



South Tyneside Council



Health & Wellbeing Board Local SEND Reform

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P R O U D
TO WORK FOR SOUTH TYNESIDE



The National SEND Context

Increasing numbers of CYP identified with SEND nationally.



Growing complexity of need and demand on services.

Pressure on systems to respond earlier, more inclusively and more collaboratively

CYP experiencing inconsistency and are not always accessing the right support at the right time



Principles of SEND Reform

Early: Children should receive the support they need as soon as possible.

Local: CYP with SEND should be able to learn at a school close to their home

Fair: Every school should be resourced to be able to meet common and predictable needs

Effective: Effective practice is evidence based with excellent long term outcomes.

Shared: Education, health and care services work in partnership with one another



Reform Objectives

A system where difference is celebrated and children with SEND access inclusive support as close to home as possible in a joined-up, fair, accountable and financially sustainable system.

1



More children supported in mainstream / local settings

Reduced reliance on high-cost placements and improved outcomes

2



Earlier identification and faster response

Consistent inclusive practice and access to multi-disciplinary expertise

3



Improved family trust and experiences

Evidenced through reduced complaints / tribunals and stronger coproduction

4



Improved sustainability and better value for money

Via sufficiency planning and commissioning, reinvestment in intervention and workforce



Local SEND Reform Plan

National Requirement & Local Response

- All local areas are required by the Department for Education to develop a Local SEND Reform Plan
- Plans must set out how systems will improve inclusion, outcomes and financial sustainability
- Approval is required to demonstrate readiness to deliver SEND reform

Financial Context

- Significant pressure within the High Needs system driven by rising demand and complexity
- Government has introduced a High Needs Stability Grant
- Expected to address ~90% of the DSG deficit, subject to plan approval
- Funding is conditional on a credible and deliverable reform programme

Implication for South Tyneside

- Reform is required to secure both improved outcomes and long-term financial stability
- Plan aligns system change with funding, governance and accountability

Local Area Maturity Assessment



Formalised Parent Carer Forum and established CYP participation through SEND It Youth Forum; evidence of influence on pathway/resources
Co-production not yet consistent or enforceable across all services; feedback loops not routinely embedded



Broad quantitative data is gathered; early work underway on shared dashboard and cross-partner understanding of demand
Outcomes and performance intelligence not yet integrated across education, health and care; data use still mainly descriptive



SEND in Mainstream Framework rewrite underway; AP embedded and quality assured; inclusion panel supporting earlier problem-solving
Inclusion practice and thresholds remain variable; targeted intervention capacity stretched; escalation still too common



Refreshed partnership governance in place with clearer strategic and operational routes; increasing joint problem-solving
Health and care engagement improving but not yet consistently embedded; pathways and thresholds still variable



Workforce development underway across LA and education with established networks and system-wide programmes (e.g., Talk Boost)
Workforce confidence and capability not consistent across the system; need a partnership-wide workforce strategy



DSG management plan in place; place planning established; reviews and deep dives informing improvement
Sufficiency and financial pressure remain significant; system still reliant on interim/high-cost responses in places



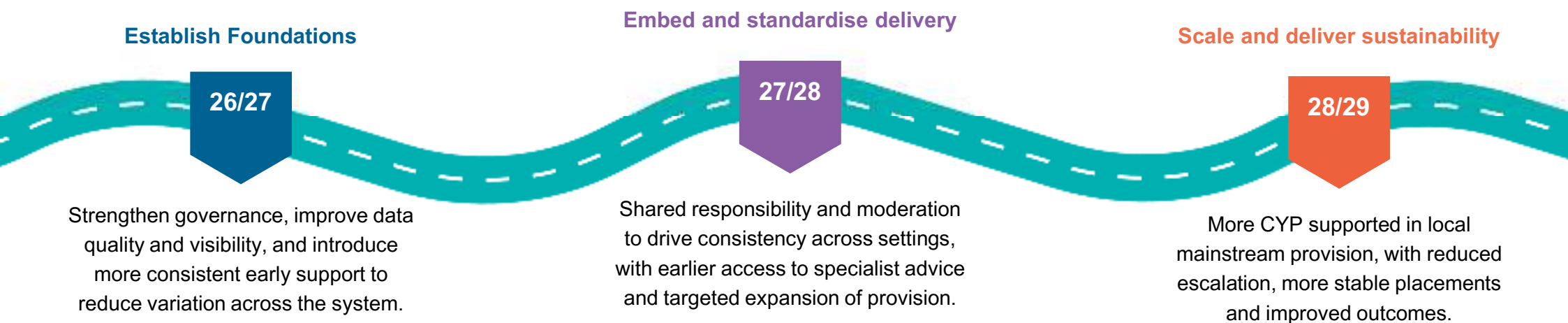
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Local SEND Reform Plan Delivery

Four building blocks for reform



Phased delivery approach





1 System leadership, local partnership, collaboration & coproduction

- SEND governance operating through clear structures, reporting and escalation routes
- Routine use of shared dashboards (education, health and care) to inform decisions
- Single action, risk and performance framework in place across partnership
- Co-production Charter embedding participation as a system expectation
- Lived experience and SENDIASS intelligence routinely informing governance decisions

2 Access to specialist support and local placements

- Experts at Hand established as a single, consistent access route to multi-disciplinary advice
- Alternative Provision Specialist Taskforce developed to support early intervention and placement stability
- Clear pathways introduced to reduce reliance on statutory and diagnosis-led escalation
- Proactive placement planning through Annual Reviews and cohort tracking
- Sufficiency and placement decisions increasingly informed by shared system intelligence



3 Strengthening inclusion across education settings

- SEND in Mainstream Settings Framework introduced as the partnership-wide standard
- Moderation and SENDCo networks used to reduce variation in thresholds and decision-making
- Specialist provision designation review to align provision with cohort need and pathways
- Planned expansion of local provision (e.g. SEN Units, inclusion bases) aligned to demand
- Structured sufficiency monitoring to inform commissioning and capital investment

4 Encouraging inclusive culture & behaviours

- SEND clusters established to support shared responsibility and peer challenge
- Clear thresholds and escalation routes to reduce inconsistent decision-making
- Specialist provision banding review to align funding with need and improve transparency
- Workforce development and system alignment to build confidence in early intervention
- Resources increasingly directed toward early support rather than reactive escalation



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Risk & Mitigation

Workforce capacity for delivery

Phased implementation of Experts at Hand and AP Specialist Taskforce aligned to workforce availability

Prioritisation of consultation and system-strengthening activity over 1:1 delivery

Coordinated workforce planning and use of commissioning to supplement capacity

Alignment with ICB workforce planning to stabilise health input

Variation in practice and thresholds

SEND in Mainstream Settings Framework as the consistent system standard

Structured moderation through SENDCO networks and cluster discussions

Phased introduction of SEND Clusters to build shared understanding and build confidence

Clear agreed thresholds across education, health and care pathways

Sufficiency and capital pressures

Use of existing estate and phased expansion of local provision

Alignment of capital investment to sufficiency data and demand forecasting

Development of Inclusion Bases, SEN Units and targeted SEMH Provision

Planned growth to reduce reliance on high-cost and out-of-area placements

Data quality and decision making

Development of integrated multi-agency dashboards (education, health, care)

Clear data ownership, validation and routine reporting through governance

Use of shared data and lived experience to inform commissioning and delivery

Alignment of local data with DfE reporting to strengthen monitoring

System confidence and engagement

Co-production Charter establishing consistent expectations for participation

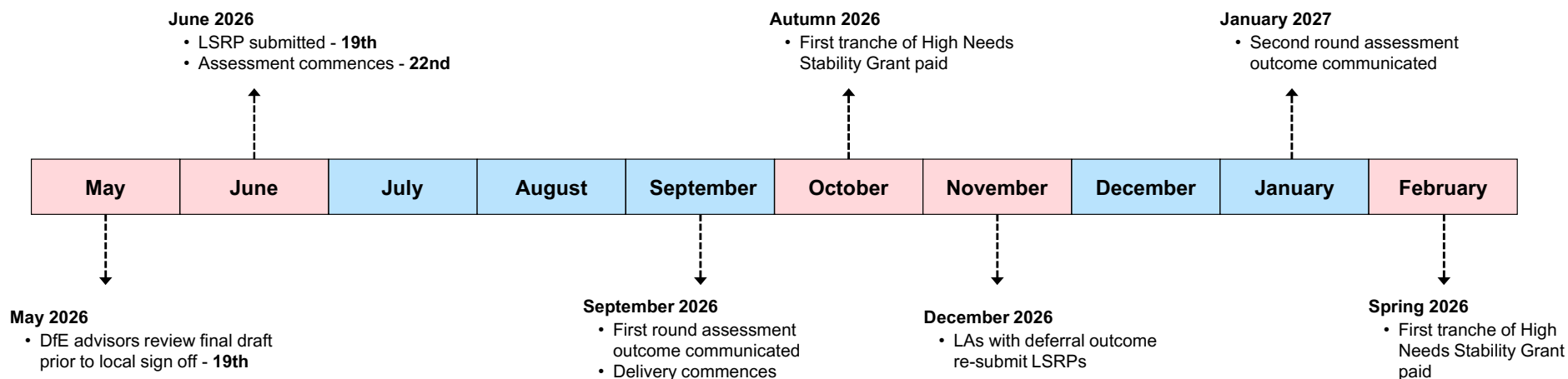
Routine "You said / we did / not yet" feedback to demonstrate impact

Structured engagement with schools, PCF and children and young people

Visible leadership and phased implementation to build confidence



Next Steps



The Board is asked to:

- Note the findings of the maturity assessment
- Endorse the Local SEND Reform Plan
- Support continued system-wide delivery across education, health and care

