HALTON JOINT STRATEGIC NEEDS ASSESSMENT (JSNA)

Special Education Needs and Disabilities (SEND) Profile 2024

HALTON BOROUGH COUNCIL

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NHS Cheshire and Merseyside

Contents Page number

INTRODUCTION

Disabled children and their families face distinct and often challenging issues that require a range of dedicated and often specialist responses from public services. The needs of disabled children, young people and their families are unique to them, often complex, and will change over time. The challenge is to understand these needs and develop a system around them that is flexible enough to meet the needs of the person and their families. Children with disabilities often suffer from significant inequalities in health, educational outcomes, employment and life chances compared to their non-disabled peers.

This profile updates a series of reports undertaken starting with the 2013/14 Children's Joint Strategic Needs Assessment (JSNA) chapter on children with Special Educational Needs and Disabilities (SEND) in Halton. The profile will compare the prevalence of specific SEND conditions in Halton with other geographic areas which are closest in demographic and characteristic makeup. These are often referred to as statistical neighbours. Where this is not possible, comparison to the North West and England is used as the default comparator areas. This will build a picture of the SEND population locally.

Who is a disabled child?

According to the Children and Families Act 2014[1], a child has Special Educational Needs and Disabilities (SEND) if "they have a learning difficulty or disability, which requires special educational provision to be made for them."

A child or young person is subsequently defined as having a learning difficulty or disability if;

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

As part of the Children and Families Act 2014, the support for children with special educational needs (SEN) was simplified to two levels:

SEN Support (replacing 'School Action' and 'School Action Plus'). The majority of children and young people with SEN will have their needs met by this non-statutory SEN support service in schools.

Education, Health and Care Plan (EHCP) for children and young people up to 25 years who require more support (replacing 'Statements' of SEN). These identify the educational, health and social needs and define the additional support required to meet those needs

As such this profile covers children & young people with a range of special educational needs and disabilities aged 0-25 years, in line with the Act and the Halton SEND Strategy.[2]

Those disabilities include children and young people whose daily lives are substantially affected by one or more of the following diagnosed conditions:[3]

- A hearing impairment
- A visual impairment
- A learning disability
- A physical disability
- A chronic/life threatening physical illness
- A communication disorder (including autism)
- A consciousness disorder (e.g. epilepsy)
- A mental health condition

Their condition should usually be expected to last for more than 12 months and have a substantial effect upon the child in more than one of the following areas:

- Physical ability
- Communication and understanding
- Awareness of risk and danger
- Behaviour
- Independence

1. Children and Family Act, 2014
2. https://localoffer.haltonchildrenstrust.co.uk/wp-content/uploads/2024/03/Halton-SEND-Strategy-2021-2025-revised-February-2024.pdf
3. https://localoffer.haltonchildrenstrust.co.uk/wp-content/uploads/2022/11/FINAL-2022-Halton-Short-Breaks-Statement.pdf

RISK FACTORS

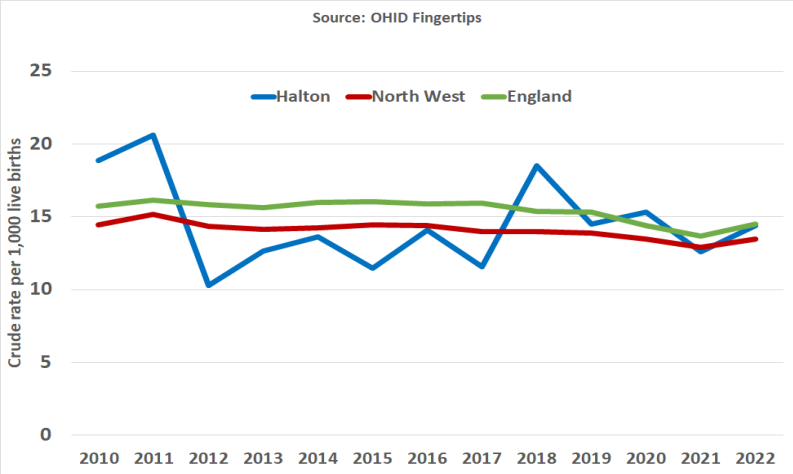
Disabilities may be developmental or acquired. There are several risk factors associated with a child being born with a congenital disability or developing complex needs. These include:

- premature & multiple births
- maternal age
- low birth weight
- Poor maternal nutrition
- Maternal smoking and use of drugs and alcohol
- Infectious diseases suffered by mothers during pregnancy and in childhood
- Economic disadvantage
- Physical injury to mothers abdomen or stress during pregnancy. This may be due to accidental injury or domestic violence.
- Physical injury during childhood

The main ones are covered in this section

Multiple births, of twins, triplets or more babies carry greater risks for both mothers and babies. Babies born as a result of multiple pregnancies are more likely than others to be born prematurely, to be of low birth weight, to require special or intensive care, and to suffer long term disabilities.

Figure 1: Rate of multiple births, per 1,000 live births, 2010 to 2022

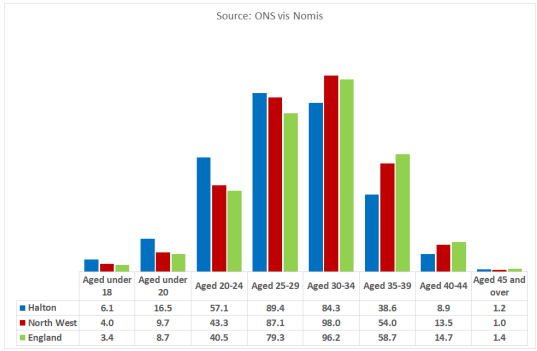


Halton has had a similar rate of multiple births as seen across England as a whole, both of which are slightly higher than the North West average.

A **mother's age** can have consequences for her babies' health and well-being. For mothers aged under 20 and over 40, pregnancy and birth carry higher risks of complications and mortality for both mothers and babies.

Halton has a slightly higher rate of births to mothers aged under 20 but lower rate for mothers aged over 40.

Figure 2: Age-specific fertility rate per 1,000 females, 2022

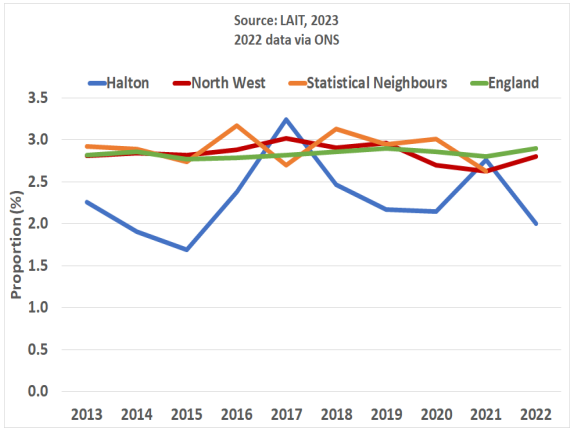


	Aged under 18	Aged under 20	Aged 20-24	Aged 25-29	Aged 30-34	Aged 35-39	Aged 40-44	Aged 45 and over
Halton	6.1	16.5	57.1	89.4	84.3	38.6	8.9	1.2
North West	4.0	9.7	43.3	87.1	98.0	54.0	13.5	1.0
England	3.4	8.7	40.5	79.3	96.2	58.7	14.7	1.4

Birth weight can also put a child at increased risk of disability. Babies who are born weighing less than 2500g, either because of prematurity or intrauterine growth retardation, are at a disadvantage. They need special care or even intensive care after birth to ensure their survival and they carry higher risks of long term health problems and disability than babies whose birth weights are closer to average.

In recent years, Halton has had lower levels of **low birth weight**. Whilst for 2021 the rate increased to a rate similar to England, higher than the North West and the borough's statistical neighbours the 2022 latest data (statistical neighbour comparison not available) shows levels in Halton have dropped back to a level below 2019.

Figure 3: Trend in low birthweight full-term live births, as a % of all full-term live births



Mothers who smoke are more likely to deliver their babies early. Preterm delivery is a leading cause of death, disability, and disease among newborns. One in every five babies born to mothers who smoke during pregnancy has low birth weight.

Babies born to **mothers who are obese** during pregnancy are at increased risk of birth defects as well as being more likely to develop diabetes and heart disease in later life.

Data on smoking and obesity during early pregnancy is no longer available at local authority level, only hospital trust. Data for April 2023-March 2024 shows levels of overweight, obese and severely obese were broadly similar to England for the main hospital trusts used by Halton women. Smoking at booking are also broadly similar with smoking g status at delivery showing small percentage reductions.

Figure 4: Smoking and obesity in early pregnancy, 2018/19

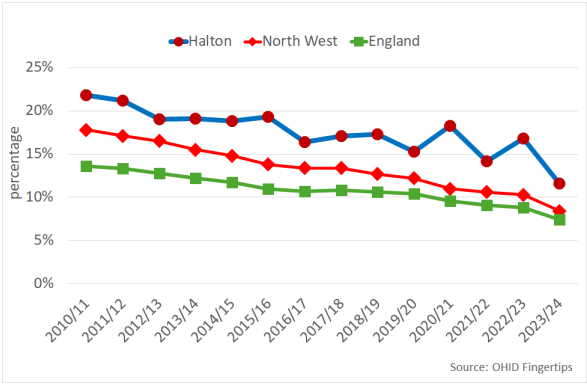
	Halton	North West	England
smoking in early pregnancy	19.2%	14.9%	12.8%
obesity in early pregnancy	29.1%	23.6%	22.1%

Source: Maternity Services Dataset (MSDA) v1.5, via PHE Fingertips tool

Replace with trust level data 2023/24

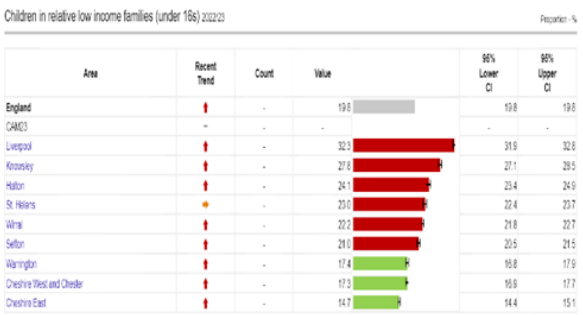
Smoking levels remain high during pregnancy, with the percentage of **mothers smoking at time of delivery** remaining statistically significantly higher in Halton than nationally. The rate increased in 2022/23 (16.8%) compared to 2021/22 (14.2%), but decreased for 2023/24 (11.6%), nearly half that seen a decade ago (2010/11 it was 21.8%). This has seen Halton drop from 4th highest in the country for 2022/23 to 10th highest for 2023/24.

Figure 5: Trend in smoking at time of delivery



Families from less advantaged socioeconomic backgrounds also tend to be disproportionately represented amongst those with disabilities. Those from more economically disadvantaged backgrounds may be more vulnerable to lifestyle factors that can contribute to disability and disability itself can be a major contributor to material poverty. The percentage of Halton children living in relative low income homes is statistically significantly higher than the England average.

Figure 6: Number and % of children aged under 16 living in relative low income families, 2022/23



Information on disability is collected in the Family Resources Survey (FRS); it is one of the key sources of information on the populations of disabled adults and children as it includes a Disability Discrimination Act (DDA) measure of disability. The estimates for disabled people within it cover the number of people with a long-standing illness, disability or impairment which causes substantial difficulty with day-to-day activities. Everyone classified as disabled under this definition would also be classified as disabled under the general definition of disability in the Equality Act (EA) which has applied since 1 October 2010. However, some individuals classified as disabled and having rights under the EA would not be captured by this definition. However, it provides a robust, reliable source of data on level of disabilities at a national level that can be applied to local population figures.

The FRS 2022/23, estimated that nationally 8% of children have a disability. The percentage increases with age, ranging from 4% of those aged 0-4 years to 13% of young people aged 20-24. Data is only available nationally from this survey but can be applied to local populations to give an overall estimate. This is useful, as not all children and young people may have been diagnosed/identified as having a disability within local services.

Figure 7: Estimated number of children and young people in Halton who have a disability, 2023

Age group	Persons	Males	Females
0-4	338	244	65
5-9	770	471	264
10-14	1,138	618	481
15-19	1,076	529	579
20-24	1,137	520	611

Source: Family Resource Survey 2022/23 and ONS mid-2023 population estimates

For the first time we are able to include local routinely available data on the number of children with different disabilities. This data is from GP records of children aged 0-24 registered with a Halton GP and 0-24 year olds living in Halton.

Attention-deficit/hyperactivity disorder (ADHD) is a chronic condition that affects millions of children and often continues into adulthood. ADHD includes a combination of persistent problems such as difficulty sustaining attention, hyperactivity and impulsive behaviour. Children with ADHD may also struggle with low self-esteem, troubled relationships and poor performance in school. Symptoms sometimes lessen with age. However, some people never completely outgrow their ADHD symptoms. But they can learn strategies to deal with it. ADHD tends to run in families and in most cases it is thought genetics is the significant factor in developing the condition. Most cases are diagnosed when children are 6 to 12 years old. Certain groups are also believed to be more at risk of ADHD, including people:

- who were born prematurely (before the 37th week of pregnancy) or with a low birthweight
- with epilepsy
- with brain damage – which happened either in the womb or after a severe head injury later in life

ADHD affects about 3-5% of children and is more common in males than females (4:1). Girls with ADHD may present with less hyperactivity than boys and subsequently may be less easily identified in primary care settings (NICE,2008, 2013).

Data from the Integrated Care Board's data platform CIPHA via its Enhanced Case Finding Report shows there are currently **1,294** children and young people aged 0-24 diagnosed with ADHD (data as at 25/07/24). 972 were male and 322 female, a ratio of 3:1.

The total population aged 0-24 was 35,985 meaning the ADHD population was 3.6% in line with national figures.

Figure 3: ADHD amongst Halton GP registered population aged 0-24, by age group and gender

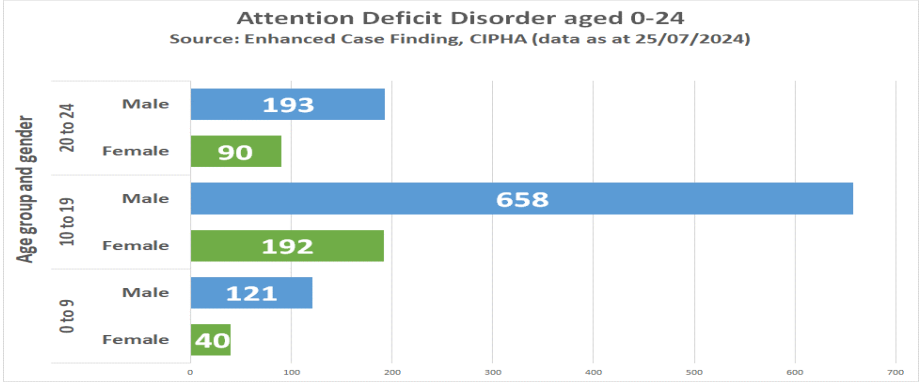
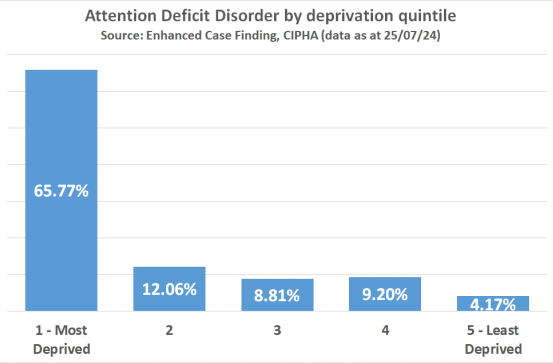


Figure 4: ADHD amongst Halton GP registered population aged 0-24, by deprivation quintile



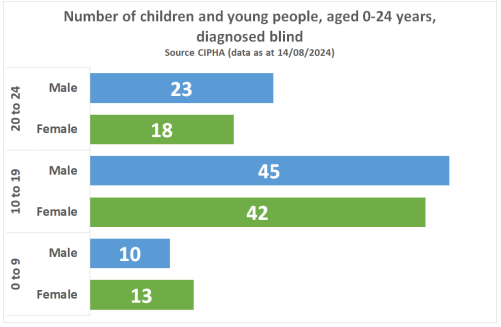
Most Halton children and young people live in the most deprived 20% of areas in the borough.

Sensory disabilities

There are more than 45,000 **deaf children** in the UK, plus many more who experience temporary deafness due to conditions such as glue ear. Around half of all deaf children are born deaf, and around the same amount acquire deafness during childhood. The annual CRIDE 2023 survey (Consortium for Research in Deaf Education) showed **110** Halton children with permanent deafness and **15** with temporary deafness being supported within local authority services/educational settings, a reduction on 2022 figures (124 and 28 respectively).

Based on the Royal National Institute for the Blind 2020 JSNA report for Halton, there are **50** children aged 0-17 who are **blind or partially sighted.**

Figure 5: Blindness diagnosis amongst Halton 0-24 year olds



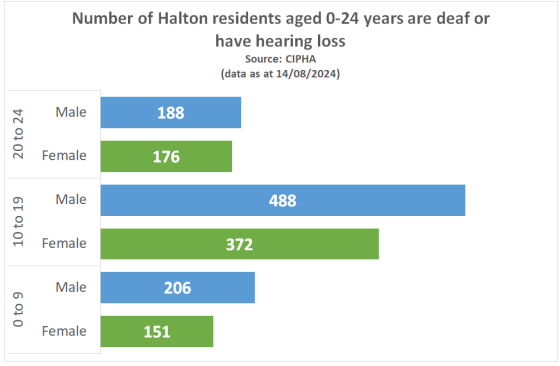
According to CIPHA date there are significantly more children diagnosed as blind in Halton. Than suggested by the RNIB figures For males the figure is 78 and for females 73, giving a total of **151**.

Around a third of these - 51– are also on a QOF long-term conditions register. Nearly 13% of this group have a learning disability, 6.6% depression, 5.3% have asthma and just under 5% have epilepsy. 13.7% have a range of other long-term conditions such as diabetes, chronic kidney disease and stroke/trans ischemic attack—small number suppression means percentages cannot be calculated for these conditions individually.

As with ADHD there is a significant relationship with deprivation with 59% living in the most deprived quintile.

1,581 patients aged 0-24 are deaf or have hearing loss, 699 females and 882 males. As with blindness and partially sighted, this figure is higher than CRIDE 2023 figures.

Figure 6: Number of Halton residents aged 0-24 who are deaf or have hearing loss



52.4% living in the most deprived quintile compared to 9.3% in the least deprived.

Of this total of 1581, 238 are also on a long-term conditions register. 6% have a diagnosis of asthma, 5% depression, 2.3% learning disability with 8.4% have some other kind of long-term condition.

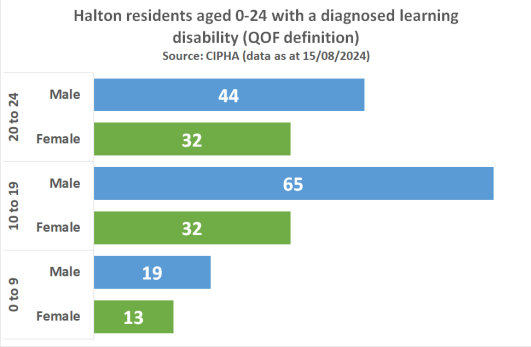
Learning Disability (LD) and Autistic Spectrum Disorder (ASD)

People with learning disabilities and autism are a very diverse population with differing needs; a group that experience health inequalities, social exclusion and stigmatisation.

It is important to consider the hidden population with learning disability – those not using services with potentially unmet needs. This is because although about 4.6 people per 1,000 in the population are known to have a learning disability, research suggests there may actually be around 20 people in every 1,000 with a learning disability.

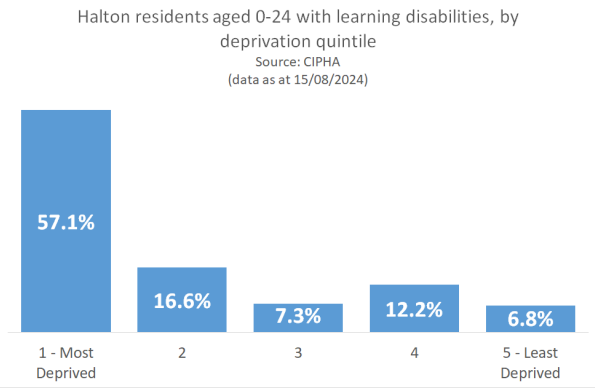
Data from CIPHA shows 205 people aged 0-24 with a diagnosed learning disability. 77 are female and 128 male. This gives a population prevalence of 0.56% or 5.61 per 1,000 population aged 0-24, similar to the national average.

Figure 7: Learning disabilities in Halton residents aged 0-24, by age and gender



There are differences by male and female in every age group with numbers larger for males in each age group. The difference is most marked in the 10-19 age group.

Figure 8: Learning disabilities by deprivation



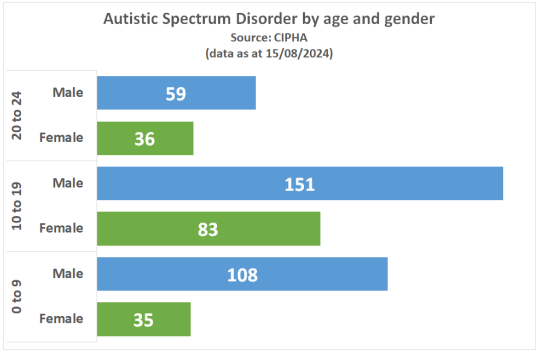
The pattern by deprivation is in keeping with other disabilities with over half living in the most deprived quintile.

Autistic Spectrum Disorder (ASD)

Data from CIPHA Enhanced Case Finding also includes John Hopkins expanded diagnostic clusters. These are different to QOF analysis above used for learning disability and so are not directly comparable.

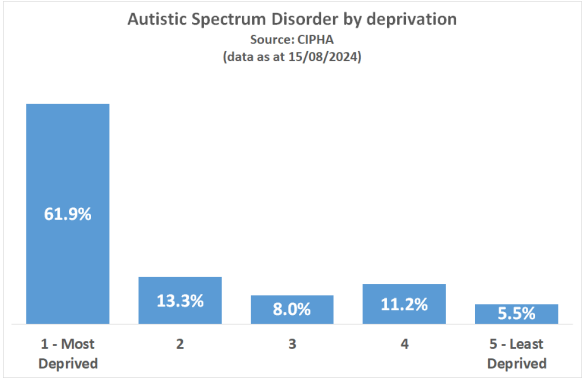
It shows 473 Halton residents aged 0-24 with ASD. There is a 2:1 ratio males to females; 318 are male and 154 female. The higher number of males is seen in each age group.

Figure 9: Autistic Spectrum Disorder diagnosis amongst Halton residents aged 0-24



Of the 473 people with ASD, 148 are on a QOF long-term conditions register. 9.7% are on the learning disability register, 9.1% have asthma, 7.6% depression, 2.1% severe mental illness and 1.5% epilepsy. 4% have another long-term condition.

Figure 10: Autistic Spectrum Disorder diagnosis amongst Halton residents aged 0-24 by deprivation quintile



Over 60% of people with ASD (aged 0 to 24) live in the most deprived quintile.

PREVALENCE OF MULTIMORBIDITY

Prevalence of multiple morbidities

Multimorbidity (MM) is the presence of 2 or more long-term health conditions in a single individual. It impacts an individual's quality of life, mental health and wellbeing, daily function, and often results in greater healthcare utilisation the more co-existing conditions they have. MM tends to increase with age, with an estimated two-thirds of individuals aged 65 and over having 2 or more long-term conditions. A small proportion of children and young people will also have more than one health condition. This may be more than one physical health condition or a combination of physical and mental health conditions.

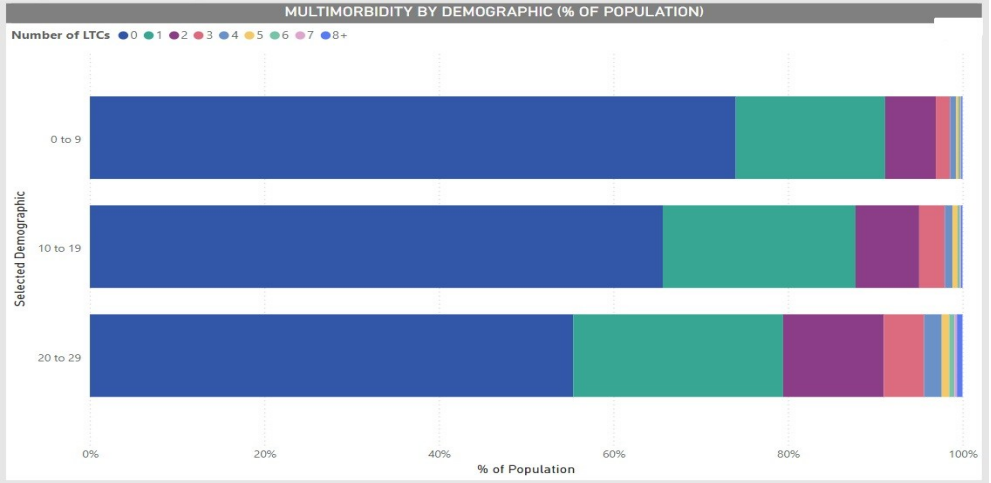
Estimates have previously been provided by Public Health England for each local authority on how many people per age band may have combinations of multi-morbidities. Updated to reflect the Census 2021 populations for 0-24 year olds, we can estimated that:

- **77** Halton males and **86** females aged 0-24 have at least 2 long-term physical health conditions
- **127** Halton males and **154** females aged 0-24 have at least one physical and one mental health comorbidity

One of the CIPHA reports uses the internationally recognised The Johns Hopkins Adjusted Clinical Group (ACG) System the world's leading population health analytics software. This is a risk stratification tool which can model and predict an individual's health over time, using existing data from electronic medical records and demographics like age and gender. It is also used to assign patients into different groups e.g. regarding morbidity or resource use. The resulting data can give insights into population profiling, patient case management, performance analysis and resource allocation. The report only includes living patients who have ACG data available.

Instead of looking for evidence of specific diseases ACG analysis is based on the premise that clustering of morbidity is a better predictor of health care services resource use.

Figure 11: numbers of 0-24 year old Halton GP registered patients with long-term conditions, data as at 26/08/2024



The analysis shows the vast majority of 0-24 year olds with no long-term conditions (LTC) but this does vary by age group, 66.86% overall ranging from 74.02% of 0-9 year olds to 55.38% of 20-24 year olds. This equates to 24,193 of 36,186 0-24 year olds having no LTCs with 90 having 8+ LTCs.

Figure 12: percentage of 0-24 year old Halton GP registered patients with LTCs

Age group	no LTC	1 LTC	2 LTC	3 LTC	4 LTC	5 LTC	6 LTC	7 LTC	8+ LTC
0-24	66.86%	20.60%	7.53%	2.77%	1.02%	0.53%	0.30%	0.15%	0.25%
0 to 9	74.02%	17.12%	5.81%	1.63%	0.70%	0.27%	0.20%	0.11%	0.15%
10 to 19	65.66%	22.09%	7.29%	2.94%	0.87%	0.60%	0.27%	0.12%	0.17%
20 to 29	55.38%	24.06%	11.54%	4.62%	2.01%	0.87%	0.58%	0.30%	0.64%

Source: CIPHA ACG report, data as at 26/08/2024

Disability Living Allowance

Disability Living Allowance (DLA) for children may help with the extra costs of looking after a child who:

- is under 16 years of age (anyone 16+ must apply for Personal Independence Payment (PIP))
- has difficulties walking or needs much more looking after than a child of the same age who does not have a disability

Figure 10: Number of those aged 16-24 receiving Universal Credit (UC), November 2022 and children aged 0-15 receiving DLA, November 2022

Age Group	Female	Male
Under 5	100	100
5 to 10	100	200
11 to 15	100	400
16-17	0	0
18-24	265	435
Total	565	1135

Source: NOMIS, 2022

There are 1,700 children and young people in Halton receiving universal credit (aged 16-24) or disability living allowance (aged under 16). The main conditions are learning disabilities (519), hyperkinetic syndrome (259) and behavioural disorders (188). These make up 67.4% of those receiving DLA payments.

Figure 11: Number of those aged 0-24 receiving DLA payments, May 2022, by main disabling condition

	Under 5	5 to 10	11 to 15	16 to 17	18 to 24	Total
Disease Of The Muscles, Bones or Joints	5	16	13	..	..	28
Blindness	..	7	9	..	..	15
Deafness	12	14	8	..	..	31
Heart Disease	7	5	..	..	..	15
Chest Disease	5	7	5	..	..	13
Asthma	..	..	..	..	..	7
Cystic Fibrosis	5	9	6	..	..	18
Epilepsy	..	11	6	..	..	18
Neurological Diseases	11	28	27	8	..	68
Diabetes Mellitus	..	20	32	10	..	60
Metabolic Disease	..	..	6	..	..	8
Learning Difficulties	64	213	209	28	10	519
Psychoneurosis	..	5	11	5	..	15
Behavioral Disorder	23	98	62	6	..	188
Hyperkinetic Syndrome	..	110	134	13	..	259
Renal Disorders	..	10	..	..	..	13
Bowel and Stomach Disease	8	8	5	..	..	12
Skin Disease	10	8	5	..	..	19
Malignant Disease	..	5	..	..	..	8
Severely Mentally impaired	..	..	..	..	5	6
Unknown/Transfer from Attendance Allowance	32	37	12	..	..	86
Total	179	611	555	74	12	1433

.. denotes a nil or negligible number of claimants. Conditions with .. In all age groups removed. There may thereforebe small numbers of claimants due to conditions not listed.

Source: DWP Stat-Xplore

POPULATION OF CHILDREN WITH SEN

In January 2024 **4,045** pupils in Halton were identified as having a special educational need (SEN). This is a substantial increase on the 2021/22 figure of 2,782 and an increase on the 2023 figure of 3,736.

The majority (2,135; 52.78%) attend state funded primary school. This is greater than both the North West and England. This is reflected in the age breakdown with Halton having a higher number of pupils aged 5-11.

Figure 12: Percentage of children and adolescents with SEN, as at January 2024, by age and gender

		England	North West	Halton
Age	Age 2 and under	0.9	1.0	0.4
	Age 3	2.8	3.3	1.5
	Age 4	7.1	7.2	6.9
	Age 5	7.3	7.4	7.5
	Age 6	7.5	7.6	7.8
	Age 7	7.7	7.8	8.0
	Age 8	7.7	7.8	8.4
	Age 9	7.7	7.9	7.9
	Age 10	7.8	8.0	8.5
	Age 11	7.9	8.0	8.5
	Age 12	7.8	7.9	8.4
	Age 13	7.6	7.7	8.7
	Age 14	7.5	7.7	7.8
	Age 15	7.5	7.6	8.6
	Age 16	2.7	1.6	0.5
	Age 17	2.5	1.5	0.4
	Age 18	0.2	0.1	0.1
Sex	Female	48.9	48.9	48.9
	Male	51.1	51.1	51.1

Source: Department for Education

		Female	Male
England	All pupils	48.9%	51.1%
	EHC plans	28.0%	72.0%
	No SEN	51.9%	48.1%
	SEN Support	38.0%	62.0%
North West	All pupils	48.9%	51.1%
	EHC plans	27.9%	72.1%
	No SEN	52.0%	48.1%
	SEN Support	38.6%	61.4%
Halton	All pupils	48.9%	51.1%
	EHC plans	30.1%	69.9%
	No SEN	52.5%	47.5%
	SEN Support	37.8%	62.2%

Source: Department for Education

As with the GP record data, SEN data derived from schools shows it is more prevalent in boys than girls. The Halton gender percentage split for EHC plans is slightly lower than the England and North West averages but the overall pattern is similar.

Figure 13: Pupils with SEN by SEN provision, as at January 2024

	Halton		North West	England
	Number	%		
EHC plans	1107	5.9%	5.3%	4.8%
SEN support/SEN without an EHC plan	2938	15.6%	13.8%	13.6%
no SEN	14802	78.5%	80.9%	81.6%

Source: Department for Education

There are more children in Halton with SEN support (15.6%), compared to the North West and England. There were also a greater proportion of pupils in Halton (5.9%) with an EHCP.

There has been an increase in the percentage of all pupils with SEN support since 2021, both locally and across the country. Halton rates have been consistently slightly higher than comparators.

Figure 14: Trend in pupils with SEN Support

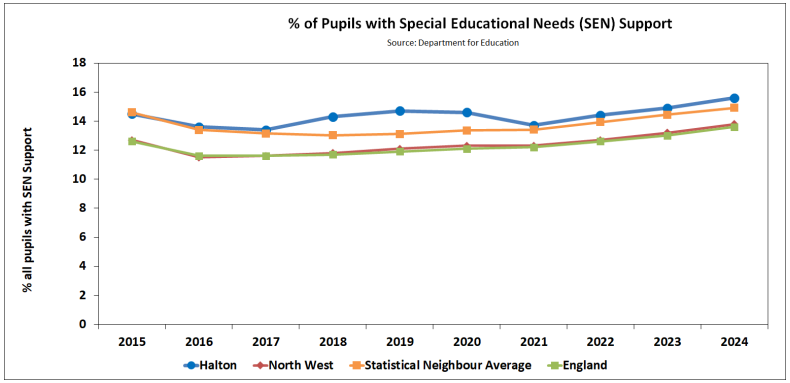
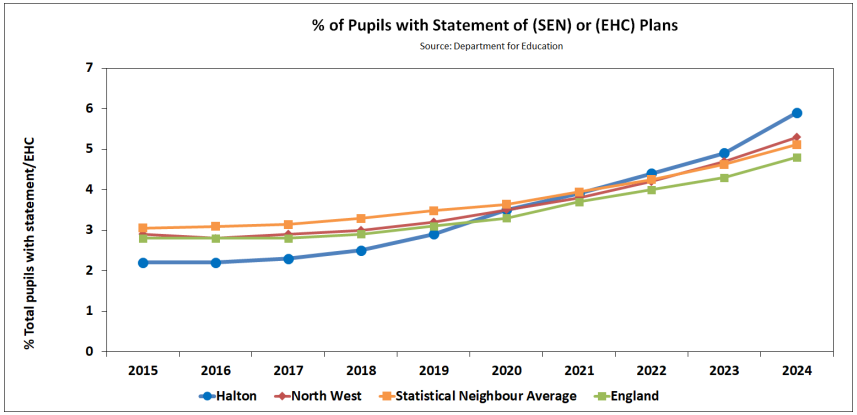


Figure 15: Trend in pupils with statement of SEN or EHC P



Whilst the percentages of pupils with EHCPs is much smaller, over recent years there has been an increase in the proportion of pupils with EHCPs (formerly statement of SEN). Halton now has a slightly higher rate than any of the comparison areas.

POPULATION OF CHILDREN WITH SEN

In terms of the type of school pupils with SEN attend, the majority are in state-funded primary and secondary schools. Special schools, independent schools cater for those with EHCPs and alternative provision for those with SEN support needs. Even for those with EHCPs, the majority (61.1% or 678 out of 1,107) do not attend special school.

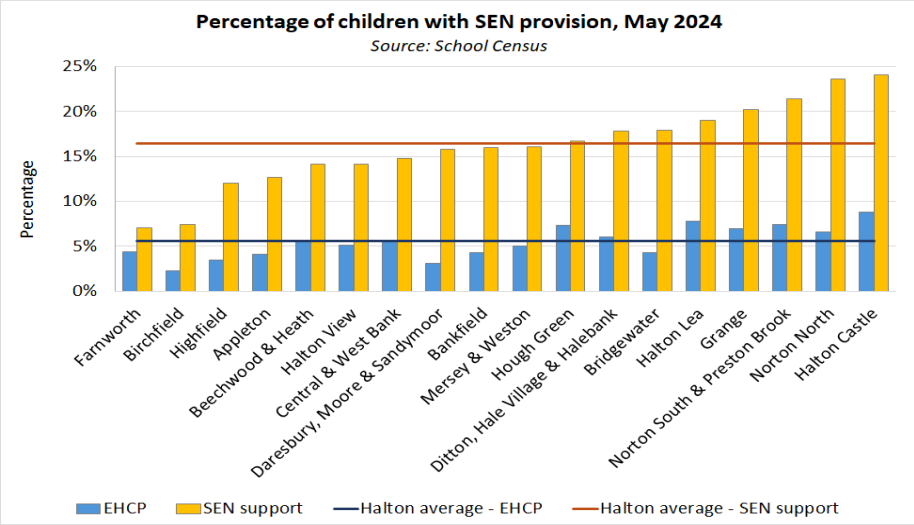
Figure 16: Numbers of pupils with SEN by school type and SEN status, 2023/24

	Total pupils	Independent school	State-funded alternative provision school	State-funded nursery	State-funded primary	State-funded secondary	State-funded special school
EHC plans	1,107	67	10	3	347	251	429
SEN support	2,938	0	52	32	1,788	1,064	2
no SEN	14,802	0	0	159	7,820	6,823	0
All pupils	18,847	67	62	194	9,955	8,138	431

Source: Department for Education

The proportion of school-age children with SEN varies at electoral ward level for both those with SEN support and EHCP

Figure 17: percentage of children with SEN, by electoral ward, May 2024



Free school meals eligibility

Free school meals (FSM) is an important policy measure to tackle food poverty, something that has been increasing since the cost of living crisis began.

All children in Reception and Year two receive a free school meal with other primary and secondary children eligible if a parent receives any qualifying benefit (including universal credit if their income is below £7,400) .

As food poverty is set to soar, how many free school meals reach under-fives? - Education Policy Institute (epi.org.uk)

A greater proportion of pupils with SEN are eligible for free school meals compared to those pupils with no SEN. Eligibility for free school meals is an indicator of poverty as it only available to children or parents receiving a range of benefits. The proportion of pupils eligible for FSM is higher in Halton than comparators. Whilst all areas have higher proportions of children with SEN eligible for FSM, levels are higher in Halton with over half of SEN children eligible

Figure 18: FSM eligibility by SEN, 2023/24

	England	North West	Halton
All pupils	24.6	27.7	39.1
SEN Support	38.3	42.1	54.6
EHC plans	42.2	44.6	53.2
No SEN	21.4	24.2	35.0

Source: Department for Education

Overall the percentage of both primary and secondary school pupils eligible for free school meals has been increasing locally and nationally. Levels in Halton (38.5% primary school and 39.5% secondary school pupils) are higher than the national, regional and statistical neighbours group averages.

POPULATION OF CHILDREN WITH SEN

Ethnicity

Overall Halton has a higher proportion of pupils who are from White British ethnic background that regionally and nationally. This is the case for all pupils, those with SEN and those with no SEN. A higher proportion of pupils with SEN are White British compared to those with no SEN.

Figure 19: percentage of pupils from White British backgrounds, by SEN status, 2023/24

	England	North West	Halton
All pupils	61.3	69.5	90.0
SEN support	69.2	76.9	92.8
EHC	66.1	74.5	91.3
no SEN	59.8	68.0	89.3

Source: Department for Education

Figure 20: Percentage of Halton pupils from each ethnic background, by SEN status, 2023/24

	All pupils	SEN support	EHC	no SEN
Any other ethnic group	0.9	0.7	0.7	1.0
Asian - Bangladeshi	0.0	0.1	0.0	0.0
Asian - Chinese	0.1	0.1	0.0	0.1
Asian - Indian	0.2	0.1	0.5	0.2
Asian - Pakistani	0.1	0.0	0.0	0.1
Asian - any other Asian background	0.3	0.2	0.2	0.3
Black - Any other Black background	0.1	0.0	0.3	0.1
Black - Black African	0.4	0.1	0.2	0.5
Black - Black Caribbean	0.0	0.0	0.0	0.0
First language unclassified	0.3	0.3	0.3	0.3
Mixed - Any other mixed background	2.0	1.4	2.1	2.2
Mixed - White and Asian	0.5	0.3	0.8	0.5
Mixed - White and Black African	0.5	0.3	0.5	0.6
Mixed - White and Black Caribbean	0.5	0.5	1.2	0.5
Unclassified	1.2	1.1	1.0	1.2
White - Gypsy/Roma	0.1	0.1	0.0	0.2
White - Irish	0.2	0.3	0.0	0.1
White - Traveller of Irish heritage	0.1	0.1	0.0	0.1
White - White British	90.0	92.8	91.3	89.3
White - any other White background	2.7	1.8	1.4	3.0

Source: Department for Education

Any other white background is the highest single ethnic group after white British, both nationally and for Halton. Halton has proportionally fewer pupils from Asian: Pakistani and Asian: Indian that England. The percentage of pupils from Any other mixed background is only slightly lower for Halton than nationally.

First language is known to be, or believed to be, other than English

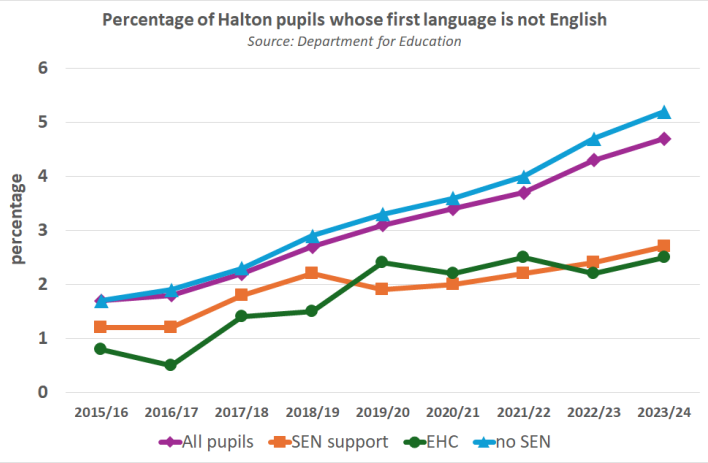
Given the ethnic make-up in Halton it is not surprising that the level of pupils whose first language is not English is lower than that seen regionally and nationally.

Figure 21: Percentage of pupils whose first language is not English , by SEN status, 2023/24

		England	North West	Halton
EHC plans	First language is known to be, or believed to be English	84.2	87.3	97.2
	First language is known to be, or believed to be, other than English	15.3	12.3	**2.5**
	First language unclassified	0.5	0.4	0.3
SEN Support	First language is known to be, or believed to be English	84.2	87.0	97.0
	First language is known to be, or believed to be, other than English	15.3	12.7	**2.7**
	First language unclassified	0.4	0.3	0.3
No SEN	First language is known to be, or believed to be English	77.4	80.8	94.5
	First language is known to be, or believed to be, other than English	22.0	18.9	**5.2**
	First language unclassified	0.5	0.3	0.3
All pupils	First language is known to be, or believed to be English	78.7	82.0	95.0
	First language is known to be, or believed to be, other than English	20.8	17.7	**4.7**
	First language unclassified	0.5	0.3	0.3

Source: Department for Education

Figure 22: trend in Halton pupils whose first language is other than English, by SEN status



Whilst the percentages are significantly lower in Halton than regional and national averages the growth rate is greater, in many cases doubling since 2015/16.

Increases in the percentage of the total population whose first language is not English were seen in the 2021 Halton Census figures compared to 2011.

POPULATION OF CHILDREN WITH SEN: TYPES OF NEED

Primary need

As at January 2024 the most common primary need among pupils with an EHCP was autistic spectrum disorder (ASD). This is the case nationally and regionally. Whilst levels are also high in Halton speech, language and communication needs (SLCN) are the highest single proportion locally.

Figure 23: Percentage of all SEN pupils with EHC plans, by primary need, as at January 2024

Primary need	England	North West	Halton
Autistic Spectrum Disorder	33.0%	31.2%	27.3%
Hearing Impairment	1.6%	1.2%	1.4%
Moderate Learning Difficulty	8.5%	8.2%	4.7%
Multi- Sensory Impairment	0.3%	0.3%	0.4%
Other Difficulty/Disability	2.2%	2.0%	3.1%
Physical Disability	3.6%	3.6%	4.0%
Profound & Multiple Learning Difficulty	2.5%	2.6%	2.6%
Severe Learning Difficulty	7.9%	8.3%	4.9%
Social, Emotional and Mental Health	15.5%	17.5%	19.2%
Specific Learning Difficulty	4.3%	4.3%	3.3%
Speech, Language and Communications needs	19.5%	19.7%	28.6%
Visual Impairment	1.0%	1.1%	0.5%

Source: Department for Education

For those with SEN support Halton follows the national and regional pattern with the highest single reason being SLCN followed by social, emotion & mental health (SEMH) and moderate learning difficulty (MLD)

Figure 24 Percentage of all SEN pupils with SEN support, by primary need, as at January 2024

Primary need	England	North West	Halton
Autistic Spectrum Disorder	9.2%	7.9%	2.9%
Hearing Impairment	1.5%	1.5%	1.2%
Moderate Learning Difficulty	15.8%	14.9%	17.3%
Multi- Sensory Impairment	0.3%	0.3%	0.5%
Other Difficulty/Disability	3.7%	3.9%	4.3%
Physical Disability	1.9%	2.0%	1.7%
Profound & Multiple Learning Difficulty	0.1%	0.1%	no data
SEN support but no specialist assessment of type	4.7%	4.7%	5.1%
Severe Learning Difficulty	0.2%	0.2%	0.0%
Social, Emotional and Mental Health	22.3%	22.8%	23.2%
Specific Learning Difficulty	13.9%	14.2%	11.6%
Speech, Language and Communications needs	25.6%	26.5%	30.0%
Visual Impairment	0.9%	1.0%	2.1%

Source: Department for Education

Of the three most prevalent primary needs, MLD has been reducing year-on-year since 2022, whilst the number of children with ASD as their identified primary need has risen for the past five years.

Figure 25 Number of SEN children by primary need , Halton 2020 to 2024

Primary need	2020	2021	2022	2023	2024
Autistic Spectrum Disorder	263	279	292	333	370
Hearing Impairment	50	50	52	55	51
Moderate Learning Difficulty	761	676	696	597	557
Multi- Sensory Impairment	16	16	14	16	20
Other Difficulty/Disability	171	154	178	180	157
Physical Disability	92	93	87	79	92
Profound & Multiple Learning Difficulty	27	29	27	27	27
Severe Learning Difficulty	64	61	54	56	52
Social, Emotional and Mental Health	738	677	684	764	883
Specific Learning Difficulty	281	276	325	302	375
Speech, Language and Communications needs	849	874	988	1,086	1,179
Visual Impairment	48	45	49	55	66
SEN support but no specialist assessment of type of need	119	142	148	186	149

Source: Department for Education

Note: colour gradients depict te most prominent levels of need

For children with SEMH or MLD as their primary need the majority are also eligible for free school meals (FSM), whereas this is not so obvious where pupils are identified as having SLCN or ASD as their primary need.

For pupils identified as having SLCN a larger proportion are known to have English as an additional language (EAL) than the other main primary need categories. This may indicate that in the primary school phase some SLCN identification is related to this.

POPULATION OF CHILDREN WITH SEN: TYPES OF NEED

Secondary need

Figure 26 combines school age persons on SEN Support together with those on an EHCP. The majority of pupils (2,901 out of 3,978 or 72.9%) have only been assessed as having a primary need, with no secondary need recorded. For those with a secondary need, the most common secondary need generally is SEMH (266 pupils) closely followed by SLCN (6245 pupils) and thirdly MLD (161 pupils).

Looking at pairings, the most common type of overall SEN pairing is that of SLCN as primary need with as secondary need (109 pupils). The second most common pairing is that of SEMH as primary need combined with SLCN as secondary need (87 pupils). Third is SLCN as the primary need with MLD as the secondary need (82 pupils)

Figure 26: levels of secondary need by primary need, as at January 2024

Primary need		Secondary need identified															
	Headcount	Autistic Spectrum Disorder	Hearing impairment	Moderate Learning Difficulty	Multi-sensory Impairment	Other Difficulty or Disability	Physical Disability	Profound and Multiple Learning Difficulty	SEN support but no specialist assessment of type of need	Severe Learning Difficulty	Social, Emotional and Mental Health	Specific Learning Difficulty	Speech, Language and Communications needs	Visual impairment	No secondary need	% with no secondary need
Autistic Spectrum Disorder	370		0	2	0	3	4	0	0	8	51	10	54	5	233	63.0%
Hearing impairment	51	0		0	0	0	2	0	0	1	2	1	5	2	38	74.5%
Moderate Learning Difficulty	557	2	1		0	8	5	0	4	0	41	4	45	4	443	79.5%
Multi-sensory Impairment	20	1	0	1		1	2	1	0	0	2	0	1	0	11	55.0%
Other Difficulty or Disability	157	1	0	4	0		1	0	1	0	18	3	10	4	115	73.2%
Physical Disability	92	0	2	8	0	4		0	0	4	8	3	9	4	50	54.3%
Profound and Multiple Learning Difficulty	27	1	1	0	1	0	3		0	0	0	1	0	1	19	70.4%
SEN support but no specialist assessment of type of need	149	3	0	3	0	1	0	0		0	8	4	2	0	128	85.9%
Severe Learning Difficulty	52	4	1	1	0	0	5	2	0		1	1	13	1	23	44.2%
Social, Emotional and Mental Health	883	18	1	40	4	21	2	0	6	0		35	87	5	664	75.2%
Specific Learning Difficulty	375	4	1	18	1	14	2	0	4	2	21		16	10	282	75.2%
Speech, Language and Communications needs	1179	30	4	82	5	23	14	1	17	7	109	34		2	851	72.2%
Visual impairment	66	4	0	2	0	3	2	0	0	0	5	3	3	0	44	66.7%
Total	3978	68	11	161	11	78	42	4	32	22	266	99	245	38	2901	72.9%

Source: Department for Education

Secondary need of pupils with EHCPs

When considering the secondary identified needs of children with EHCPs in Halton schools, it is evident that the pattern is similar to national over the past five years, with SLCN being the largest proportion of secondary need, followed by SEMH and ASD.

Figure 27: Percentage of pupils with EHCPs by secondary need, 2020 to 2024

Sec Need	Halton					England				
	2020	2021	2022	2023	2024	2020	2021	2022	2023	2024
SLCN	10.1	10.3	11.3	11.2	12.0	12.3	12.2	12.3	12.3	12.4
SEMH	6.2	6.8	8.3	8.4	8.8	5.8	6.1	6.4	6.7	7.0
ASD	3.8	4.3	4.6	4.0	4.3	6.2	6.2	6.3	6.5	6.8
MLD	6.5	5.0	5.2	4.7	4.3	5.9	5.8	5.6	5.4	5.0
SPLD	2.1	2.7	2.6	3.2	3.4	2.2	2.3	2.4	2.5	2.6
SLD	4.3	3.6	2.8	2.4	2.0	2.9	2.7	2.5	2.3	2.1
PD	2.5	2.4	2.6	2.7	2.0	2.5	2.3	2.2	2.0	1.9
OTH	1.7	1.4	2.0	2.0	1.9	2.7	2.6	2.6	2.5	2.3
VI	0.9	1.3	1.2	1.8	1.5	1.1	1.0	1.0	0.9	0.8
MSI	0.6	0.6	0.7	0.6	0.7	0.4	0.4	0.4	0.4	0.5
HI	1.3	0.8	0.7	0.9	0.5	0.8	0.8	0.7	0.7	0.6
PMLD	0.5	0.3	0.1	0.2	0.4	0.4	0.4	0.3	0.3	0.3

Looking at the three top secondary needs, SLCN and SEMH are driven by the secondary school phase with 18% having SLCN and 14% having SEMH as a secondary need. The proportion of children with ASD as a secondary need is broadly similar across primary, secondary and special school phases

Secondary need for children with EHC Plans and ASD as primary need

When looking at the secondary need of children in Halton schools, who have an EHCP and ASD identified as their primary need, in 2024 similar patterns are evident:

Figure 28: Secondary need of pupils with ECHPs and ASD primary need, 2024

Phase	SLCN	SEMH	SLD	SPLD	VI	MLD	OTH	PD
ALL	14.4	12.7	2.5	2.1	1.4	0.7	0.7	0.7
PRIMARY	20.6	8.8	0.0	1.5	0.0	1.5	1.5	1.5
SECONDARY	31.1	36.1	0.0	6.6	3.3	1.6	1.6	1.6
SPECIAL	5.2	5.2	4.5	0.6	1.3	0.0	0.0	0.0

SLCN and SEMH are the highest proportion of secondary needs for these children, with children in the secondary school phase having SEMH as the highest proportion of secondary need.

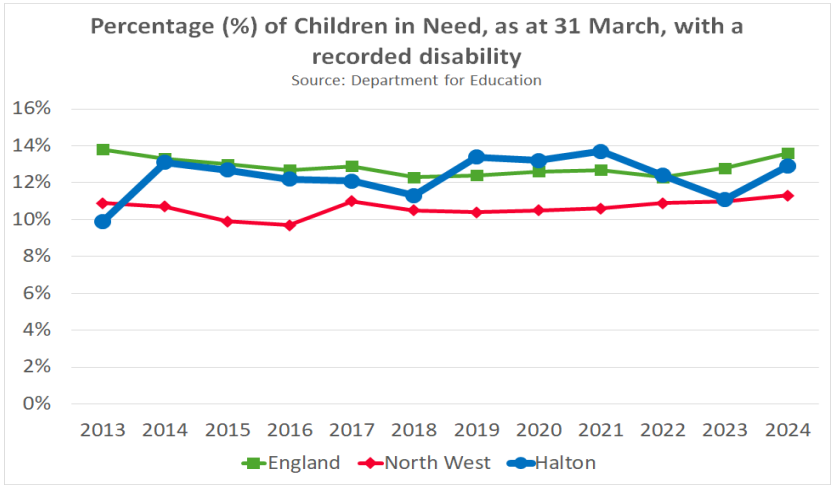
SEN AMONGST CHILDREN IN NEED

Children in Need (CiN)

A child in need is one who has been assessed by children's social care to be in need of services. These services can include for example family support (to help keep together families experiencing difficulties), leaving care support (to help young people who have left local authority care), adoption support, or disabled children's services (including social care, education and health provision).

As at 31 March 2023 Halton had 132 CiN with a recorded disability. This is a reduction on the 144 in 2022. This gives an overall percentage with a disability of 11.1%. Although rates have fluctuated over time Halton rates were higher than regional and for 2019 to 2022 also higher than the England average.

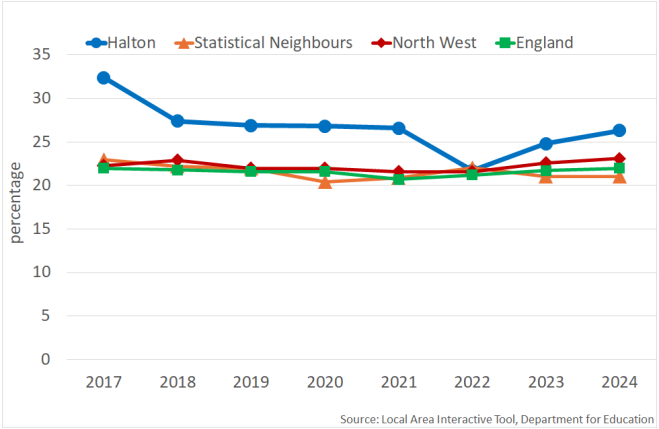
Figure 29: Trend in CiN with disabilities



Of the 132 Halton CiN with a recorded disability 36.1% was due to Autism/ Asperger Syndrome, 30.8% learning disability (an increase from 21.5% in 2022), 24.2% communication, 7.6% incontinence, 6.8% mobility and 21.2% other disability. At 32.8% due to behaviour this is a substantial decrease on the 66.8% in 2022. This may be due to how a child's needs are recorded.

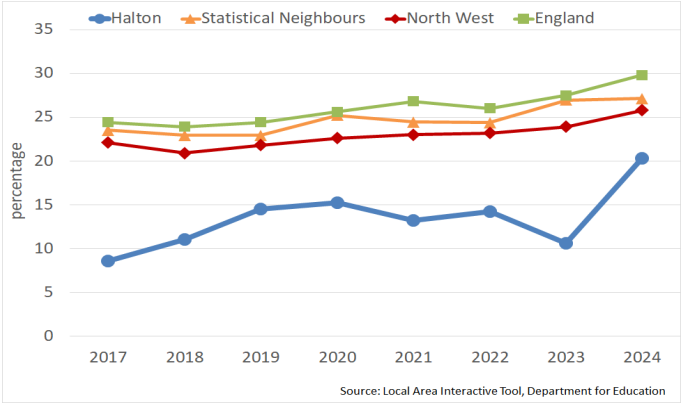
SEN support and ECHPs amongst CiN is not yet available for 2024. The recent fall in the percentage of Halton CiN with SEN support needs has seen an upturn in the 2023 figure with Halton rates higher than comparators.

Figure 30: Trend in proportion CiN with SEN Support needs



For CiN with a statement/EHCP Halton rates remain below comparators. Comparators have higher proportion of CiN with EHCP than with SEN support needs whereas the reverse is the case in Halton.

Figure 31: Trend in % CiN with SEN Statement/EHC plan



SEN AMONGST LOOKED AFTER CHILDREN

Looked After Children/ Children in Care (CiC)

Looked after children, as defined by the Children Act 1989, are either:

in the care of a local authority, or;
are provided with accommodation by a local authority for a continuous period of more than 24 hours.

The term 'children in care' is used to include all children that are being looked after by a local authority. Some of them may live outside the local authority.

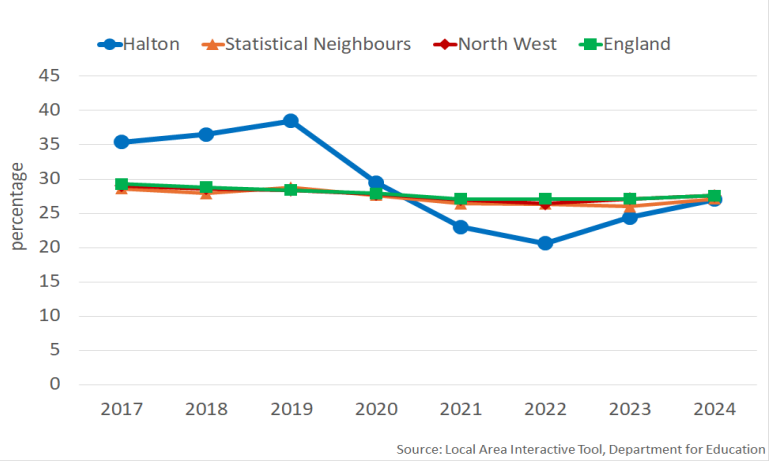
Thus a child who has been in the care of their local authority for more than 24 hours is known as a looked after child.

In 2024 Halton had the second highest number of children in care it has seen, at 381 (looking at figures since 2014. 2023 was the highest at 386). At a rate of 138 per 10,0000 children it is higher than comparators. A significant proportion of CiC have SEN.

Until 2021 Halton had a higher rate of CiC who had identified SEN without statement/ EHCP. Comparator area rates have been fairly steady over the 6 year period but Halton's rates have been dropping since 2019. However, they saw an increase in 2023 and are now similar to comparators.

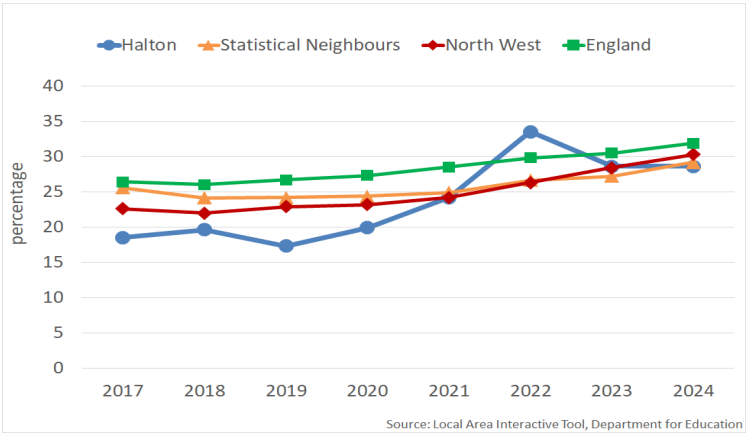
To note: relatively small numbers in a small unitary authority like Halton can make rates subject to more fluctuation than seen regionally and nationally.

Figure 18: Trend in proportion Children in Care (CiC) with Special Educational Needs (SEN) Support



All areas have seen a upward movement in the percentage of CiC with SEN statement/ EHCP. Between 2019 and 2022 the increase was more marked in Halton. Whilst at 2022 the borough rates were higher than comparators this has reduced and they are now similar.

Figure 19: Trend in % Children in Care (CiC) with Special Educational Needs (SEN) Statement/EHCP



EDUCATIONAL OUTCOMES FOR CHILDREN WITH SEN

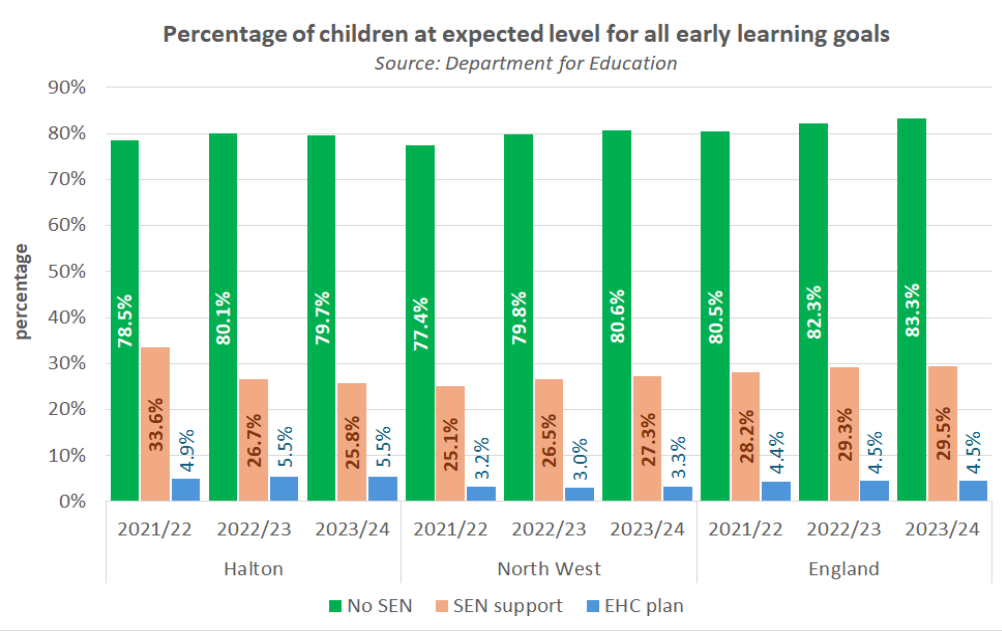
Early years

The Early Years Foundation Stage (EYFS) profile is intended to provide an accurate representation of each child's development at the end of the EYFS to support their transition into year 1. The early years foundation stage (EYFS) sets standards for the learning and development of children from birth to aged five. Children are mostly taught through games and play. Areas of learning include the prime areas: communication and language; physical development; and personal, social and emotional development; plus literacy; mathematics; understanding the world; and expressive arts and design. Across these seven areas practitioners make a best fit assessment at the end of school year when they turn five, of whether a child's level of development is "emerging", "expected" or "exceeding" seventeen early learning goals (ELGs). Children are deemed to have reached a good level of development (GLD) if they achieve at least the expected level for all ELGs in the prime areas as well as mathematics and literacy which contain 12 of the 17 ELGs.

As the framework changed in 2022 formal comparison should only be made from that point onwards. Performance in Halton can be affected greatly by the relatively small cohort size. It does show in 2023/24 about 1 in 5 (19.7%) Halton pupils with any SEN achieved GLD. A reduction on the 2022/23 and 2021/22 figures (21.4% and 26.4% respectively).

Children in Halton tend to have done slightly better than the North West average but slightly below the national average. Those with SEN do substantially worse than those with no SEN and this Halton pattern is consistent with the regional and national pattern.

Figure 20: Percentage of children at expected level at EYFS



Data split by gender shows that females have higher levels achieving a GLD than males. Whilst Halton achievement is lower than comparators it follows this pattern

Figure 21: Percentage of children achieving GLD in EYFS, by gender, 2023/24

		All	no SEN	Any SEN	SEN Support	EHCP
Halton	Persons	61.2%	68.8%	16.4%	21.1%	5.5%
	Females	69.6%	74.4%	19.2%	22.9%	11.8%
	Males	53.8%	63.2%	15.3%	20.4%	2.6%
Statistical Neighbours	Persons	66.0%	74.6%	17.3%	21.4%	2.9%
	Females	74.0%	79.4%	20.6%	25.3%	4.1%
	Males	58.5%	69.3%	16.0%	19.8%	2.4%
England	Persons	67.7%	75.6%	19.7%	24.9%	3.8%
	Females	75.0%	80.3%	24.4%	30.3%	4.8%
	Males	60.7%	70.7%	17.6%	22.5%	3.4%

Source: Department for Education

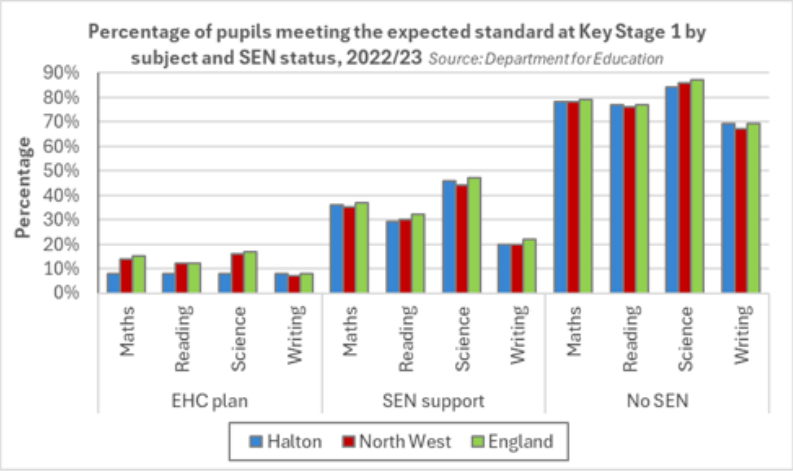
EDUCATIONAL OUTCOMES FOR CHILDREN WITH SEN

Key Stage 1

Key Stage 1 (KS1) marks a shift from EYFS to more subject-specific learning. KS1 covers all compulsory national curriculum subjects. These are English, maths, science, history, geography, computing, languages, physical education, art and design, music and design and technology.

The chart below shows the percentage of pupils meeting the expected standard at the end of KS1 for maths, reading, science and writing, split by SEN provision.

Figure 22: Percentage of pupils achieving the expected standard in KS1 teacher assessments (TA) by SEN provision, 2022/23



It shoes that not only do Halton children with EHCPs have lower percentages achieving expected standard in maths, reading and science than the regional and national averages for children with ECHPs, but there is a step change across the differing SEN status's and all have much lower levels of achievement than children with no SEN identified. Apart from the aforementioned differences Halton children achieving the expected standard in KS1 is similar to the regional and England averages in all elements, both SEN support and no identified SEN.

Phonic screening

The phonics screening check is carried out at the end of Year 1 and tests the pupils against 40 words, with the pass mark having been 32 for the last five years, also known as working at expected standard.

The following table shows the percentage of pupils meeting the expected standard in phonics, split by pupils with a EHC plan, SEN support or no identified SEN.

Figure 23: Percentage of pupils meeting the expected standard in phonics, by SEN provision

		EHC plan		SEN support		No SEN	
		in year 1	by the end of year 2	in year 1	by the end of year 2	in year 1	by the end of year 2
Halton	2017/18	5%	12%	43%	71%	87%	98%
	2018/19	7%	17%	44%	66%	87%	97%
	2021/22	7%	26%	37%	59%	84%	95%
	2022/23	18%	16%	47%	69%	87%	97%
	2023/24	15%	35%	54%	72%	88%	97%
North West	2017/18	16%	27%	46%	67%	88%	97%
	2018/19	15%	28%	45%	68%	88%	97%
	2021/22	17%	26%	42%	59%	81%	93%
	2022/23	20%	29%	48%	66%	85%	95%
	2023/24	19%	31%	50%	69%	87%	96%
England	2017/18	19%	29%	48%	70%	88%	97%
	2018/19	19%	29%	48%	69%	88%	97%
	2021/22	19%	28%	44%	61%	82%	94%
	2022/23	20%	29%	48%	66%	86%	95%
	2023/24	20%	31%	52%	70%	88%	96%

Source: Department for Education

Note: Data wasn't available for 2019/20 and 2020/21 due to the COVID-19 pandemic.

The percentage of children meeting the expected level in phonics did tend to decrease in 2021/22 for pupils with SEN support and no SEN, compared to the pre-pandemic levels.

EDUCATIONAL OUTCOMES FOR CHILDREN WITH SEN

Key stage 2

Key stage two (KS2) is school years three to six for children aged between 7 and 11. For most children attainment is assessed in year six with SATs (Standard Assessment Tests) unless they are performing below a certain level (level three) then they are teacher assessed. Children are assessed in English reading, English writing (teacher assessment), English grammar, punctuation and spelling (GPS) and mathematics. In all subjects children with no identified SEN significantly outperformed children who are on a EHCP and those who are receiving SEN support. There were no assessments in 2019-20 or 2020-21 academic years due to the pandemic.

Figure x: Percentage of pupils meeting the expected standard in reading, writing and maths (combined)

	Halton				North West				England			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All SEN	17%	16%	19%	21%	21%	17%	20%	21%	22%	18%	20%	22%
EHC plan	4%	3%	8%	7%	9%	6%	8%	9%	9%	7%	8%	9%
SEN support	18%	18%	22%	24%	24%	20%	23%	26%	25%	21%	24%	26%
No SEN	71%	70%	71%	73%	75%	68%	69%	71%	75%	69%	70%	72%

Source: Department for Education

A slightly lower proportion of Halton pupils with an ECHP as well as those receiving SEN support achieve the expected standard in reading, writing and maths (RWM) combined than the regional or national averages in 2023/24. Smaller cohort sizes can have an impact on this so the differences need to be interpreted with caution. This is also the case with individual subject results.

For the last two academic years, children in Halton with SEN have performed better than their peers in English Reading and English Grammar, Punctuation and Spelling, when considering the proportion achieving expected standard plus (EXS+). SEN Support children were broadly in-line with national performance in English Writing and Mathematics too, for this measure. There were no key stage one to key stage two progress scores for 2024, as this cohort of children did not get assessed at KS1 due to the pandemic.

Figure x: Percentage of pupils meeting the expected standard in KS2 subjects

READING

	Halton				North West				England			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All SEN	34%	37%	41%	43%	36%	37%	40%	41%	36%	38%	39%	41%
EHC plan	11%	16%	19%	21%	16%	16%	19%	20%	16%	16%	18%	19%
No SEN	80%	87%	84%	85%	82%	84%	82%	84%	82%	84%	82%	85%
SEN support	36%	42%	47%	48%	40%	43%	46%	48%	41%	44%	45%	48%

WRITING (TEACHER ASSESSMENT)

	Halton				North West				England			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All SEN	28%	25%	27%	31%	34%	26%	29%	30%	33%	25%	28%	30%
EHC plan	4%	8%	11%	13%	14%	10%	12%	12%	13%	9%	11%	12%
No SEN	89%	83%	86%	86%	89%	81%	83%	84%	88%	79%	82%	83%
SEN support	30%	30%	31%	35%	39%	30%	34%	36%	37%	29%	33%	35%

MATHEMATICS

	Halton				North West				England			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All SEN	37%	30%	36%	38%	41%	34%	36%	38%	40%	34%	36%	38%
EHC plan	7%	11%	11%	14%	17%	15%	16%	17%	16%	15%	17%	18%
No SEN	85%	80%	82%	84%	88%	81%	83%	84%	88%	81%	83%	83%
SEN support	40%	35%	42%	43%	46%	40%	42%	44%	45%	39%	42%	45%

GRAMMER, SPELLING AND PUNCTUATION

	Halton				North West				England			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All SEN	31%	30%	35%	37%	37%	32%	33%	34%	37%	31%	34%	35%
EHC plan	7%	19%	19%	19%	17%	15%	16%	17%	17%	15%	17%	17%
No SEN	86%	81%	85%	83%	88%	83%	83%	84%	89%	83%	84%	84%
SEN support	33%	33%	39%	41%	41%	36%	38%	40%	41%	36%	39%	40%

SCIENCE (TEACHER ASSESSMENT)

	Halton				North West				England			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All SEN	35%	35%	42%	45%	45%	41%	44%	46%	43%	39%	43%	46%
EHC plan	0%	16%	16%	17%	18%	17%	19%	21%	17%	17%	19%	21%
No SEN	91%	87%	89%	91%	92%	89%	90%	91%	92%	88%	90%	91%
SEN support	38%	40%	49%	51%	51%	48%	51%	55%	48%	46%	50%	54%

Source: Department of Education

EDUCATIONAL OUTCOMES FOR CHILDREN WITH SEN

Key stage 4: GCSE Attainment 8

Key stage four is school years 10 to 11 for children aged between 14 and 16. Attainment is assessed in year 11 with most children taking GCSEs or other national qualifications (General Certificate of Secondary Education).

Attainment 8 measures the average achievement of pupils in up to 8 qualifications including English, maths, three further qualifications that count in the English Baccalaureate (EBacc) and three further qualifications that can be GCSE qualifications (including EBacc subjects) or any other non-GCSE qualifications on the DfE approved list.

To note 2020 and 2021 have been excluded due to impacts of the pandemic.

Figure 23: attainment 8 score (GCSE attainment) by SEN status and gender, 22019 to 2024

ALL PUPILS

	Halton				England				Statistical Neighbours				North West			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All pupils	45.4	46.1	42.8	39.9	46.8	48.9	46.4	46.1	43.1	45.0	43.0	42.1	45.5	47.2	44.6	44.3
No SEN	48.8	49.5	45.9	42.8	50.1	52.6	50.2	50.0	47.0	50.0	47.6	46.9	48.6	50.8	48.1	48.1
EHCP	7.5	11.1	12.6	11.8	13.7	14.3	14.0	14.2	10.7	11.8	12.7	11.7	12.7	13.3	13.6	13.8
SEN Support	27.1	32.5	28.5	26.9	32.6	34.9	33.3	33.1	30.6	32.4	30.9	30.0	31.2	33.7	32.2	31.8
Any SEN	23.1	27.4	24.2	22.3	27.6	29.4	28.1	27.8	24.8	26.5	25.8	24.7	no data	27.8	26.9	26.3

FEMALE PUPILS

	Halton				England				Statistical Neighbours				North West			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All pupils	47.4	48.8	46.4	42.7	49.6	51.5	48.7	48.4	45.7	47.5	45.4	44.4	48.4	49.8	47	46.7
No SEN	49.9	51.0	48.9	44.9	52.0	54.3	51.6	51.4	48.7	51.4	48.9	48.3	50.7	52.5	49.7	49.7
EHCP	0.1	14.1	8.0	8.9	12.2	14.1	13.0	13.8	9.4	11.7	13.2	11.3	11.8	12.8	12.7	13.6
SEN Support	26.2	34.4	27.6	29.4	34.3	36.6	34.8	34.5	31.8	33.7	31.4	31.0	32.6	35	33.5	33
Any SEN	22.2	30.5	22.3	23.0	29.9	32.0	30.4	30.1	26.8	29.0	28.0	26.5	no data	29.9	29.2	28.5

MALE PUPILS

	Halton				England				Statistical Neighbours				North West			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All pupils	43.5	43.5	39.3	37.1	44.2	46.4	44.2	43.9	40.7	42.6	40.8	39.8	42.8	44.8	42.3	42.1
No SEN	47.8	47.9	42.7	40.6	48.1	51.0	48.7	48.6	45.3	48.5	46.2	45.3	46.5	49	46.5	46.5
EHCP	9.9	9.9	14.8	13.5	14.2	14.4	14.4	14.4	11.2	11.9	12.5	11.9	13.1	13.5	13.9	13.8
SEN Support	27.6	31.5	29.0	25.6	31.5	33.8	32.2	32.0	29.8	31.5	30.6	29.4	30.3	32.9	31.2	30.8
Any SEN	23.5	25.7	25.1	21.9	26.3	27.8	26.6	26.3	23.7	25.0	24.5	23.6	no data	26.6	25.5	24.9

Data Key:

	Performance behind national
	Performance better than or equal to national

Source: Department for Education

Educational attainment is often unequal between boys and girls and this is seen in local and comparator data. Male pupils with EHCPs have slightly higher average attainment scores. Small pupil cohorts may impact this so should be interpreted with caution.

Key Stage 4: Average Progress Scores

A Progress 8 score of 1.0 means pupils make on average a grade more progress than the national average of pupils with similar KS2 prior attainment in mainstream schools. Progress 8 should be interpreted alongside the associated confidence intervals. If the confidence intervals cross 0, then progress is not significantly different compared to pupils with similar KS2 prior attainment in mainstream schools.

On average Halton pupils do worse than England apart from females with SEN. Again small cohort in Halton may impact this data.

Figure 26: average progress scores, by SEN status and gender, 2019 to 2024

ALL PUPILS

	Halton				England				Statistical Neighbours				North West			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All pupils	-0.14	-0.15	-0.30	-0.46	-0.03	-0.03	-0.03	-0.03	-0.29	-0.37	-0.35	-0.35	-0.2	-0.16	-0.2	-0.17
No SEN	-0.02	-0.04	-0.21	-0.35	0.08	0.10	0.10	0.10	-0.16	-0.17	-0.17	-0.18	-0.1	-0.04	-0.08	-0.04
EHCP	-1.63	-1.68	-1.57	-1.74	-1.17	-1.33	-1.12	-1.13	-1.47	-1.64	-1.37	-1.38	-1.3	-1.44	-1.28	-1.25
SEN Support	-0.71	-0.50	-0.58	-0.85	-0.43	-0.47	-0.45	-0.45	-0.56	-0.70	-0.76	-0.65	-0.6	-0.58	-0.59	-0.56
Any SEN	-0.90	-0.77	-0.84	-1.12	-0.62	-0.69	-0.62	-0.63	-0.82	-0.96	-0.92	-0.85	no data	-0.82	-0.78	-0.76

FEMALE PUPILS

	Halton				England				Statistical Neighbours				North West			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All pupils	0.08	0.05	-0.08	-0.24	0.22	0.15	0.12	0.09	-0.07	-0.20	-0.21	-0.21	0.08	0.02	-0.04	-0.03
No SEN	0.17	0.11	0.01	-0.15	0.30	0.25	0.22	0.21	0.03	-0.03	-0.07	-0.06	0.16	0.12	0.06	0.07
EHCP	-1.63	-0.91	-1.75	-1.68	-1.09	-1.30	-1.19	-1.21	-1.29	-1.55	-1.31	-1.36	-1.2	-1.4	-1.34	-1.3
SEN Support	-0.71	-0.33	-0.60	-0.83	-0.22	-0.33	-0.37	-0.39	-0.40	-0.57	-0.68	-0.61	-0.4	-0.46	-0.5	-0.51
Any SEN	-0.84	-0.43	-0.90	-1.10	-0.39	-0.52	-0.53	-0.56	-0.60	-0.78	-0.79	-0.77	no data	-0.66	-0.66	-0.68

MALE PUPILS

	Halton				England				Statistical Neighbours				North West			
	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024	2019	2022	2023	2024
All pupils	-0.34	-0.35	-0.50	-0.67	-0.27	-0.21	-0.17	-0.15	-0.51	-0.54	-0.47	-0.48	-0.4	-0.33	-0.35	-0.29
No SEN	-0.22	-0.20	-0.43	-0.56	-0.16	-0.06	-0.03	0.00	-0.37	-0.31	-0.28	-0.30	-0.3	-0.2	-0.22	-0.16
EHCP	-1.63	-1.98	-1.48	-1.77	-1.21	-1.34	-1.10	-1.10	-1.54	-1.67	-1.38	-1.39	-1.4	-1.45	-1.26	-1.23
SEN Support	-0.70	-0.60	-0.57	-0.86	-0.56	-0.57	-0.51	-0.49	-0.66	-0.80	-0.83	-0.68	-0.7	-0.66	-0.66	-0.6
Any SEN	-0.92	-0.95	-0.81	-1.13	-0.76	-0.79	-0.69	-0.68	-0.95	-1.08	-1.00	-0.90	no data	-0.91	-0.85	-0.81

Data Key:

	Performance behind national
	Performance better than or equal to national

Source: Department for Education

EDUCATIONAL OUTCOMES FOR CHILDREN WITH SEN

School absence and exclusions

The data below shows a higher level of absences due to illness and medical appointments amongst pupils with SEN Support and EHCPs compared to total pupils and pupils with no SEN support needs. Levels of persistent absence are also higher. This is not unsurprising given the complex health needs some of these pupils will have.

Caution should be taken when interpreting the much higher percentage on SEN Unclassified with persistent and severely absent pupils due to the much smaller cohort this constitutes.

Figure 27: Percentage of pupils absent, by absence type and SEN status, Halton 2022/23

	All pupils	SEN Support	EHCP	SEN Unclassified	No SEN
Authorised absence rate	4.7%	5.7%	7.4%	11.4%	4.3%
Excluded rate	0.1%	0.2%	0.1%	1.4%	0.1%
Illness rate	3.8%	4.4%	5.1%	4.7%	3.6%
Medical appointments rate	0.3%	0.4%	0.7%	0.2%	0.2%
Overall absence rate	7.8%	9.8%	11.6%	37.2%	7.2%
Percentage of persistent absentees (10% or more missed)	22.6%	31.5%	31.6%	60.6%	20.1%
Percentage of severely absent pupils (50% or more missed)	2.3%	3.4%	5.1%	38.3%	1.7%
Unauthorised absence rate	3.1%	4.1%	4.3%	25.8%	2.9%
Unauthorised holiday rate	0.6%	0.6%	0.3%	0.2%	0.6%
Unauthorised other rate	2.3%	3.1%	3.7%	25.0%	2.1%
Number of pupil enrolments	17,580	2,683	788	94	14,015

Source: Department for Education

For all these categories of absence Halton pupils have similar levels to both the North West and England.

There are differences in the absence rates by type of primary need. Those with the most severe conditions having the higher absence rates.

Figure 28: Proportion of main types of absence, by SEN primary need, Halton 2022/23

	Overall absence rate	Authorised absence rate	Illness rate	Unauthorised absence rate	Percentage of persistent absentees	Percentage of severely absent pupils	Excluded rate
Autistic spectrum disorder	**11.3%**	**8.4%**	**5.7%**	2.8%	34.8%	3.1%	0.1%
Hearing impairment	9.1%	5.6%	4.0%	3.5%	22.9%	4.2%	0.1%
Moderate learning difficulty	10.3%	5.3%	4.3%	**5.0%**	**35.2%**	2.5%	**0.2%**
Multi-sensory impairment	7.1%	5.5%	4.7%	1.6%	25.0%	0.0%	0.0%
Other difficulty/disability	9.3%	6.8%	5.5%	2.6%	27.8%	1.8%	0.0%
Physical disability	**12.4%**	**9.5%**	**7.3%**	2.9%	**36.5%**	1.4%	0.0%
Profound and multiple learning difficulty	**27.8%**	**12.5%**	**8.7%**	**15.3%**	**54.5%**	**22.7%**	0.0%
Severe learning difficulty	9.5%	**7.7%**	**5.6%**	1.9%	28.6%	0.0%	**0.2%**
Social emotional and mental health	**13.2%**	7.0%	4.4%	**6.3%**	**37.7%**	**8.5%**	**0.7%**
Specific learning difficulty	9.2%	5.5%	4.3%	3.7%	27.8%	1.8%	**0.2%**
Speech language and communications needs	8.3%	5.2%	4.2%	3.1%	26.9%	1.6%	0.1%
Unclassified SEN	10.5%	5.3%	4.1%	**5.2%**	31.4%	**8.6%**	0.1%
Visual impairment	7.4%	4.8%	4.0%	2.6%	25.5%	2.0%	0.0%

Source: Department for Education

Note: blue denotes the top 2-4 percentages for each type of absence

National evidence indicates that children with SEN and/or disabilities are more likely to be excluded from school than their peers. There are two types of exclusion: fixed period exclusion where the young person is unable to return to school for a specific number of days, and permanent exclusion where the young person is unable to return to that school unless overturned by appeal. This pattern is also followed regionally and in Halton.

Figure 29: Proportion of pupils with permanent exclusions and suspensions, 2022/23, by SEN status

			Halton	North West	England
All pupils		Permanent exclusions	0.07%	0.07%	0.05%
		Suspension	4.47%	4.06%	4.13%
SEN provision	No identified SEN	Permanent exclusions	0.04%	0.05%	0.03%
		Suspension	3.17%	2.78%	2.69%
	EHC plan	Permanent exclusions	0.10%	0.14%	0.11%
		Suspension	7.52%	9.45%	10.05%
	SEN support	Permanent exclusions	2.20%	0.21%	0.16%
		Suspension	10.22%	9.98%	11.27%

Source: Department for Education

A levels

Whilst there are relatively low proportions of SEN pupils who go on to study for A levels, the majority of those who do so achieve at least 2 A level results. They do achieve slightly lower grades on average than those without SEN.

Figure 30: A level results, 2022 to 2024

Percentage achieving at least two A levels

Student Groups	Halton			North West			England		
	2022	2023	2024	2022	2023	2024	2022	2023	2024
All pupils	91.6	92.4	89.3	87.0	85.7	86.6	87.5	86.0	86.6
No idenitified SEN	91.7	92.9	89.5	87.1	86.1	86.9	87.8	86.6	87.1
SEN Support	94.4	69.2	90.9	80.8	77.9	80.8	80.3	77.4	80.2
EHCP	50.0	100.0	0.0	77.5	74.2	76.7	78.1	73.5	76.5

Average A level result by student group

Student Groups	Halton			North West			England		
	2022	2023	2024	2022	2023	2024	2022	2023	2024
All pupils	B-	C+	C+	B-	C+	C+	B-	C+	C+
No idenitified SEN	B-	C+	C+	B-	C+	C+	B-	C+	C+
SEN Support	C+	C	C+	B-	C+	C+	B-	C+	C+
EHCP	C-	B+	-	B-	C+	C+	B-	C+	C+

Data Key:

	Performance behind national
	Performa

Source: Department for Education

Education status of 19 year olds

Level two attainment equates to achievement of five or more GCSEs at grades A* to C, or a level two vocational qualification such as BTEC, NVQs or Key Skills level two. Attainment at this level has varied locally but for the most recent years has been lower than comparators. Overall Halton pupils perform worse than the England average although follow the pattern seen regionally and nationally with lower proportions of pupils with SEN achieving level 2 qualifications at age 19.

Note: data release for both level 2 and level 3 by age 19 is end of April each year. As such data in the next two tables only available to 2023 at time of writing this report

		2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
All pupils	Halton	86.27	85.79	86.9	84.36	83.7	82.05	79.64	78.51	77.84	79.05	80.57
	North West	85.84	86.22	86.21	85.05	83.95	82.04	81.31	80.79	80.81	80.41	83.09
	England	84.94	85.58	86.07	85.3	83.63	82.25	81.84	81.42	81.73	81.83	84.26
No SEN	Halton	95.56	93.81	92.78	90.26	89.6	88.32	85.58	82.33	82.36	85.15	85.98
	North West	92.18	92.39	91.56	90.48	89.26	87.11	86.04	85.41	85.28	84.88	87.94
	England	91.79	92.05	91.92	90.9	89.37	87.63	86.78	86.2	86.4	86.47	89.08
Any SEN	Halton	68.32	67.27	66.56	61.43	60.54	48.9	47.93	51.72	49.73	38.89	47.29
	North West	63.65	64.25	64.97	62.05	60.44	52.99	50.73	49.8	50.74	52.11	53.83
	England	64.22	65.19	65.8	64.09	60.11	54.64	52.98	52.62	53.35	54.03	56.32
SEN Support	Halton	74.06	73.08	72.8	69.36	68.78	57.06	54.6	60.45	58.87	44.06	55.26
	North West	69.69	70.03	71.61	69.15	67.89	61.35	60.01	59.55	60.26	61.96	64.27
	England	69.43	70.54	71.68	70.45	66.68	62.05	61.18	61.32	62.34	63.22	66.03
EHCP	Halton	32.88	39.47	31.92	17.78	26.32	20	20.93	22.5	20.46	18.92	23.53
	North West	36.36	38.21	37.08	35.41	33.21	29.33	28.59	26.95	27.6	27.49	28.16
	England	35.9	37.13	36.93	36.35	33.36	30.95	30.07	28.94	28.95	28.99	29.99

Data Key:

	Performance behind national
	Performance better than or equal to national

Source: Department for Education

Figure 31: Proportion of 19 year qualified to level 2, by SEN status, 2013 to 2023

Level 3 qualifications include A-levels, NVQ level 3, GNVQ Advanced and Key Skills level 3. The pattern seen is similar to level 2.

		2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
All pupils	Halton	52.7	53.2	56.5	54.4	55.4	55.1	52.6	49.3	53.8	55.5	50.9
	North West	56.5	57.2	57.9	57.1	57.7	56.9	56.1	55.6	57.4	57.3	56.6
	England	56.3	57.0	57.5	57.2	57.6	57.4	56.9	57.0	59.2	59.9	58.8
no identified SEN	Halton	64.9	64.3	65.2	60.9	62.3	60.6	58.0	53.1	58.2	60.9	55.9
	North West	65.3	66.1	65.7	64.3	64.5	62.5	61.1	60.3	61.9	62.0	61.4
	England	65.7	66.2	65.8	64.9	64.8	63.3	62.2	62.0	64.2	64.9	63.8
Any SEN	Halton	29.2	27.5	26.3	29.0	28.2	25.6	24.0	22.4	26.5	19.4	20.7
	North West	25.8	25.8	27.0	26.3	27.8	25.1	24.1	24.4	27.1	27.2	27.4
	England	27.9	28.2	28.7	28.0	28.2	26.8	25.9	26.6	29.1	29.9	29.9
SEN support	Halton	32.2	32.1	29.5	33.5	32.9	29.9	27.6	24.6	31.2	21.7	23.7
	North West	28.6	28.5	30.2	29.6	31.9	29.4	29.1	29.6	32.7	33.2	33.7
	England	30.6	31.0	31.9	31.2	31.9	31.0	30.7	31.6	34.7	35.8	35.9
EHCP	Halton	11.0	5.3	8.5	4.4	8.8	10.0	9.3	15.0	11.4	10.8	11.8
	North West	13.1	13.3	13.8	13.7	12.9	12.8	12.1	12.3	13.7	12.0	11.9
	England	13.2	13.6	13.4	13.7	13.0	13.2	12.5	12.8	13.9	13.8	13.7

Data Key:

	Performance behind national
	Performance better than or equal to national

Source: Department for Education

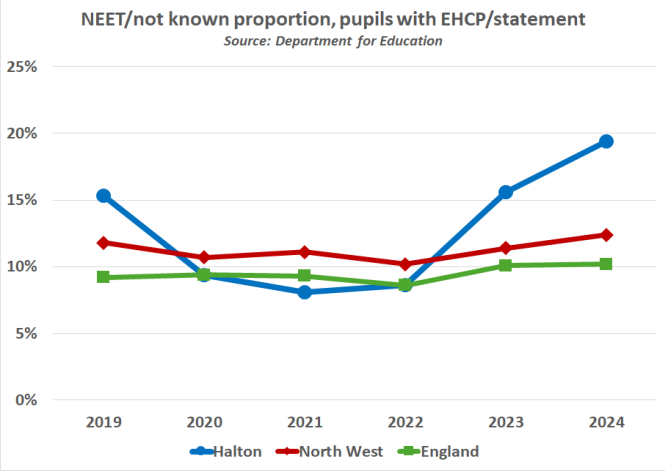
NOT IN EDUCATION, TRAINING OR EMPLOYMENT (NEET)

All young people are expected to stay in education or training until their 18th birthday. Local Authorities are tasked with tracking the activity of academic age 16 & 17 year old residents and supporting those who are not in education, employment or training (NEET).

The Department for Education publish annual measures of the number of young people who are NEET, or whose activity is Not Known to the Local Authority. This measure is an average of performance across December, January and February annually.

Source for all three charts: explore-education-statistics.service.gov.uk

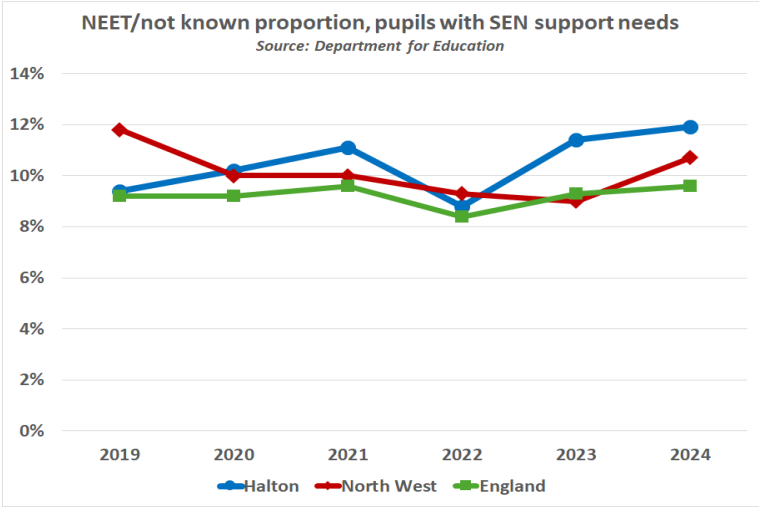
Figure 33: NEET amongst 16 and 17 year olds with EHCP



Halton has seen a greater variation in the NEET and Not Known figures for young people with an Education, Health and Care Plan (EHCP) than Regionally and Nationally. In 2020 NEET and Not Known figures fell below regional figures and matched national performance, remained low for two years, but increased sharply in 2023. This increase continued in 2024.

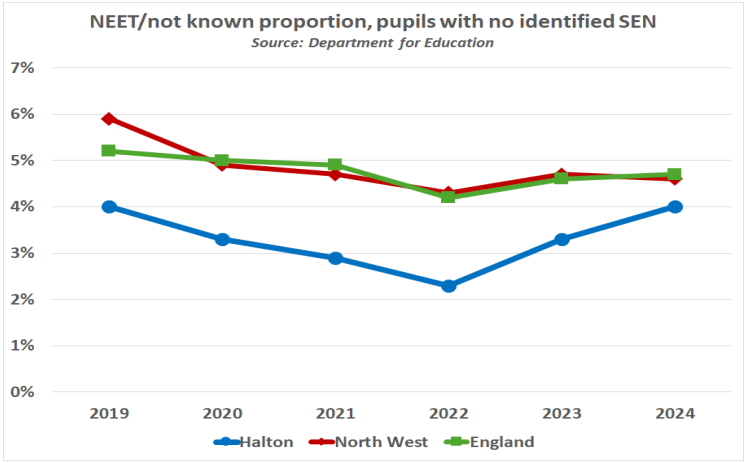
The experience for young people who were identified as SEN Support during their compulsory schooling is more varied, although also rising sharply in 2023. In 2024 it continued to rise although not as sharply as the previous year.

Figure34: NEET amongst 16 and 17 year olds receiving SEN support



Unlike children with an EHCP or SEN support, the proportion of Halton children with no identified SEN who are NEET is lower than comparators. However, here too levels have been increasing recently.

Figure 35: NEET amongst 16 and 17 year olds with no identified SEN

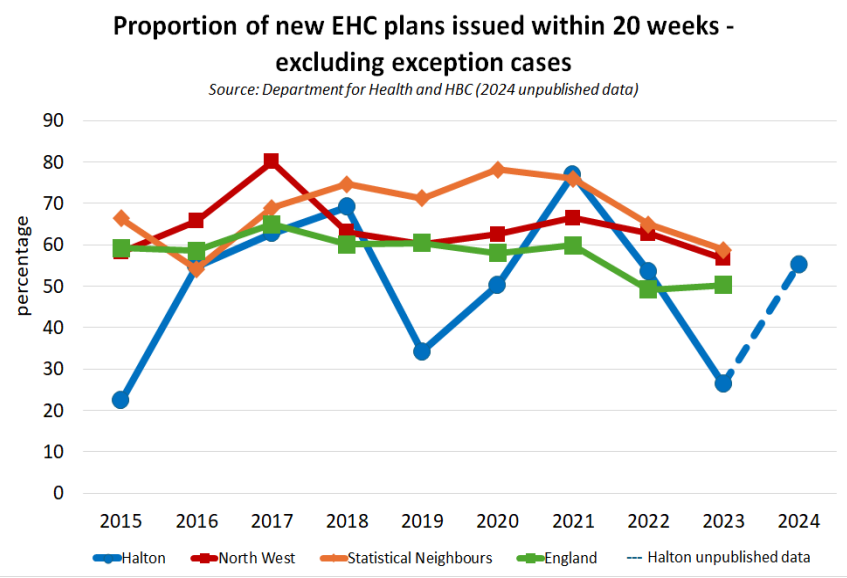


Meeting statutory timelines

It is in the interests of all those concerned that EHC needs assessments are carried out in a timely manner. Regulations set out that the overall time it takes from the local authority receiving a request for an assessment and the final EHC plan being issued (if one is required) should be no longer than 20 weeks.

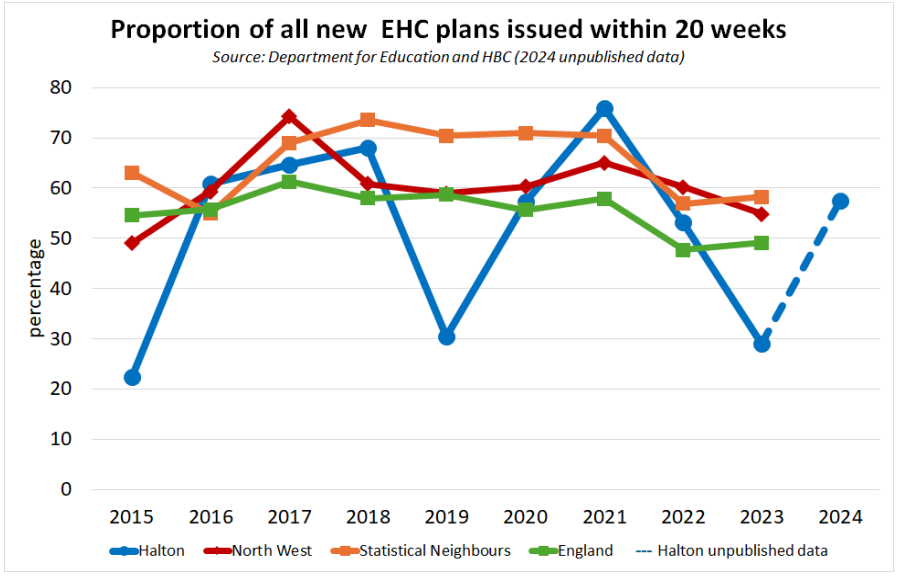
In Halton, for 2023, 26.3% were issued within 20 weeks, excluding exceptional cases where local authorities are allowed to exceed the 20 week time limit, lower than comparators. However, unpublished data shows this has now increased to 55.3% making it on par with 2023 comparators data.

Figure 36: EHC plans issued within 20 weeks, excluding exceptions (all)



Including exceptions, in Halton in 2023 29.0% were issued within 20 weeks, compared to the statistical neighbours average of 60.8%, North West of 54.8%and England of 49.1%. Again, 2024 unpublished data shows Halton rates are now similar to comparators at 57.4%.

Figure 37: EHC plans issued within 20 weeks, including exceptions (all)



Note: for both Halton unpublished rates these are at a point in time, *as of 13th January 2025,* and are subject to change once the published figures are released.

Implementation of the reforms

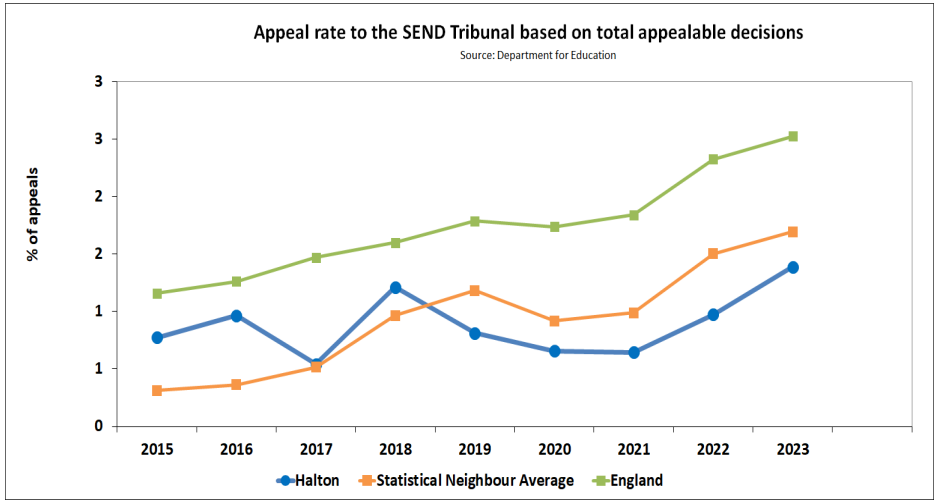
The 2014 Act introduced the biggest reforms to SEND in a generation, aimed at making the system less confrontational, promoting better involvement of parents and increasing focus on outcomes and transition to adult life. An important part of these reforms was the move from statements of SEN to more holistic EHCPs with **93.4%** of Halton children and young people assessed being issued with an EHCP for the first time, compared to 95.8% for the North West and 95% for England.

It is expected that all those who have a statement and who would have continued to have one, are transferred to an EHCP – no-one should lose their statement and not have it replaced with an EHCP simply because the system is changing. Whilst this is the case for the majority as the data above shows, it does mean that a higher, albeit small, percentage of Halton children & young people assessed were not issued with an EHC plan— **6.6%** compared to the statistical neighbours average of 4.7%, North West average of 4.2% and England average of 4.7%. (Number 19 compared to CIPFA average of 20 North West average England average 31).

Appeal rates

If a child's parent or the young person is dissatisfied with their EHC needs assessment or plan, they can appeal to the First-tier (SEN and Disability) Tribunal.

Figure 38: Appeal rate for SEN tribunals



The number of mediation cases held in Halton was 69, and the proportion that went on to appeal was 0.0%. The SEND tribunal appeal rate was 1.4% in Halton, this compares to the average for the statistical neighbours of 1.7% and England average of 2.2%. North West not available due to missing values.

QUALITATIVE INSIGHTS

During February to May 2022 young people aged 11 to 16 years with special educational needs and disabilities, parents, carers, and school staff share their experiences with education and educational systems across England, including what they feel is going well and suggestions for improvements.

The main findings were:

- Young people with special educational needs and disabilities (SEND) reflected on their needs and difficulties at school and described the strategies they use to manage their learning and emotional wellbeing, which included wearing headphones or sunglasses, fidgeting, doodling and accessing sensory spaces.
- Unmet educational support needs were reported to result in a range of reactions from young people, including feeling angry or frustrated, and potentially distracting others, which was sometimes treated as "naughty" behaviour and met with punishment, such as isolation and exclusion.
- Young participants reflected on their unique learning preferences and support needs, highlighting the importance of consulting with individuals to understand and find appropriate ways to accommodate their needs, without them feeling labelled as different.
- Participants felt that schools could be more responsive to young people's needs through: providing more training to help staff identify needs and understand how best to meet them; ensuring support plans were appropriate, up to date and adhered to; being flexible around things like course load, access to safe spaces and uniforms; and ensuring teaching methods considered a range of learning styles and preferences.
- Good communication and relationships between staff and pupils and their families were said to have a positive impact on young people's experiences at school; staff who displayed empathy, respect and care were described as encouraging young people to feel comfortable about asking for help, as well as being better able to understand their individual needs and adapt lessons appropriately.
- Young participants, parents and carers reflected on how schools could promote inclusion, for example through school clubs and buddy systems to build friendship opportunities, recognising a range of achievements beyond academic grades, and raising awareness and understanding of needs and differences.
- Parents and carers shared difficulties with navigating systems to ensure their child's support needs were met, describing stressful, lengthy, complex and inconsistent processes to access appropriate schools and support plans, and calling for greater accountability to ensure guidelines are followed by local authorities.

Educational experiences of young people with special educational needs and disabilities in England - Office for National Statistics (ons.gov.uk)

Halton Co-production Charter

The review work of the Halton Local Offer is led by the Halton SEND Strategic Improvement Board and working groups in co-production with parents, carers and young people. As well as this, feedback on the Local Offer from local parent/carer groups, colleagues and professionals is sought at every opportunity.

Delivering the virtual training sessions 'Getting to Grips with the Local Offer' remains the most popular avenue to receive direct feedback and suggestions for improvement on the Local Offer. These sessions have provided the best opportunity to work with parent/carers and professionals to review and improve the Local Offer in bitesize areas to ensure the information is more robust, comprehensive and accessible.

The Halton Co-production Charter explains how Halton Special Educational Needs and/or Disability (SEND) Strategic Improvement Board sets out its expectations, to encourage all children, young people and their families to work with us as we design, develop and review their SEND services here in Halton. 'It should evidence Halton's commitment to listening to each other and valuing the voice of children and young people and families with lived experience'. This Charter is everyone's business and all partners have the same responsibilities to it. It is set within the context and principles laid out in the articles of the United Nations Convention on the Rights of the Child. It recognises that all Children and Young People have the right to participate in decision-making, as enshrined in law (Section 19 of the Children and Families Act 2014, the SEND Code of Practice 2014, the Mental Capacity Act 2005 and the Care Act 2015)

Review and co-production | Local Offer

Halton Local SEND Partnership

The Halton Local Area SEND Partnership strives to work collaboratively and in a co-productive way to make a real difference to the lives of children and young people that live in Halton. The Halton SEND Strategy 2021 – 2025 has focused the areas of priority for the partnership. The strategy was revised in the Autumn 2024 in light of the November 2023 Ofsted and Care Quality Commission (CQC) joint SEND inspection of the Halton partnership. Halton-SEND-Strategy-2021-2025-revised-February-2024.pdf

The inspection assessed how effective the local education, health and care services are at identifying, and meeting the needs of, children and young people with special educational needs and disabilities (SEND) aged 0 to 25. The purpose of inspection was to:

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

The findings have been published on Ofsted's website in the Area SEND Inspection of Halton Local Area Partnership report. It identified widespread and/or systemic failings leading to significant concerns about the experiences and outcomes of children and young people with special educational needs and/or disabilities (SEND), which the local area partnership must address urgently.

Halton SEND Improvement Plan (Priority Action Plan)

Ofsted and the Care Quality Commission (CQC) inspected the Halton local area

To respond to the Ofsted and CQC inspection the local area partnership, including the council, the integrated care partnership, parents/carers, and wider partners, came together to coproduce a Priority Action Plan, which details the actions that the local area will take to address the five priority actions identified by the inspection. DfE, Ofsted and the Care Quality Commission (CQC) have now approved the local area's SEND improvement plan (Priority Action Plan).

Halton SEND Strategic Improvement Board (HSSIB) spans a broad range of partners, services and stakeholders and has been set up to oversee SEND improvement activity in Halton and the supporting Priority Action Plan and will take forward the learning from the Ofsted and CQC inspection process and the areas for improvement identified through the inspection. To deliver positive change, it is essential that areas for improvement, improvement activity and accountability is shared across this complex partnership.

Figure 39: Priority Action Plan: areas for priority action

Priority 1 – Strategic Oversight and Governance
Leaders at Halton local authority and the NHS Cheshire and Merseyside ICB should cooperate at pace to improve the shared strategic oversight, governance, support and challenge to drive improvements to meet the needs of children and young people with SEND in Halton.
Priority 2 – Cohesive communication / joined up systems
Leaders in the local authority, ICB and education, health and social care providers should improve the efficiency and quality of their information gathering and sharing processes to ensure that children's and young people's needs are understood accurately and met more swiftly and effectively through coordinated approaches.
Priority 3 – Joint Commissioning
Leaders across education, health and social care should improve the joint commissioning of services to ensure that children, young people and their families receive sufficient support to have their needs met effectively.
Priority 4 – Early identification of need and access
Leaders across education, health and social care should urgently improve the early identification of needs and access to specialist health pathways, including the neurodevelopmental assessment pathway and speech and language therapy and the support available, while children and young people wait.
Priority 5 – Education Health and Care Plans
Leaders across education, health and social care should improve the timeliness of new EHC plans and updates to EHC plans following the annual review process, so that, if appropriate, children and young people receive an effective EHC plan within statutory timescales.

Full details of the Priority Action Plan can be found at Halton-Final-Priority-Action-Plan-signed.pdf and of the HSSIB at Useful Information & Documents | Local Offer

for more on Halton's Local Offer: https://localoffer.haltonchildrenstrust.co.uk/

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- Linda Edwards, Business Intelligence Manager, Midland & Lancashire Commissioning Support Unit working on behalf of Cheshire & Merseysdie Integrated Care Board, Halton Place

The draft report was sent to key partners for comment prior to being published.

Version Control

2023 report assessed and refreshed data accessing	May 2024
Draft 1	September 2024
Draft 2	November 2024
Draft 3	February 2025
Draft 4: final draft for stakeholder consultation	February-March 2025
Inclusion of new school absence data	April 2025
Inclusion of Level 2 and level 3 qualification by age 19 new data	May 2025
Final Version published on Halton Borough Council JSNA webpage	May 2025
Published on Halton Local Offer website	May 2025

Data sources

Pages 3 and 4: Office for Health Improvement & Disparities (OHID) Fingertips tool

Page 5: Family Resource Survey and Office for National Statistics (ONS) mid-year population estimates

Page 5 to 7: Integrated Care Board (ICB) Combined Intelligence for Population Health Action (CIPHA) Enhanced case Finding report

Page 8: ICB CIPHA Adjusted Clinical Group (ACG) report

Page 9: Nomis website and Department for Works & Pensions data via StatXplore tool

Pages 10-14,17-19, 21-25 Department for Education Explore tool

Pages 15, 16. 20: Department for Education Local Area Interactive Tool (LAIT)

Additional data was provided by Halton Borough Council Children's Directorate:

Page 11: SEN status at electoral ward level from School Census

Page 24: unpublished 2024 data provided by Halton Borough Council Children's Directorate

Caveats when interpreting the data:

As the data for this report has come from several different sources the time periods differ. Some of a financial year e.g. 2023/24, some a point in time 'as at January 2024, other a calendar year. CIPHA utilises GP records which are updated daily. For this we have indicated the day the data was last refreshed e.g. 15/08/2024.

We have used the latest published or locally available data available at the time of writing. Data is not published at a single point each year, even from the same source.

The pandemic affected both the publication and collection of some education data. For this reason data for 2019/20 and 2020/21 were not available for every educational; outcome measure covered in this report.

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