupils with special educational needs or disabilities alongside AP for inclusion. There are currently 44 commissioned places in AP for inclusion and SEND , either on full time EOTAS, or flexible learning packages.

Further Evidence where there are areas that Derby local area partnership is effective

- Leaders across the system have a **shared aspiration to keep children and young people local**,

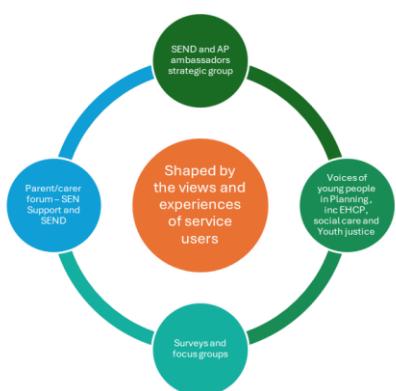
making sure that they can benefit fully from local services; this is particularly the case for some of Derby's most vulnerable children and young people including our children in care.

- The local area has clear systems in place for **information, guidance, advice and support...**
 - SENCO's, GP's and professionals within our universal settings are able to **access bespoke material** to ensure consistency of advice and support from the earliest opportunity.
 - The **Derby SENCo Advice Line and SEND Support Officers** are an early advice service for SENCOs, inclusion leaders and other frontline professionals and family workers, helping them to meet the needs of children and young people with SEND as early as possible.
 - A single point of access (SPOA) for **health services**.
 - In recognition of the high levels of vulnerability and trauma for children in care DDICB co-commission with Derby City a specialist trauma informed service for children in care and care leavers to meet their mental health needs. The service is a well-respected a vital part of our offer as corporate parents and works to proactively to prevent needs escalating and to prevent placement breakdown.
 - **Inclusion Partnership website**, developed by the Derby City Inclusion Strategy Group, allows schools and those who work with children and young people to access a range of inclusion training, resources and signposting to support.
 - **Derby and Derbyshire Mental Health Pathway Guidance** for schools.
 - **An emotional health and wellbeing website** for the public and professionals, with both local and national links and resources, including the ND portal for families and professionals. [Derby & Derbyshire - Emotional Health & Wellbeing](#)
 - **Hot Topic Briefings** - which is a dynamic programme of bite-size, briefings and training sessions being delivered by a variety of teams across the local area SEND system. Schools and Education settings can book onto these via our School Information Portal
- Derby's STePs (**Specialist Teaching and Psychology Service**) Team provides targeted support to professionals alongside families if individuals have concerns about a child or young person with special educational needs or disabilities in school/early years settings; with annual feedback survey's positively evidencing the impact and value that the service delivers.
- Our **Integrated Disabled Children's Service** (The Lighthouse) provides a range of services to families (including residential short breaks, occupational therapy, direct payments, community short breaks and social care field work), and routinely receives positive feedback from families that use services, which has been reinforced through inspection outcomes (ILACS) and local quality assurance evidence.
- In the **Youth Justice Service**, there is a speech and language team who are part of our health hub alongside CAMHS, Clinical Psychology, Therapeutic Mentors and the Criminal Justice Liaison and diversion team.
- The **Department for Education's Short Breaks Innovation fund**, Over the two-year innovation programme, we have supported 420 children and young people to engage in positive activities., building confidence and self esteem , being active in their community.
- **901 young people with SEND** have been involved in the HAF programme in Derby ranging from sporting to therapeutic activities. "It's a pure joy seeing him become more confident the more he attends." (Parent - Umbrella Easter 25 HAF)
- Young people with SEND can access the **Music Partnership Hub** in all schools, and St Andrews Special School has a music hub. An inclusive choir and orchestra are included in our annual Halle . **MEHEM** was rolled out this academic year and will continue during the new academic year
<https://www.mehem.org/uprising/uprising.aspx>
- Short Breaks – S 17 There are currently **338 children accessing a community short break** and 31 children accessing a Direct Payment to meet their assessed Social Care needs
- The Council currently supports 1254 eligible children, young people, and their families with **home to**

school travel assistance enabling them to travel to and from their educational setting.

- 19 young people have been involved in non-course based **Independent travel training** via Transition 2. This is additional to all those in special school and mainstream settings where travelling independently is part of the core PFA skills provision.
- Derby City has a **joint vision assessment clinic** (JVAC) involving an orthoptist, a qualified teacher for vision impairment and a paediatrician where appropriate to review a child's vision and there is a termly vision interest group for health and education professionals across Derby City and South Derbyshire.
- Derby City Specialist/ Advisory Teachers for sensory and physical impairment work closely with school staff, health and social care colleagues to provide a **joined-up approach to care and support for Deaf, visually impaired and physically disabled children and young people in Derby**. The referral process from audiology, ophthalmology and physio and occupational therapy to the specialist teaching teams is direct and used effectively. Health and education colleagues work closely around the provision of specialist equipment and children receive this equipment promptly following assessment.

Experience



Leaders in Derby are committed to making insight-led decisions, and central to this is placing the experiences of children, young people and their families/carers at the heart of all that we do.

This is clearly expressed in our Local Area Inclusion Plan that is outcome driven, with the six outcomes determined by young people.

- **I am active, independent and participate in society**
- **I have a plan for my future**
- **I have real life experiences, learning opportunities, good careers advice and guidance and insight into the world of work**
- **I enjoy good physical and mental health and live a healthy lifestyle**
- **Those that care for me understand how they can help me realise my potential**
- **I am supported to dream big**

We are very proud of our on-going work to actively create as many opportunities as we can to listen to experiences and views, using these to shape our developments...

The ICS has developed a comprehensive "**Guide to Patient and Public Involvement in our Integrated Care System (ICS)**", launched in September 2022 to support those considering, and involved in, service change across the system. This guide is accompanied by training from both NHS England and the ICB Engagement Team, with recent examples of collaboration including:

- FIM transformation programme - Exploring CYP Mental Health
- service design - ND Community Hubs
- re-procurement - Eating Disorder Service Procurement.

As a strategic partner the **Derby SEND Voice** has not only ensured the voice of parents are heard within the strategic SEND and Inclusion partnerships in Derby, but have also delivered on monthly 'let's talk SEND' events across Derby, providing a space for parents and carers of young people (aged 0-25) with SEN and SEND

to share any concerns and discuss areas for improvement with representatives from Health, Social Care and Education. Ideas and opportunities raised at these sessions are then taken forward to help shape services and inform advocacy and positive change. Meeting once a month, both alternating between in person and online. Since being set up in September 2024 the membership is now at 100 with over 700 followers. Members include parents of young people with an EHCP and without an EHCP.

Parents have told us

Parent carers in Derby have shared a wide range of views about their experiences with SEND services with Derby SEND Voice, highlighting both areas of strength and those needing improvement.

Many families appreciate the dedication of individual professionals and the support offered by schools and voluntary organisations. However, communication remains a recurring concern, particularly around accessing timely updates, navigating processes like EHCPs, and reaching the right people when help is needed. Many of these topics are covered at the Let's talk SEND events, in an effort to ensure the parents are able to voice their lived experience and to know that they are being heard.

Derby SEND Voice continues to gather feedback and work collaboratively with the Local Authority, Health, and Social Care to ensure that parent carers' views are not only heard but acted upon. While challenges remain, some positive changes are already being felt, and families are beginning to see signs of progress, laying the groundwork for more consistent and responsive services in the future.

SENDIASS continues to be highly sought after, well respected and valued by parents, carers, children, young people, and professionals in Derby City; successfully supporting over 1010 families over 2024/5 academic year.

The Service regularly receives positive feedback acknowledging the Services' support and the team's expertise in being able to resolve issues / mediate on what are often complex situations.

Some recent quotes from families are below:

“Thank you so much for your support over the last few weeks. It was so helpful to talk to you yesterday and to have you in mediation this morning. It is such a good outcome, and we are all very happy this evening. Thank you again”

“I now have a better relationship with my child’s school or setting, I have a greater understanding of the SEND Code of Practice and the arrangements that should be made for children and young people with SEN, I feel more involved in decisions about my child’s education, I feel my child has benefitted as a result of the service being involved”

There are **100 Young SEND Ambassadors** that meet monthly to ensure the voices of children and young people are not only heard but embedded in the decisions that affect them. Representing a variety of secondary mainstream and special schools, they discuss key themes such as healthcare priorities, accessibility in sports, and improving employment opportunities for SEND individuals. Additionally, 10 young people, including those attending alternative provision, represent Derby at the regional SEND Young People’s Assembly; there is one representative from Derby on the EMCCA SEND Connected Futures Forum.

Their insights and suggestions are fed directly back to council teams and local partners and stakeholders, ensuring that young people’s lived experiences shape policy and service planning. This collaborative approach means decisions are informed by those most affected, leading to real action. Outcomes so far include enhanced employability support, improved transport options, and targeted changes following health-focused sessions.

Our group of young people said...

To live their best life, they needed to be physically active and enjoy exercise.

We did...



Commissioned the Festival of Sport for a second year under the Derby Promise initiative. In its first year it achieved over 1000 engagements, and is set to achieve over 1,200 engagements this summer, providing opportunities to children and young people to be active and healthy in their community, as well as enjoying the social connectedness, emotional and mental health benefits of physical activity alongside their peers. This supports the planning for young people to access careers experiences, build their skills and explore the future of work, leaving them confident and ambitious about their place in Derby's future.

Our group of young people said...

It was important for them to be able to make good, healthy choices around food.

We did...

Undertook further consultation around the Holiday Activity and Food (HAF) programme, to ensure those that receive benefits-related free school meals

have a hot, nutritional meal in the holiday periods. Young people offered feedback on their likes and dislikes, and future sessions are planned around healthy eating, healthy habits and how this ties into independent choices and agency as we prepare children and young people for adulthood.

Our group of young people said...

Getting good sleep and managing their screen time would improve their quality of life.

We did...

After being raised as a priority by the SEND Ambassadors at a meeting, we improved education around healthy sleep habits and the impact of a good night's sleep on physical and mental health. We also created awareness about screen time management and its effect on emotional health. These topics were promoted at the Festival of Sport, and monitored by the Includmi app, used by children and young people in schools.

Young Ambassadors:

“Being an Ambassador gives me the chance to share my opinions and make sure people really listen to what we need.”

“I enjoy working with others like me, because together we can make things better for young people in Derby.

Our commitment is to maintain our improvement journey through the dialogue with parents/carers and young people, as well as our ongoing drive to improve outcomes and support young people to thrive.

How will the differences that we are making support us to achieve our outcomes for Derby's children and young people?

Outcome 1

I am active, independent and participate in society

- There are opportunities for children and young people to participate in travel training and independent living skills ,
- Young people coproduce and co design services.
- My voice is clear in my plan
- Young people tell us in an annual survey

Outcome 2

I have a plan for my future

- Good quality and timely EHC plans and reviews, with a clear focus on SMART outcomes for the future,
- Health waiting lists are at national target (diagnostic and needs assessments) with a clear plan for support

- Support is available at the right time in the right place so that I do not have to wait for an assessment or an EHC plan

Outcome 3

I have real life experiences, learning opportunities, good careers advice and guidance and insight into the world of work

- Good learning outcomes and access to education that meets my needs available in my local school
- Children are supported to remain in school
- Services delivered through schools, SEND post 16 Hub, and Supported internship forum are helping our young people plan for the future, gaining an insight into work.
- The Derby Promise provides employment pathways and opportunities - with recent examples including "Allestree Woodland and Rolls Royce first young person with sensory needs to be enrolled on a degree Apprenticeship with Rolls Royce Nuclear Skills Academy".

Outcome 4

I enjoy good physical and mental health and live a healthy lifestyle

- Opportunities for young people to build physical and mental wellbeing and they know where to find them
- Outcomes for young adults in contact with mental health services or with a learning disability, are largely positive and improving (EET and living independently).

Outcome 5

Those that care for me understand how they can help me realise my potential

- The Local offer provides clear explanations of processes and access to provision
- Parents/carers know and understand the local educational provision and how it can meet the needs of their children.
- Parents/carers understand how their child's plan meets the needs of their child
- Parents/carers tell us

Outcome 6

I am supported to dream big

- Activities for children and young people - i.e., The Festival of Sport and Dream Fest – inspire young people to take part in activities
- Annual aspirations survey
- Annual celebration events champion young people with SEND or those attending Alternative provision

Development areas for Derby

- Continue to drive the movement for meeting needs earlier as part of a **cultural shift to belonging in local provision, a more social model of meeting needs and inclusive model of education in partnership with parents/carers and young people.**
- **Maintain improved performance in the timeliness of EHCP assessments and Annual reviews.**
- In collaboration with the Derby SEND Voice continue to **strengthen our communication** with parents/carers demonstrating how we have listened and what we have done to positively impact on experiences.
- **Outcomes** for pupils in Derby, at all Key Stages (particularly Key Stage 4), including for pupils with special educational needs and disabilities and in AP are too low. Leaders have recognised this, and work continues through our local area partnerships to build on the progress made.
- **Deliver on the CAMHS , Wheelchairs , AHC, ND, and OT, and Community Physio recovery programmes**
- **Develop the LD and Down Syndrome pathways**
- Continue to address the proportionality of **the number of those Electively Home Educated** as a % of the

school age population.

- Maintain the drive to **reduce those who are NEET** and provide opportunities to increase the proportion of children and young people who are economically active in Derby.