

**Joint Strategic Needs Assessment of Special Educational Needs and  
Disability in Barnsley**

**Update 2022/23**

**Contents**

Key points ..... 3

Introduction..... 4

1. Definition of population ..... 4

2. SEND population in Barnsley ..... 6

3. The Local Strategic Approach ..... 15

4. A Life Course View ..... 19

5 Attainment and Absence ..... 21

5. Support Services ..... 31

6. Recommendations..... 31

## Key points

- As at January 2023 Barnsley maintained 2443 Education, Health and Care Plans (EHCPs) for children and young people between the ages of 0 and 25.
- The January 2023 school census identified **5731** children and young people of school age as being on the SEND register in Barnsley schools - **around 16.2% of all pupils**. This includes 1636 children (4.6% of the school population) with EHCPs and 4095 children (11.6% of the school population) children receiving SEN support.
- The most common primary needs of children and young people with SEND is speech, language, and communication needs (SLCN), Social, Emotional and Mental Health needs (SEMH), Moderate Learning Difficulty (MLD) and Autistic Spectrum Disorder (ASD).
- For those with an EHCP the most common need is Autistic Spectrum disorder (ASD) whilst for those receiving SEN Support the most common need is SLCN.
- There are more boys than girls with an EHC plan and SEN support, this is in line with the national average.
- There is a clear link between poverty and SEND need. Families living in the most deprived areas of Barnsley are disproportionately more likely to have a child with SEND.
- Comparing data for Barnsley to national averages shows that Barnsley has a higher than average percentage of pupils with EHCPs and a lower than average percentage of pupils receiving SEN support. Barnsley now has a higher than average percentage of pupils with a primary need of Specific Learning Difficulties (SPLD) compared to national figures for both pupils with EHCPs and SEN Support.
- Speech, Language and Communication need is the most common primary need in primary school children in Barnsley (31.8% of state funded pupils).
- Moderate Learning difficulty is the most common primary need in secondary school children in Barnsley (24.1% of state funded pupils).
- 129 children are known to early years' settings with special educational needs. Data from early years assessment and development checks show fewer children with an EHCP/SEN support achieve a 'good level of development' at foundation stage when compared with children with no SEN.
- Those living in Barnsley with SEND are more likely to experience fixed term exclusion than those without SEND and are more likely to be persistently absent from school.
- There is now widespread early help support for children and young people's mental health and emotional health and wellbeing under the new joined up service, Branching minds.
- Strategic and operational work in Barnsley is moving at a great pace to improve health, educational and social outcomes for families affected by SEND.

## Introduction

The Joint Strategic Needs Assessment (JSNA) is the means by which the Health and Well-being Board understands and agrees the needs of local people. This document forms part of the JSNA and will inform joint commissioning decisions made for children with SEN and Disabilities (SEND). The priorities identified in the report will ensure that resources are allocated to make the greatest impact, and the right support is available to build effective support plans for children and young adults with SEN and Disabilities in Barnsley.

Nationally children and young people with SEND have poorer outcomes than their non-SEND peers. In Barnsley we want to better understand the needs of our SEND population so that we can commission appropriate services and provision to meet their needs and improve outcomes.

This JSNA represents an accurate picture of known data and information available as of winter 2023.

## 1. Definition of population

### 1.1. Special Educational Needs

The Special Educational Needs and Disability (SEND) Code of Practice defines SEN as<sup>1</sup>:

- A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her.
- A child of compulsory school age or a young person has a learning difficulty or disability if he or she: Has a significantly greater difficulty in learning than the majority of others of the same age, or has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.
- For children aged two or more, special educational provision is educational or training provision that is additional to or different from that made for other children or young people of the same age by mainstream schools, maintained nursery schools, mainstream post-16 institutions or by relevant early years providers. For a child under two years of age, special educational provision means educational provision of any kind.

The main categories of SEN include:

- Communication and interaction

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<sup>1</sup> The Children & Families Act, 2014. Available at: <http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted>

- Cognition and learning
- Social, emotional, and mental health difficulties
- Physical and / or sensory needs

## 1.2. Disability

The Equality Act (2010) defines a disability as<sup>2</sup>:

*“A physical or mental impairment that has a ‘substantial’ (completing a task takes much longer than is usually would and ‘long-term’ (12 months or more) negative effect on ability to do normal daily activities. Sensory impairments and long-term conditions are included in this definition.*

There is overlap with young people who experience SEN also having a disability however not all young people with a disability experience SEN. In educational settings if a child or young person requires special educational provision, they would fall under the SEN umbrella.

For the purposes of this document, SEND will be used to discuss the population, unless explicitly stated otherwise.

## 1.3. National Picture

It is estimated that 11% of children nationally have a recognised disability, an increase of three percentage points, from 8% in 2018 to 2019. Of those with a disability social/behavioural was the most common type of disability (50%) followed by mental health (30%), then learning impairment (26%)<sup>3</sup>. As of January 2023, 17.5% of school aged pupils have a special educational need<sup>4</sup>. Of those, the most common presenting need was *Speech Language and Communication* (SLCN) (24% of all pupils with SEN), followed by *Social, Emotional and Mental Health* (SEMH) (20%) then *Moderate Learning Difficulty* (MLD) (15%)<sup>4</sup>. For those with education, health, and care plans (EHCPs), the most common primary need is autism spectrum disorder (ASD). 32% of these pupils have this as their primary need whilst for SEN Support *Speech Language and Communication* (SLCN) is the most common need (26%)<sup>4</sup>.

### 1.3.1. A Changing Landscape

On 1<sup>st</sup> September 2014, the Children and Families Act came into effect and with it a few changes to how local authorities support children and young people with SEND and their families, particularly around assessment, planning and involvement in their care. One of the biggest changes was the age range expanding to include children and young people from birth to age 25. Additionally, local authorities are required to provide children, young people and their families with information and advice as well as details about services

<sup>2</sup> The Equality Act, 2010. Available at: <https://www.gov.uk/definition-of-disability-under-equality-act-2010>

<sup>3</sup> Department for Work and Pensions. Family Resources Survey: financial year 2021/22. Available at: <https://www.gov.uk/government/statistics/family-resources-survey-financial-year-2021-to-2022/family-resources-survey-financial-year-2021-to-2022>

<sup>4</sup> Department for Education. Special educational needs in England: January 2023. Available at: <https://www.gov.uk/government/statistics/special-educational-needs-in-england-january-2023>

they can access in the local area, known as the Local Offer. Barnsley's Local Offer can be found [here](#).

Under the new guidance, children, and young people (CYP) can be offered SEN support from an educational provider, such as their nursery or school, which should meet their needs. SEN Support is managed by education providers and works on the principles of; assess, plan, do and review. For those requiring a more intensive level of specialist help, local authorities will carry out an education, health, and care assessment. The outcome of this assessment could be an EHCP, which brings health, education and social care needs into one legal document<sup>5</sup>. Children and families should be involved in all stages of this process<sup>6</sup>. Further information about SEN Support and EHCPs can be found in the [SEND Code of Practice](#).

Nationally, the number of pupils in schools with a Special Educational Need (SEN) has been increasing over recent years and the overall figure stands at 1,572,555 children (17.5% of total pupil population). Of those, 4.3% (389,171 pupils) have an EHCP and 1,183,384 require SEN support (13.0% of pupil population)<sup>7</sup>.

## 1.4 SEND and Equity

Children and young people with SEND often face multiple barriers which can make it more challenging for them to reach their full potential. They are more likely to grow up and continue to live in poverty, more likely to be excluded from school and less likely than other children to attain good educational outcomes<sup>8</sup>. This impacts on employment prospects, life chances and health outcomes<sup>9</sup>. Timely identification of those children and young people to provide quality support can help reduce the inequality of outcomes that they face. SEND and inequities are covered in more detail in the next section.

## 2. SEND population in Barnsley

### 2.1 Local context

Barnsley is home to an estimated 67,000 children and young people (aged 0-24) an increase of 11,200 (16.7%) from 2011<sup>10</sup>.

There are around 35,250 pupils on roll across Barnsley state funded schools with 5,584 pupils on the current SEND register accounting for 15.8% of all pupils. This includes only

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<sup>5</sup> Department for Education & Department of Health. Special educational needs and disability code of practice: 0-25 years. 2015 [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/398815/SEND\\_Code\\_of\\_Practice\\_January\\_2015.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf)

<sup>6</sup> Department for Education. Special educational needs and disabilities: a guide for parents and carers. 2014. Available at: <https://www.gov.uk/government/publications/send-guide-for-parents-and-carers>

<sup>7</sup> Department for Education. Special educational needs in England: June 2023. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england>

<sup>8</sup> Shaw, B, Bernardes, E, Trethewey, A, Menzies, L. Special educational needs, and their links to poverty. Joseph Rowntree Foundation, 2016.

<sup>9</sup> Field, F. The foundation years: preventing poor children becoming poor adults. HM Government, 2010.

<sup>10</sup> Office for National Statistics Population and house household estimates: census 2021. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationandhouseholdestimatesenglandandwalescensus2021>

those who have been identified and placed on the register and may be an underestimate of actual need.

14.9% (3,167) of children at primary school, 14.3% (1,941) of secondary school pupils, and 67.9% (38) of those at an Alternative Provision school have an identified SEN.

Due to the steady population increase, if the proportion of CYP with SEND remains the same, this will result in an increase in actual numbers, year on year.

There are 1489 children and young people attending Barnsley schools with Education Health and Care Plans (EHCP) and a further 4081 pupils identified as receiving SEN Support. Percentage breakdowns are as follows:

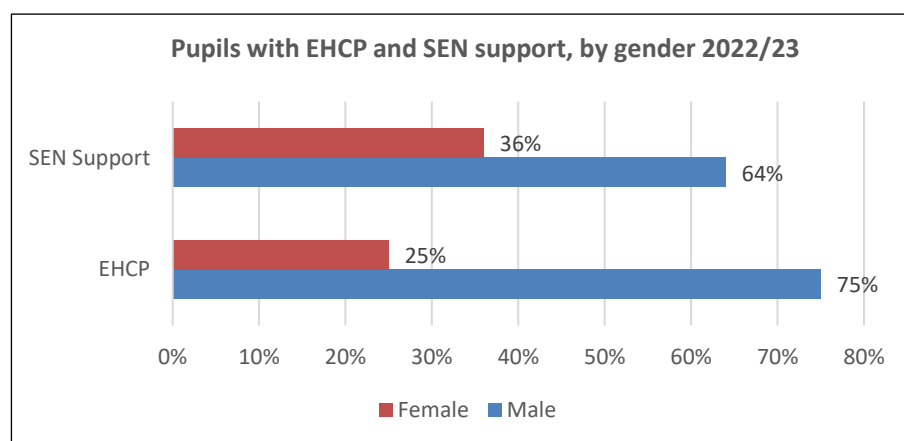
- EHCP 1489 (4.2%)
- SEN support 4081 (11.6%)

(Source: January 2023 School Census)

## **Gender**

The chart below breaks down the percentage of pupils in state funded schools with an EHCP and SEN support by gender. The proportion of boys with an EHCP and SEN support is significantly higher than girls in Barnsley, with boys representing three quarters of pupils with EHCP and two thirds of pupils with SEN support. This is in line with national averages. The ratio of boys to girls receiving CAMHS support for ASD is approximately 2:1.

*Chart 1: Pupils in state funded schools with EHCP and SEN support by gender*



Whilst the overall proportion of pupils with SEND in Barnsley has been rising since 2021 it remains below the national average.

In comparison to the national and regional average, Barnsley has a higher percentage of SEND pupils with an EHCP, 4.6% compared to 4.3% (national) and 3.8% (regional) and this has continued to increase since 2018. However, in contrast to national and regional trends, the percentage of pupils with SEN support is at 11.6%, below the national

average of 13.0% and the regional average of 13.5%. These differences are reflected in primary schools with 12.2% of pupils having SEN Support in Barnsley compared to 13.5% nationally and 14.3% regionally. In secondary schools there are 10.9% of pupils with SEN Support in comparison to 12.4% nationally and 12.6% regionally. In recognition of the need to understand early identification and ensure the graduated response is embedded in our schools and settings, the local authority has invested in a SEND Improvement Service.

This service focuses specifically on SEN Support in Barnsley. This is a free service to local schools and settings supporting early years through to Post 16 and this work has seen increases in the percentage of children and young people receiving SEN Support, closing the gap to the national average.

### **Ethnicity**

Barnsley's 0-24 population is predominantly White British (92.5%) with only 7.5% from Black, Asian and Minority (BAME) groups<sup>11</sup>. Across all educational settings, the ethnic group with the highest proportion of children with SEN is White British (16.5%), followed by Mixed ethnicities (14.6%), Black ethnicities (10.8%), Other White ethnicities (9.2%), Asian ethnicities (6.0%) and Other ethnicities (5.7%), although this is not statistically significant due to the smaller numbers within BAME groups.

7.8% of primary school children and 5.7% of secondary school children in Barnsley do not have English as their first language. (DfE, 2022/23).<sup>12</sup>

### **Deprivation, poverty, and local inequalities**

There is a complex relationship between poverty and SEND (as shown in Chart 2, below). Children from low-income families are more likely to be born with or develop SEND and those with SEND are more likely to experience poverty<sup>13</sup>. The proportion of children with SEND who are living in poverty also increases with age. Access to high quality early years provision has a particularly positive impact on those children with SEND but also those growing up in poverty who are at higher risk of SEND.

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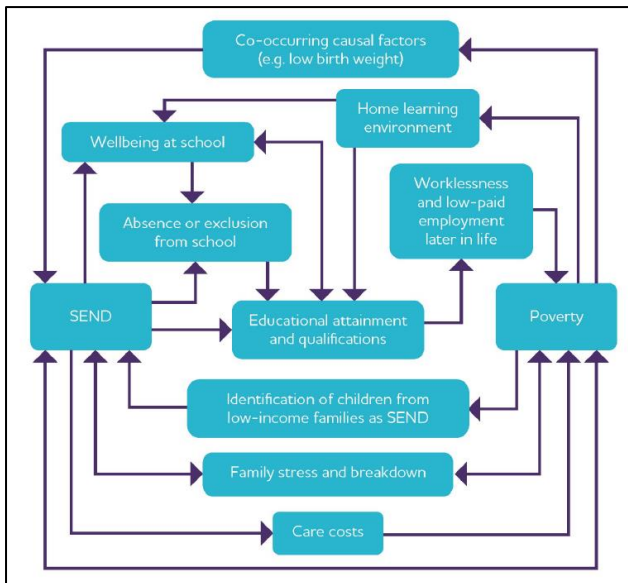
<sup>11</sup> 2021 Census. Available at: <https://www.ons.gov.uk/census/>

<sup>12</sup> Department for Education (2023). School pupils and their characteristics. Available at: (<https://explore-education-statistics.service.gov.uk/data-tables/school-pupils-and-their-characteristics/>)

<sup>13</sup> Shaw, B, Bernardes, E, Trethewey, A, Menzies, L. Special educational needs and their links to poverty. Joseph Rowntree Foundation, 2016.



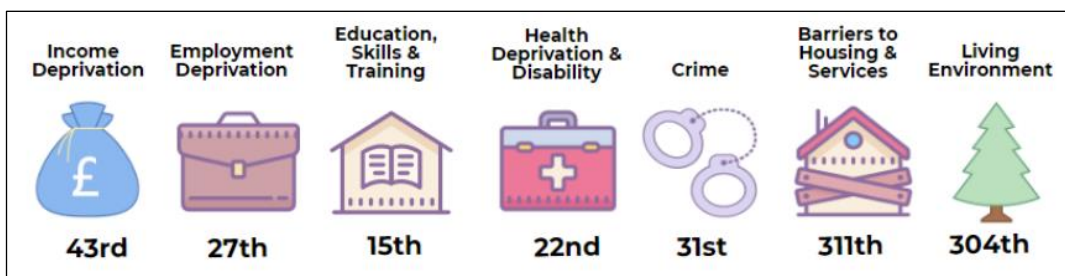
Chart 2: Links between SEND and poverty



(From Shaw et al: *Special educational needs and their links to poverty*, 2016).

There are several factors linked to poverty which increase the likelihood of SEND, for example smoking and alcohol consumption during pregnancy, and low birth weight. An estimated 29.7% of children in Barnsley (15,300 individuals) are growing up in poverty, when housing costs have been accounted for.<sup>14</sup>

Barnsley is the 38<sup>th</sup> most deprived local authority in England<sup>15</sup> (out of 317) with 21.8% of its Lower Super Output Areas (LSOAs) being amongst the 10% most deprived in England. Where 1 is most deprived, Barnsley is ranked 15<sup>th</sup> for education, skills, and training, 22<sup>nd</sup> for health deprivation and disability, and 27<sup>th</sup> for employment deprivation.



Free School Meals (FSMs) is a commonly used proxy measure for socio-economic disadvantage, during childhood. Eligibility for FSMs has increased year-on-year since 2017/18 both locally and nationally. In Barnsley, 29% of school children aged 5 to 16, are eligible for FSMs, but this rises to 46.9% of children who have an EHCP and 44.2% of those with SEND support (Source: January 2023 School Census).

<sup>14</sup> DWP (2022) Children in Low-income Families: local area statistics. Available here:

<https://www.gov.uk/government/statistics/children-in-low-income-families-local-area-statistics-2014-to-2022>

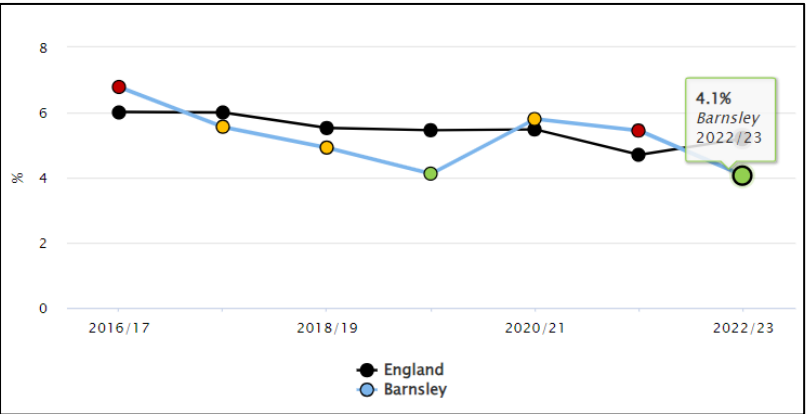
<sup>15</sup> Barnsley: Our Borough profile. 2019. Available at: <https://www.barnsley.gov.uk/services/our-council/research-data-and-statistics/our-borough-profile/>

In Barnsley, in an average class of 30 pupils, the number eligible for FSM has increased from around 5.5 in 2017/18 to almost 9 in 2022/23.



A total of 80% of Barnsley’s secondary schools are rated good or outstanding by Ofsted. This is broadly in line with the regional (81%) and national (82%) rates. 84.4% of Barnsley’s primary schools are rated good or outstanding by Ofsted. This is below the regional average (88%) and the national average (90%). 96% of early years childcare settings are rated good or outstanding by Ofsted. This is slightly below the national average of 97%. (Source: GOV.uk Management information as of 30 September 2023).

In 2022/23, the proportion of 16 to 17-year-olds NEET( not in education, employment, or training)/Not known decreased to 4.1%. This is below regional and national averages (6.5% and 5.2% respectively).



### 2.2. Types of SEN needs locally

There are four main areas of need.

- Communication & Interaction
- Cognition & Learning
- Social, Emotional & Mental Health Difficulties
- Physical and/or Sensory Needs

These are split into twelve primary needs.

Table 1 below provides information on primary need in both primary and secondary schools in Barnsley, with national and statistical neighbour figures for comparison.

Table 1: Percentage of pupils with SEN by primary need January 2023

Percentage of pupils with SEN identified by primary need, comparative data January 2023						
SEN Description	Overall		Secondary Schools		Primary Schools	
	Barnsley	National	Barnsley	National	Barnsley	National
Moderate learning difficulty	16.7%	15.3%	24.1%	17.0%	13.6%	15.5%
Social, Emotional & Mental Health	20.4%	19.6%	23.0%	23.6%	17.9%	17.5%
Speech, Language & Communication Needs	22.3%	23.7%	9.1%	12.6%	31.8%	34.4%
Autistic Spectrum Disorder	16.3%	14.2%	17.1%	13.6%	14.4%	10.6%
Specific Learning Difficulty	14.6%	11.7%	17.1%	18.7%	14.0%	8.9%
Other Difficulty/Disability	2.4%	3.6%	2.5%	5.0%	2.5%	3.0%
Physical Disability	2.6%	2.5%	2.9%	2.7%	2.4%	2.4%
Severe Learning Difficulty	1.0%	2.3%	0.2%	0.3%	0.7%	0.5%
Hearing Impairment	1.6%	1.6%	2.2%	2.0%	1.3%	1.5%
NSA/Not recorded/Blank	0.3%	3.4%	0.3%	2.9%	0.2%	4.5%
Visual Impairment	1.1%	0.9%	1.2%	1.2%	0.9%	0.8%
Profound & Multiple Learning Difficulty	0.5%	0.8%	0.2%	0.1%	0.1%	0.2%
Multi-Sensory Impairment	0.2%	0.3%	0.2%	0.3%	0.3%	0.3%
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

\* Please note, overall percentages include special schools which are not broken down in the table.

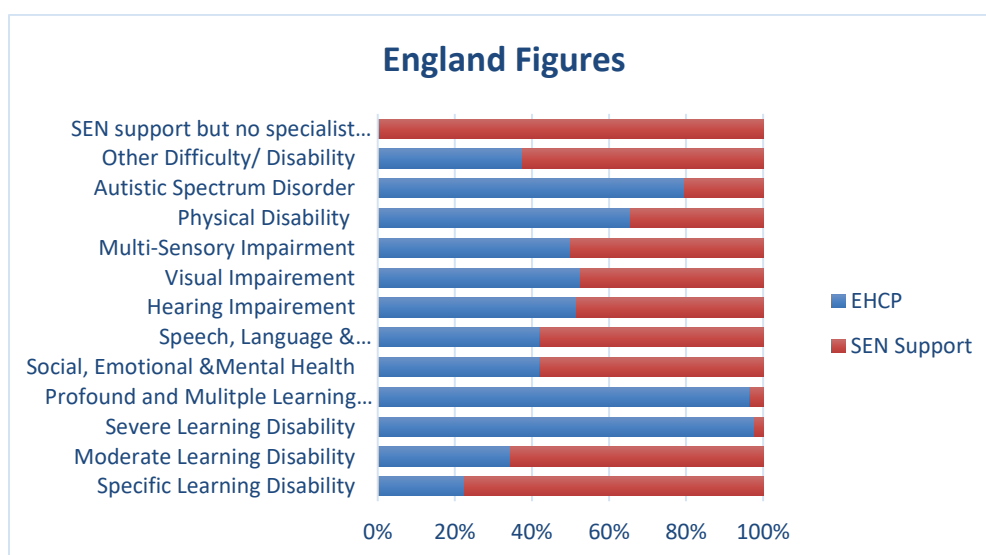
Speech Language and Communication Needs (SLCN), Social, Emotional and Mental Health Needs (SEMH), Moderate Learning Difficulty (MLD) and Autistic Spectrum Disorder (ASD) needs are currently the most prevalent primary needs for all pupils with SEND in Barnsley. The number of pupils with ASD needs has doubled since 2019. Other data in the table shows:

- Barnsley has a higher proportion of pupils with Specific Learning Difficulty as a primary need than the national average, particularly in primary schools.
- There is a higher proportion of Moderate Learning Disability as a primary need in Barnsley, compared to national. This lower than national in primary but much higher at secondary school level.

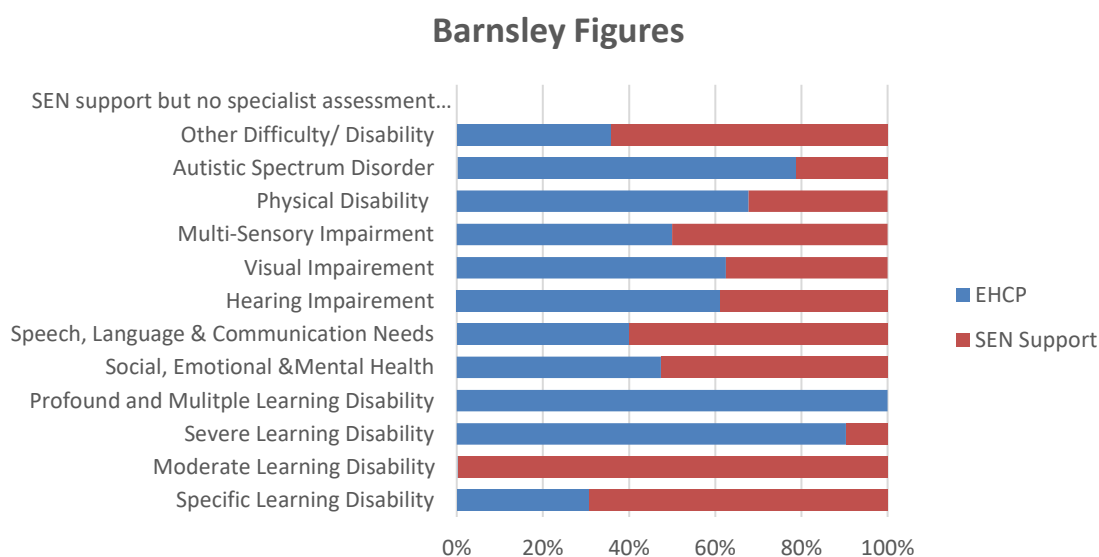
- In primary schools the predominate primary needs are Speech, Language and Communication (SLCN), Social, Emotional and Mental Health (SEMH) and Autistic Spectrum Disorder (ASD). The percentage of Specific Learning Difficulty (SPD) is higher than national figures but lower for Speech, Language and Communication Needs (SLCN).
- In secondary schools the predominate need is Moderate Learning Disability (MLD) followed by Social, Emotional and Mental Health (SEMH). In Barnsley, the proportion of MLD in secondary school is 7% points higher than national.
- In special schools 27.9% have Autistic Spectrum Disorder (ASD) as their primary need and 22.6% have Social, Emotional and Mental Health (SEMH).

### **Percentage of ECHP and SEN Support, 2022/23**

*Chart 4: Percentage of ECHP and SEN Support (England)*



*Chart 5: Percentage of ECHP and SEN Support (Barnsley)*



When comparing the percentage of pupils with each primary diagnosis (SEND-support or EHCP) in Barnsley to England figures, there are some clear differences. Barnsley has a higher proportion of pupils with social, emotional and mental health needs supported with an EHCP compared to England. Barnsley also has a higher proportion of pupils with a specific learning need and autistic spectrum disorder.

Compared to England, Barnsley has comparatively high levels of pupils with specific learning difficulty and moderate learning difficulty receiving SEN support.

### 2.2.3 Differences by age – total plans maintained

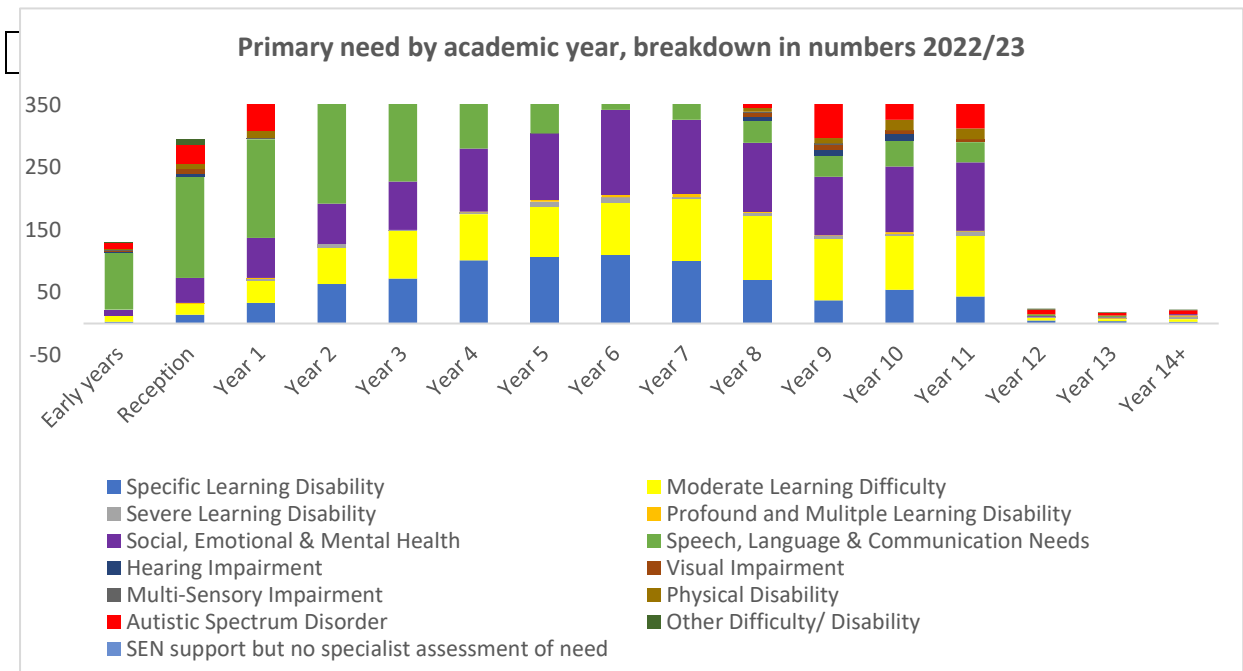
- The percentage of new and current children with EHCPs who are under the age of 5 in Barnsley is lower than the national figures. Nationally around 24.7% of new EHCPs are provided to children under five compared to around 18.4% in Barnsley, which has increased from around 14% in 2019.
- The percentage of new EHCPs issued for the 5-10 age group decreased from 48.0% to 42.9% and is now below the national average of 44.7% (down from 46.2%).
- The percentage of new EHCPs issued for children aged 11-15 increased further from 29.6% to 33.5%, remaining above the national average of 25.7% (up slightly from 25.5%).
- The percentage of new EHCPs issued for young people aged 16-19 saw an increase from 4.1% to 5.0% and is now above the national average of 4.7% (down slightly from 4.8%).
- The percentage of new EHCPs issued for the 20-25 group remained at 0% whilst nationally there was a further decrease from 0.3% to 0.2%<sup>16</sup>.

The chart below illustrates a breakdown of the number of learners within each year group, with each bar representing all those with EHCP and SEN support in that year. It shows that speech, language, and communication needs are common within the younger age group and social, emotional, and mental health needs are more common among older learners. Moderate learning difficulty increases across the year groups.

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<sup>16</sup> Department of Education. Education, health, and care plans, 2023. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/education-health-and-care-plans>

Chart 6: Primary need by academic year (2022/23)



Source: Department for Education. Special educational needs in England 2022/23. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england>

#### 2.2.4. Local Inequalities and SEND need

In Barnsley much of the identified SEND need is concentrated within the more deprived areas. St Helens Ward has the highest number of EHCP in Barnsley and the highest percentage on SEN Support.

As table 2 shows, children living in St Helen's, Stairfoot, Dearne South, and North East are the most likely to be receiving SEN support. These are amongst the wards with the highest proportion of deprived LSOAs. Those in Old Town, Dodworth and Darton East are the least likely to receive SEN Support.

Table 2: EHCP and SEN Support by ward (top ten wards with highest percentages highlighted)

Central	4.09%	4.36%
Cudworth	4.83%	4.51%
Darfield	4.69%	4.75%
Darton East	3.28%	2.51%
Darton West	3.75%	3.24%
Dearne North	4.96%	5.92%
Dearne South	5.36%	6.14%
Dodworth	3.22%	2.63%
Hoyland Milton	4.36%	5.90%
Kingstone	3.82%	4.43%
Monk Bretton	5.90%	5.36%
North East	6.03%	5.94%
Old Town	3.08%	2.73%
Penistone East	3.28%	4.00%
Penistone West	4.16%	4.92%
Rockingham	3.95%	4.04%
Royston	5.70%	4.48%
St Helens	7.98%	6.26%
Stairfoot	5.70%	6.14%
Wombwell	5.63%	5.77%
Worsborough	3.89%	4.17%

Source: January 2023 school census.

Rates of EHCP by ward have all increased from 2016 to 2019. Wards with the highest rates of EHCPs are St Helens, North East, Monk Bretton, Royston and Stairfoot.

As SEN support and EHCP represent differing levels of support for children with SEND it may be expected that those wards with the highest percentages of CYP with SEN support would also be those with the highest percentages of CYP with EHCP. We can see some of this correlation above.

Nationally, children from low-income families are more likely to be identified as having SEND and are less likely to receive appropriate support or interventions that meet their needs. This is in part due to parents from deprived backgrounds not always having the means to obtain support as a result of structural inequality. This can also result in them being less likely to receive support when seeking it<sup>17</sup>. It is unclear if this inverse care picture is being replicated in Barnsley, however some of the local data would suggest this may be an issue. Further work is needed to understand the reasons for these disparities and whether all CYP with SEND are being supported appropriately.

### 3. The Local Strategic Approach

<sup>17</sup> Shaw, B, Bernardes, E, Trethewey, A, Menzies, L. Special educational needs and their links to poverty. Joseph Rowntree Foundation, 2016.

### 3.1 Action planning

Barnsley's local SEND Strategy was published in 2022 and sets out the Local Area's vision for children and young people who have special educational needs and/or disabilities, along with the priorities identified by leaders within the local area.

The vision articulates local area leaders' commitment to:

- Developing a well-planned continuum of provision and integrated services which work closely with children, young people, and their families to meet their needs
- Early intervention and prevention – the right service at the right time
- Supporting children and young people to live as ordinary a life as possible in their local community
- Create services, schools and settings which have the capacity and confidence to deliver high quality provision, which improves children and young people's educational and health outcomes and enables their access to social opportunities

The SEND Strategy has identified 5 key priorities for improvement. The Local Area Inclusion Plan is the working document to ensure that these priorities are achieved.

- **Priority 1:** Independent Living
- **Priority 2:** Community Inclusion
- **Priority 3:** Health and Wellbeing
- **Priority 4:** Education and Employment
- **Priority 5:** Choice and Control

The Local Area Partnership Board acts as the strategic driver for system changes to improve local area SEND arrangements.

### 3.2 Children, Young People and Parent/ Carers Voice

#### 3.2.1 Parents, Carers and Families

It was not possible to engage with parents and carers as part of this needs assessment project. This is an area of work we know requires improvement and accelerated progress. As part of our work to capture the voice of parents and carers a survey was co-produced with parents, carers and SEND professionals from across the local area to gather opinion on how we should move forward with co-production. Parent/carers groups from across the local area were involved in shaping the survey as well as its



development. We had a much higher response rate than usual for online surveys and very positive results (249 responses). A plan is now being made about how to move forward using the results of the survey.

There have been examples of parent/carer involvement and co-production. The SEND Strategy 2022/2025 was co-produced during 2022 and launched in December 2022. A total of 130 parents, carers and young people were involved in setting the priorities and shaping the future direction of SEND services.

As part of the Family Hubs development and Start for Life offer (for help and support for families from conception until age 19 or 25 years for children and young people with SEND), there has been a series of questionnaires and surveys to help shape the offer. A parent/carer panel has been established and there has been active involvement with parents and carers in local communities.

### 3.2.2 Strength and Needs assessment 0-19 (25 SEND)

In 2023, Barnsley council identified a need to develop a more detailed understanding of local strengths and needs amongst children and families to help plan and prioritise future services and to inform the ongoing development of the Healthy Child programme. Therefore, Qa Research were commissioned to conduct a strengths and needs assessment covering local children from 0-19 (25 SEND) and their families. Primary research was undertaken as part of this assessment via a parents/carers survey, focus group discussions and telephone interviews. Findings from the needs assessment included:

- There are some perceived gaps in terms of supporting SEND children to be school-ready. Families with SEND children are more likely to *disagree* that they had enough support and information to enable their child to be school ready (32% compared to 20% of families with non-SEND children) highlighting a potential area of disadvantage at the start of school life for these children.
- Those living in Barnsley with experience of SEND are more likely to experience fixed term exclusion than those without SEND.
- The sheer complexity of the system of services for children with SEND was a key theme expressed by families. Parents and carers often feel left to figure things out for themselves or learn from other families in similar situations; this knowledge-sharing was prominent within support groups and was an enormous source of solidarity and strength for families.
- Main areas of improvement/concerns suggested by parents were a wider range of SEND specific support groups and activities across Barnsley – travelling is a barrier for some families.

### 3.2.3 Recommendations for improvement from the young people

Small qualitative focus groups and interviews have been conducted with local young people with experience of SEND by our Targeted Youth Support Service. Although not a representative sample, this data provides useful insight into some of the experiences of our SEND population.

Themes to emerge from the data were: education, respite, friendships and social activities, transition to adulthood, after education, employment, health, and wellbeing.

The young people made a number of recommendations for each of the themes. They are as follows:

#### *Education*

- More needs to be done to tackle issues of bullying.
- More training on disability is needed for all school staff.
- Students should be taught about disability to develop empathy and understanding.

#### *Respite*

- Have different provision/ different activity offers in respite provision for young people with different needs and abilities.

#### *Friendships and social activities*

- Transport is a barrier to participation, sometimes the provision is there but young people cannot access it.
- Young people would like to be able to have more integration of SEND and mainstream groups, especially for those young people who do not necessarily identify as having a disability.
- Young people want to be able to access “normal” young person social activities with their friends.
- Need for more provision for older young people.

#### *Transition to adulthood*

- Most young people were not aware what transition to/preparation for adulthood is.
- They want more support in preparation for living alone before the need to do it arises.

#### *After education*

- Young people worry about and want more preparation for when they need to live independently/without their parents.
- Young people worry about what they will be able to do when they cannot access youth provisions anymore, many of them plan their weeks around the activities.

#### *Employment*

- Have more opportunities for work experience that has the potential to lead to employment.
- More training/support so that workplaces can support young people with SEND.

### Health and wellbeing

- Better/ more consistent mental health support is needed.
- More specialist sexual health/education services are needed.
- More availability/flexibility of services such as TADS.

(Reproduced with kind permission from BMBC Targeted Youth Support).

## 4. A Life Course View

### 4.1. Maternal and birth factors

There are several different maternal and neonatal factors which influence the incidence of SEND. These include smoking, alcohol, and drug use during pregnancy. A higher proportion of pregnant women in Barnsley are smoking at time of delivery compared to regional and national figures, 15% compared to 9% England, and 12% Yorkshire and the Humber. This has gradually fallen from 2019.

Babies born at low birth weight or born premature have a higher prevalence of SEND. Low birth rates for Barnsley are similar to national figures of around 9% of term babies<sup>18</sup>.

	Central	Cudworth	Darfield	Darton East	Darton West	Deane North	Deane South	Dodworth	Hoyland Milton	Kingstone	Monk Bretton	North East	Old Town	Penistone East	Penistone West	Rockingham	Royston	St Helens	Stairfoot	Wombwell	Worsbrough	Barnsley (2022/23)	England	
% maternal obesity	31%	32%	32%	39%	29%	46%	31%	24%	40%	28%	41%	34%	30%	25%	31%	31%	44%	39%	44%	38%	42%	35%	22%	2018/19
% mothers smoking at booking	23%	18%	20%	15%	5%	33%	30%	9%	21%	23%	19%	22%	16%	2%	9%	20%	17%	28%	28%	16%	23%	20%	13%	2018/19
% mothers smoking at delivery	16%	17%	13%	10%	1%	23%	23%	8%	16%	18%	16%	18%	10%	3%	8%	12%	11%	23%	21%	13%	19%	15%	9%	2021/22
% all babies born with low birth weight (<2.5kg)	4%	6%	9%	8%	4%	12%	7%	8%	8%	10%	14%	8%	5%	3%	11%	6%	6%	10%	15%	9%	12%	9%	7%	2021
% term babies born with low birth rate (<2.5kg)	3%	3%	5%	3%	3%	5%	1%	3%	2%	6%	4%	6%	3%	2%	4%	2%	3%	4%	5%	5%	5%	4%	3%	2021
% babies born before 37 weeks gestation	5%	7%	10%	8%	4%	10%	8%	5%	7%	12%	16%	4%	7%	5%	8%	6%	5%	9%	14%	9%	15%	8%	8%	2019-2021

### 4.2. Early Years

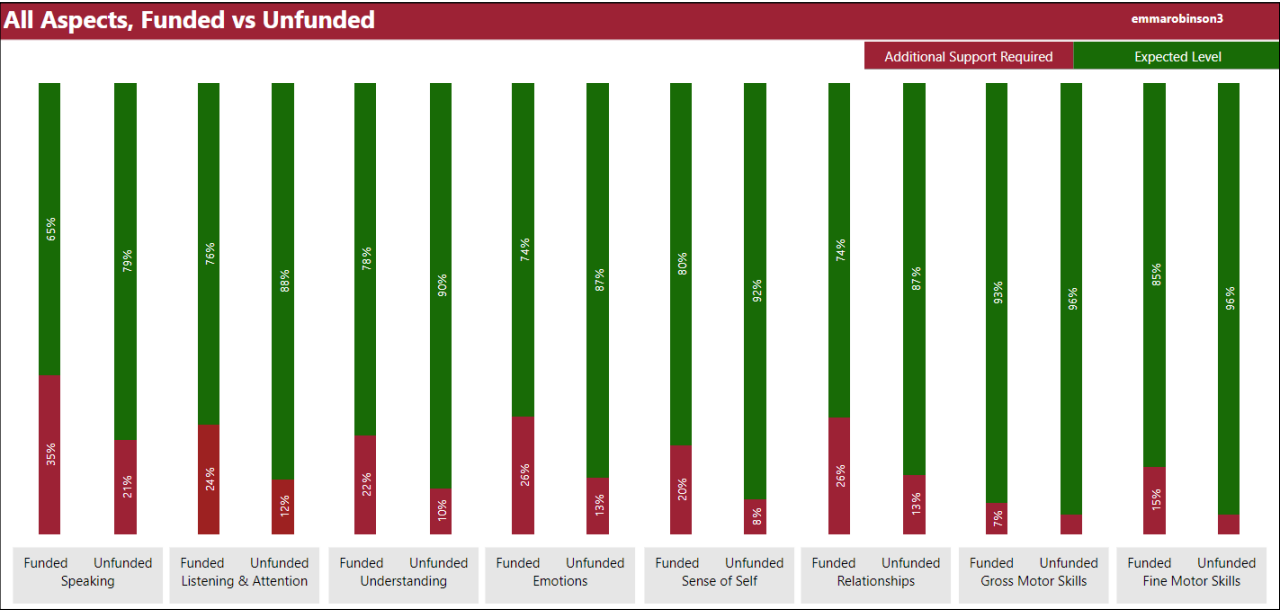
All children are assessed at two years of age for their progress in eight different areas of learning and development. In Barnsley just under a third of children are below the expected stage of development for speaking. Around a fifth are below the expected stage across listening and attention, managing emotions, and relationships (see Chart 7). A greater proportion of boys are below expected levels of development, in particular for speaking, listening and attention, and understanding (see Chart 8). In all aspects of learning and development, non-funded two-year-olds perform better than funded children. High quality early years provision is known to have a particularly positive effect for both children with SEND and children living in poverty<sup>19</sup>. It is positive that 96% of

<sup>18</sup> Public Health England. Child and maternal health profiles. Available from: <https://fingertips.phe.org.uk/profile/child-health-profiles>

<sup>19</sup> Shaw, B, Bernardes, E, Trethewey, A, Menzies, L. Special educational needs and their links to poverty. Joseph Rowntree Foundation, 2016.

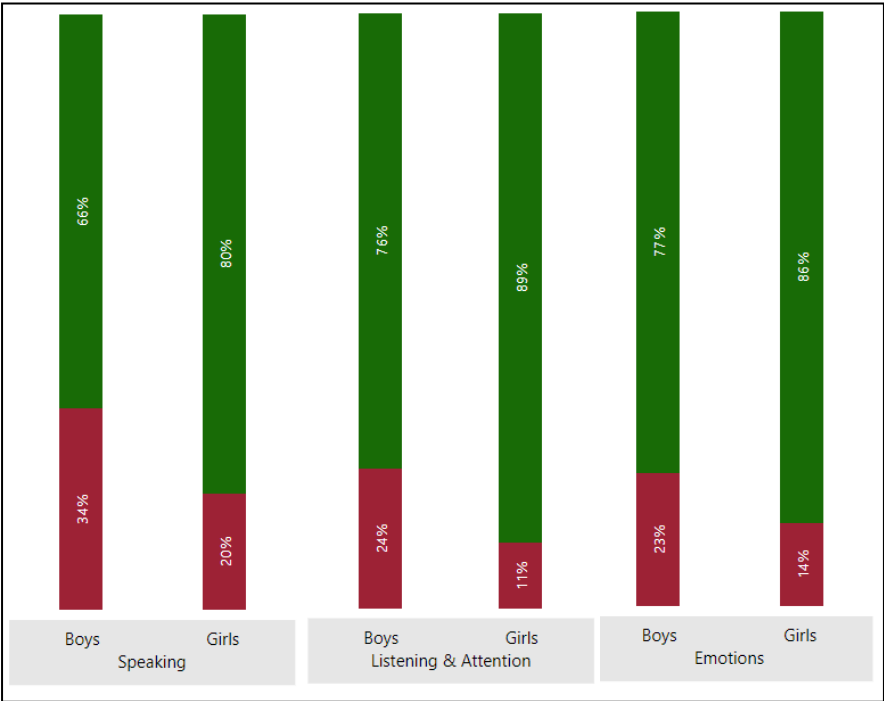
early years settings in Barnsley are rated good or outstanding by Ofsted, however they are being presented with increasingly complex children to manage.

Chart 7: 2 year checks data - funded vs unfunded children



Source: 2-year checks data dashboard, Business intelligence

Chart 8: 2 years check data by gender

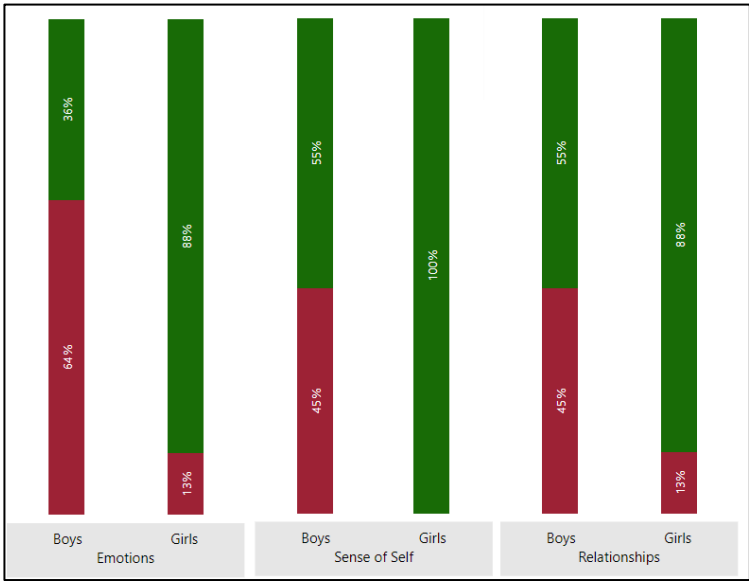


A higher proportion of girls are found to be at or above expected levels of development for most areas, this is similar to regional

and national trends. However, girls in some areas locally perform worse than boys for managing emotions, speaking, and understanding, and sense of self. Girls from some areas perform less well than boys in making relationships and self-confidence, and sense of self.

There is a particularly high proportion of boys from the Dearne (see Chart 8) who are below expected levels across managing emotions (64%), speaking, listening and attention, and understanding (55% across all three). In Grimethorpe, there is a similar pattern although additional support levels are not as high as in the Dearne.

**Chart 8: 2-year checks data: gender and area (Dearne)**



Comparing recent data from early year’s assessments across Barnsley, it is clear that there are differences in the level of progress for some children. Overall, children living in Grimethorpe and the Dearne perform less well than children from other areas.

The findings from the two-year checks highlight the need for targeted work in certain areas for those families who need it most, to help them achieve equity with their peers in other areas.

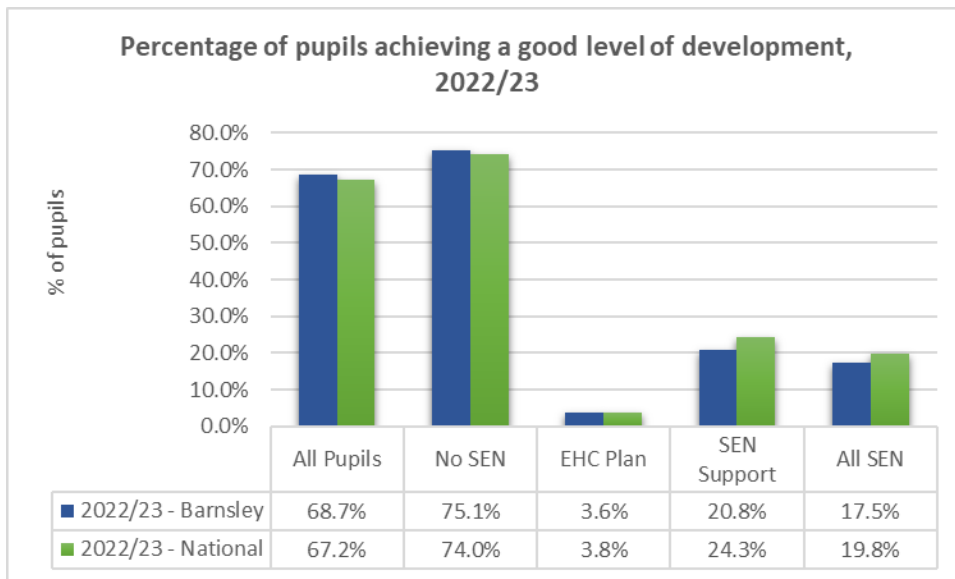
**5 Attainment and Absence**

**5.1. Early Years Foundation Stage**

Children receiving a good level of development in Barnsley at the end of reception is now at 68.7% (Chart 9). However, Barnsley remain higher than the regional average of 66.1% as well as the national average of 67.2%<sup>20</sup>. The graph shows that fewer children with an EHCP/SEN support achieve a 'good level of development' at foundation stage when compared with children with no SEN.

<sup>20</sup> Public Health Outcome Framework. School profiles. Available at: <https://fingertips.phe.org.uk/search/school#page>

Chart 9: Pupils achieving a good level of development



Source: Department for Education. Early years foundation stage profile results 2022/23. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/early-years-foundation-stage-profile-results>

## 5.2. Phonics

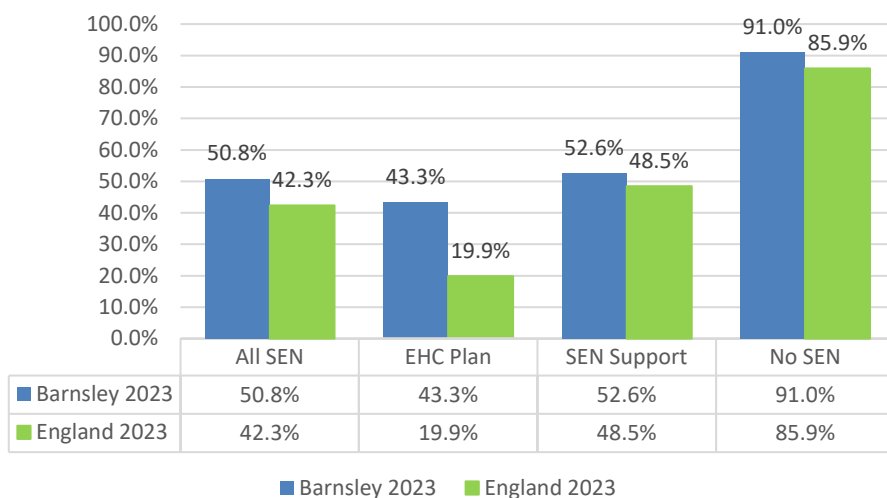
The phonics screening check is a statutory requirement to assess whether individual children have learnt phonics to an age-appropriate standard. The screening check is for all year 1 pupils and children in year 2 who did not previously meet the standard of the check in year 1<sup>21</sup>.

Barnsley has seen a consistent increase in attainment across all SEN groups in phonics since 2019, with small increases each year. Comparatively, Barnsley is now outperforming national figures at all SEN stages, despite previously being below national figures across the board, in 2019 (Chart 10).

Chart 10: Pupils achieving expected standard of phonics

<sup>21</sup> Standards and Testing Agency. Available at: <https://www.gov.uk/government/organisations/standards-and-testing-agency>

**Percentage of pupils achieving expected standard of phonics, 2022/23**

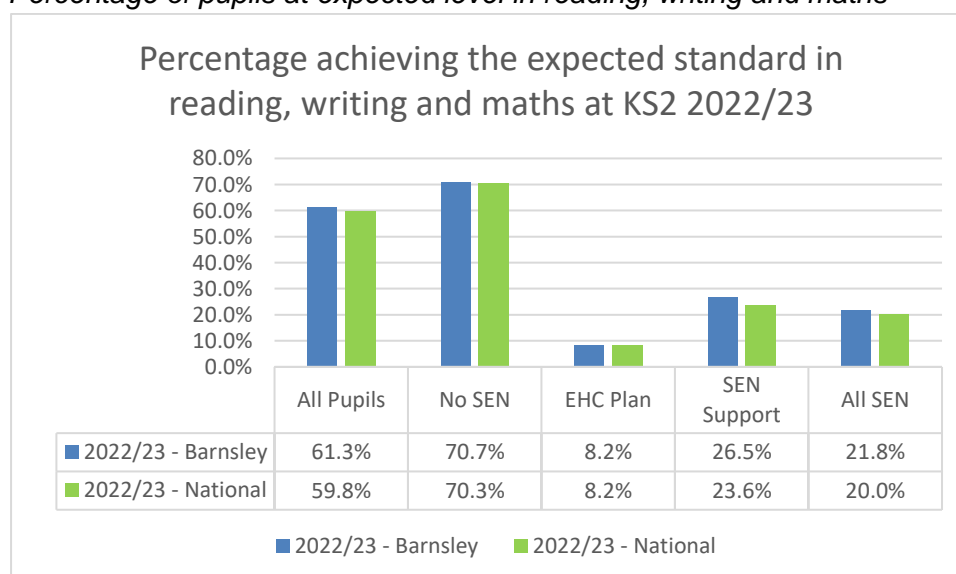


Source: Department of Education. Key stage 1 and phonics screening check attainment, 2022/23. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/key-stage-1-and-phonics-screening-check-attainment>

### 5.3. Key Stage 2 and 4

The SEN attainment gap for KS2 has not changed significantly since 2018/19. 8.1% of pupils with EHCP reached at least the expected level in Reading, Writing and Mathematics (RWM) at KS2 in 2022/23. This is similar to the England average indicated in the graph below. However, pupils receiving SEN support was above the England average with an increase from 20.9% in 2021/22 to 26.5% in 2022/23.

**Chart 11: Percentage of pupils at expected level in reading, writing and maths**

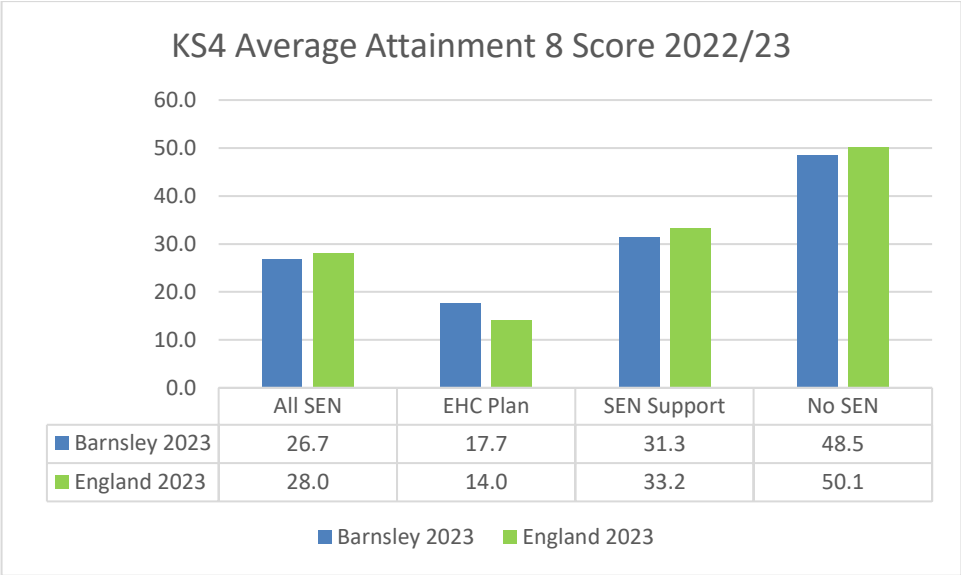


Source: Department of Education. Key Stage 2 attainment, 2022/23. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/key-stage-2-attainment>

Attainment 8 is based on the calculation of pupils' performance across 8 subjects including a double weighted English and Mathematics and the three highest point scores from any of the EBacc qualifications (e.g., science subjects, computer science, history, geography, and languages) and an open element comprising three other subjects<sup>22</sup>.

The graph shows that Barnsley is performing above the England attainment 8 average of (14.0) for pupils with and EHCP with an increase from 14.7 in 2018/19 to 17.7 2022/23. Pupils receiving SEN support have a similar average attainment 8 score in Barnsley to the England average.

Chart 11: KS4 average Attainment 8 score



Source: Department of Education. Key Stage 4 attainment, 2022/23. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/key-stage-4-performance-revised>

#### 4.41 School absence and exclusion

Pupils with SEND, particularly those from low-income families are significantly more likely to be out of education either through exclusion or dropping out and subsequently are more likely to become NEET (Not in Education, Employment or Training)<sup>23</sup>. The relationship between SEND and poverty is interdependent with children in receipt of free

<sup>22</sup> Department for Education. How to understand school performance- everything you need to know, October 2022. Available at: <https://educationhub.blog.gov.uk/2022/10/19/how-to-understand-school-performance-everything-you-need-to-know/>

<sup>23</sup> Department for Education. Special educational needs in England: January 2019. Available at: <https://www.gov.uk/government/statistics/special-educational-needs-in-england-january-2019>



school meals four times more likely than their peers to be excluded and those with SEND six times more likely to be excluded. Nationally, 75% of all permanently excluded pupils have some form of SEND identified. In addition, those young people attending the secondary schools in those most deprived areas, those from some minority ethnic backgrounds and those with experience of mental health concerns are also more likely to face exclusion<sup>24</sup>.

Rates for persistent school absence and exclusions in Barnsley (2021/22) are provided in table 3 below with regional, national, and statistical neighbour comparisons. Nationally the permanent exclusion rate for pupils with no SEND (number of permanent exclusions / number of registered pupils on roll on census day) is 0.05, in Barnsley it is three times higher at 0.15. The national exclusion rate for those children on SEN Support is 0.25, in Barnsley it is more than double this figure at 0.57. The national exclusion rate for children with an EHCP is 0.13, in Barnsley it is almost 3 times higher at 0.35. Barnsley's rate is also significantly higher in comparison to statistical neighbours for those with an EHCP and those with SEN support.

In terms of persistent absence, the national figure for non-SEN children was 20% in 2021/22. The figure for Barnsley is slightly higher at 22%. For children with SEN support the national figure rises to 32%, with Barnsley slightly higher at 34% (and 12% points higher than non-SEN children. This is an improvement on previous years when children with SEN were twice as likely to be persistently absent from school.

For pupils with an EHCP, Barnsley is slightly below the national average at 36%.

*Table 3: Permanent exclusion and persistent absence*

Local Authority	Permanent Exclusions			Persistent Absence		
	Non-SEN	EHCP	SEN Support	Non-SEN	EHCP	SEN Support
Barnsley	0.15	0.35	0.57	22%	36%	34%
County Durham	0.07	0.04	0.31	23%	39%	34%
Doncaster	0.07	0.00	0.26	24%	38%	36%
North East Lincolnshire	0.08	0.00	0.25	23%	35%	32%
Redcar and Cleveland	20.4	0.22	0.78	21%	36%	30%
Rotherham	0.06	0.16	0.38	23%	40%	34%
St. Helens	0.05	0.20	0.27	24%	37%	34%
Sunderland	0.07	0.07	0.38	23%	36%	36%
Tameside	0.16	0.13	0.40	18%	32%	27%
Wakefield	0.06	0.24	0.28	21%	38%	34%
Wigan	0.08	0.45	0.51	20%	37%	33%
<b>Stat Neighbour</b>	0.95	0.15	0.38	22%	37%	33%

<sup>24</sup> Menzies L, Baars S. The alternative should not be inferior: What now for 'pushed out' learners? London: Inclusion Trust. 2015

<b>Average</b>						
<b>Yorkshire &amp; Humber</b>	0.05	0.11	0.26	22%	38%	33%
<b>England</b>	0.05	0.13	0.25	20%	37%	32%

Source: 2021/22 DfE SFR

#### 4.42 School placements

We know that we are still placing too many children and young people in settings outside of the borough. This is decreasing and is significantly assisted by the extra capacity commissioned for additional places in borough. We have a clear plan set out as part of our Safety Valve programme so that we can support more children and young people to be educated within borough. Our position in 2022 is set out below whilst we evaluate data for 2023.

- In 2022, 3.5% of new EHC plans issued were placed in Independent and Non-Maintained Special Schools (INMSS), up from 3.0% in 2021. Nationally this dropped from 2.6% to 2.3%.
- A total of 79.6% of new EHCPs were for mainstream settings, down from 83.0% in 2021. Nationally this also decreased from 72.8% to 72.0%.
- Just 1.9% of new EHCPs issued in 2022 were for maintained special school settings, a decrease from 3.1% in 2021. Nationally this decreased from 11.5% to 10.3%.
- 7.2% of new EHCPs were for pupils in non-maintained Early Years settings. This is an increase from 4.1% in 2021. Nationally this also increased from 3.6% to 3.8%.
- In 2022, only 0.3% of new plans were for placements in pupil referral units. This is unchanged from the previous year whilst nationally this decreased slightly from 1.6% to 1.4%.
- 5.6% of EHCPs were for further education settings, up from 4.4% in 2021. Nationally this decreased from 3.1% to 2.8%.
- In 2022 1.9% of new EHC plans were issued for children and young people who were educated elsewhere, up slightly from 1.7% in 2021. Nationally this decreased from 3.9% to 2.6%
- Zero percent of new plans were classed as NEET in 2022 in comparison to 0.3% in 2021. Nationally this decreased from 3.1% to 2.8%
- A total of 0.9% of new EHCPs were for elective home education, down from 1.4% in 2021. Nationally this also decreased slightly from 0.9% to 0.8%

#### 4.5. Mental Health

In 2022, 18.0% of children aged 7 to 16 years and 22.0% of young people aged 17 to 24 years in England had a probable mental disorder.<sup>25</sup> In children aged 7 to 16 years, rates rose from 1 in 9 (12.1%) in 2017 to 1 in 6 (16.7%) in 2020. Rates of probable mental disorder then remained stable between 2020, 2021 and 2022. Having SEN significantly increases the odds of having mental health difficulties ranging from 1.23-2.03 times as likely to experience these difficulties<sup>26</sup>.

Overall, 3.2% of all Barnsley pupils in state funded schools have been identified as having Social Emotional and Mental Health (SEMH) needs (see chart 12 below); this is compared to statistical neighbour and national averages of 2.9% and 3% respectively.<sup>27</sup>

When broken down by primary school, the figures are 2.5%, 2.3% and 2.5% respectively (Barnsley, Stat neighbours, England). Barnsley’s average is similar to the England average, but higher than statistical neighbours. When broken down by secondary school, the figures are 3.7%, 3.2% and 3.1% respectively (Barnsley, Stat neighbours, England).

Barnsley also has a higher percentage of SEMH needs as primary diagnosis for SEND than both the England average and that of its statistical neighbours, being the highest amongst statistical neighbours for primary school pupils and second highest for secondary school pupils. Further work is warranted exploring the relationship between mental health and SEND in Barnsley.

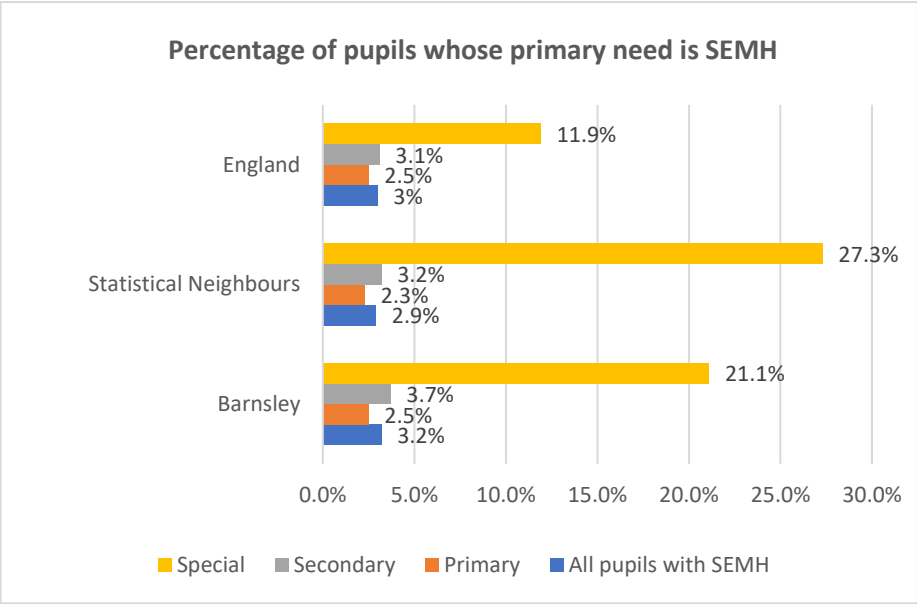


Chart 12: Percentage of pupils with SEMH need as a primary need

<sup>25</sup> NHS Digital 2022. Mental Health of Children and Young People in England 2022 - wave 3 follow up to the 2017 survey. Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2022-follow-up-to-the-2017-survey>

<sup>26</sup> Deighton, J et al. Prevalence of mental health problems in schools: poverty and other risk factors amongst 28,000 adolescents in England. British Journal of Psychiatry, 2019; 215: 565-567.

<sup>27</sup> Department for Education. Special educational needs in England: January 2022. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england/2021-22>

Department for Education. *Special educational needs in England: January 2021*.

<https://www.gov.uk/government/statistics/special-educational-needs-in-england-january-2021>

Another measure of mental and emotional health in the population is hospital admissions as a result of self-harm (10–24-year-olds). Barnsley's rate of 695.2 admissions per 100,000 is significantly higher than the England average of 421.1 and third highest of the statistical neighbours. Admissions appear to peak in the 15-19 age groups, and this is where the largest gap between Barnsley and England is (1155.1 vs 648.6 admissions). There are also large disparities within the borough. Central, Kingstone, St Helen's and Stairfoot wards all have self-harm admission rates significantly higher than the Barnsley average. These wards also have some of the highest rates of pupils requiring SEN Support. Self-harm is a priority area of focus in Barnsley's Mental Health and Wellbeing Strategy 2022-26.

#### 4.6 Local Mental Health Pathways

[Barnsley's Mental Health and Wellbeing Strategy 2022-26](#) outlines our commitment to better support the emotional health and wellbeing of Barnsley's children and young people. We are focusing our efforts on implementing the recently co-produced CAMHS (Children's and Adolescent Mental Health Services) Service Specification; implementing the recommendations of the Department of Education's 'Green Paper: Transforming Children and Young People's Mental Health provision'; continuously engaging with young people so that they are able to influence service design and development; and implementing the action plan of the Children and Young People's Emotional Health and Wellbeing group.

To ensure that children and young people experience positive emotional health and wellbeing and build resilience, all partners will work together to provide a borough in which:

- Early signs and indications of poor mental health and wellbeing will be recognised, and all children and young people will have access to the most appropriate support at the earliest possible opportunity.
- All children and young people have access to high-quality emotional health and wellbeing support linked to their school or college and, if required, fully outlined within their Education, Health, and Care Plan (EHCP).
- All professionals working with children, young people and their families will have a good understanding of emotional health and wellbeing and services will be needs-led rather than focusing on the diagnosis or condition.
- The most vulnerable young people in our community, including:
  - **those with SEN or a Learning Disability**
  - Children in Care
  - Young carers

- **Young people with Autism or ADHD**, young people educated at home and those young people who identify as LGBTQ+, will have targeted support to identify the specific needs unique to each group to ensure they are able to access the most appropriate support that best meets all their needs.

In the first 12 months of the coronavirus pandemic there was significant increase in referrals citing emotional health and wellbeing as the main concern. This included an increase in the number of Early Assessments with a primary concern of emotional health and wellbeing. Within the same time period, we also saw a 45% increase in the numbers of children and young people attending Barnsley Hospital's Emergency Department because of anxiety, depression, or low mood, alongside a 6% rise in admissions due to overdose. As cited earlier in the report, compared to the whole of Yorkshire and Humber, Barnsley has more than twice the number of 10 – 24-year-olds admitted to hospital as a result of self-harm.

To combat the issues outlined above, and to better support our children and young people's emotional health and wellbeing, a system-wide Emotional Health and Wellbeing Improvement Plan has been developed, and the implementation of the plan within the 6 key focus areas, has begun. The areas of focus include:

- Workforce training and development
- Early intervention and prevention
- The role of schools and education workforce, including colleges, early years establishments and those electively educated at home
- Working together: A better journey through mental health services
- Improved support for vulnerable children and young people
- Co-production and engagement

A Single Point of Contact has been developed for children and young people and their families, where ALL requests for support around emotional health and wellbeing will be accepted. [Branching Minds Barnsley](#) brings together local mental health support teams (MHST) and child and adolescent mental health services (CAMHS) under one roof, helping children, young people and their families get the right support at the right time, whilst providing more seamless care. You can request support for mental health and emotional wellbeing issues centrally from the newly joined-up service.

#### 4.61 Autistic Spectrum Disorder

The Autism Spectrum Disorder Assessment Team (ASDAT) at Barnsley Hospital NHS Foundation Hospital Trust (BHNFT) offers a specialist assessment and diagnosis service for children under the age of 18 who have an active Early Help Assessment.

We know that waiting times for children and young people requiring autism assessments are too long. For families that are waiting, there is a parent/carer support and information group delivered by the Council's Social Communication Team (SCI). The Think Differently workshop is specifically designed to support families of children and young

people who have social communication and interaction needs and who do not have a diagnosis.

For children and young people who present with social communication and interaction needs, the SCI team have also co-produced (with parents, carers, children, and schools) an Autism Friendly School toolkit to support children and young people with or without a diagnosis. This toolkit enables staff in schools and settings to develop strong understanding of how to meet the needs of children through creating an inclusive and whole school approach which is autism friendly.

NHS South Yorkshire is working with Barnsley Council and local health and social care partners to build a new All-Age Autism Strategy for the next five years.

## 4.7 Further Vulnerabilities

### 4.7.1 Looked after Children (LAC) and Children in Need (CIN)

Looked after Children (LAC) are defined as those looked after by the local authority for one day or more. In Barnsley, 26.7% of LAC are on SEN support, compared to the national average of 27.2%. 27.9% of LAC in Barnsley have a statement of SEN or EHCP, compared to 30.2% nationally (2021/22 figures LAC for 12 months or more at 31<sup>st</sup> March).

Children in need are defined in law as children who need local authority services to achieve or maintain a reasonable standard of health or development, need local authority services to prevent significant or further harm to health or development, or are disabled.

Nationally, 21.3% of Children in Need (CIN) are on SEN support and 26.9% have a statement of SEN or EHC plan. In Barnsley, there is a slightly higher proportion of CIN on SEN support at 23.6%, and 23.0% of CIN have a statement of SEN or EHC plan.

In Barnsley, 13.9% of school-age children in need have a disability, compared to the national average of 12.3%

### 4.7.2 Children known to Youth Justice Service

14.2% of young people known to Barnsley Youth Justice Service between April 2022 March 2023 had an active Education Health and Care Plan. A learning disability nurse has been employed to screen young people when they first enter the service. The service has also supported schools in triggering the EHCP process. Some of the issues that have been identified are speech, language, and communication; ASD, dyslexia, acquired brain injury and ADHD. The service also employs psychologically trained professionals in partnership with CAMHS to work with young people and is hoping to secure funding for a speech and language therapist.

## 5. Support Services

There are a number of sources of support provided which are brought together in one place, the [Local Offer](#) including: schools and colleges (specialist and mainstream, travel to school and college, childcare and education for the early years (0 to five years), health services including learning disability nurses, social care, training, housing, employment and leisure opportunities.

A few specific examples include:

- Public Health Nursing support
- Childcare for children with SEND
- DIAL Barnsley – offer advice and information to adults and children with disabilities and/or long-term health problems
- Barnsley SENDIASS (SEND, Information, Advice, and Support service)
- Parent support forums
- Short breaks provision
- Barnsley CAMHS
- Barnsley Education Inclusion Services

## 6. Recommendations

The recommendations of this document have been aligned with the local area Inclusion Plan and are based on the evidence contained within our JSNA. The aim of this is to align priorities in a precise and consistent manner.

The local area is, as a partnership and as a whole system ambitious for all our children and young people in Barnsley. We know from our data that we have got a number of challenges and priorities ahead of us but we are committed to achieving positive outcomes for all children.

- Continue to tackling childhood poverty and support low-income families in order to improve outcomes and life chances.
- Continued improvement of earlier identification including take up of early years education.
- Children's mental health and emotional resilience should be an area of focus.
- Reduce the number of permanent exclusions and suspensions for children and young people with SEND.
- Ensure information and access to services is easy to navigate.



- Making sure that relationships with parents and carers is stronger and that their voices are represented in the shaping of our services.
- Work to reduce waiting times and improve access through evaluating the pathways, auditing referrals for appropriateness, using early help assessments.

**Next Review Date: December 2025**

## Glossary

ASD	Autistic Spectrum Disorder
BME	Black and minority ethnic
CYP	Children and young people
EHCP	Education, Health, and care plan
FSM	Free school meals
FTE	Fixed term exclusions
IMD	Index of multiple deprivation
JSNA	Joint strategic needs assessment
KS	Key stage
LSOA	Lower super output area
MLD	Moderate learning disability
NEET	Not in education, employment, or training
PD	Physical disability
PSED	Personal, social, and emotional development
PHE	Public Health England
SEMH	Social, emotional, and mental health
SEND	Special educational needs and disability
SLCN	Speech, language and communication needs
SLD	Specific learning difficulty