Background

Children with Special Educational Needs and/or Disabilities (SEND) are a diverse group of children and young people with a wide range of conditions, needs and abilities. Collectively they:

- Are more likely than children in general to experience unfavourable treatment through discrimination (intentional or unintentional), social exclusion, bullying and abuse
- Are represented in all parts of the community but are more prevalent in lower socio-economic areas
- Are significantly over-represented amongst children who are looked after or on Child Protection Plans
- Experience worse outcomes when they become adults in terms of physical and mental health, independence, training/employment, community participation and social relationships

Some disabled children and young people are long term users of specialist and intensive education and care services that the Local Authority has statutory duties to provide. They may also require considerable involvement with health services.

Health, education and social care agencies share a strong interest in planning for disabled children and young people. That means having good information (and forecasts) about needs and numbers, and also about interventions that are effective in improving outcomes.

The Local Picture

Identifying the number of children and young people with learning and/or physical disabilities is beset with definitional and identification problems:

- There is a degree of subjectivity in who is identified as having SEND. This is because the social model of disability is widely preferred to the medical model.
- Sutton’s statutory register of disabled children (ICOUNT) is voluntary and is by definition incomplete but to an unknown extent
- There is no centralised health based register of diagnoses so we do not know the prevalence of different impairments in the community
- The ‘purest’ objective dataset is the register of children with statements of SEN, but even this:
  (a) Indicates only those who need additional support to access education
  (b) Is not entirely synonymous with disability and
  (c) Is susceptible to changes in the definition or application of thresholds, and to school funding regimes

A review of Special Education Needs was performed by Public Health in 2014. Particular concerns were expressed that there was:

- A perceived changing profile of need, especially reports of more children diagnosed with Autistic Spectrum Disorder (ASD) and more children with severe and complex impairments
- More children placed in out of borough schools

Contact Public Health, LB Sutton

Last updated October 2016
- High numbers of children living away from home - in boarding schools or residential care for a significant part of their lives
- Disproportionate numbers of disabled children on protection plans compared to children in general
- Increasing numbers of disabled children presenting behaviour difficulties, including self-harm and severely challenging behaviour
- Families reporting difficulties in being included in or being able to benefit from some mainstream services such as schools and leisure services (although there are some positive reports too)
- Historically persistent difficulties with the transition, leading to poor experiences by service users and inefficient commissioning

**Numbers and Diagnosis**

**Figure 1** below indicates that in Sutton over time the percentage of pupils with a statement or Education, Health and Care (EHC) plan in Sutton has been consistently higher than London or England. In 2016 there were 1,137 pupils with a statement or EHC plan, representing 3% of pupils.

**Figure 1 - Percentage of Children with a Statement of SEN in Sutton**

![Graph showing percentage of pupils with a statement or EHC plan in Sutton, London, and England from 2007 to 2016.](source: Department for Education, SFR 29/2016, Table 12)
Although Sutton's percentage of children with a statement or EHC plan is slightly higher than for London and England, overall, the percentage of pupils with special educational needs, including those on SEN support as well as those with a statement or EHC plan, is lower than for comparators. Sutton ranks among the lowest end of London boroughs for those with special educational needs as shown in Figure 2.

**Figure 2: Percentage of pupils with special educational needs in London**

![Bar chart showing percentage of pupils with special educational needs by borough in London. Sutton is among the lowest end of London boroughs.](source: Department for Education, SFR 29/2016, Table 15)
Figure 3 below shows the number and percentage of number of pupils with special educational needs by primary type of need and by type of school (state funded). Notably Sutton’s percentages are higher for some categories of need than comparators, i.e. Specific Learning Disability and ASD at Secondary School.

**Figure 3: Number and percentage of children with subcategories of Special Educational Need by Primary, Secondary and Special School in Sutton**

<table>
<thead>
<tr>
<th></th>
<th>Primary School</th>
<th>Secondary School</th>
<th>Special School</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Sutton L* E*</td>
<td>Sutton L E</td>
<td>Sutton L E</td>
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<tr>
<td>Specific LD</td>
<td>No.</td>
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<td></td>
<td>%</td>
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<tr>
<td>Moderate LD</td>
<td>No.</td>
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<td></td>
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<tr>
<td>Severe LD</td>
<td>No.</td>
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<td></td>
<td>%</td>
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<tr>
<td>Profound &amp; Multiple LD</td>
<td>No.</td>
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<td></td>
<td>%</td>
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<tr>
<td>Social, Emotional and Mental Health</td>
<td>No.</td>
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<td></td>
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<td></td>
<td>%</td>
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<tr>
<td>Speech, Language and Comms Needs</td>
<td>No.</td>
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<td></td>
<td>%</td>
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<tr>
<td>Hearing Impairment</td>
<td>No.</td>
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<td></td>
<td>%</td>
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<td></td>
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<tr>
<td>Visual Impairment</td>
<td>No.</td>
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<td></td>
<td>%</td>
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<tr>
<td>Multi-Sensory Impairment</td>
<td>No.</td>
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<td></td>
<td>%</td>
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<tr>
<td>Physical Disability</td>
<td>No.</td>
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<td></td>
<td>%</td>
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<tr>
<td>ASD</td>
<td>No.</td>
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<td></td>
<td>%</td>
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<tr>
<td>Other</td>
<td>No.</td>
<td></td>
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<td></td>
<td>%</td>
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<tr>
<td>SEN support but no specialist assessment</td>
<td>No.</td>
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<tr>
<td></td>
<td>%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>No.</td>
<td></td>
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</tr>
</tbody>
</table>

L*, E* = London and England

Source: Department for Education, SFR 29/2016, Tables 16-18

Where children with SEND live

It is projected that children with SEND will be born in areas of the borough with the highest birth rates. The four wards with the highest birth rates are listed below, but all wards will host children with SEND:

- Wandle Valley
- Worcester Park
- Sutton Central
- St. Heller
It is recognised that families may move elsewhere after a child is born, but this provides an insight into the areas of highest future need within the borough.

Location of Education Provision
Over time Sutton has been educating slightly fewer of its SEN children ‘in borough’. Currently, Merton and Surrey provide the majority of out-of-borough places. Likewise, the nature of the replacement, e.g. residential or day attendance, has remained very stable over the last ten years.

Future projections of children and young people with SEND
The number of children and young people requiring Special Education Needs and Disability support in future is uncertain. The following factors are all likely to increase needs:

- Expanding provision up to 25 years
- Raising the education leaving age to 18 years
- Increasing number of births
- Increasing number of under 25 year olds
- The adoption of the new Education, Health and Social Care Plans brings some uncertainty until they become familiar and thresholds re-established

A crude estimate encompassing all these uncertainties suggests that the need for SEND council-funded tailored education provision may rise by up to a third to around 1,440 pupils by 2020. This is likely to include up to around 420 children with ASD if current trends persist. None of these increases will occur suddenly and the best predictor will be the annual trajectory of increasing numbers.

What Works: Keeping Young People with SEND with their families

Much has been published on how to avoid home support disintegration, and the requirement for residential education for children and young people with behavioural and emotional disorders.

Clearly, for individual families that are on the threshold of disintegration, highly complex multifaceted psychology based interventions are required for the children and their families.

However, this review considered early interventions that help prevent reaching the point of crisis. The following interventions are shown to be effective:

i). High quality tailored preschool provision for children with Special Educational Needs modelled on provision which has a strong evidence base including High/Scope preschool models which include children with learning disabilities.

ii). High quality tailored preschool provision for children at risk of school conduct disorders – children living in relative poverty, born to teenage mothers and those from the complex ‘Families Matter’ programme.

iii). High quality parenting support for parents of children with SEN and at risk families (as in (ii) as early as possible in the child’s life.

iv). Ensuring that existing programmes including Family Nurse Partnership, The Families Matter Programme and other family intervention programmes identify and prioritise children with learning difficulties where possible, and are provided with more assistance if some of the issues are very complex.
All the above interventions are available in Sutton, but the extent to which they are sufficiently resourced and delivering quality outcomes would need to be the subject of a separate review.

**Links and Further Information**

See Fact Sheet on Autism.

- Disabled Services, Commissioning Plan: 2014 to 2019
- Children and Young People with Special Educational Need and Disability in Sutton – A Review. Dr Sue Levi

**Priorities for Sutton**

There are many new challenges to the provision of care for children and young people with Special Educational Need and Disability including:

- The four priorities identified above contribute to the prevention of family disintegration.
- Identifying shortfalls and service needs related to the transition to adult services