



Local area SEND strategy 2019-2022:
supporting children and young people, 0-25 who have special educational needs and/or disabilities (SEND) and those who are vulnerable

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This strategy has been informed through engagement and participation with:

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| <ul style="list-style-type: none">• Parents and carers via the parent/carer forum• Schools and settings via:<ul style="list-style-type: none">○ Promise Board and Promise Board Sub-Group meetings○ Headteacher meetings and discussions○ Focused planning with Headteachers of specialist schools○ Focused planning days with Headteachers and senior leaders from schools who host school-based specialist provision (ARPs/ARCs)○ SENCo networks | <ul style="list-style-type: none">• The SEND Executive Board• The SEND Implementation Group Partners in Newcastle & Gateshead Clinical Commissioning Group• Partners in the local authority across education and care services• Voluntary organisations via the SENDIASS network |
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Introduction

We are proud, fair and ambitious for all children and young people in Newcastle. For those with SEND and who are vulnerable this means that, as a local area, we are committed to:

1. Creating a fully inclusive system, where children and young people with SEND will have all their identified needs met.
2. True co-production with children, young people and their parent/carers.
3. Maintaining high expectations for all children and young people and, through providing the right support, enabling them to have a successful future.

The local area SEND strategy outlines the values, principles and key priorities that will ensure our commitments are fulfilled. It sets out how decision-making has been influenced and how we want to shape provision over the next three years to achieve the most effective support for children and young people with special educational needs and/or disabilities and those who are vulnerable.

This is a partnership strategy for the local area that will be delivered across the city by the local authority and Newcastle & Gateshead Clinical Commissioning Group along with partners and stakeholders. This includes our colleagues across education, health, economy, the voluntary sector, social care and adult services.

Children, young people and their families are at the core of the strategy and we are committed to continue to work closely to secure high quality outcomes for all, regardless of need. The strategy sets out our three-year direction to meet the needs of children and young people with SEND and those who are vulnerable and secure the best outcomes possible.

From 2017 – 2018 we completed a review of our provision for children and young people with SEND and vulnerable learners. This included engagement with partners and stakeholders both during, and after, the reviews once the final reports were published, in September 2018. This means that the strategy has been influenced and shaped through engagement with partners and stakeholders across the City. There has also been strong oversight from the City Council and in January 2018, Cabinet approved:

- A realignment of high needs spending to deliver the strategic aims.
- Refocusing of existing specialist provision on children and young people with the highest needs, reducing spending in the independent and non-maintained sectors.
- Ensuring that more pupils with higher needs attend their local school.
- Reducing the unplanned movement of vulnerable learners between settings, with greater continuity in learning, leading to improved outcomes.
- Better pathways to adulthood, with greater opportunities for vulnerable children and young people to be aspirational for their future, feel that they belong, develop resilience, and become good citizens.

The local area SEND strategy sets a direction of travel and next steps to improving the outcomes for every Newcastle child and young person with SEND.

Context

New duties, as outlined in the Children and Families Act, 2014, regarding local area provision and support for children and young people with special educational needs and/or disabilities (SEND) came into force 2014. The duties are further described in the statutory guidance, 'special educational needs and disability code of practice: 0 to 25 years', which is published jointly by the Department for Education (DfE) and the Department of Health (DoH).

During the reforms, there has also been changes to funding for SEND and we are still in transition towards the national funding formula. Until recently, Newcastle's High Needs budget had consistently overspent and, through support from the Council, is now on track. However, there is still more to be done to ensure that it is sustainable in the future, whilst meeting current and future needs.

The investment for SEND in Newcastle is significant, with a higher proportion of the high needs block spent on supporting children and young people in special schools than in many similar areas. The challenge is to ensure we are achieving the best outcomes for this investment, through good practice in all our schools and settings, both mainstream and special, with the right offer of support for children, young people and their families.

There are around 44,542 children and young people of school age in Newcastle and of these:

The overall number of those with SEND (EHCP & SEN Support) is:

- National 14.7%
- Newcastle 15.6% (6,880)

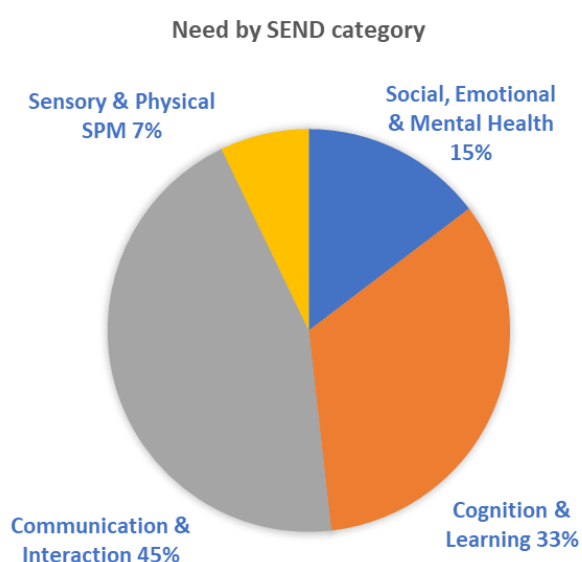
Children and young people at SEN support is:

- National: 11.8%
- Newcastle: 13.1% (5,777)

Children and young people with EHCPs is:

- National: 2.9%
- Newcastle: 2.5% (1,103)

Based on census data, January 2018



Definition of SEND

Code of Practice, DfE, 2015	Equality Act, 2010
<p>A child of compulsory school age or a young person has a learning difficulty or disability if they:</p> <ol style="list-style-type: none"> 1. have a significantly greater difficulty in learning than most others of the same age; or 2. have a disability which prevents or hinders them from making use of educational facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions <p>A child under compulsory school age has special educational needs if they fall within the definition at (a) or (b) above or would so do if special educational provision was not made for them.</p>	<p>A disability under the Equality Act is defined as ‘a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities’. For schools and services this means;</p> <ol style="list-style-type: none"> a) They must not discriminate, and they must make reasonable adjustments for disabled children and young people. b) Public bodies are also under wider duties to promote equality of opportunity. c) The definition of disability in the Equality Act includes children with long term health conditions such as asthma, diabetes, epilepsy, and cancer. d) Children and young people with such conditions do not necessarily have SEN, but there is a significant overlap between disabled children and young people and those with SEN.

Strategic aims and key principles

The local area SEND strategy sets out our priorities and the next phase of development, towards creating an effective local area SEND system. To achieve our joint commitment to the children and young people of Newcastle, and their families, we will ensure that there is:

- Partnership working and co-production with parents and carers, and with children and young people.
- A shared, co-produced strategy, including all stakeholders and partners in its development.
- High quality provision and sufficient capacity to meet the needs of all children and young people so that they remain part of their community.
- A high level of confidence in the system.
- Providers who continuously meet the needs of CYP with SEND effectively.
- Improved outcomes across education, health and care.
- Improved engagement in mainstream education and less reliance on specialist provision; meaning that most children and young people will attend their local mainstream schools/settings.
- Effective and targeted balance of mainstream specialist provision to enable more local inclusion and to cater for children and young people with the highest needs.
- Investment through capital and transformation funding to boost the range of mainstream specialist provision (0-25), creating more mainstream capacity to support all learners with SEND.
- Complete clarity and transparency about services, protocols and processes as part of the local offer.
- Expertise in schools and settings through wider workforce development.
- Consistency in early identification and application of specialist support and intervention at an earlier stage.

Co-production and participation with children, young people and parents/carers

Providing the right services and support for children, young people and their families is hugely important. We recognise that it is from their feedback and involvement in service development that we will gain better understanding of how we can make improvements in the ways that are important to them. Therefore, co-production must be at the heart of our local area SEND system.

As the system includes services and provision from education, health and care across the age range of 0-25, this means that many families will experience multiple agencies, services and organisations. Getting the most effective support can only be done through a joined-up system that is designed and regularly reviewed with children, young people and families.

For true co-production to take place, it must be meaningful and should start at an early stage in any process by engaging openly and enabling parents, carers and young people to generate and contribute their ideas to help shape solutions.

Participation should empower and enable local groups of parents and carers to play a strategic role within the local SEND system. It is vital that specific opportunities for parents, carers and young people to influence the local SEND system at a strategic level are identified and acted upon. It is also important to build the capacity of local groups and networks to play this role. In relation to this, we recognise that broadening participation by engaging an ever-wider range of children, young people and families can only make the system improve.

We are committed to:

- Fostering pride in our participation work, making sure that more people know about it and choose to engage with us.
- Fully understanding the impact that our participation and engagement work is having for the local area, for children and young people and for families.
- Building effective relationships regarding participation with, and between, services, schools, colleges and families.
- Making sure that all children and young people have opportunities to get their voices heard and that their voice influences decision making. The LA and CCG will be held accountable for how they have reflected the views of children and young people and have kept them informed about the difference this has made.
- Giving children and young people better feedback so they know how we have used their views to inform our decisions.
- Giving local area staff more opportunities to learn about the importance and impact of participation directly from children and young people.
- Ensuring that information about local support is accessible and helps families and professionals to navigate the local system easily.
- Ensuring that the local offer is a useful tool that enables families and professionals to understand what is available, which services are best placed to support them, and how to access those services.
- Keeping the local offer under continuous review, including linking development of the local offer website closely to the feedback we receive from children, young people' and families.
- Maintaining a dedicated officer with responsibility for managing the content, liaising with all agencies within the local area and engaging with a wide range of groups to ensure the local offer is fit for purpose.

This will lead to *(the intended impact of our work) ...*

- A better understanding by children and young people with SEND of how they can influence decision making.
- High engagement by parent/carers in the development of support and provision, leading to improved services
- Increased confidence of parents/carers in the local area SEND system.
- Engagement of parents/carers leading to effectively targeted advice and support as it is shaped by their input.
- Embedding of high quality assessment process.
- The impact of participation being regularly fed back and reported so that children and young people feel listened to.

Partnership working and joint commissioning across education, health and care

Packages of support for children and young people with SEND, particularly those with the most complex needs, will often require input from a range of agencies. As an effective local area SEND system, well established protocols and routines around commissioning are vital.

To ensure these are in place it is crucial that there is sign-up across agencies to protocols and processes through which decisions are made. Strong routines and processes for making decisions and commissioning provision need to be embedded across key agencies. This means that we need to work together as a local area to agree how decisions will be made and who has the authority to make them, including what each part of the system contributes in terms of support and resources. We also need to agree common criteria and apply this consistently and develop transparent processes that outline how the system works.

On occasion, a child or young person's needs may not be able to be met within the local area. This can be due to specialist school places not being available or because a child or young person's needs require a highly specialist placement that is not available in local specialist schools, e.g. when there are very low incidence and complex needs.

To ensure the best provision for children and young people, we are committed to:

- Ensuring joint commissioning delivers better, joined-up support by planning pathways of support for specific types of needs.
- Aligning key sources of data and intelligence in the form of a joint dataset on children and young people with SEND, so that partners can take decisions about joint commissioning based on a broad and shared understanding of current and future needs.
- Agreeing a set of outcomes that local area partners can achieve together through the services that are commissioned.
- Providing clarity on the resources required to meet current needs and achieve the agreed outcomes.
- Joining up frontline practice as far as possible through integrating services, organising joint training for staff across different agencies and ensuring that there is a common language and a consistent approach to support young people with SEND and their families.
- Further embedding effective governance structures and processes to ensure strategic decisions can be taken swiftly and effectively.

This will lead to *(the intended impact of our work) ...*

- Outcome focused approaches to joint commissioning and integrated working that promote early intervention and prevention, which will result in more inclusion for children and young people with SEND.
- All aspects of the system meeting their statutory duties linked to the provision of services within education health and care plans, leading to better outcomes for children and young people.
- Innovative approaches to joint commissioning improving the quality and availability of provision 0-25, including good transition to adult services.

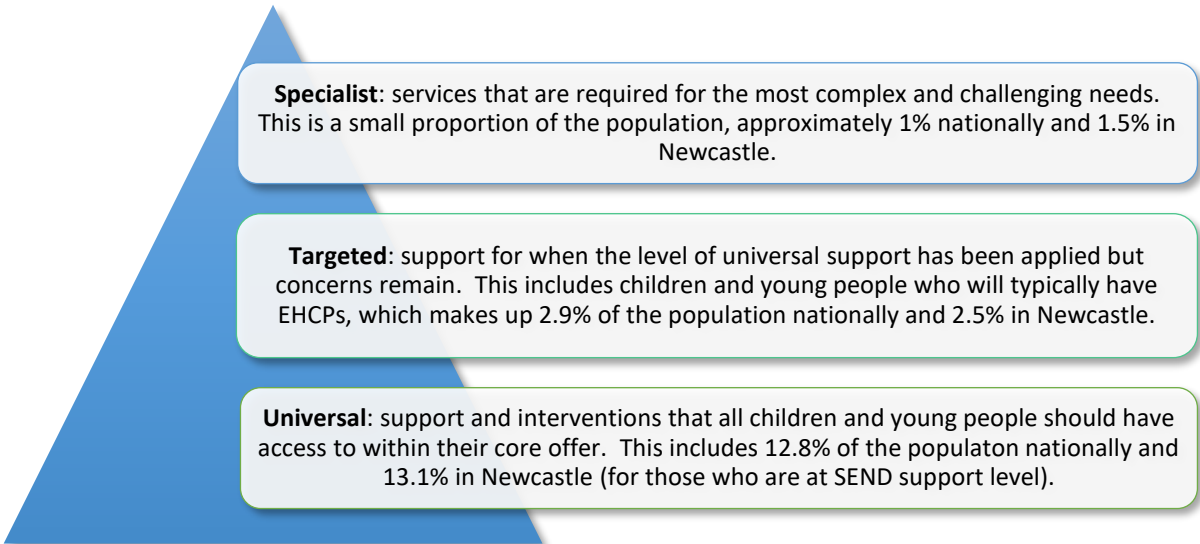
Identifying, assessing and meeting needs

Ensuring that young people with SEND get the support that they need when they need it, i.e. as soon as an area of concern arises, requires that all professionals within the local system can identify needs early, accurately and consistently. For this to happen effectively, we need to ensure that the frontline workforce have the right skills, guidance and support and, to get that right, there needs to be in-depth understanding of the needs within the City.

Consistently effective identification of children and young people's needs is vital to ensuring that they can access the support they need. It is also critical that we ensure that data and intelligence on current needs, on which decisions about commissioning services are based, are accurate.

Much of the work to identify the needs of children and young people with SEND will be done without recourse to a statutory assessment by professionals working in universal settings, e.g. early years settings, schools and local health centres, etc.

The challenge, here, is to ensure that all services across the local area can develop their practice in identifying and meeting those needs. Once that has been achieved, there needs to be a focus on establishing and embedding core processes that support the graduated response, i.e. the range of interventions that fit that model, which consists of:



Specialist: services that are required for the most complex and challenging needs. This is a small proportion of the population, approximately 1% nationally and 1.5% in Newcastle.

Targeted: support for when the level of universal support has been applied but concerns remain. This includes children and young people who will typically have EHCPs, which makes up 2.9% of the population nationally and 2.5% in Newcastle.

Universal: support and interventions that all children and young people should have access to within their core offer. This includes 12.8% of the population nationally and 13.1% in Newcastle (for those who are at SEND support level).

To support effective identification, we will:

- Focus on strengthening core processes and building a consistent understanding of the ‘assess, plan, do, review’ process so that needs can be identified early and accurately, and the right support put in place.
- Work with SENCOs and other professionals, across education health and care settings, to agree a common set of descriptors for when we talk about children and young peoples’ needs and how to address them, i.e. the SEND mainstream guidance.
- Hold joint training for frontline professionals across agencies – education staff, therapists, general practitioners (GPs), health visitors, social care colleagues – so that there is a common understanding around children and young people across different areas of need.
- Compare data sources to ensure needs are being identified accurately, e.g. looking at census data on the number of children with specific primary needs in relation to caseloads and referral routes.
- Ensure local area oversight of the use of data so that it supports effective service planning.
- Ensure that assessment panels and annual reviews include representation from education, health and care, where appropriate, e.g. at key transition reviews or where there are complex issues. They should be transparent and used to consider what a child or young person’s needs are, ensuring these are reflected in their EHCPs.
- Quality assure the EHC needs assessment process to check for the consistency and quality of identification of needs, and whether information is presented in a way that provides the information needed by young people and their families and by professionals and services.
- Foster a stronger focus on outcomes, i.e. consider EHCPs as commissioning documents, outlining a clear set of outcomes that providers are expected to meet.

This will lead to *(the intended impact of our work) ...*

- Increased school attendance and a reduction in exclusions for children and young people with SEND.
- High Needs funding being targeted to deliver the graduated response of support and interventions for learners and this will impact successfully on improving their progress and attainment.
- Improved wellbeing outcomes for all children and young people with SEND and those who are vulnerable.
- Higher quality and capacity of early years providers, schools and colleges, in meeting the needs of those with autism and speech and language and communication needs.
- The frontline workforce receiving the necessary training, advice, guidance and support to provided increased capacity in meeting the needs of children and young people with SEND.

Promoting an inclusive City

Most children and young people with SEND and those who are vulnerable will be supported in mainstream settings. Nationally, 11.7%, and in Newcastle, 13.1%, of children and young people in mainstream schools and settings have identified SEND and are supported at SEN support level. A further 2.9% nationally and 2.5% of Newcastle children and young people have statutory EHCPs. Many of the children and young people with EHCPs educated in specialist schools are likely to have spent part of their education in a mainstream school or setting.

As a local area we are committed to building effective practice in mainstream schools and settings to identify, assess and meet needs. We know we must create an enhanced offer for mainstream schools and settings to build capacity so that we can intervene early and avoid unsustainable pressure on more targeted and specialist provision. We also want our children and young people to have the widest possible choices that a mainstream education brings.

To ensure that inclusion is at the heart of the system, we will ensure that there is a joined-up, holistic offer of support for children and young people's education, health and care needs. This is because we recognise the importance of providing support in schools and settings, but also that those needs may be linked to issues related to their family, home or health needs.

It is crucial that we have a strategically-planned and coherent offer of specialist support and provision across education, health and care. When things are not going well, there needs to be a fast response, as part of a wider, more targeted continuum of support from services and provision.

To build capacity in mainstream schools and settings we will:

- Define the offer and expectations that all aspects of the mainstream system will meet, i.e. we will be clear about the types and levels of need and what will commonly be expected to meet them within schools and settings own resources and signposting the next steps, when additional support needs to be accessed.
- Define the offer that is available to support schools and settings when they have exhausted their own capacity. The offer of support will draw on the specialist skills and resources in the local area. This will include education and health specialist teams, specialist staff based in mainstream schools, specialist schools and system leaders working together to create their own offer.
- Create a more responsive 'core' and 'traded' offer for centrally based specialist education services and specialist schools, which allows for the level of need being the primary reason for providing support. This will not be based on formal diagnosis but on what is happening for individual children and young people.
- Create a 'single point of contact' for accessing support for children and young people who are causing concern and who meet the eligibility criteria for 'free-at point-of-delivery' support.
- Work closely with SENCos, through established networks, to identify and monitor changing needs in the local area and the impact of these on schools and settings. This includes changes to policy, levels and types of needs over time and the trends in outcomes for children and young people, e.g. specific groups of children and young people being at risk of exclusion and becoming NEET.
- Work with the SENCo networks to identify CPD needs and provide SEND development opportunities for colleagues in mainstream schools and settings. This will be directly linked to local area priorities.
- Ensure that SEND and vulnerable learners are a high priority for headteachers, school leaders and governors in relation to whole-school evaluation and improvement planning. This will include looking at data including, exclusions, attendance, progress, levels and types of need and having targeted discussions about this with an aim of working together to support inclusion.
- Develop a flexible, bespoke, approach to short-term, time-limited support. This will be targeted at children and young people in exceptional circumstances, e.g. those with complex needs who move into the city and previous assessment has not been carried out or to support a specific issue that requires immediate, short-term intervention.
- Build capacity through outreach support, provided through centrally based specialist teams and school-based specialist staff.
- Quality assure all aspects of support and provision so that there are clear expectations of service, eligibility criteria and outcomes. This includes introducing a refreshed 'Inclusion Quality Framework.
- Strengthen the offer for supporting inclusion for children and young people with autism and social, emotional and mental health needs (SEMH).
- Develop and implement parent programmes for specific areas of need, for example, autism and speech, language and communication needs.

This will lead to *(the intended impact of our work) ...*

- Improved provision for supporting schools and settings, in collaboration with the appropriate local services in childcare, education, health and care in order that more families can help their children to thrive.
- Fewer children and young people who are educated out of their community.
- The right balance of school-based specialist provision, so that there is less reliance on specialist places.
- Greater local integration and co-ordination of education, health and care services and in Newcastle, ensuring this encompasses children and young people aged 0-25.
- Positive, effective and seamless transitions at all stages between the ages of 0-25.

Keeping specialist provision under review

Places in specialist schools are a highly-valued resource, which are also high cost. As a local area we need to make sure the right children and young people are going into specialist schools in accordance with need. It is important that we strive for the right balance and type of specialist provision and to ensure it is aligned to the current and future needs of the local area. Equally, we need to ensure high quality provision within specialist schools.

To ensure we are planning specialist school places effectively we will consider demographic trends, such as population growth and numbers of children and young people coming into the system, triangulated with local data and intelligence that looks deeper at changing needs.

It is important that we consider data and intelligence from a wide range of sources, held within the local area. This will include things such as, births of children with complex needs, census data, intelligence about disputes, waiting lists following health referrals, requests for exceptional funding, requests for education, health and care needs assessments, placements in specialist schools and specialist provision outside the local area, etc.

In addition to specialist schools, some children and young people can benefit from a local mainstream school place, with specialist support available (ARPs/ARCs). These can be described as school-based specialist provision and they can help to avoid creating additional pressures on mainstream schools and specialist provision.

In keeping specialist provision under review, we will ensure that there are a range of choices and pathways for all children and young people.

Specialist and mainstream school leaders are partners in achieving the right level and balance of specialist local provision and to do this we will:

- Continue to work in close partnership with the mainstream and specialist school sector to support and maintain consistently high-quality outcomes.
- Share local intelligence and work together to respond to trends and emerging needs.
- Share challenges through an open and honest dialogue.
- Work collaboratively to shape an effective and strategically-planned local offer of specialist support and provision.
- Engage with colleagues from the independent and non-maintained specialist school (INMSS) sector around commissioning and high-quality provision.
- Ensure the range of mainstream school-based specialist provision is flexible and responsive to support children and young people with needs at the ‘targeted’ support level, on a time-limited basis.
- Develop collaborative processes for considering and developing bespoke placements for children and young people with the most complex needs. This will enable us to retain resources within the local area.

This will lead to *(the intended impact of our work) ...*

- A broader range of providers, offering provision which is local, flexible and matches the needs of children and young people, so that increased parental choice is available.
- A continuum of provision across mainstream and special education, colleges, training and care providers, so that the needs of all children and young people in Newcastle can be met locally.
- The right balance of provision as local intelligence is used effectively to forward plan for specialist places, and this will lead to less reliance on independent and the non-maintained specialist sector (INMSS).
- More efficient and effective use of resources, to meet increasing demand to ensure that costs do not escalate.
- High quality specialist services, in education, health and care, will be targeted more effectively leading to more timely access to support, including working alongside school staff.

Preparation for adulthood

Preparation for adulthood is not just about post-16 and post-19 education, employment or training. It is about how we support, encourage and facilitate a child or young person's long-term aspirations and pathways from their earliest age and continually throughout their education career.

In relation to the 16-19 cohort, we have seen a significant rise in EHCPs since the SEND reforms came into force in 2014, and this is placing a demand on SEND support and provision, e.g. young people aged 16-25, account for the largest proportion of the growth in EHCPs over the last five years.

We also know that there is significant variation in Post 16 destinations for young people with SEND, compared to their peers. We need to develop a strong, joined-up approach to considering and planning for suitable destinations and longer-term outcomes. We will maintain our strong transition planning for all children and young people with SEND as they move through education and approach adulthood.

We will do this through:

- Ensuring that there is a strong, joint local offer of education, health and care options to enable young people with the most complex needs to make a successful transition to adult life.
- Exploring what is on offer in the City regarding what's available, and working well, for young people and that promotes the widest range of opportunities and outcomes.
- Pro-actively identifying cohorts of young people who are likely to need more intensive support around transition, e.g. those in specialist schools, resourced provision, alternative provision or who are looked after.
- Employing effective and consistent processes for consulting children and young people about their aspirations.
- Monitoring data and intelligence about post 16 destinations so that this helps us to shape and influence programmes in the post statutory education sector.
- Capturing young people's feedback, e.g. through active involvement in annual reviews and transition planning and use this to shape processes.
- Putting young peoples' views at the forefront of processes that enable them to move into adulthood effectively, empowering them to make decisions concerning their future.
- Pro-actively working with p16 providers and sharing key intelligence to support them to develop opportunities for young people with SEND to make a successful transition to the world of education, employment and training.
- Supporting more young people with SEND into internships, pre-apprenticeships and apprenticeships.
- Working with employers to design and develop a pathway that supports young people with SEND into employment.
- Ensuring the right specialist support continues into post 16/post 19 for young people who have SEND, regarding safeguarding, being looked after/care leavers, SEMH needs and autism, etc. To do this effectively, we need to have effective processes for identifying these cohorts, involving effective joint working across education, health, and children's and adult services.

This will lead to *(the intended impact of our work) ...*

- A whole life pathway for children and young people with SEND, so that they receive more integrated support especially as they transition to early adulthood.
- Improved transition planning, leading to schools and colleges developing a wider range of learning options and pathways into post 16, which cater for the needs of young people with SEND.
- High quality support for traineeships, pre-apprenticeships and apprenticeships leading to increased take-up and retention of young people with SEND who are in education, employment and training (EET).

Glossary: commonly used terms regarding SEND

1. AET: autism education trust
2. AP: alternative provision
3. ARC: additional resourced centre
4. ARP: additional resourced provision
5. BI: business intelligence
6. C&FA: children and families act, 2014
7. C&I: communication and interaction
8. C&L: cognition and learning
9. CBHP: child be healthy partnership
10. CCG: clinical commissioning group
11. CCT: continuing care team
12. CHC: continuing health care
13. CoP: code of practice, 2014 (updated 2015)
14. CQC: care quality commission
15. CSC: children's social care
16. CT: communication trust
17. CYP: children and young people
18. CYP&F: children, young people and families
19. CYPS: children and young people's service (child and adolescent mental health service)
20. DCO: designated clinical officer
21. DfE: Department for Education
22. DH: Department for Health
23. DLA: disability living allowance
24. DMO: designated medical officer
25. EET: education, employment and training
26. EH: early help
27. EHC: education, health and care
28. EHCNA: education, health and care needs assessment
29. EHCP: education, health and care plan
30. ES: early support
31. EY: early years
32. FT: foundation trust
33. FTE: full time equivalent
34. GDPR: general data protection regulations
35. GNCH: great north children's hospital
36. HI hearing impairment
37. HLTA higher level teaching assistant
38. HNB: high needs block
39. HV: health visitor
40. IS: independent support
41. JC: joint commissioning
42. JD: job description
43. JSNA: joint strategic needs assessment
44. KS: key stage
45. LA: local authority
46. LAC: looked after Children (now Children in Care)
47. LO: local offer
48. MASH: multi-agency safeguarding hub
49. MLD: moderate learning difficulty
50. MPS: market position statement
51. MSI: multiple sensory impairment
52. NEET: not in education, employment or training
53. NMISS: non-maintained and independent special schools
54. Ofsted: office for standards in education
55. OT: occupational therapy
56. OSC: overview and scrutiny committee
57. NAS: national autistic society
58. NDCS: national deaf children's society
59. NECS: north of England commissioning support unit
60. NHSE: national health service England
61. PB: personal budgets
62. Promise Board: promise board
63. PBSG: promise board sub-group
64. PCF: parent/carer forum
65. PCP: person centred planning
66. PD: physical disability
67. PfA: preparing for adulthood
68. PHB: personal health budget
69. PMLD: profound and multiple learning difficulty
70. PPI: patient public involvement
71. PSP: pastoral support plan
72. PVI: private, voluntary and independent
73. QA: quality assurance
74. S<: speech and language therapy
75. SBSCS: school based commissioned services
76. SC: social care
77. SDQ: strengths and difficulties questionnaire
78. SEMH: social, emotional and mental health

79. SENCo: special educational needs coordinator
80. SEND: special educational needs and/or disabilities
81. SENDIASS: special education needs and disabilities information advice and support service
82. SENS: special education needs support
83. SLCN: speech, language and communication needs
84. SLD: severe learning difficulties
85. SpLD: specific learning difficulty
86. Settings: nurseries, schools, post 16 FE colleges and other post 16 providers
87. VCS: voluntary and community services
88. VI: visual impairment
89. WSoA: written statement of action
90. YOT: youth offending team
91. YP: young people/person