

# **0-25 years Special Educational Needs and Disability Needs Assessment 2024 – 2026**

Herefordshire Council Intelligence Unit  
Version V1.0

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## Foreword

Welcome to our Joint Strategic Needs Assessment (JSNA) for Special Educational Needs and Disability in Herefordshire. This provides a single up-to-date evidence base to inform the

Herefordshire Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Partnership's work improving services and outcomes for children and young people, as set out in its [2023-26 strategy](#).

This SEND JSNA should be read in conjunction with our 2024 JSNA summary for Herefordshire which created a comprehensive picture of the health and well-being of the local community -all ages, at the time and into the future. Both are part of a continuous cycle of strategic assessment and planning with the purpose of enabling best use of locally available resources to reduce inequalities and improve health and well-being for residents.

Nationally, there continues to be a gap between children and young people with SEND and their peers, academically, emotionally and socially. The growth in level of need, nationally and locally means that available, necessarily limited resources must be used efficiently and with clear understanding of needs and priorities. This SEND JSNA is an important assessment of

current and future need. It will support working together across many organisations and groups to get timely, purposeful and effective planning, commissioning and new developments.

Partners across Herefordshire are committed to ensuring that all children and young people with special educational needs and/or disabilities feel safe, valued, and supported. Our goal is to help them grow with confidence, develop essential skills, and reach their full potential. We are committed to identifying their needs early and providing the right support to help them thrive.

In order to realise our ambitions, we need to know what is happening now and how things have changed since 2023 when we completed a comprehensive self-evaluation which is the bedrock of our priority plans. Our shared SEND and AP strategy 2023-26, is entering its third year and we want to make sure we are using the best evidence to inform our forward work programme.



Liz Farr, Director of Education, Skills and Learning

# Summary

- There are 5,192 children and young people aged 0-25 years with a Special Educational Need and a Disability (SEND) in Herefordshire. Of these 1,152 have an EHCP (22%) and 4,040 (78%) are in receipt of SEN support (January 2024). These figures are for school aged children and young people only.
- Boys are more likely to have an EHCP or SEN support compared to girls.
- The SEND population in Herefordshire is growing, with a 15% increase in the school-aged SEND population and a 56% rise in the 0-25 EHCP population between 2019 and 2024, particularly among those under 5 years.
- The most frequently reported primary needs are learning difficulties (39% collectively), followed by social, emotional, and mental health needs (21%) and speech, language, and communication needs (19%)
- The proportion of children and young people with SEND are higher in the more deprived areas.
- Herefordshire CYP with SEND start well in the early years and KS1 compared to their peers nationally but make less progress during KS3 and KS4.
- However, more children and young people with SEND sustained in education, employment or in training in Herefordshire compared to nationally.
- There are below average rates of persistent absenteeism for children and young people with SEND in Herefordshire.
- The pupils with profound and multiple learning difficulties and social emotional and mental health problems have missed school the most.
- The most commonly identified long-term conditions in primary care in Herefordshire in those aged 0 to 25 years are 'asthma' and 'depression, the prevalence of asthma is reasonably stable, while the rate of depression increase with the age.
- Hospital admissions due to mental ill health are increasing for the children and young people under 18 years.
- Although Herefordshire's overall 0-18 age population is predicted to fall over the next 10 years, the growth of the SEND population over the last decade suggests that the SEND population will likely continue to increase. Consequently, demand for SEND services is expected to rise.
- Herefordshire children and young people's quality of life survey provides a wealth of information about SEND children in special schools, however in some cases it is not directly comparable views of children and young people in special schools with their peers in mainstream schools.
- Herefordshire coproduction charter enables parent carers of children and young people with special educational needs and disabilities to have their say and influence change in the delivery of services in Herefordshire.

# Background

## What is a Joint Strategic Needs Assessment?

A Joint Strategic Needs Assessment (JSNA) looks at the current and future health and care needs of local populations to inform and guide the planning and commissioning of health, well-being and social care services within a local authority area. In this case, it is focussed on the population and needs of children and young people aged 0 to 25 living with Special Educational Needs and Disability (SEND) in Herefordshire.

In this SEND JSNA a wide range of data will be looked at across various sources including local, national and data from areas similar to Herefordshire (comparator authorities) in order to:

- estimate the size and the characteristics of the local population and the health and wellbeing status
- identify the inequalities
- illustrate trends
- describe local community views
- highlight the key findings

## What are Special Educational Needs and Disabilities (SEND)?

A child or young person has a Special Educational Need and Disability (SEND) if they have a learning difficulty or a disability, which calls for special educational provision to be made for him or her. A child of compulsory school age or a young person (up to the age of 25) 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<sup>1</sup>
- For most children with SEND, their needs can be met with some support to access education (SEN support), but a small number of children need more specialist help and, following statutory assessment, may require an education, health and care plan (EHCP).

<sup>1</sup>Special educational needs and disability code of practice:0 to 25 years:  
<https://assets.publishing.service.gov.uk/government/uploads/system/uploa>

[ds/attachment\\_data/file/398815/SEND Code of Practice January 2015.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploa)

**Stages where special educational needs are identified:**

- 0 to 2 years - information from parents/carers/child minders
- The progress check at age two - Statutory check
- Health and development review at age two
- Good level of development – end of Reception (age 5)
- Throughout school life by Teachers, SENCO, other professionals or parents

**What types of support are available to the SEND population?**

There is a graduated approach of support available to children and young people with SEND who are considered to have additional needs. Most children and young people will receive early intervention and will have their needs identified and met by their setting, school or college without the need for further input. If the child or young person's needs and difficulties persist, they will require a greater level of attention and support. This is categorised in two ways.

**SEN support:** This consists of help given in addition to that provided by a school's usual curriculum. This may involve the class teacher and SEN co-ordinator receiving advice and support from external specialists.

**EHCP:** An educational, health and care plan (EHCP) is created as part of a formal assessment for children who require further help. This is a legal document which outlines the child's needs and the

additional help which is required. EHCP replaced 'Statements of SEN' in 2014 and most children have now been transferred over to EHCP.

Herefordshire Council's local offer is a place for families to find out about the support, services and information available for children and young people with special educational needs and disabilities (SEND).

The local offer includes information about:

- Education, health and social care services from birth to 25 years of age
- Eligibility criteria to access specialist support services
- The support arrangements available to help access the services required
- Leisure activities and support groups
- How to make a complaint

Herefordshire's local offer is continuously being developed in consultation with young people and their families, with workshops and consultation events to ensure the right information is available, in the right format, at the right time.

In addition to the SEN support and EHCP, the local authority's children's services ensure the safeguarding and promotion of the welfare of children with SEND.

# SEND population in Herefordshire

## How large is the SEND population in Herefordshire?

Currently, there are 5,192 **school aged** (Statutory school age: 5-16 years) children and young people with SEND in Herefordshire. Of those, 1,152 have an EHCP and 4,040 are in receipt of SEN support, respectively this is 4.6% and 16% of total pupil population in Herefordshire ([SEND England data](#) = school census). According to Local authority EHCP caseload there are 1,461 children and young people aged **0-25 years** in their records ([EHCP England](#) = SEN2 returns).

Table 1 shows the school aged SEND population, the majority of individuals with EHCP or receiving SEN support are male (64%), which is an overrepresentation compared to the general male population of the same age in Herefordshire (52%). In contrast, the total female SEND population is 39%, quite smaller than the general female population of the same age in Herefordshire (48%).

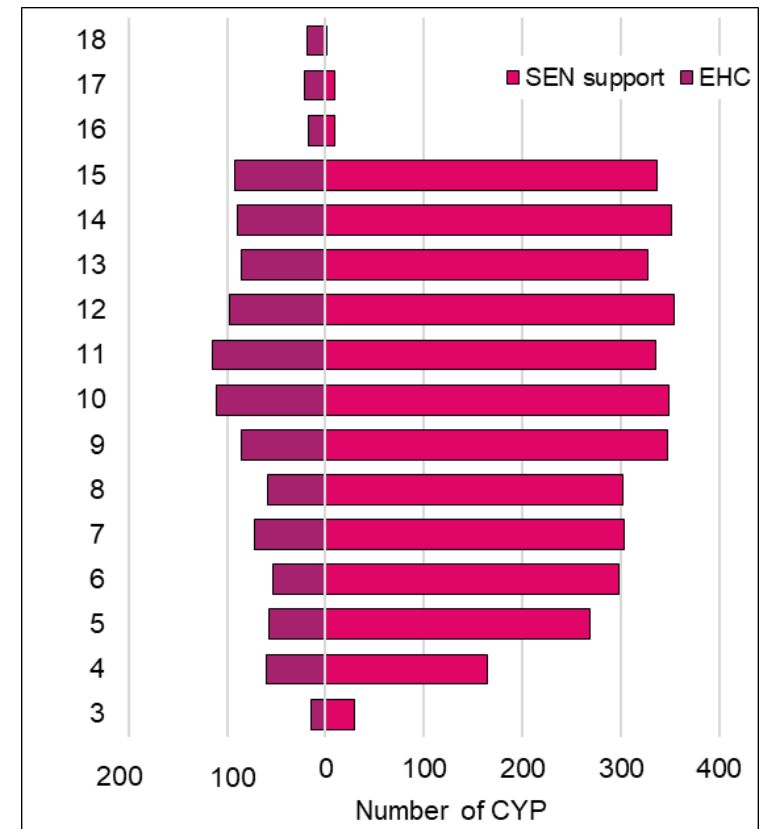
*Table 1: Total size of school aged SEND population (excludes Independent schools) in Herefordshire according to SEND code and gender, 2023/24 (School Census 2024)*

	Male No	Male %	Female No	Female %	Total
EHCP	767	73.3%	280	26.7%	<b>1,047</b>
SEN support	2,340	61.7%	1,451	38.3%	<b>3,791</b>
<b>Total</b>	<b>3,107</b>	<b>64.2%</b>	<b>1,731</b>	<b>35.8%</b>	<b>4,838*</b>
<b>Herefordshire Aged 5-16 population</b>		<b>52%</b>		<b>48%</b>	<b>23,670</b>

\*excluding Independent schools. Also, these figures are for school aged children and young people only. There are other children with EHCPs / SEN support who are not with a Special Support Assistant/Additional Support.

Figure 1 shows the age profile of the school aged SEND population in Herefordshire in 2023/24. The average (median) age of those receiving SEN support (6 year) is younger than those with an EHCP (8 years).

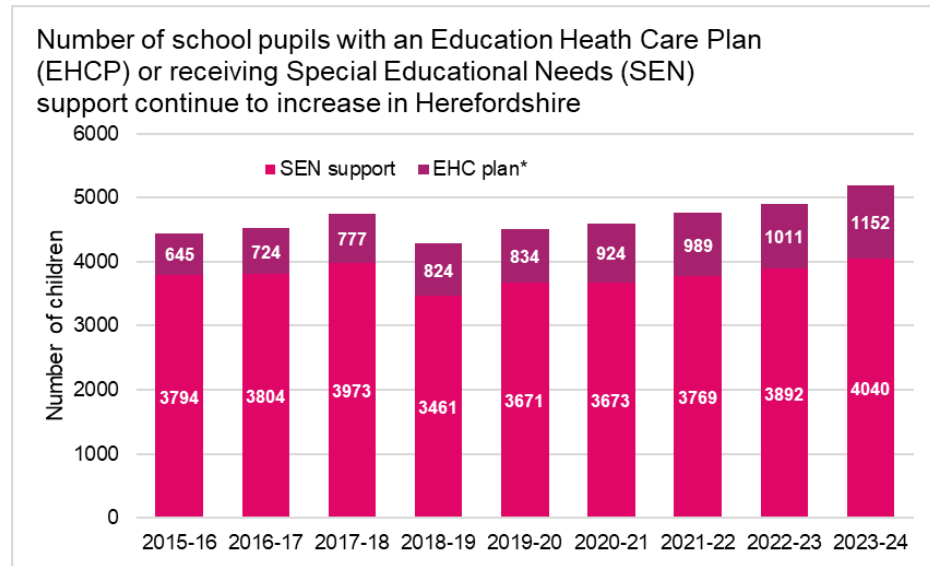
*Figure 1: Age profile of SEND population in Herefordshire, 2023/24 (School census 2024)*



### Is the size of the SEND population changing over the years?

The school aged SEND population has increased over the years, showing a consistent growth since 2018-19, especially in the number of EHCPs. Compared to the years prior to the pandemic, the increase in the SEND population has been higher in the years following the pandemic (4% from 2015-16 to 2020-21 Vs 13% from 2020-21 to 2023-24) – Figure 2.

Figure 2: School pupils with an EHCP\* or receiving SEN support in Herefordshire since 2015-16 (Special educational needs in England: January 2024 (School Census Data))

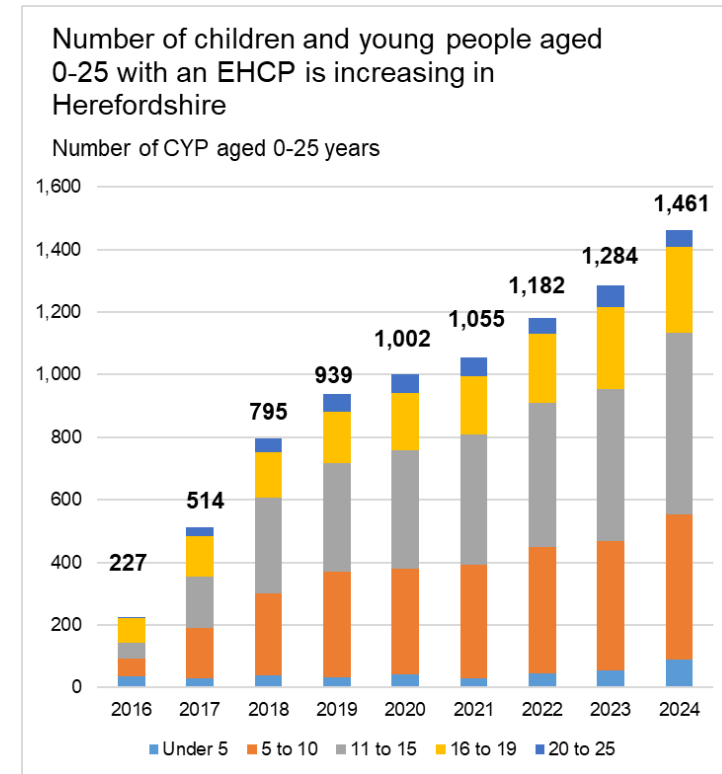


\*EHCP also includes statements of SEN. Statements were phased out from 2014 to 2018.

Figure 3 shows that the whole 0 to 25 age population with an EHCP in Herefordshire increased by 55.6%, from 939 in 2019 to 1,461 in 2024. This compares to a 62.7% increase in England over the same period.

Between 2019 and 2024, EHCPs in Herefordshire saw the highest percentage growth among those aged under 5 years, with an increase of 161.8%. Comparatively, the same age group increased by 88.2% across England during this period. In Herefordshire, the under-5 age group accounts for just 6% of all EHCPs.

Figure 3: Numbers of children and young people aged 0-25 with an EHCP in Herefordshire by age band (EHCP in England, January 2024)



Between 2016 and 2024, the total EHCP pupil population has increased by 2 percentage points (507 pupils) in Herefordshire and similar increase shown for England and the nearest similar authorities, however the West Midlands region shows a slightly slower growth. (Figure 4)

During the same period, the proportion of pupils receiving SEN support in Herefordshire increased by only 0.7 percentage points (246 pupils), despite a larger increase in the West Midlands region and across England. This suggests that, over these years, other areas have nearly caught up with Herefordshire, which has consistently had a higher proportion of pupils receiving SEN support compared to national and regional levels (Figure 5).

### SEND population in Herefordshire compared to other areas

In Herefordshire 4.6% of pupils were reported to have an EHCP almost similar to nationally and regionally however, a slightly higher proportion of Herefordshire’s pupils receive SEN support (16%) – Table 2

Table 2: Proportions of pupils with special educational needs, Herefordshire, West Midlands and England 2023-24

	EHCP	SEN support	Total
Herefordshire	4.6%	16.0%	20.5%
Statistical Neighbours	4.9%	14.6%	19.5%
West Midlands	4.5%	14.3%	18.7%
England	4.8%	13.6%	18.4%

Figure 4: Time trend in proportion of school pupils with an EHCP or statement in Herefordshire, West Midlands and England, Special educational needs in England: January 2024 (Census Data)

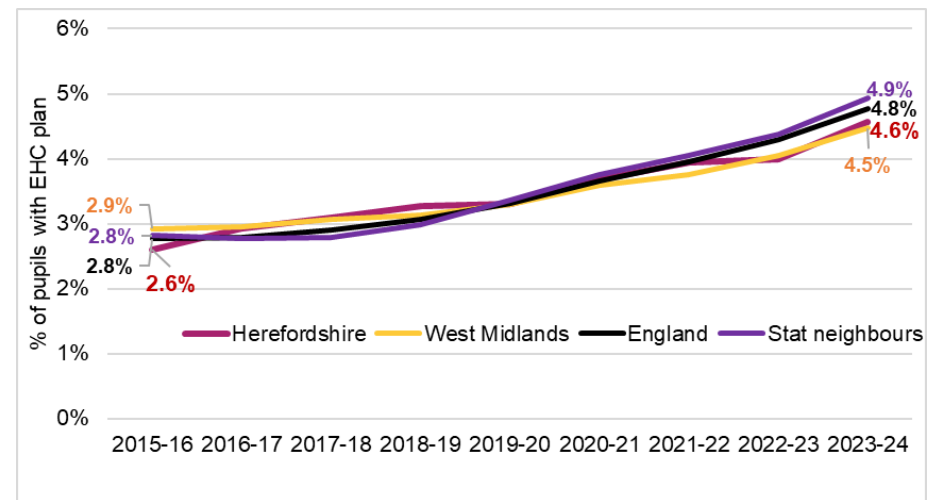
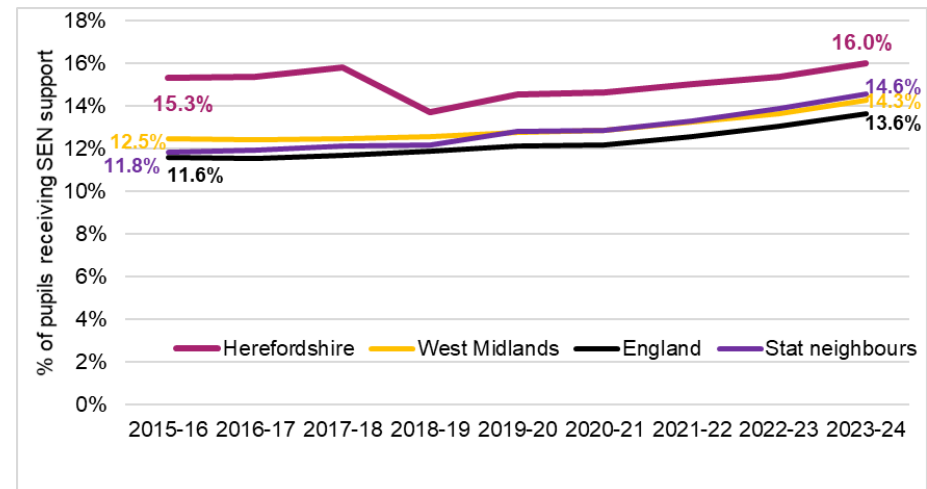


Figure 5: Time trend in proportion of school pupils receiving SEN support in Herefordshire, West Midlands and England, Special educational needs in England: January 2024 (Census Data)



## What are the needs of children and young people with SEND?

*Table 3: Primary type of need for SEN support and EHCP in Herefordshire, 2023/24 (not including Independent Schools)*

SEND Code	SEND Type	Number of pupils	% of pupils
ASD	Autistic Spectrum Disorder	417	9%
HI	Hearing Impairment	98	2%
VI	Visual Impairment	47	1%
MSI	Multi- Sensory Impairment	12	0%
PD	Physical Disability	92	2%
SPLD	Specific Learning Difficulty	1,093	23%
MLD	Moderate Learning Difficulty	635	13%
SLD	Severe Learning Difficulty	147	3%
PMLD	Profound & Multiple Learning Difficulty	30	1%
<b>LD</b>	<b>All Learning Difficulties</b>	<b>1,905</b>	<b>39%</b>
SEMH	Social, Emotional and Mental Health	1,003	21%
SLCN	Speech, Language and Communications needs	928	19%
OTH	Other Difficulty/Disability	161	3%
	SEN support but no specialist assessment of type of need	175	4%
	Total	4,838	

Table 3 presents the number of children receiving SEN support or with EHCP in Herefordshire for the 2023–24 academic year, categorized by their primary type of need. Among all pupils with SEND in Herefordshire, the most frequently reported primary needs are learning difficulties (39% collectively), followed by social, emotional, and mental health needs (21%) and speech, language, and communication needs (19%).

Specific learning difficulty is the most common type within learning difficulties:

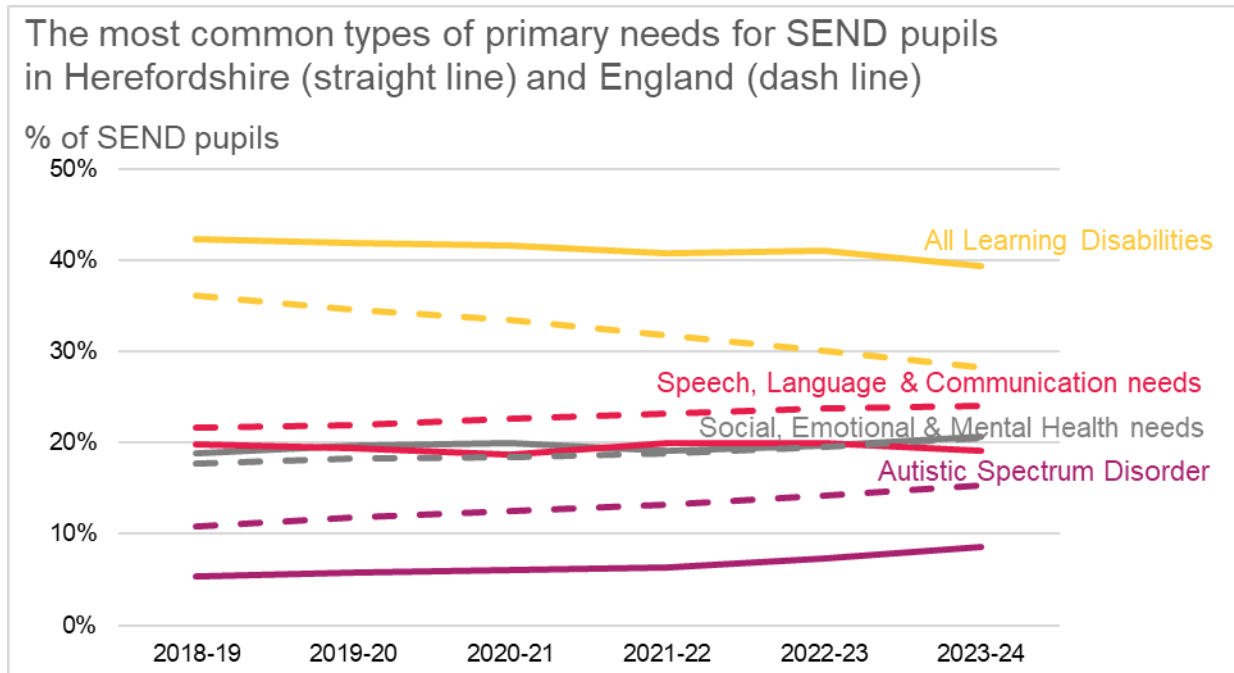
- 18% of primary SEND pupils in Herefordshire, compared to 8.5% nationally.
- 33% of secondary SEND pupils in Herefordshire, compared to 18.5% nationally.

9% of secondary school pupils with SEND were reported as having a primary need of autism spectrum disorder compared with 14.8% of secondary pupils across England.

Figure 6 shows key differences between the SEND population in Herefordshire and the national averages in England:

- Speech, language, and communication needs (SLCN): Most common primary need in England (24%), but lower in Herefordshire (19%).
- Social, emotional, and mental health needs (SEMH): Second highest primary need, aligning with national figures (21% locally and nationally).
- Autism Spectrum Disorder (ASD): 15% nationally, but lower in Herefordshire (9%), though local rates are increasing.
- Learning difficulties (LD): Higher in Herefordshire (39%) than nationally (28%).

Figure 6: Pupils with SEN by the most common type of primary need for Herefordshire and England from 2018-19 to 2023-24 (Department for Education)



SEND and AP local Area Inclusion Plan reports that “SEMH and ASD are the most common area of need for requests for an EHCP and top-up funding over the last three years with the numbers of requests in these areas increasing alongside an increase in referrals to the SEMH Inclusion Service. This shows that secondary schools are finding meeting the needs of children presenting with SEMH needs and ASD challenging”.

[Herefordshire and Worcestershire All-Age Autism Strategy](#) also highlighted the lower than national average of pupils identified as ASD in Herefordshire and stated that “this is thought to reflect the length of waiting list for a diagnosis of autism and that work is being done to update local authority records and improve accuracy”.

High level of SEMH is also reflected in the caseload of Early Years SEND Team, 15% of the referrals are for SEMH and it is one of the most challenging to support within the mainstream Early Years settings.

Table 4: Pupils with SEN by type of primary need for Herefordshire and England from 2018-19 to 2023-24 (Department for Education)

School Year	2018-19	2018-19	2019-20	2019-20	2020-21	2020-21	2021-22	2021-22	2022-23	2022-23	2023-24	2023-24
Type of Primary Need	Hfds	England	Hfds	England	Hfds	England	Hfds	England	Hfds	England	Hfds	England
Autistic Spectrum Disorder	5%	11%	6%	12%	6%	12%	6%	13%	7%	14%	9%	15%
Hearing Impairment	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%
Visual Impairment	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%
Multi- Sensory Impairment	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Physical Disability	3%	3%	3%	3%	2%	3%	2%	3%	2%	3%	2%	2%
Specific Learning Difficulty	23%	12%	25%	12%	25%	12%	25%	12%	24%	12%	23%	11%
Moderate Learning Difficulty	14%	20%	12%	19%	12%	18%	12%	17%	13%	15%	13%	14%
Severe Learning Difficulty	4%	3%	4%	3%	4%	3%	4%	2%	3%	2%	3%	2%
Profound & Multiple Learning Difficulty	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%
<b>All Learning Difficulties</b>	<b>42%</b>	<b>36%</b>	<b>42%</b>	<b>35%</b>	<b>42%</b>	<b>33%</b>	<b>41%</b>	<b>32%</b>	<b>41%</b>	<b>30%</b>	<b>39%</b>	<b>28%</b>
Social, Emotional and Mental Health	19%	18%	20%	18%	20%	18%	19%	19%	20%	20%	21%	21%
Speech, Language and Communications needs	20%	22%	19%	22%	19%	23%	20%	23%	20%	24%	19%	24%
Other Difficulty/Disability	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	3%	3%
SEN support but no specialist assessment of type of need	4%	3%	4%	3%	4%	3%	5%	3%	4%	3%	4%	3%

### Where do children and young people with SEND live?

There is a well-established link between special educational needs and disabilities (SEND) and poverty. Research has shown that children from low-income families are significantly more likely to be identified as having SEND. The Children’s Commissioner’s report 2023 revealed that Children with SEND are more likely than non-disabled children to be attending a school in the most deprived fifth of neighbourhoods.

When looking at the home postcodes of Herefordshire’s children and young people with SEND, it is evident that the highest proportion of children and young people with an EHCP (30%) or SEN support (27%) in Herefordshire live in the most deprived areas of the county – Figure 7

Figure 7: SEND population in Herefordshire by deprivation (IMD) quintile according to SEND type (Herefordshire Council data)

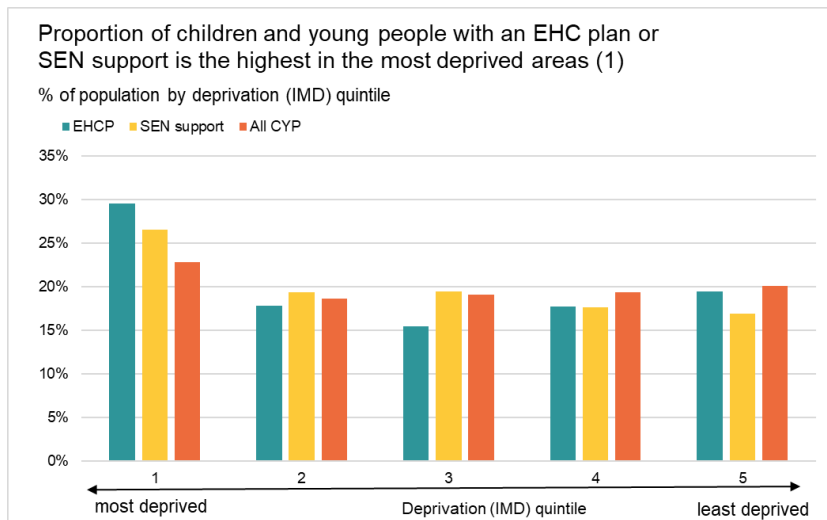
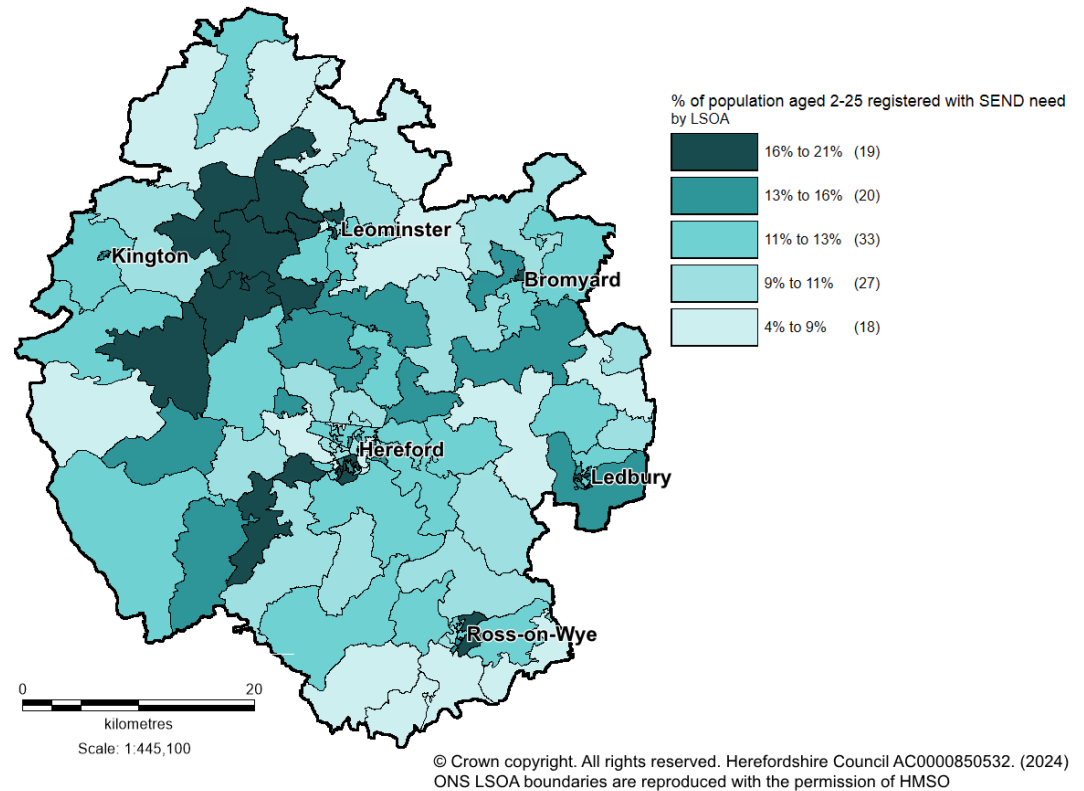


Figure 8 shows the estimated population aged 2-25 years with an EHCP or receiving SEN support in each of the Lower Super Output Areas in Herefordshire. The rates of SEND are highest (18%-21%) in areas with the greatest levels of poverty and deprivation, particularly in Leominster Ridgemoor (21%), Greater Weobley (20%), Bromyard Central (18%), Redhill (18%), and Hunderton (18%).

Figure 8: Map of where children and young people with SEND live in Herefordshire by Lower Super Output Areas (LSOAs) 2024



# Education

## Where are pupils with SEND educated within Herefordshire?

For children and young people with SEND need more support than others while they are at school or college so that they can achieve their potential. The level of support required will vary between children and over time and is based on an individual assessment of each child.

Of the schools in Herefordshire; 78 primary schools, 15 secondary, 5 special schools, one Pupil Referral Unit (PRU) and 12 Independent schools accommodate 5,192 CYP aged 2 to 19 years old who receive SEN support or with an EHCP.

The majority of SEND pupils study in state funded primary and secondary schools (84%) – Table 5

*Table 5: Numbers of children with SEND codes attending schools in Herefordshire, according to phase type, Special educational needs in England: January 2024 (Census Data)*

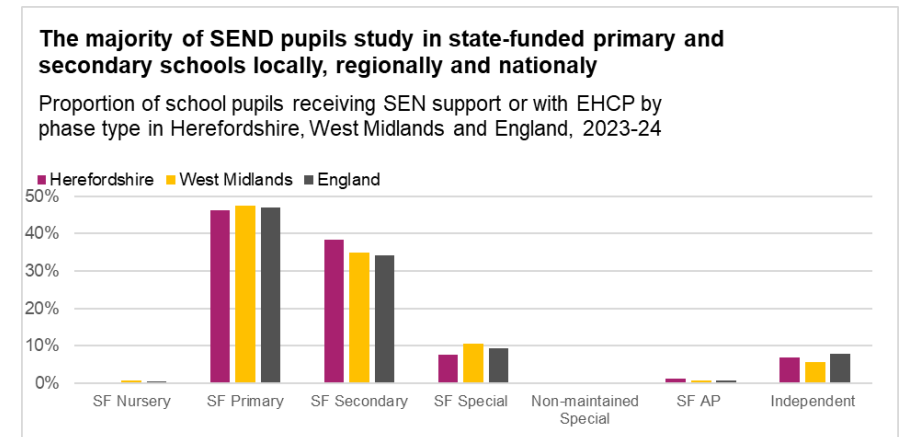
School type	EHCP	SEN support	Total number	Total % (Hfds)	Total % (England)
State-funded Primary	360	2,039	2,399	46%	47%
State-funded Secondary	281	1,707	1,988	38%	34%
State-funded Special School	394	1	395	8%	9%
State-funded AP School (PRU)	12	44	56	1%	1%
Independent School	105	249	354	7%	8%
<b>Total Number</b>	<b>1,152</b>	<b>4,040</b>	<b>5,192</b>	<b>100%</b>	<b>100%</b>

Although the proportion of primary school pupils receiving SEN support and with EHCPs in Herefordshire is similar to the regional and national levels, a slightly higher proportion of SEND children recorded in secondary schools in Herefordshire (38% Vs. 34% nationally) -

Figure 9

In Herefordshire, 17.4% of secondary school pupils receive SEN support, compared to 13.8% nationally, while the proportion with an EHCP is almost the same (2.9% vs. 2.0% nationally)

*Figure 9: Proportion of school pupils receiving SEN support or with EHCP by SEN phase type in Herefordshire, West Midlands and England, Special educational needs in England: January 2024 (Census Data)*



Source: Special educational needs in England: January 2024 (Census Data)

**Where are Herefordshire pupils with an EHCP educated?**

The relative needs of SEND children differ in each educational setting. Also the complexity of SEND needs changed over the time, with the proportion of 0-25 aged children and young people requiring EHCP increased from 795 in 2018 to 1,461 2024 (84%). By 1 April 2018, local authorities must have transferred all children and young people with Statements of SEN who meet the criteria for an EHCP, or have made a decision that it was not necessary to issue an EHCP, therefore 2019 selected as the reference year for this analysis.

Table 6 shows that there has been a steady increase in the number of EHCPs supported by Herefordshire Council across all settings. Despite an overall 84% increase in EHCP caseloads in Herefordshire since 2018, the number of EHCPs in mainstream schools has almost doubled. Additionally, there has been a 46% increase in special schools, a 57% increase in Alternative Provision (AP) and Pupil Referral Units (PRUs), and a 65% increase in Further Education (FE) settings. A similar increase has also been seen among Herefordshire pupils educated elsewhere during the same period. The largest growth was seen in non-maintained early years settings, which rose from 0 to 14.

*Table 6: Trend in EHCP caseload (0-25 years) in Herefordshire by establishment type, Herefordshire Council 2024*

	2018	2019	2020	2021	2022	2023	2024	% change since 2018
<b>Total</b>	<b>795</b>	<b>939</b>	<b>1,002</b>	<b>1,055</b>	<b>1,182</b>	<b>1,284</b>	<b>1,461</b>	84%
Non-maintained early years	0	2	5	6	7	5	14	-
Mainstream school	337	405	429	476	546	532	651	93%
Special school	300	350	375	373	421	411	438	46%
Alternative provision/Pupil referral unit	7	6	11	17	23	13	11	57%
Further education	121	136	148	156	161	195	198	64%
Educated elsewhere	14	20	19	23	19	26	23	64%
NEET	0	20	15	4	5	1	0	-
Other/Unknown	0	0	0	0	0	101	126	-

The complexity of SEND needs in Herefordshire also appears to be increasing over time. Between 2018-19 and 2023-24, the school age SEND population (5 to 16 years) increased by 56%. At the same time the amount of money spent by Herefordshire Council on SEND educational provision (£251) has increased by 117%. This is due to a number of reasons, including an increase in demand for more expensive special school places which has required a small number of children to be educated outside Herefordshire. However, SEN transport cost is not included in the above increase.

## How does provision of SEND education compare with other areas?

*Table 7: The proportion of the school age SEND cohort with EHCP attending different types of educational settings in 2024 (Herefordshire Council Data)*

	Herefordshire	West Midlands	England
Non-maintained early years	1.0%	0.6%	0.8%
Mainstream school	44.6%	36.9%	43.3%
Special school	30.0%	37.9%	32.3%
Alternative provision/Pupil referral unit	0.8%	0.5%	0.8%
Further education: Mainstream provision	7.9%	11.5%	11.7%
Further education: Specialist post-16 institutions	2.9%	2.3%	1.5%
Further education: UKRLP provider	2.7%	1.9%	1.4%
Educated elsewhere	1.6%	3.8%	3.7%
NEET	0%	2.6%	2.7%
Other/Unknown	8.6%	2.0%	1.9%

Table 7 shows that 45% of pupils in Herefordshire with an EHCP are educated in mainstream schools, a figure slightly higher than the national average (43%) and notably higher than in the West Midlands (37%). Special schools educate 30% of EHCP pupils, which is a lower proportion compared to both the national (32%) and regional averages (38%). A similar trend is observed for pupils in mainstream further education settings. However, a marginally higher proportion of Herefordshire's pupils (3%) attend specialist post-16 institutions compared to England and the West Midlands (2%). Additionally, the proportion of pupils in other UK registered learning providers (UKRLP) is higher in Herefordshire (3%) than in the West Midlands (2%) and England (1%).

The differences in proportions reflect not only differences in the level of needs but also variations between local authorities in the way that SEN assessments are undertaken, EHCPs are produced and special provision is made.

**What are the Early Years and Foundation Stage outcomes for children with SEND needs?**

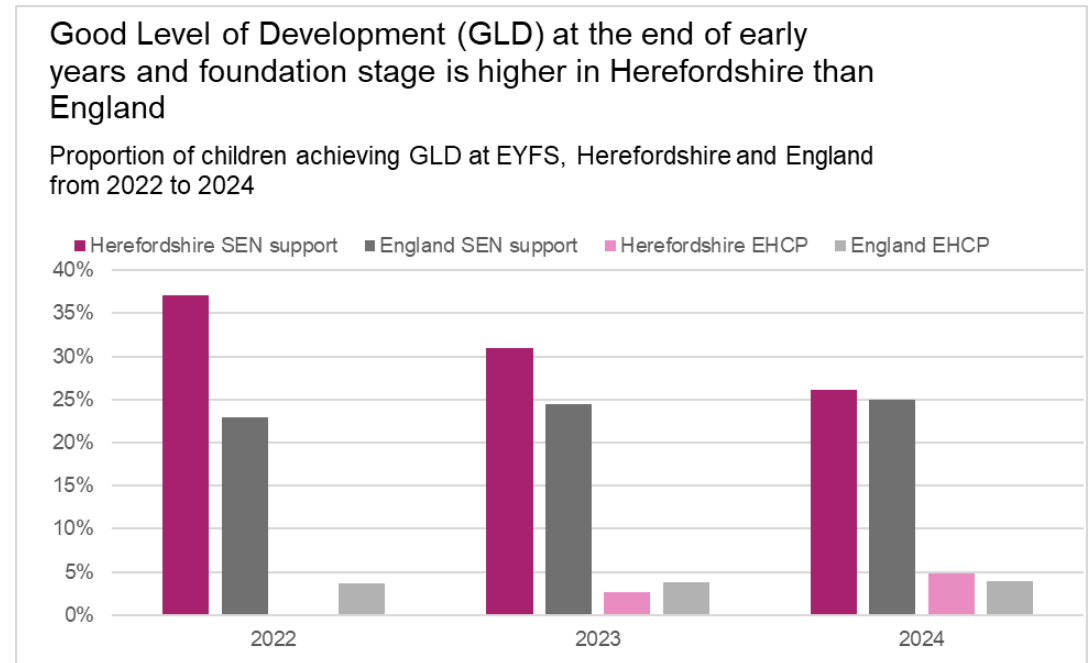
Children are defined as having a good level of development if they are at the expected level for the 12 early learning goals within the 5 areas of learning relating to: communication and language; personal, social and emotional development; physical development; literacy; and mathematics at the end Early Years and Foundation Stage that is end of the reception year.

This is only the second year since the changes to the Statutory Framework for the Early Years Foundation Stage and under the new assessment framework. So there is limited data available currently. Due to the size of the local authority, Herefordshire is always going to have very small numbers in the EHCP cohort at the end of EYFS. This in turn makes year on year comparators unreliable as individual children count towards a significant percentage of the overall total.

Figure 10 - In 2024, 4.8% of EHCP children achieved GLD above the national average of 3.9%. The ambition is that earlier identification of need at a younger age and increased knowledge of the cohort will lead to further children with EHCP reaching GLD at the end of EYFS Assessment.

Historically, children receiving SEN support in Herefordshire have achieved better than their peers nationally. However, the latest data shows that the gap has narrowed to one percentage point between Herefordshire’s SEN support cohort (26%) and the national average (25%) in 2024.

Figure 10: Proportion of children achieving GLD at EYFS, Herefordshire and England 2022-2024



### What are the Key Stage 2 outcomes for children with SEND needs?

Most children sit tests in KS2 Reading, writing & Maths. These are marked externally. Children that took the tests also require a teacher assessment in Writing. Children must meet the expected standard for all 3 subjects - Reading, Writing AND Maths - to be deemed as achieving the Expected standard for RWM.

Figure 11: Proportion of KS2 pupils achieving expected level (reading, writing, and maths) in Herefordshire according to SEND type with comparator areas, 2024 (Local Authority Interactive Tool)

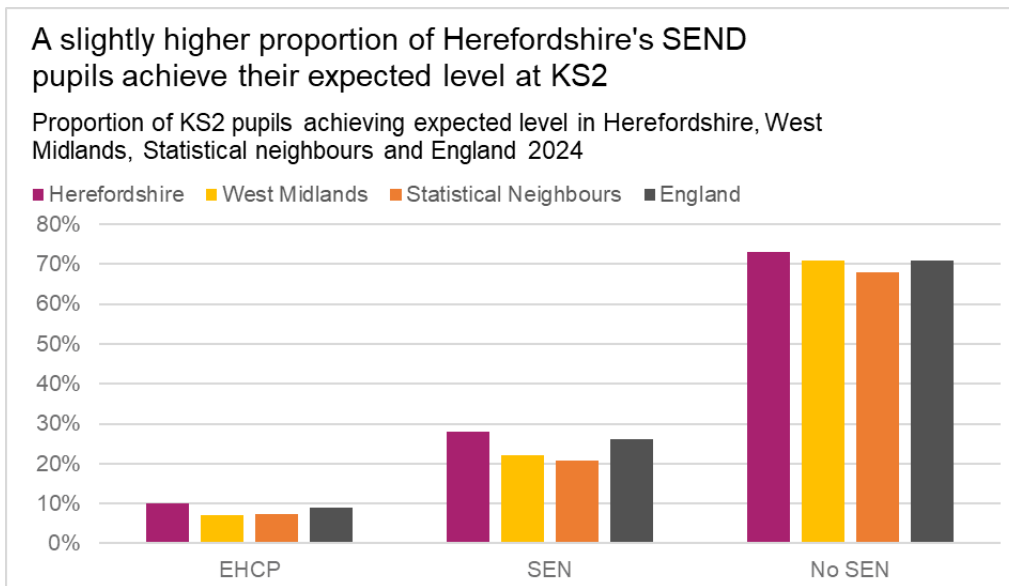


Figure 11 shows that the Herefordshire pupils receiving SEN support and pupils with an EHCP have outperformed their peers in 2024. This has been the case for the SEN pupils since pre pandemic years although Herefordshire's pupils with an EHCP have not performed as well as their peers either pre or post pandemic until 2024 – Figures 12 and 13

Figure 12: Proportion of KS2 pupils receiving SEN support achieving expected standards in RWM in Herefordshire, West Midlands, England and Statistical neighbours

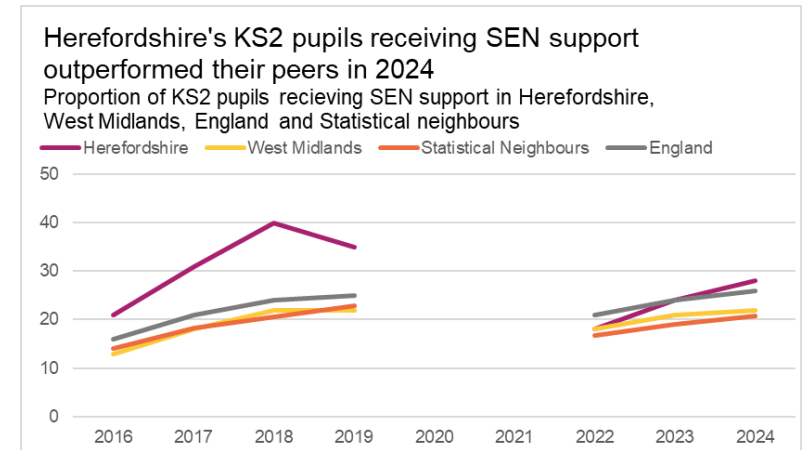
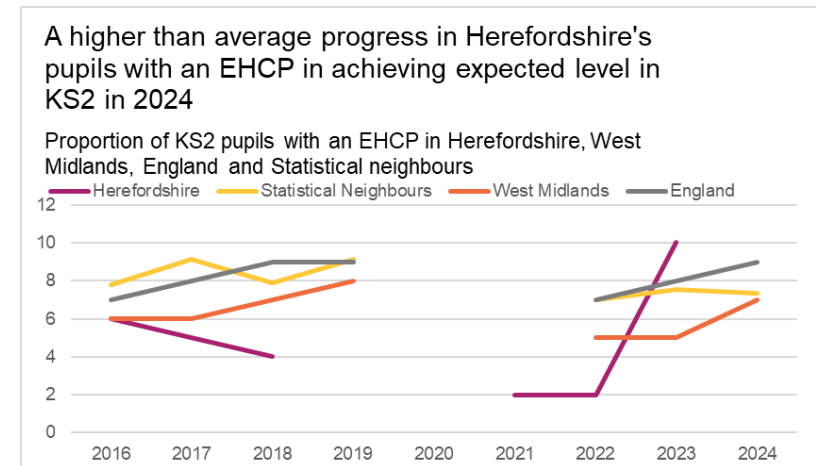


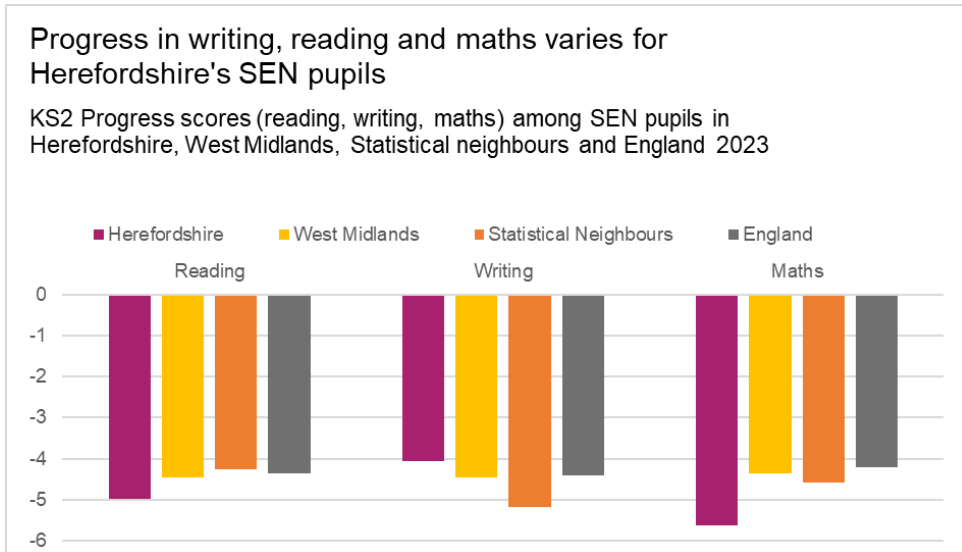
Figure 13: Proportion of KS2 pupils with an EHCP achieving expected levels in RWM in Herefordshire, West Midlands, England and Statistical neighbours



### What are the Key Stage 2 outcomes for children with SEND needs?

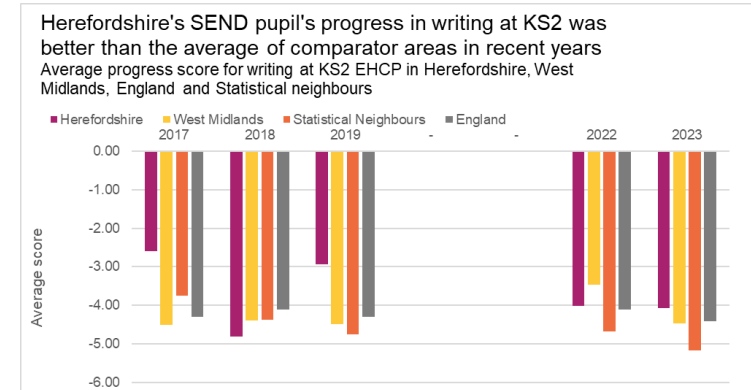
KS2 Progress scores compare pupils' KS2 results to those of other pupils nationally with similar prior attainment. Positive scores indicate performance is above-average; negative scores indicate below-average performance.

Figure 14: KS2 Progress scores (reading, writing, maths) among SEN pupils in Herefordshire and comparator areas, 2023 (Local Authority Interactive Tool)

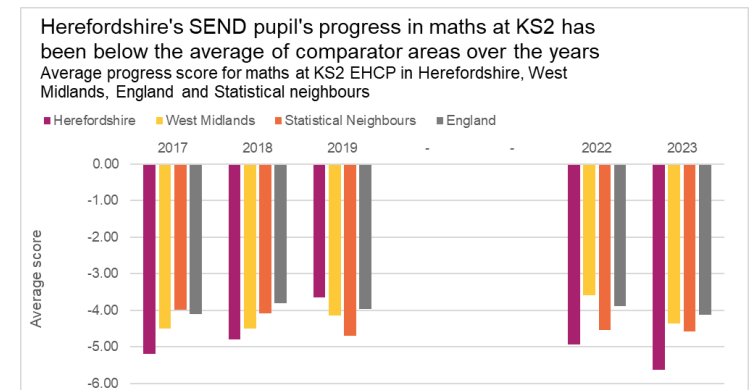
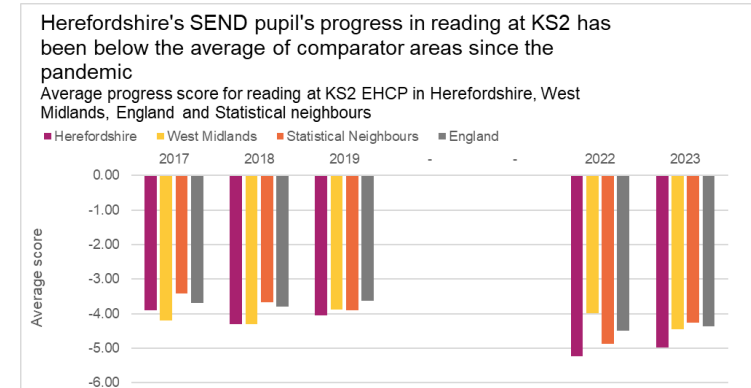


The data suggests that while progress in writing is a positive outcome for Herefordshire's SEND pupils, but reading and maths remain challenging. The larger cohort size and the diversity of primary needs may contribute to the variability in progress across subjects. Herefordshire's SEN pupils have shown varying progress over recent years. Overall, writing is a strength, while reading and maths show areas for improvement – Figure 14.

Figures 15-17: Herefordshire's SEND pupil's progress at KS2 over the years (Local Authority Interactive Tool)16



17



### What are the progress 8 outcomes for children with SEND needs?

Progress 8 is a measure of the progress which children make between the end of primary and the end of secondary school, based on performance in 8 qualifications. A score of 0 indicates that, at the end of secondary school, students are performing in line with those who reached a similar level of attainment at the end of primary school.

Figure 18: Progress score of pupils at the end of KS4 in Herefordshire according to SEND type with comparator areas, 2023 (Local Authority Interactive Tool)

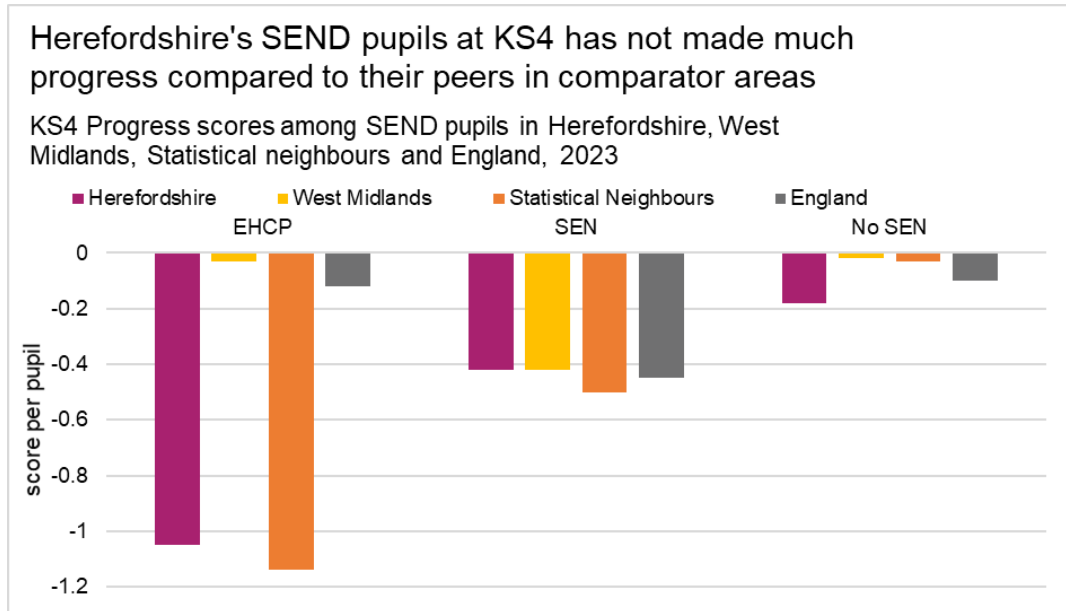


Figure 19 - In 2023 pupils receiving SEN support (-0.42) made better progress than their peers nationally (-0.45), however this progress wasn't positive. EHCP pupils at the end of KS4 in Herefordshire (-1.05) did not make as much progress as their peers nationally (-0.12). It should be noted that only Level 2 qualifications (mainly GCSEs) count in this measure. Many of Herefordshire's EHCP cohort have gained passes in vocational or level 1 qualifications that are not counted in this progress calculation.

Figure 19: Progress score of SEN support pupils at the end of KS4 in Herefordshire with comparator areas, 2016-2023 (Local Authority Interactive Tool)

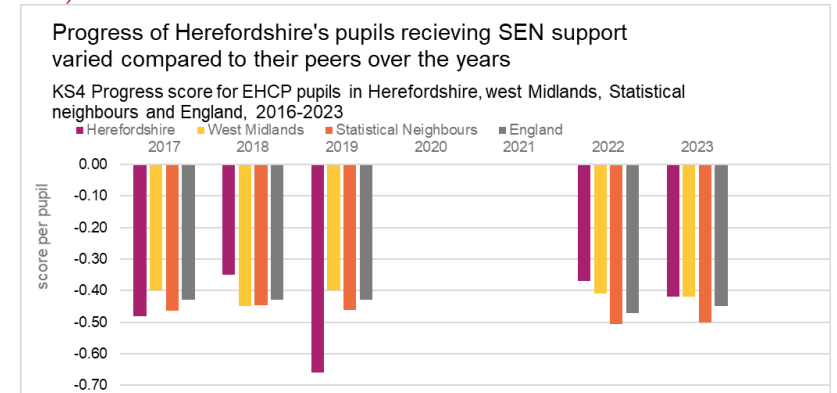
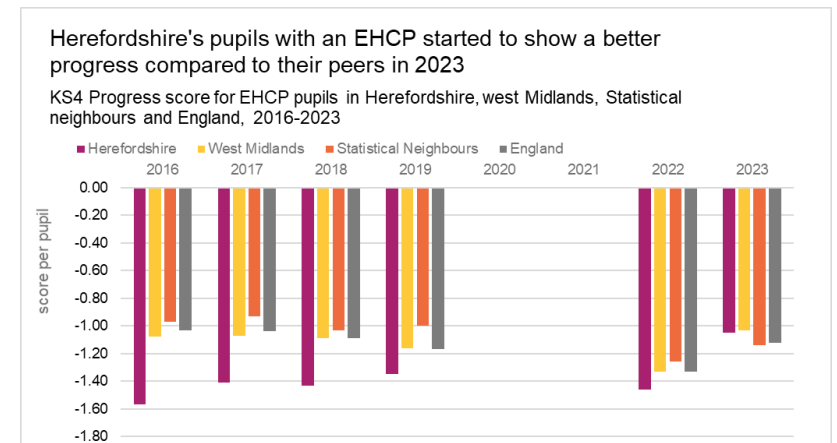


Figure 20: Progress score of EHCP pupils at the end of KS4 in Herefordshire with comparator areas, 2016-2023 (Local Authority Interactive Tool)



### What are the further education and employment outcomes for children with SEND needs?

If a child/young person has SEND then there are additional challenges when leaving school and moving on to the next step in their lives whether it is to continue into education or getting into employment or training/apprenticeship or any other adult services.

Figure 21: Proportion of SEND pupils in education, employment or in training after KS4 in Herefordshire according to SEND type with comparator areas, 2022 (Local Authority Interactive Tool)

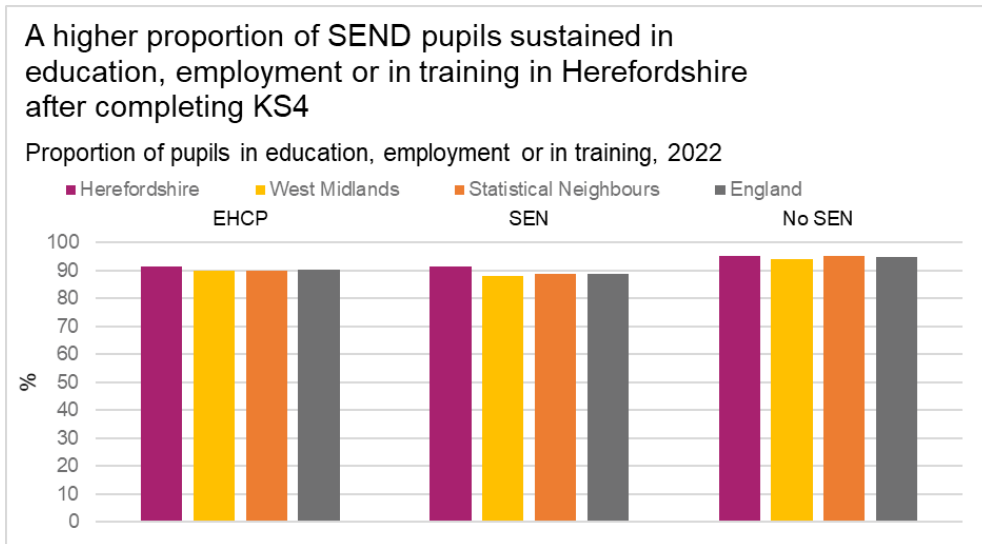


Figure 22 shows that a high percentage of young people with an EHCP (91.5%) or receiving SEN support (91.2%) are continuing into sustained education, employment or apprenticeship destination after completing year 11 in 2022, slightly below the percentage of young people with No SEN support (95.2%).

Compared to the peers in other areas a higher proportion of Herefordshire's pupils with an EHCP or receiving SEN support has been sustaining in education, employment or training

over the years. This outcome for EHCP pupils is above the average for the SEN support cohort, it has been the case for most of the years since 2017– Figures 20-21

Figure 22: Proportion of SEN support in EET in Herefordshire, West Midlands, Statistical neighbours and England, 2017-2022 (Local Authority Interactive Tool)

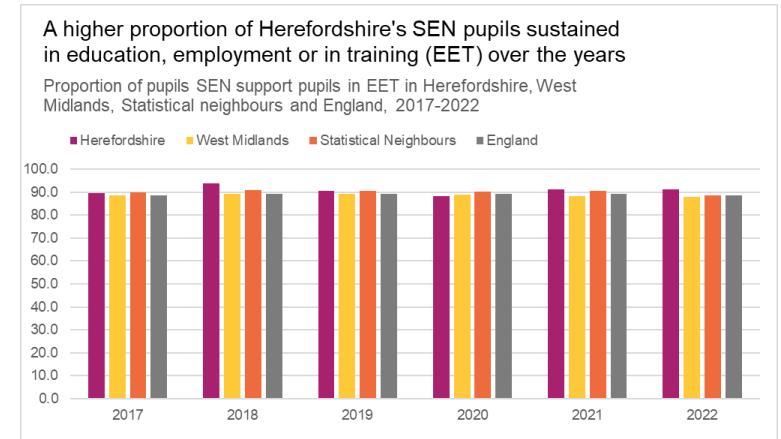
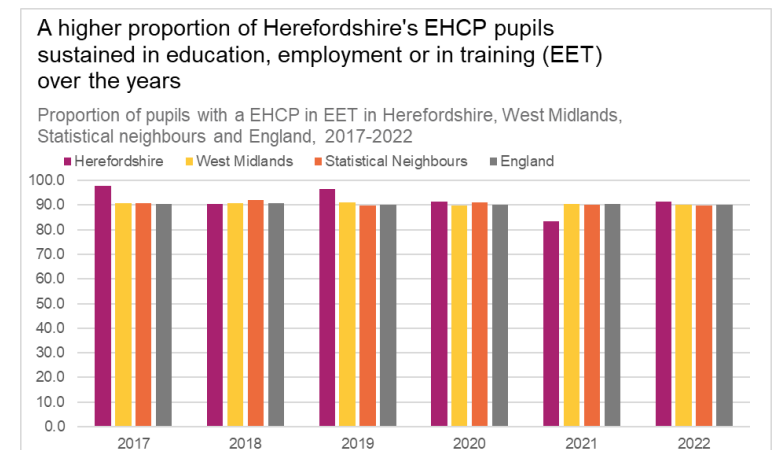


Figure 23: Proportion of EHCP pupils in EET in Herefordshire, West Midlands, Statistical neighbours and England, 2017-2022 (Local Authority Interactive Tool)



### Progression to Higher Education (HE) and high tariff HE by age 19

There are fewer children with SEND progressing into higher education due to various reasons, including a lack of SEN-specific advice and guidance, insufficient support for independent living and study skills, no formal handover from schools or colleges to higher education providers, and a lack of accessibility in higher education. Whatever the reasons, this results in fewer better life chances for children and young people with SEND.

For pupils with SEND in Herefordshire, the Higher Education (HE) progression rate by age 19 fell from 14.7% in 2021/22 to 10.7% in 2022/23, remaining well below the national level of 20.7%. Pupils with no identified SEN have a progression rate of 42.6% in Herefordshire, compared to 51.2% in England. The progression gap between pupils with and without SEN in Herefordshire widened in 2022/23 (see Figure 25).

The situation is even more concerning at the level of progression into higher-tariff higher education, where only 0.3% of Herefordshire's children and young people progressed into higher-tariff institutions by age 19, compared to 4.3% of their peers nationally.

Figure 24: Progression rate to higher education by age 19 for SEND and No SEND in Herefordshire

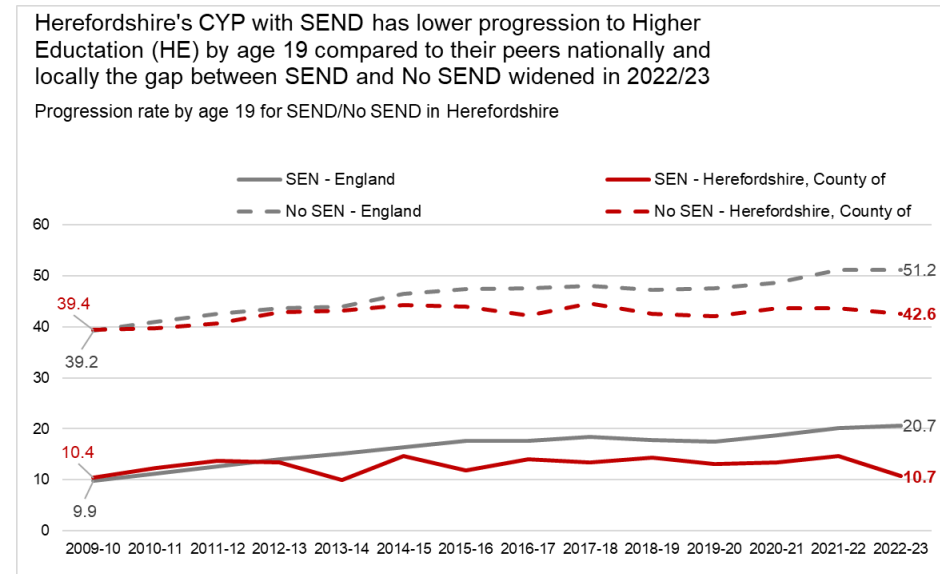
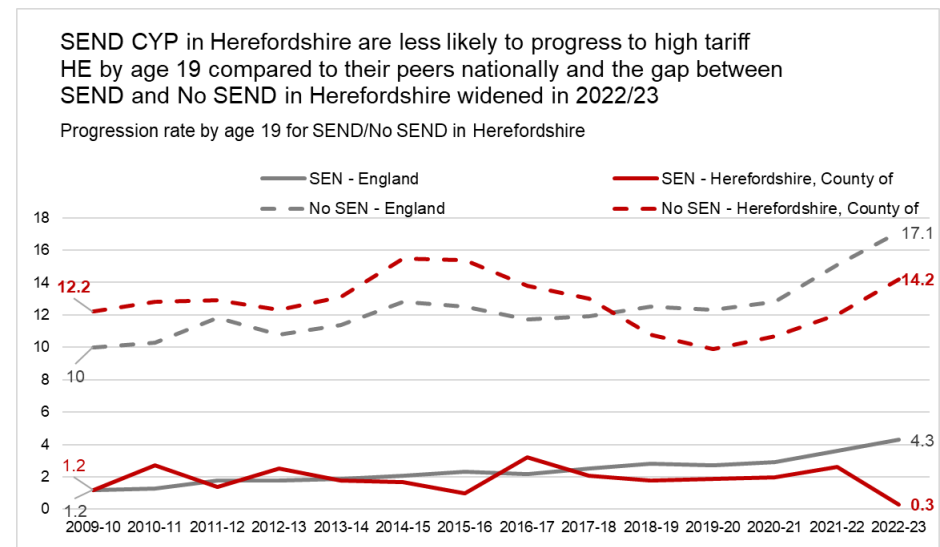


Figure 25: Progression rate to high tariff higher education by age 19 for SEND and No SEND in Herefordshire



**What are the school absence and exclusion rates for SEND pupils?**

Children with SEND have historically had more absences for a number of reasons: health issues, lack of support in school, waiting for a suitable school place, waiting for a first or updated Education, Health and Care Plan (EHCP), as well as being subject to higher rates of exclusion. Therefore it is important to monitor the absence and excluded rates as they may indicate a need for additional support, either in mainstream or special schools.

The pupils with profound and multiple learning difficulties and social emotional and mental health problems have missed school the most – Figure 27

A pupil is classified as a persistent absentee if they miss 10% or more of their own possible sessions.

Over time (4 year trend) shows that SEN support pupils in Herefordshire have a lower persistent absence rate than their peers nationally. Despite the higher rate in 2020/21, generally the persistent absence rate of EHCP pupils in Herefordshire are slightly lower or similar to the level seen in England –Figure 28.

Figure 26: Comparison of absence rates (% of sessions missed) according to primary need in Herefordshire, 2022/23 (Department of Education data)

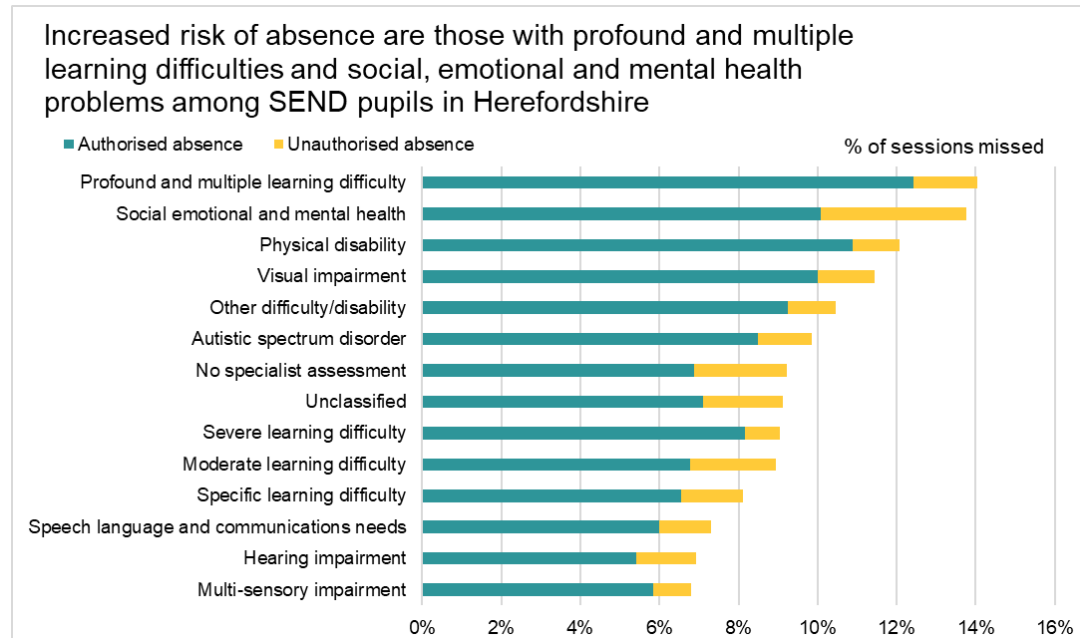


Figure 27: Persistent absence rate for SEND pupils in Herefordshire and England, from 2017-18 to 2022-23

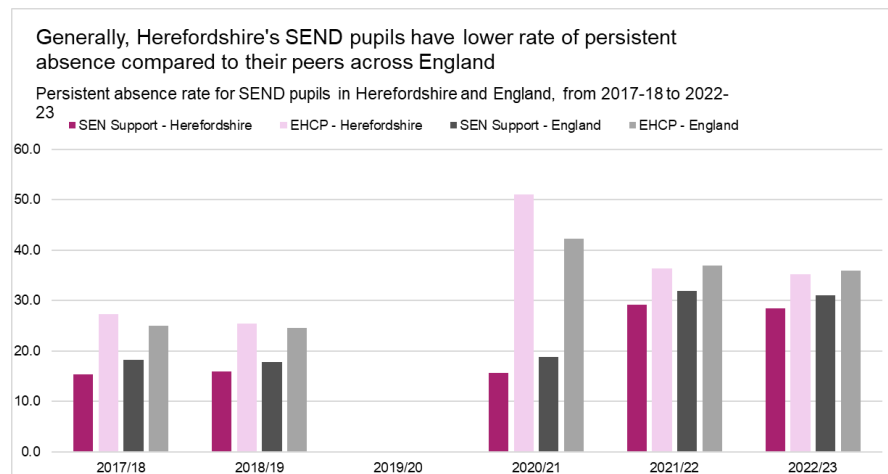


Figure 29 shows that the persistent absentee rates in primary, secondary and special schools in Herefordshire are in line with national rates.

Rates of permanent exclusion of EHCP children are low, however compared to national level slightly higher rate can be seen in Herefordshire in SEN support cohort although the numbers are very small (18 pupils) in 2022-23.

The suspension rates of pupils with SEN support is well below national average over the years and similar pattern is seen with pupils with an EHCP in recent years – Figures 30-31.

Figure 28: persistent absentee rates in Herefordshire and England, 2022-23

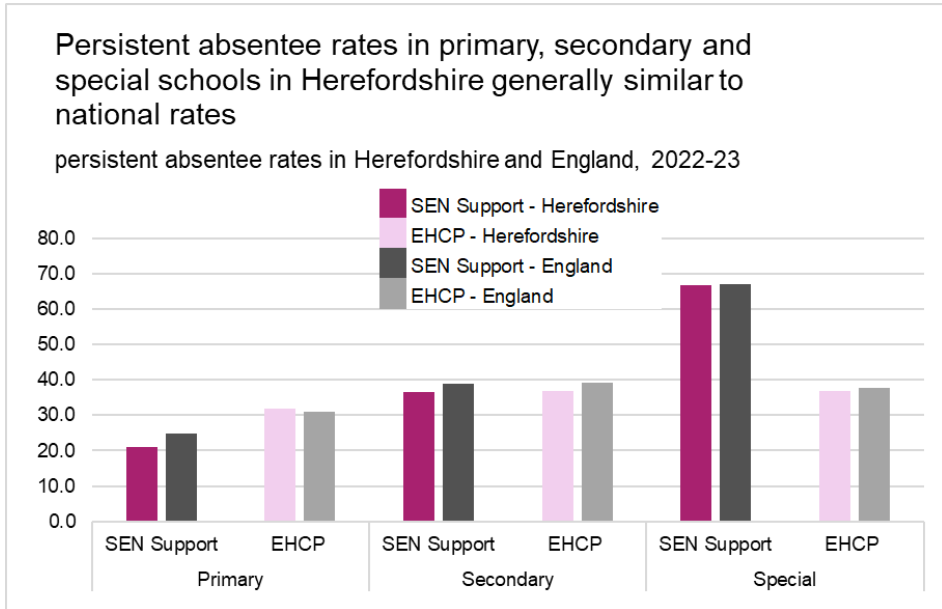


Figure 29: Permanent exclusion rates for END pupils in Herefordshire and England from 2017-18 to 2022-23

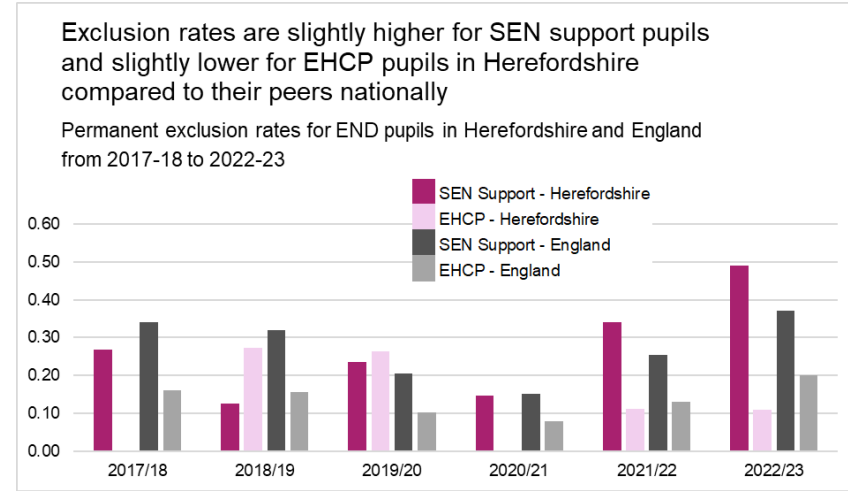
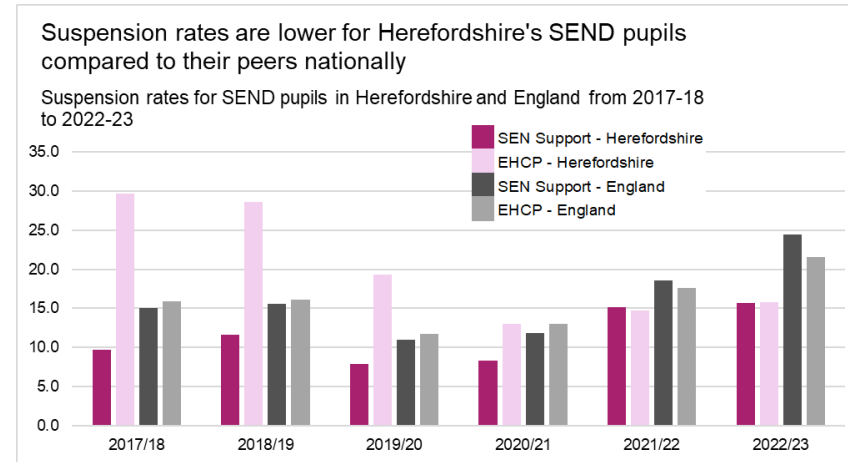


Figure 30: Suspension rates for SEND pupils in Herefordshire and England from 2017-18 to 2022-23



# Health

## What are the most common health problems affecting the 0 to 25 population?

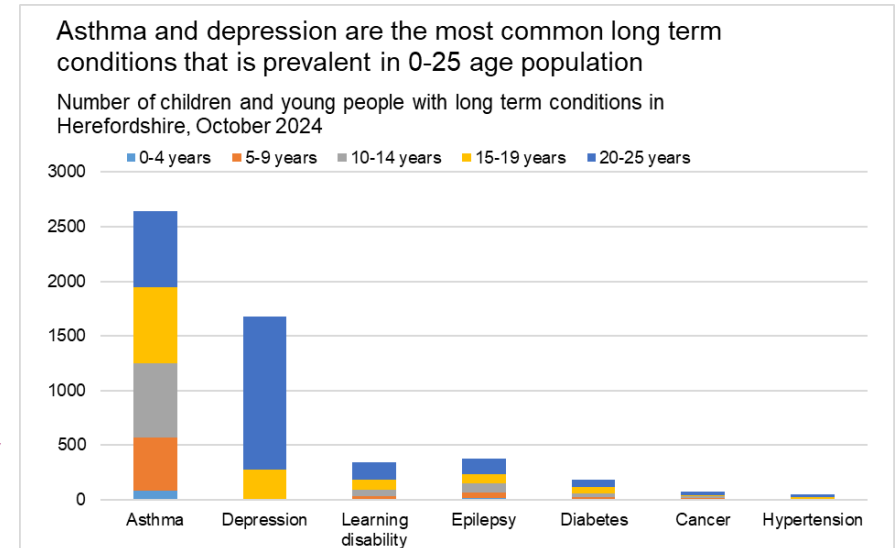
Not all children and young people who have a disability will have a special educational need (and vice versa). However, it is useful to know the prevalence of disability in local population for the local authority to commission services. According to Census 2021, just over 4,000 children and young people aged 0-25 years in Herefordshire had a disability which limited their day to day activities. 11% (426 CYP) of them were identified either by themselves or their parent or guardian as having bad or very bad health – Table 8. Herefordshire is in line with England averages.

*Table 8: Self-reported health and functional status of 0-25 population who are 'Disabled under the Equality Act', Census 2021*

Health	Day-to-day activities limited a lot	Day-to-day activities limited a little	Total number	Total % (Hfds)	Total % (England)
Very good or good health	636	1,922	<b>2,558</b>	63%	63%
Fair health	434	620	<b>1,054</b>	26%	27%
Bad or very bad health	319	107	<b>426</b>	11%	10%
<b>Total</b>	<b>1,389</b>	<b>2,649</b>	<b>4,038</b>	100%	100%

According to the Herefordshire Population Health Management (PHM) Tool, which reports GP practice data recorded in the EMIS system, there are 50,285 children and young people aged 0–25 years registered with all GP practices across Herefordshire. However, there is no flag to identify children classified as having SEND. The following analysis pertains to the entire 0–25 population in Herefordshire.

*Figure 31: Prevalence of common long term conditions in children and young people aged 0-25 years across GP practices in Herefordshire, PHM Tool, Taurus Healthcare 2024*



According to figure 32, Asthma and depression are the most common long term conditions prevalent in the whole 0-25 year population registered with a GP practice in Herefordshire. For each condition there is a different age distribution which has implications for service provision. For example, the prevalence of asthma is reasonably stable, while the rate of depression increase with the age.

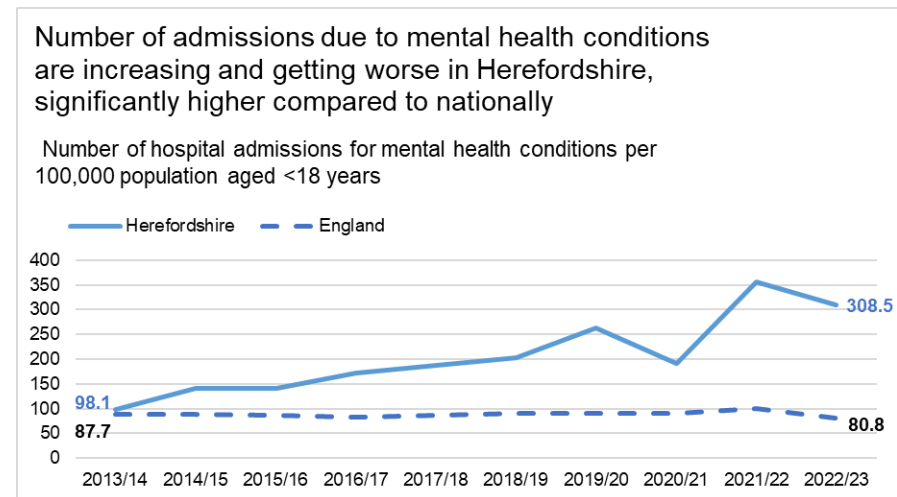
Figures 32-35 shows the hospital admissions\* for the **whole 0-19 year population** (except for self-harm) linked to the most common long term conditions. The following data refer to episodes or admissions and not persons. Hospital admission indicators are published to benchmark the use of acute healthcare services, with rates per 100,000 population enabling comparison between different sized areas. However, such indicators may be influenced by local variation in referral and admission practices as well as variation in incidence or prevalence.

Number of admissions due to mental health conditions are increasing and getting worse for the under 18 children and young people, from 202.7 to 308.5 per 100,000 population (from 70 to 105 admissions) over the last 5 years and significantly higher compared to national levels, 80.8 per 100,000 in 2022-23.

When looking at the mental health related admission data, including procedures carried out and the length of hospital stays, the majority of admissions involve blood withdrawals, with patients discharged on the same day. Additionally, just under half of admissions had a diagnosis of some form of eating disorder. In each individual year since 2020/21, this was the single most common reason for mental health related admissions.

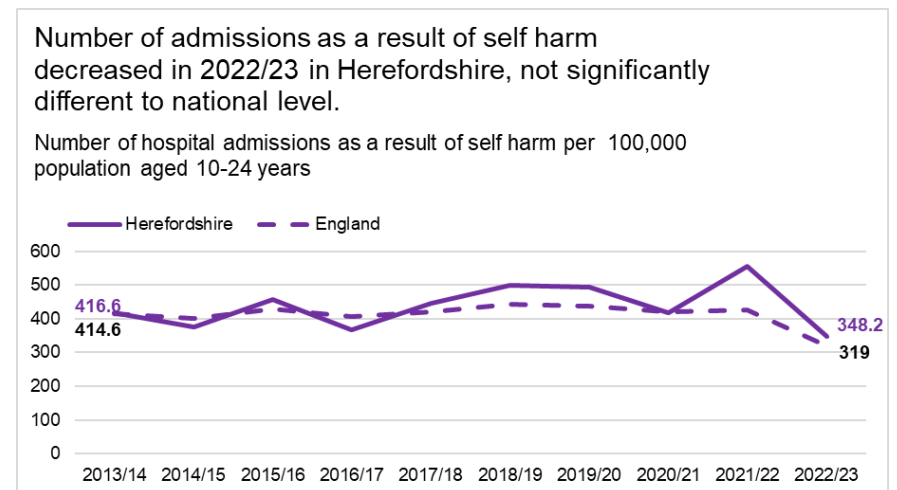
Hospital admissions for self-harm among 10 to 24-year-olds decreased from 554 per 100,000 population in 2021/22 to 348.2 in 2022/23. This rate is not significantly different from the rate for England, which stands at 319 per 100,000 – Figure 33.

Figure 32: Hospital admissions for mental health conditions (<18 years) in Herefordshire and England



Source: OHID fingertips

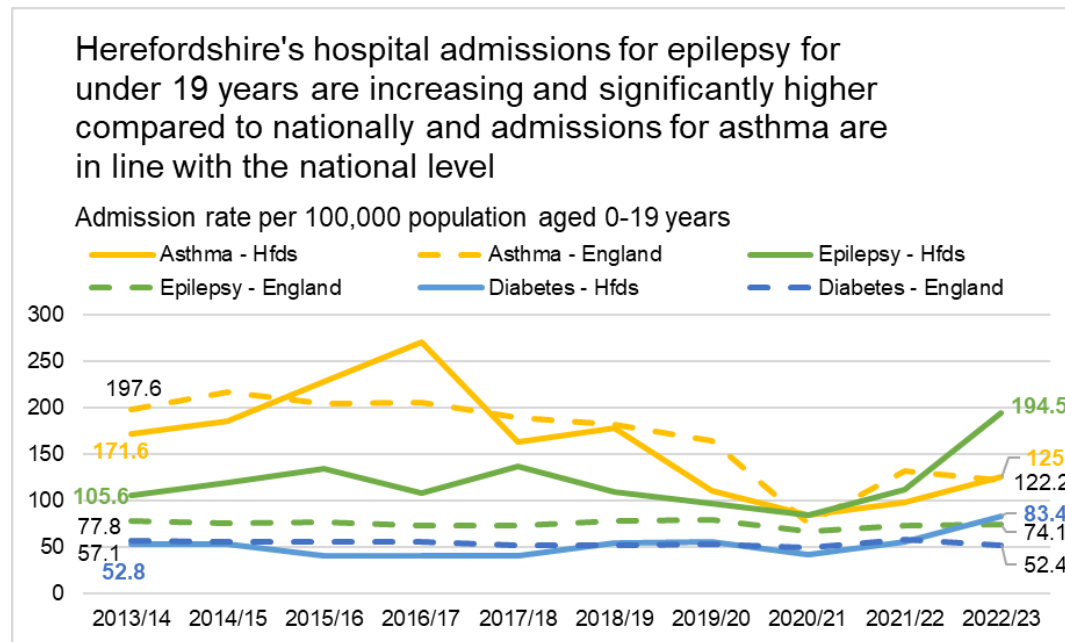
Figure 33: Hospital admissions as a result of self-harm (aged 10-24 years) in Herefordshire and England



Source: OHID fingertips

Admissions due to epilepsy among those under 19 years show an increasing trend and are significantly higher than the rate for England (194.5 compared to 74.1 per 100,000) in 2022/23. Admissions for diabetes are also high, though not significantly so, with a rate of 83.4 per 100,000 in Herefordshire compared to 52.4 per 100,000 in England. Hospital admissions for asthma among children show a decreasing trend overall and are similar to the national level – Figure 34.

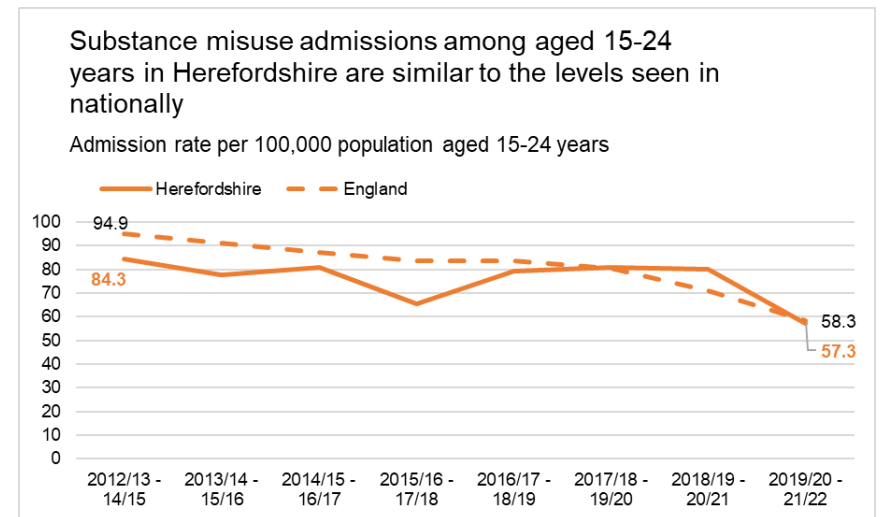
Figure 34: Hospital admissions for epilepsy, asthma and diabetes (<19 years) in Herefordshire and England



Source: OHID fingertips

Substance misuse admissions among the entire 15 to 24-year-old population have shown an overall decrease over the years (see Figure 35). The latest rates are similar to the national rate, with 57.3 per 100,000 in Herefordshire compared to 58.3 per 100,000 in England, and show a decreasing trend in recent years.

Figure 35: Hospital admissions due to substance misuse for 15-24 years in Herefordshire and England



Source: OHID fingertips

### Recommendation

Introduce a suitable marker to the EMIS primary care patient management system for clear identification for children and young people with SEND.

Implement a comprehensive tracking system across all services which will help to understand the outcomes for children and young people.

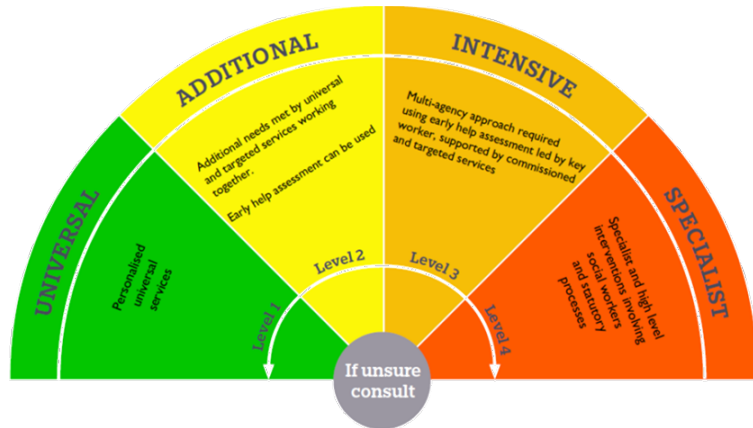
# Early Help Assessments and Social Care

## Early Help Assessments

Early Help in Herefordshire means to ensure that children and young people receive the Right Help at the Right Time to reduce the likelihood of adverse childhood experiences<sup>2</sup>. Early help is everyone’s responsibility.

The diagram below sets out the four levels of need that services and professionals will use to ensure the right help is provided at the right time to the right children and families.

Figure 36: Threshold of need diagram set out by Herefordshire Safeguarding Children Partnership (HSCP), 2020



Early help can be provided by a range of partner agencies and council services at any stage of a child or young person's life, from pre-birth through to the teenage years or up

to 25 years old for those with special educational needs and disabilities (SEND). Early Help services are made up of:

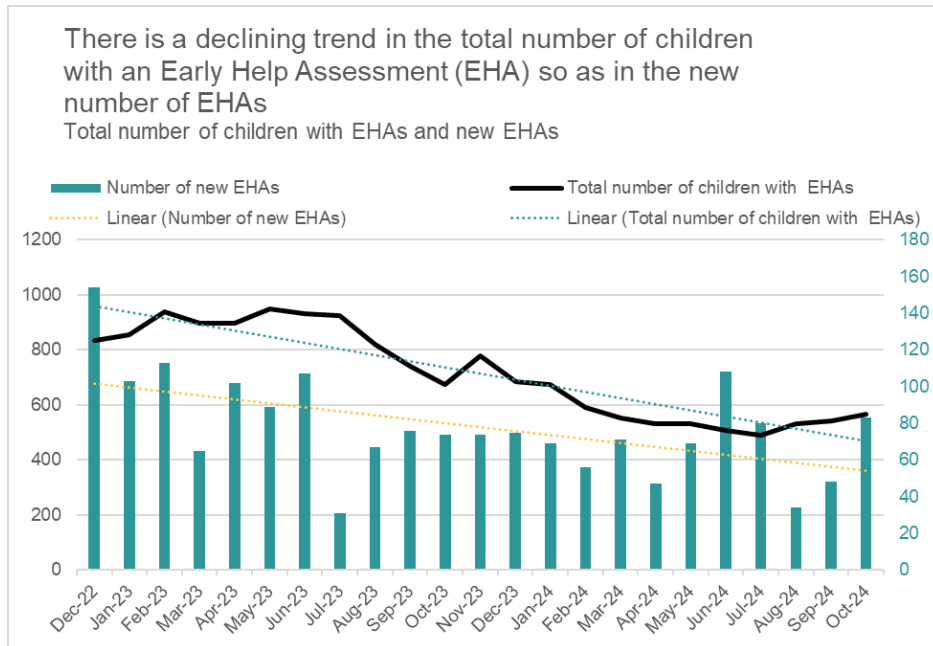
1. The Children’s Help and Advice team (CHAT) which has a direct telephone line for young people, parents and professionals offering advice, guidance, sign posting and facilitates support through an Early Help Assessment (EHA). The line has on average 70 calls a month, 50% of them from families (October 2024).
2. Parenting programmes open to all families with two specific parenting programmes aimed at parents of children with SEN; Triple P Fearless and Stepping Stones which are both very popular.
3. Whole family support for those families with an EHA through family support workers and the commissioned service of Vennture.

The EHA is completed for level 3 families (see Herefordshire’s level of need diagram) and with their consent. The EHA is for all family members and looks at both the needs and the strengths. From this an outcome focussed support plan is agreed with the family.

As of end of October 2024 there were 534 open EHA’s in Herefordshire, of these 55 were for children with EHCPs; 10% of total EHAs. The average number of new EHAs received has remained around at 66 per month in 2024- Figure 37. The vast majority of the EHAs receive via the portal.

<sup>2</sup> [Early Help and Prevention Strategy, Herefordshire Council March 2023](#)

Figure 37 Total and New number of children with an Early Help Assessment



**Specialist day time and overnight short breaks**

The day time breaks were provided in terms of group activities or by individual support (buddying). There were 63 packages delivered totalling 16,785 hours of daytime specialist break by December 2024, an increase of 37 packages since April 2024.

As of April 2024, 13 packages of overnight breaks were allocated totalling 312 night and further 10 packages were secured by December 2024 which was an additional 281 nights. The unmet demand for the overnight breaks were reduced from 11 (305 nights) to 6 (194 nights) packages between April and December 2024.

**Targeted Short Break (TSB) Allowance Scheme**

This scheme is aimed at SEND children who require extra support to take part in leisure activities out in the community whilst giving their main carer/s a short break. The SEND children aged 4-17 and has an EHCP and on Special Educational Needs Tariff D or above are eligible for TSB allowance. There is a process in place for children and their parents to apply through special circumstances if they do not meet the initial criteria. As of November 2024, there were 436 parents of the above children were in receipt of the allowance which compared to 412 in 2023.

**Children’s direct payments**

These are monetary payments given directly to a person who is a parent or carer of a child or young person or to the young person if they are over 16 or to a nominee/carer of the young person with their consent. Direct payments can be used to:

- Employ a personal assistant(s)
- Can arrange care and support or day opportunities

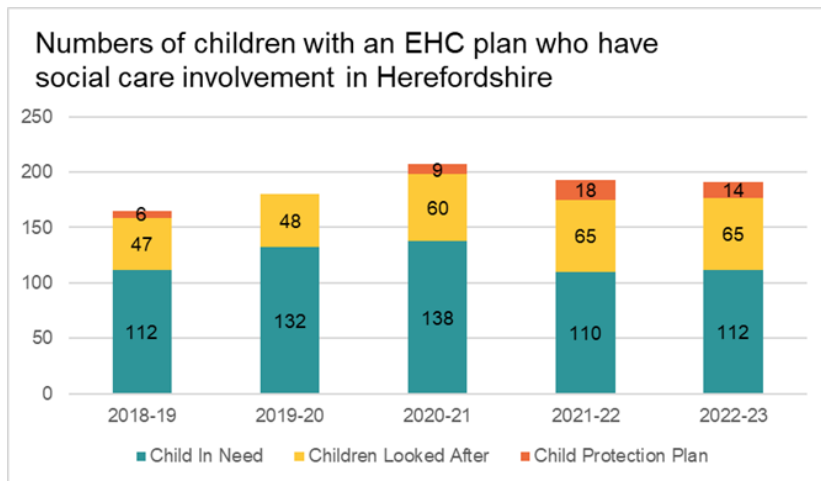
There is more flexibility in receiving direct payment as it gives flexibility, control and independence to choose the type of support and whenever they need. In December 2024, there were 110 children and young people who received direct payments, this compares to 133 in April 2024.

### How many children and young people with SEND have social care involvement

In 2022–23, just under a fifth of children with an EHCP in Herefordshire (191 children, or 19%) received some form of involvement from social care (see Figure 38).

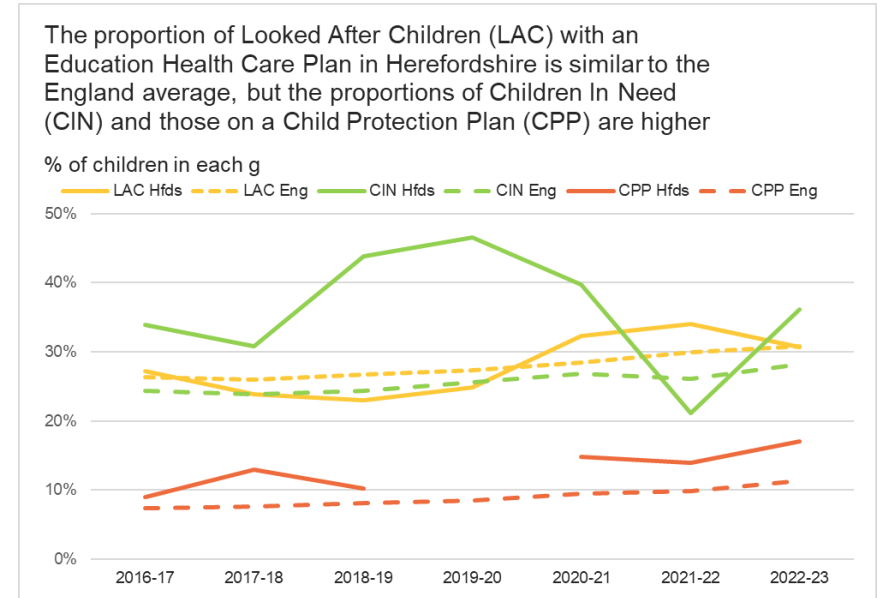
Over the past five years, there has been an overall increase of 16% in the number of children with an EHCP who have social care involvement, although the increase in numbers is small (26 children, or 16%).

Figure 38: Numbers of children with an EHCP who have social care involvement in Herefordshire from 2018-19 (Education Statistics data, DofE 2024)



Compared to national data, Herefordshire has a slightly higher proportion of CIN with an EHCP (36.2% vs. 28.2%), although the gap has been narrowing over the last five years. Additionally, the latest data available (2022-23) shows a higher proportion of CPP (17.1% vs. 11.4%) in Herefordshire, but a similar level of children in care (30.7% vs. 30.8%) compared to the national figures (Figures 39).

Figure 39: Proportion of EHCP children with social care involvement in Herefordshire and England from 2016-17 to 2022-23, Special Education Needs, Department of Education 2024



Note: Number of children with an EHCP and who are on a CPP were <5 in 2019-20 hence it is not published.

### What type of housing do those aged 18-24 years in Herefordshire with SEND live in?

Table 9 shows the accommodation types for the 18 to 24 population in Herefordshire who have been under long-term social care services for at least 12 months. Most CYP are living in family homes (22 people), while 5 people are in Herefordshire Shared Lives, a highly personalised form of care that supports people with a wide range of needs to live safely and comfortably in a home and community of their choice. Another 6 people live in shared housing in Herefordshire and less than five live alone as a housing association tenants. It is not possible to identify whether any of these young people have an EHCP or a disability.

*Table 9: The type of accommodation for 18-24 aged population with social care needs live in Herefordshire, October 2024 (Herefordshire Council Data)*

Accommodation Type	Number
Family home - live in a mainstream house with family and friends	22
Herefordshire Shared Lives - live with others	5
Housing Association tenant - live alone	<5
Shared Housing - Supported Living/Lodgings/Supported Group Home	7
Total	~35

# EHCP services in Herefordshire

## How well does the SEND assessment process work?

In Herefordshire, there were 401 new requests made for assessment for an EHCP in 2023. Of these, 85 (21.2%) were declined without an assessment, a lower rate compared to the West Midlands (27.6%) and England (24.0%) – Figure 39.

In the same year, out of the 294 assessments made for EHCP, all but one were approved, resulting in a 99.7% approval rate. This is higher compared to the West Midlands (96.9%) and England (94.9%) – Figure 40.

Figure 40: Outcomes from requests for EHCP assessment in Herefordshire, West Midlands and England 2023:

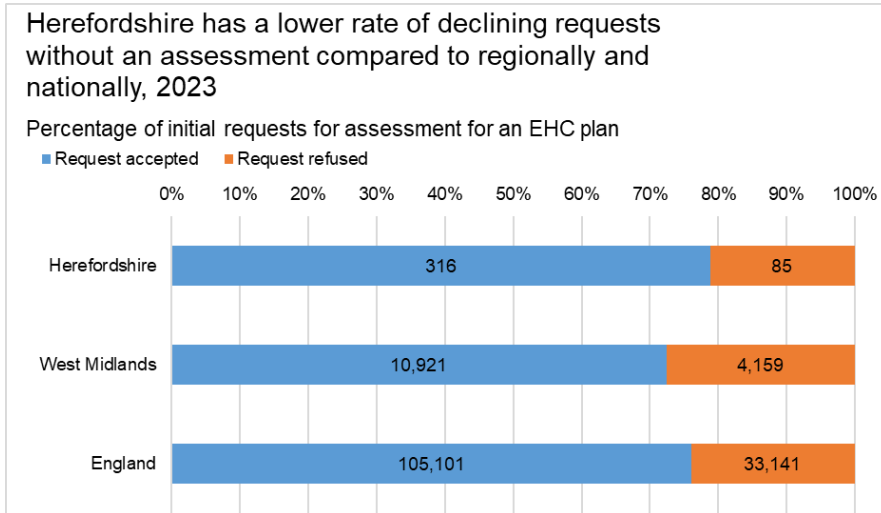
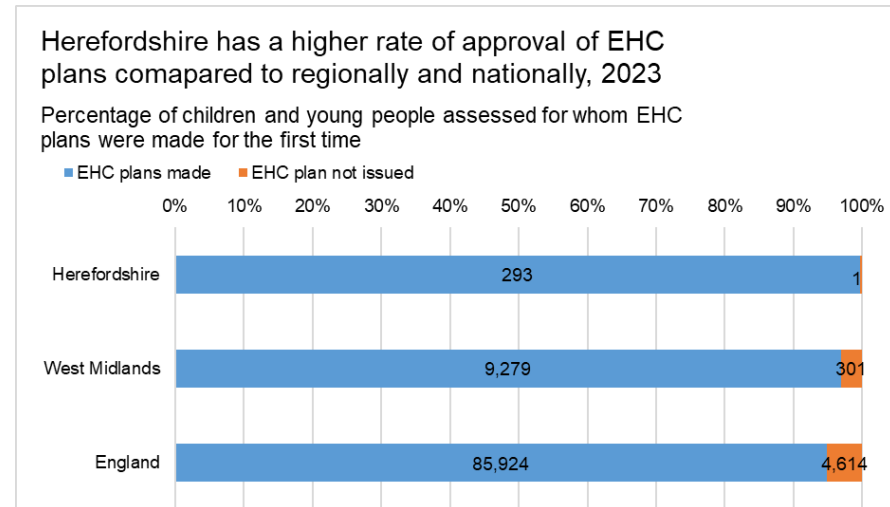


Figure 41: Outcomes from EHCP assessment in Herefordshire, West Midlands and England 2023



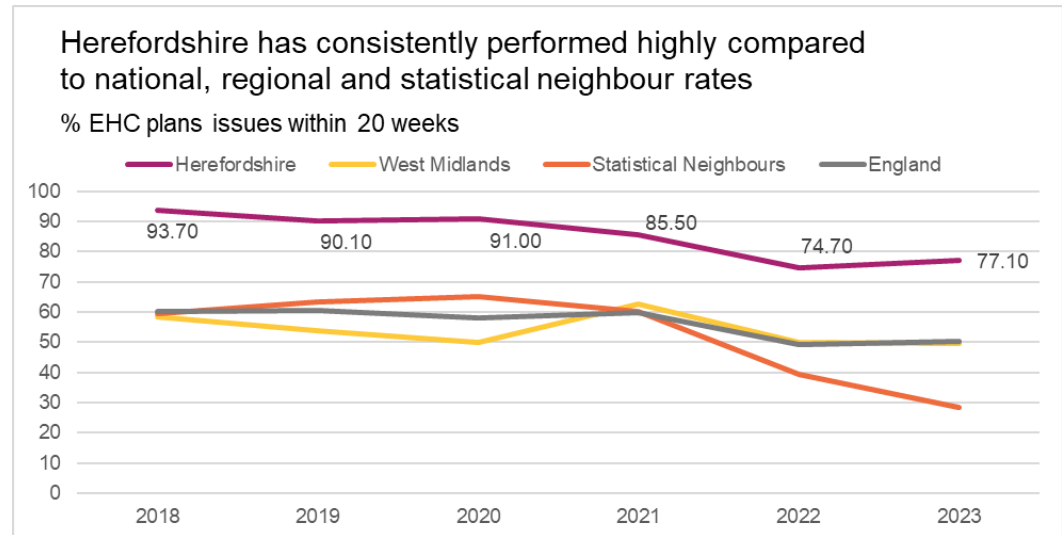
### How well does the SEND assessment process work?

The whole process of EHC needs assessment and EHCP development, from the point when an assessment is requested (or a child or young person is brought to the local authority’s attention) until any final EHCP is issued, must take no more than 20 weeks. The relevant legislation provides for exceptions to the time limits in certain situations.

Although the rates are not high as pre pandemic levels, Herefordshire has consistently performed highly compared to national, regional and statistical neighbour rates- Figure 41  
 In 2023, the rate of EHCP issued within 20 weeks was 77% in Herefordshire compared to 50% in the West Midlands and England and 28% in the similar authorities.

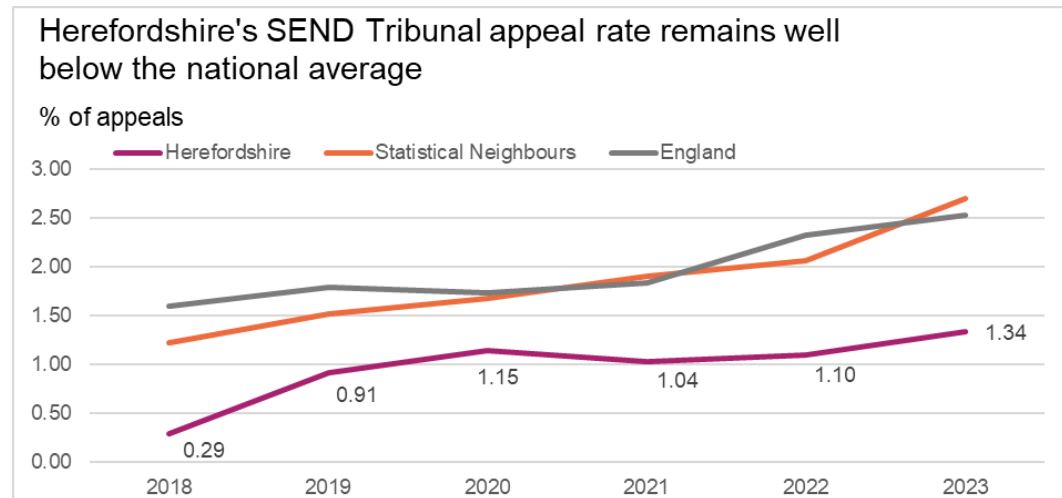
Herefordshire’s SEND tribunal rate remains well below England averages, which is an indicator that the local assessment process is working well – Figure 42

Figure 42: New EHCP issued within 20 weeks, excluding exception cases from 2018-2023



Source: Local Authority Interactive Tool, 2024

Figure 43: SEND Tribunal appeal rates from 2018-2023



Source: Local Authority Interactive Tool

# SEND services in Herefordshire

## How are the demands on SEND services changing over time?

### Portage

The Portage Early Education Programme, is a home teaching scheme for families with a pre-school aged child, between 0 and 5 years old (up until the August that children are due to transition to school), who may have special educational needs or disabilities.

Herefordshire Council is supporting more families each year through a combination of more streamlined working methods and a slightly larger team- Table 10

As of October 2024, the referral list has 16 children, down from 76 in 2021. The average time to intervention has decreased to 115 days this year, compared to 275 days in 2021.

*Table 10: Number of referrals received and the number of families supported in Portage services, Herefordshire Council data 2024*

Number	2021-22	2022-23	2023-24
Number of referrals received	85	213	195
Number Families supported	84	139	165

### Educational psychology

The service provides educational psychology assessments and case work for children and young people in Herefordshire who have a variety of special educational needs and disabilities (SEND). This work is at two levels: early intervention work with schools for children whose needs are emerging, and supporting schools to understand and provide for these children’s SEND. And secondly, assessments

completed as part of the EHCP (Education, Health, and Care Plan) process for children with the highest levels of need. EHC needs assessments (EHCNA) are statutory, and therefore take precedence over the early intervention support for children and schools. In recent years, the numbers of children requiring EHCNA’s has increased substantially. This is a national picture and locally led to the EP service pausing their early intervention work in December to ensure this statutory work is provided within statutory timeframes.

Table 11 shows the number of early intervention cases (i.e. pre-statutory assessment work) completed by the educational psychology service, as well as the number of EHC needs assessments completed each academic year. In 2019/20 school closures due to the Covid-19 pandemic led to reduced caseloads. By the time early intervention work paused in December 2022, 94 cases had been completed. Early intervention case work in schools was due to resume in the second half of the autumn term 2024 following recruitment and an increase in the EP service capacity.

*Table 11: Number of cases completed by the Early Intervention service, Herefordshire Council*

Year	Number of early intervention cases completed	Number of EHCNA statutory assessment cases completed
2017/18	135	106
2018/19	143	131
2019/20	57	44
2020/21	129	187
2021/22	114	162
2022/23*	94	259
2023/24	0	303

\* Early Intervention only up to December 2022

### Social, emotional and mental health (SEMH) inclusion service

As always has been the case SEMH is one of the high primary needs among the SEND children and young people.

Due to the growing number of children and young people with SEMH needs, there appears to be a rise in referrals to the SEMH Inclusion Service and an increasing number of requests for top-up funding. –

Table 13.

*Table 12: Number of referrals to SEMH Inclusion Service, Herefordshire Council data*

Academic Year	Number of referrals
2022/23	145
2023/24	343

### Health services

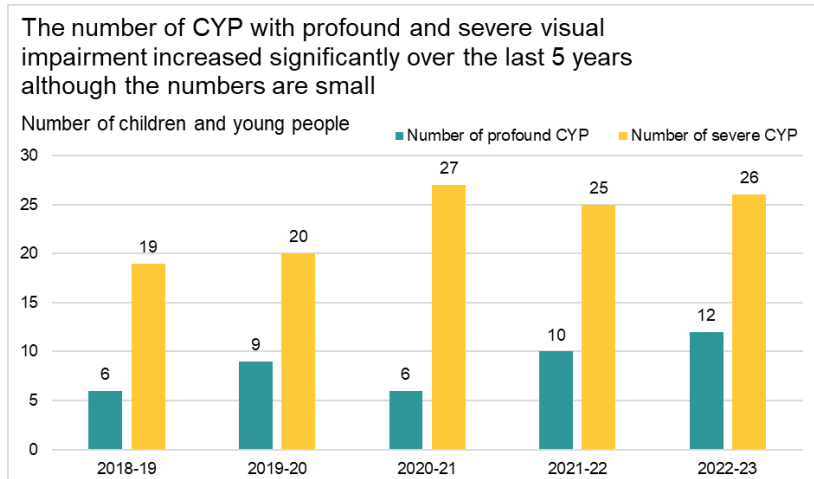
For the services included in the following section, the data is only available for all children who access a particular service. There are no markers to identify children with special educational needs. As the majority likely involve a primary need identified as SEND they serve as a proxy for children and young people with SEND.

Anecdotally, most services have seen significant increases in demand for children's therapy services, including occupational therapy (OT), physiotherapy, and speech and language therapy (SALT). However, there is not enough data available to quantify this increase. The rising demand has led to longer waiting lists for some services. Waiting times for children's therapy services are monitored against an 18-week standard. In 2023/24, an average of 65% of new referrals for physiotherapy and 46% of new referrals for OT and SALT were seen within the 18-week timeframe.

### Visual Impairment Service

The service has a strong record of meeting needs in mainstream and in-county special schools, with out-of-county placements limited to CYP with significant additional SEND over the last five years. However, an increase in severe and profound visual impairment cases is straining the service's capacity to support these CYP – Figure 44. The number of children and young people (CYP) with profound visual impairment (VI) doubled from 6 in 2018/19 to 12 in 2022/23, while the number with severe VI increased from 19 to 26 over the same period. Those with profound visual impairments require specialised support, such as tactile learning, braille instruction, and specialised IT equipment, skills not available within mainstream schools or in-county provisions.

Figure 44: Number of children and young people with visual impairment in Herefordshire, Herefordshire Council data



### Hearing Impairment Service

In 2022-23, the Hearing Impairment Service provided support for 193 children and young people with permanent or temporary deafness and 21 with temporary conductive deafness.

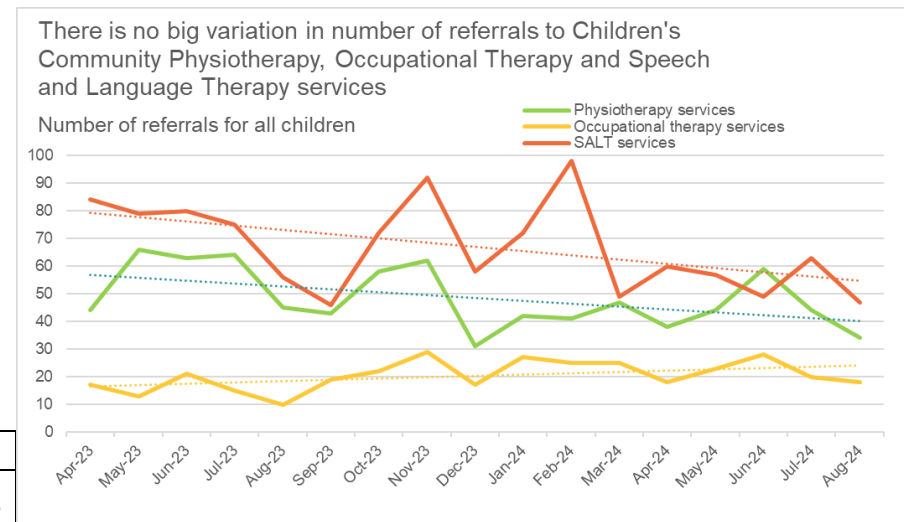
Table 13: Caseload of Hearing Impairment Service from 2018/19 to 2022/23, Herefordshire Council data

Year	2019-20	2020-21	2021-22	2022-23
Permanent or temporary deafness	211	221	196	193
Temporary conductive deafness	41	45	15	21

### Physiotherapy (PS), Occupational Therapy (OT) and Speech And Language Therapy (SALT) services

The number of referrals to Children's Community Physiotherapy, Occupational Therapy, and Speech and Language Therapy (SALT) services varies each month although there is no big variation in the numbers for the short duration for which the data available for. Of these services the most referrals were made to SALT services (861 in 2023/24) –Figure 45. Please note that these referrals are for all children, not just for children and young people with SEND.

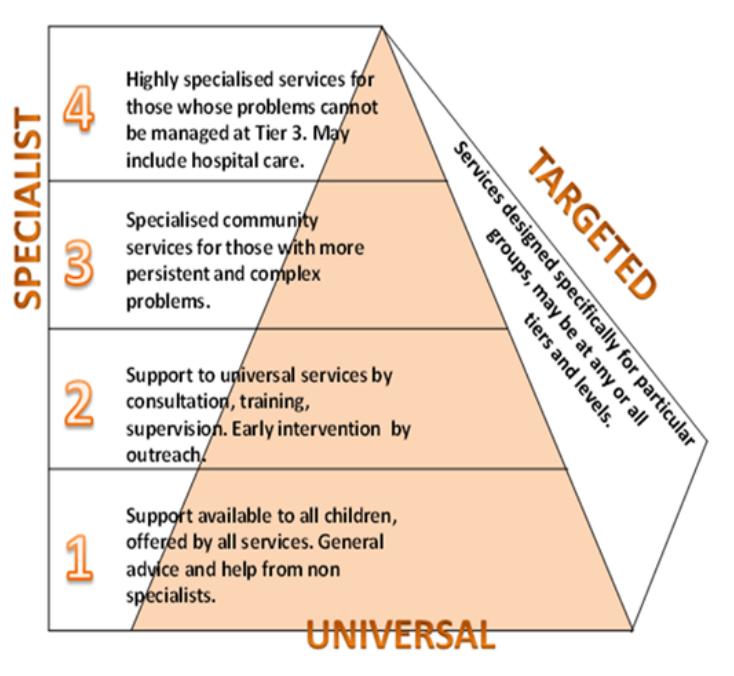
Figure 45: Number of referrals to children's community Physiotherapy, Occupational Therapy and Speech and Language Therapy services in Herefordshire, October 2023 (Herefordshire Council data)



The services reported varying levels of achievement in meeting the target standard waiting time of 18 weeks, with an average of 46% of referrals seen within 18 weeks for occupational therapy and SALT, compared to 62% for physiotherapy services.

**Child and Adolescent Mental Health Service (CAMHS) and CLD Trust**  
 Hereford CAMHS provides Tier 3 services for children and young people with persistent and complex issues, with the option of referral to Tier 4 (which may include hospital care) if necessary. CAMHS therapeutic offerings include individual and family interventions, following NICE guidelines when considering psychiatric intervention and medication.

Figure 46: Herefordshire Child and Adolescent Mental Health Service (CAMHS)'s needs Triangle



Referrals are generally expected to show prior attempts at Universal services, unless the young person appears acutely unwell, and cases not meeting Tier 3 criteria may be redirected to Tier 2 partners like the

CLD Trust or Well Being and Emotional Support Team (WEST) for appropriate support.

These services do not record referrals with a SEND flag, making it difficult to understand the size of the SEND population they serve. During the period from April 2023 to March 2024, overall 1,660 children and young people were referred to the CLD Trust for emotional health and wellbeing support. Of these, only 7% were directly referred from CAMHS.

### Community paediatrics

The Community Paediatric team is a specialist team providing a consultant-led service dedicated to improving the health and wellbeing of children, young people and their families. The number of children with an EHCP on the caseload of the Community Paediatrics team is not routinely collected, therefore the demand for this service cannot be quantified currently. However, teams are putting processes in place to collect this data in future.

Recommendation:

Recording SEND status in the patient records of all relevant services so that services would be able to identify the proportion of cases and referrals that have an already identified SEND need. This would improve the collective understanding about the impact on specialist services of the rising numbers of CYP with SEND.

### **Autism Pathway**

The assessment and diagnosis of children under the age of 10 years who present with neuro-developmental disorders due to Autism Spectrum Conditions is provided by the Wye Valley NHS Trust. These assessments are carried out by a team of Community Paediatricians, Speech and Language Therapists, Occupational Therapists, Specialist Autism/Complex Communication Needs Teachers and Clinical Psychologists.

The diagnostic pathway for children and young people aged 10 years and over are provided by Herefordshire & Worcestershire Health & Care Trust. There are waits for this pathway and limited access to support while waiting or post diagnosis. There were 587 open referrals in September 2024 for children under 10 years and 163 open referrals for children and young people over years. As of July 2024, the wait times for the initial assessments were for children aged pre school, school aged and over 10 years were 43 weeks, 44 weeks and 42 weeks respectively.

### **Learning disability Annual Health Checks**

People with a learning disability often have a poorer physical and mental health than other people. This does not need to be the case. Hence, anyone aged 14 or over who is on their GP's learning disability register can have a free annual health check once a year to help finding any problem and get them sorted early. Overall, there is a high uptake of annual health checks in Herefordshire. In 2023-24, among eligible children and young people, 83% of those aged 14–17 years and 81% of those aged 18–25 years had their annual check. The latest data, as of September 2024, shows that 1,203

(32%) children and young people on the GP Learning Disability Register had already received their annual health check.

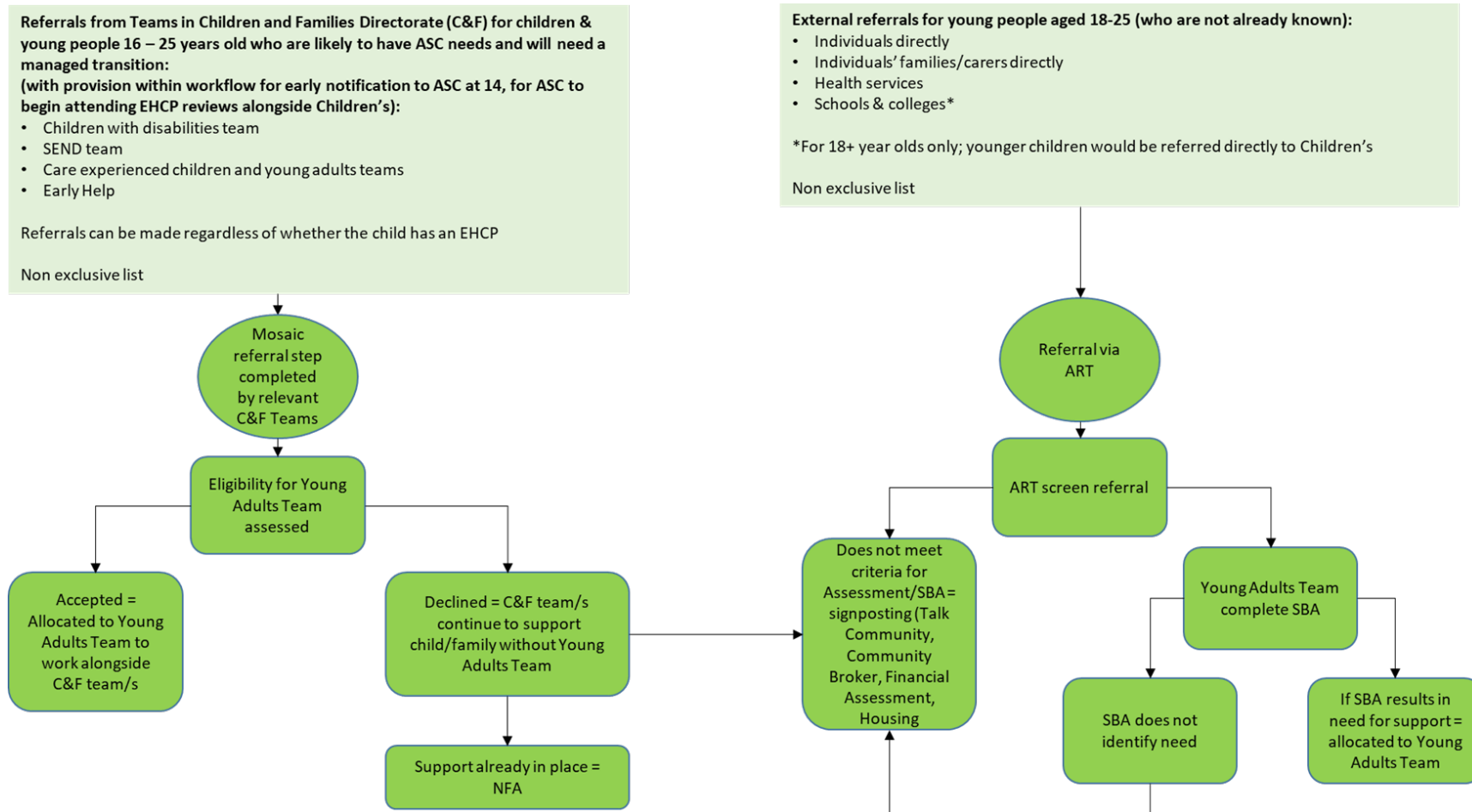
### **Transition to adult social care**

Preparing for adulthood process is provided by the young adults team within the Adult Wellbeing Directorate. The Young Adults Team (YAT) work closely with the Children with Disabilities team and children's social care following a referral around the child's 16<sup>th</sup> birthday. Assessments normally commence when the young person is 17.5 years where they have an appearance of an eligible need under The Care Act 2014. This process is about the young adult, to support their aspirations for the future, staying in education, getting a job, being more independent – to identify the strengths they have, regardless of any diagnosis, what type of support they need or what support they have had previously. The key areas that young adults will be supported with are safety, education, employment, independent living, community inclusion and health.

### **Young people entering into adult social care**

According to the council's social care case management system, Mosaic, 60 service users aged 18-25 years who has had completed Transition to Adult Services, Strength Based Assessment (SBA) and at least any adult social care services between January 2021 and January 2024.

Figure 47: Pathway of children and young people entering to adult social care services



C&F – Children and Families directorate

NFA – No Further Action needed

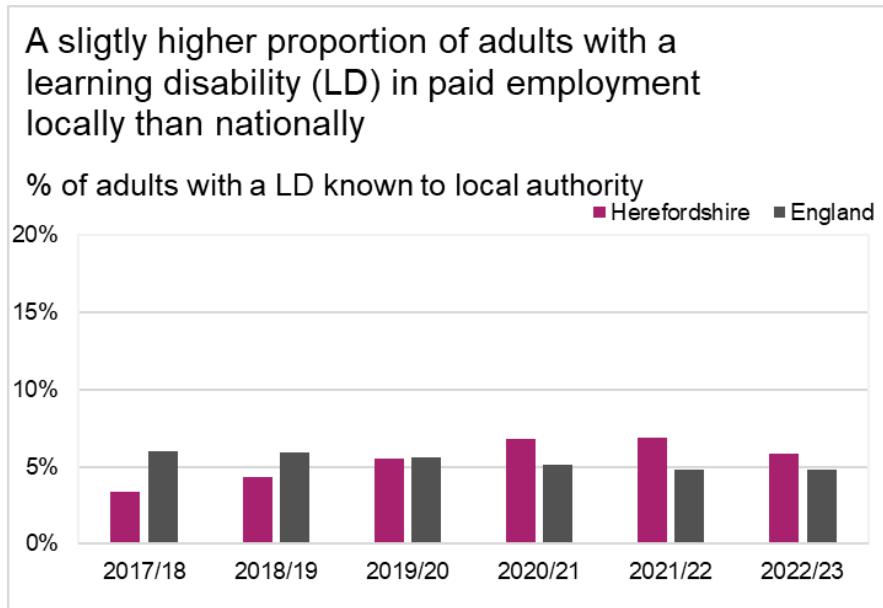
SBA - Strength Based Assessment

ART – Advice and Referral Team

### People with learning disability in paid employment

The latest data shows that Herefordshire’s working age adults with a learning disability who are in paid employment is slightly higher than nationally. In 2022-23, 5.8% of adults with a learning disability who are known to the local authority were in a paid employment compared to 4.8% nationally – Figure 47.

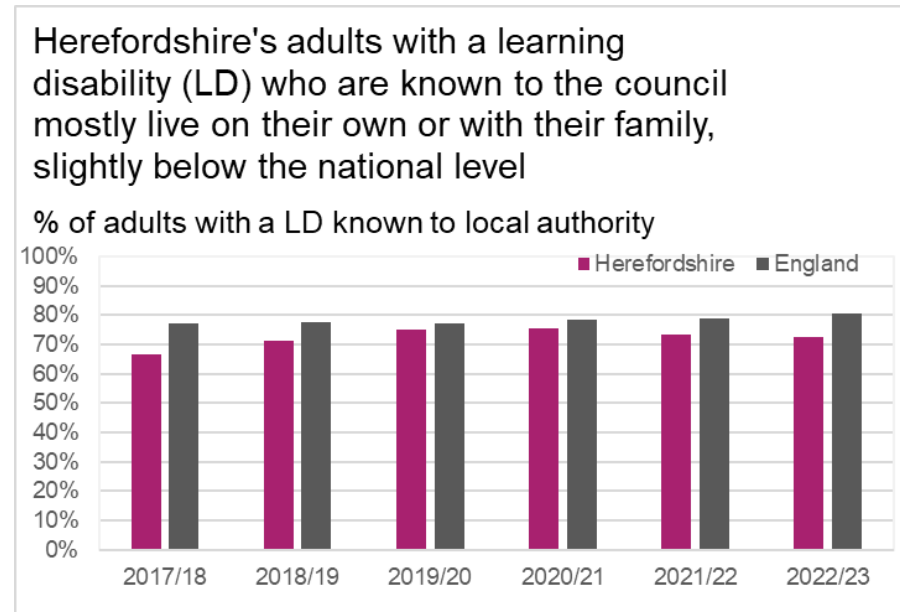
Figure 48: Proportion of working age adults with a learning disability who are known to the local authority and in a paid employment, 2017-18 to 2022-23 (Herefordshire Council data)



### People with learning disability live in their own home or with family/friends

In 2022–23, 72% of Herefordshire’s working-age adults with learning disabilities known to the council lived either on their own or with their family, compared to 81% nationally.

Figure 49: Proportion of working age adults with a learning disability who are known to the local authority live on their own or with family, 2017-18 to 2022-23 (Herefordshire Council data)



## Predicted future trends

### What can we predict about the size and needs of the SEND population in the future?

A comprehensive understanding of future population trends is essential for commissioning and designing effective services for the SEND cohort in Herefordshire.

There are different methodologies to predict future population, based on previous trends and based on different assumptions. They show what the population will be if recent trends continue. The forecasts published by Greater London Authority (GLA) projections are based on trends in births, deaths and migration over the previous 15-years.

The Institute of Public Care publish more detail population projections for the population over 18 years via 'Projecting Adult Needs and Service Information (PANSI)' System. These projections are based on previous trends and it also considers prevalence rates of certain conditions.

Due to variations in methodologies, the projected population numbers are not directly comparable. Therefore, It's important to choose a reliable and credible population projection that fits the purpose of your work.

Looking at current trends and changes in the overall population, we can make predictions about the future of the SEND population. According to GLA projections, the number of children and young people aged 0-18 in Herefordshire is expected to shrink by 8.4% by 2034. The biggest drop will be among those aged 11-15, with their numbers expected to fall by 14.6% in the next ten years - Table 15

If we assume that the number of children with SEND grows at the same rate as the overall 0-18 population in Herefordshire, and the percentage of children with SEND stays the same as in 2024, there will be 410 fewer children and young people with SEND in Herefordshire by 2034 - Table 16 However, since the SEND population has grown a lot in the past 10 years, these estimates might not be very accurate.

*Table 14: Population Projections for Herefordshire 0-18 population, Greater London Authority (GLA) Trend based population projections 2022*

Age group (years)	2024	2029	2034	change (2024-2034)	% change (2024-2034)
0-5	9,537	9,270	9,277	-260	-2.7%
6-10	9,275	8,445	8,180	-1,095	-11.8%
11-15	10,274	9,628	8,775	-1,499	-14.6%
16-18	5,845	6,229	5,755	-90	-1.5%
<b>0-18</b>	<b>34,931</b>	<b>33,572</b>	<b>31,987</b>	<b>-2944</b>	<b>-8.4%</b>

*Table 15: Predicted SEND population in 2034 based on changes in the Herefordshire's 0-18 years aged population*

Type of SEND	2024	2029	2034	change (2024-2034)
EHCP	1047	1,006	959	-88
SEN support	3791	3,644	3471	-320
<b>Total SEND</b>	<b>4838</b>	<b>4650</b>	<b>4430</b>	<b>-408</b>

According to PANSI system 354 people aged 18-24 are predicted to have a learning disability, 137 predicted to have an autistic spectrum disorder, 238 predicted to have some hearing loss and 132 to have impaired mobility – Table 17

The smallest increase over the next decade is predicted to occur in the 18-24 age group with Down's syndrome, visual impairments, and learning disabilities who are expected to display challenging behaviour.

*Table 16: Population projections for 18-24 age population with a disability in Herefordshire, Institute of Public Care, Projecting Adult Needs and Service Information (PANSI), 2020*

Type of disability	2023	2025	2030	2035	2040
People aged 18-24 predicted to have a learning disability	315	312	346	354	337
People aged 18-24 predicted to have a moderate or severe learning disability	74	74	82	84	81
People aged 18-24 predicted to have a severe learning disability	24	24	27	28	27
People aged 18-24 predicted to be living with a parent	49	49	55	56	54
People aged 18-24 predicted to have Down's syndrome	7	7	8	8	8
People aged 18-24 with a learning disability, predicted to display challenging behaviour	5	5	6	6	6
People aged 18-24 predicted to have autistic spectrum disorders	119	121	133	137	129
People aged 18-24 predicted to have a serious visual impairment	8	8	8	9	8
People aged 18-24 predicted to have some hearing loss	210	210	233	238	227
People aged 18-24 predicted to have impaired mobility	117	116	129	132	126
People aged 18-24 predicted to have a moderate personal care disability	70	70	77	79	76
People aged 18-24 predicted to have diabetes	98	99	109	113	107
Total People aged 18-24	11,700	11,600	12,900	13,200	12,600

# Evidence from children and young people

## Herefordshire Children and Young Peoples Quality of Life Survey 2021

The children and young people's quality of life survey carried out in spring 2021 provided much needed insight into Herefordshire's CYP in main stream schools and in special schools. The survey asked about a wide range of topics related to overall wellbeing: experiences, behaviours and feelings about their life. These included:

- Citizenship
- Covid-19
- Drugs, alcohol and tobacco
- Emotional health & wellbeing
- Puberty & growing up
- Safety
- School
- Relationships & sexual health

### Mainstream schools

CYP who self-identified themselves as having 'a long-term disability, long-term illness or health problem (12 months or more) which stops you doing everyday activities' were considered as that they have SEND in the survey although it was not exactly the same as asking whether they have SEND.

These are the key findings about SEND from the survey:

### Safe environments

- Largely, SEND pupils feel safe at home, school/college and going out in local area during day however, compared to non SEND the levels are lower.
- A half (48%) feel afraid of going to school because of bullying at least some times.
- Almost a third (29%) have been bullied at or near school
- Around a tenth have been physically attacked at home/in their local area (10%) or at school (14%) in the last month
- Although cyberbullying is one of the things that SEND pupils are least worried about (15%), nearly a half have received a hurtful, unwanted or nasty message or picture online (45%).
- SEND pupils are more likely to take action against cyberbullying by blocking someone (74% vs. 66%), talked to parents/carers (36% vs. 27%) or an adult outside or at school (12-14% vs. 6-7%) or asked a friend to reply for them (29% vs. 22%).

### Being part of the community

- Sense of belonging to their school, neighbourhood, Herefordshire and Britain is high but not as much as the levels for non SEND pupils.
- 63% have chances to give their views about their community and environment and 15% think their views makes a difference.
- A third have taken part in at least some volunteering outside the school over the last six months; a fifth have done at least once a month.
- 69% went to parks and open spaces in their free times in the last months while 42% attended a sports club or class outside school.

### **Mental health & wellbeing**

- 65% (73% - non SEND) said worry stops them from concentrating on or enjoying other things at least sometimes, 11% (14% - non SEND) said they don't have a trusted adult to talk to if they were worried.
- More SEND pupils or their families asked for help with their mental health compared to non SEND (40% vs. 25%)
- A quarter said that they found information or education at school about emotional health and wellbeing useful while a fifth found it not useful at all.
- Higher proportion had a low score on the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) compared to non SEND

### **Resilience and coping strategies**

- SEND pupils are less likely to be happy with their life (45% vs. 59%)
- 50% had a low measure of resilience and 8% had a high measure of resilience (36% and 13% respectively of non SEND).
- When things go wrong, SEND pupils were less likely to keep on trying until they succeed (41% vs 52%) but more likely to give up (27% vs. 17%) however, the majority (55%) learn from it and keep calm and carry on.
- When they have a problem they were more likely cut or hurt themselves (17%) or talk to someone about it (41%).

### **Education and moving into adulthood**

- The information or education at school at 'PSHE' that most SEND pupils found 'quite' or 'very' useful (over 40%) were about safety, physical activity and how to prepare a meal.

- 29% found Careers education at school was useful whilst 16% found it's 'not at all useful'.
- 26% found the help from teachers to think about future was useful.
- 76% said that more fun/interesting lessons, more help from teachers (49%) and a quitter/better behaved class (46%) might help them to do better in school.

A summary of findings for SEND children in mainstream schools have published at [Children and Young People's Quality of Life Survey - Understanding Herefordshire](#)

### **Special school survey**

Following further engagement, bespoke versions of the survey took place in three special schools during Spring 2022 – Summer 2023. These were co-designed with parents and carers with the support of Herefordshire Parent Carer Voice. All of the children and young people surveyed in the three special schools which took part have complex and long term special educational needs.

The following section highlight the findings from the special school survey where 168 pupils aged 8-18 years and 66 parents of primary aged pupils (4 to 11 years) completed the parent's survey.

## Children's responses

### Healthy eating, dental health and sleep

- 14% had nothing for breakfast, older pupils more likely to miss breakfast
- 57% had school lunch while 43% had food from home, eat at home, takeaway or gastronomy fed.
- At least a half eat fresh fruits, salad or vegetables, dairy and fish or meat
- 63% were able to clean their teeth twice a day
- 17% missed school in the last year because 37% went to the dentist, 11% had a dental surgery
- 23% needed medication to sleep and 69% usually sleep for 8 or more hours at night

### Physical activity, feeling safe and happy with life

- Most popular physical activity at home or at school was 'walking'
- Over 75% pupils said they feel safe at home or school
- Similar proportion said that they keep themselves safe online and the majority (70%) said they can say 'no' to friends if they don't want to do something when friends asked to do.
- 81% of pupils were happy with life

### Drugs, alcohol and tobacco (Year 10+)

- 15% have tried smoking or vaping, and 8% had an alcoholic drink

### Relationships, sexual health and personal care (KS3/KS4)

- Over 60% KS3 & KS4 pupils ever had a boyfriend/girl friend
- 8% didn't always feel safe with their boyfriend/girlfriend.
- 63% understand what 'consent' is and 51% feel confident to give or not give consent.
- 59% said they were independent with their personal care and 23% said they would like to be in future.

## Parent responses

### Healthy eating, dental health and continence

- 9% said their child had nothing for breakfast
- All said their children had lunch 'yesterday'; 50% packed lunch, 47% school lunch and 3% other food.
- A third (32%) said their children eats healthily 'all the time'.
- Whilst the majority's children clean/accept having their teeth cleaned, a third (31%) said their children do not consistently clean their teeth.
- Children of 68% of parents' been to the dentist last year and 12% missed school because of dental problems.
- The reasons for not been to the dentists were; couldn't find a NHS dentist or available appointment and too stressful to attending dentist cited by parents.
- Around three fifths (61%) said their child has continence issues day and night.

**Feeling safe and happy with life**

- A large majority (>92%) said their child is happy with life, safe at home and school. 5% said it is not the case outside when not at home or school
- 16% said their child at least 'sometimes' feels scared to go to school.
- 86% of parents said that their child's school deals well with bullying, 6% said 'sometimes' but 8% said 'No'.

**School and leisure time**

- 98% said their child enjoys school, 71% of parents said their child's school listens to the children's ideas;
- 5% of parents didn't know what their child's next steps are in learning and what they need to do to improve.
- 3% said their child spent time talking/ texting on the phone or 19% on gaming after school 'yesterday'.
- 'Go for a walk', 'swimming' and 'running' were the common activities that most parents said their child did after school or at weekends.

The survey is being repeated in two phases during 2024/25, to provide an update three years on from the 2021 survey. The mainstream survey fieldwork has been completed in summer 2024 and results are yet to publish in spring 2025. The special school surveys is due to take place during spring 2025, with results expected by autumn 2025.

# Evidence from Parents

## Coproduction Charter

Herefordshire's Parent Carer Voice (PCV) plays a vital part in producing the coproduction charter enabling parent carers of children and young people with special educational needs and disabilities to have their say and influence change in the delivery of services in Herefordshire. [More detail information can be found on the SEND co-production in Herefordshire](#). The following information highlights the summary of improvements that have been made as a result of coproduction.

### What needs to be improved and how it has improved – 'You Said, We Did'

**You Said:** Services are being developed without engaging with parent carers, families were not consulted, service users are not involved.

**We Did:** New [Working Altogether Charter](#) created and Coproduction Week 2024 promoted across all partners with very positive response from key people particularly in the Council.

**You Said:** CYP Voice said taking into account children's views varies across settings, not everyone is asking children for their input.

**We Did:** [The SEND & Alternative Provision Change Program](#) has recruited a SEND Participation Officer to ensure CYP with SEND have their voices heard, resulting in increased involvement in professional development, staff interviews, and decision-making processes, such as annual reviews and play plans. Additionally, initiatives like the Care Leaver's Council and Beacon

College Student Council have led to active youth participation in service design and improvements, including transport and youth employment hubs.

**You Said:** Parent Carer annual survey was too long and difficult to complete

**We Did:** PCV and HCC collaborated to coproduce a shorter, more accessible survey for parent carers, increasing participation and leading to key insights shared with the SEND strategic board, which has contributed to reducing health service waiting times.

**You Said:** Themed coffee mornings were not well attended because parent carers were working and unable to attend and also there wasn't a coffee morning in their area.

**We Did:** Evening coffee and chat meetings have now been scheduled to reach a wider audience. Coffee mornings now take place in Hereford, Ledbury, Ross-on-Wye and Leominster.

**You Said:** Families of early years age children don't know what support is available to them when they first learn that their child may have SEND.

**We Did:** The coproduced EY booklet has successfully supported families and is being updated in Autumn 2024, with new groups helping more parents receive personalized service information more quickly.

**You Said:** Parent carers need more involvement with each department – health, education, social care (short breaks) involved with CYP with SEND.

**We Did:** Parent carers are strategic partners in the SEND Strategy, with PCV co-chairing the coproduction work-stream group and participating in subgroups for each work stream.

**You Said:** Early Years children facing unacceptably long waiting lists for SALT, Physio and OT appointments / assessments.

**We Did:** The EY Collaboration Project offers pre-school children access to drop-in sessions with SALT for early advice, reducing the need for formal referrals by providing support in advance.

**You Said:** Parent Carer Voice wanted to have regular opportunities to meet with leadership at the council.

**We Did:** Fortnightly KIT (keeping in touch) meetings with Director of Education, Learning and Skills and Head of Service for Additional Needs.

**You Said:** SEND Summit – parent carers wanted more time to interact directly with professionals and discuss more individual concerns rather than sitting through lots of presentations.

**We did:** New structure for SEND Summit – every 6 weeks a variety of professionals/ colleagues attend a less formal format (coffee and chat).

**You Said:** Parent carers would like to know more about what's happening with SEND at Herefordshire Council

**We Did:** The SEND Strategy was launched in Autumn 2023 with events and a SEND Snapshots video, while a co-produced friendly-read version and

CYP-friendly SEF bulletins were also released. A new SEND newsletter format will debut in October 2024.

**You Said:** More information for parent carers of CYP with SEND at primary school age.

**We Did:** Primary School SEND booklet coproduced by PCV and partners

**You Said:** High school age / Preparation for Adulthood (PfA)– more information needed for parent carers and CYP.

**We Did:** Draft version of PfA booklet currently in production (due Oct 2024)

**You Said:** Parent carers would like more information about neurodiversity including pathways and what help is available whilst you wait for an assessment.

**We Did:** The coproduced Neurodiversity Zone for the Local Offer is set to go live in October 2024, and a "While you wait" support group for parent carers of pre-school children awaiting assessment began in Spring 2024.

**You Said:** Parent carers would like access to SEND resources they can use and try out at home before making their own purchases.

**We Did:** PCV created a SEND Lending Library for parent carers to borrow equipment and resources.

# Recommendations

- Extending the comprehensive tracking system for children with SEND, currently in place within children's services, to all services across the SEND partnership. This will bridge the gap between health and care data, supporting service planning and tracking outcomes for children and young people.
- Enhance the EMIS primary care patient management system to include clear identification markers for children and young people with SEND. This will improve data accuracy, streamline referrals, and enable healthcare providers to better meet the specific needs of SEND patients within primary care.
- Introduce a new metric in the SEND dashboard to monitor the number of children and young people transitioning to adult social care. This will provide valuable insights into transition trends and support planning for future service needs.
- Enhance data recording practices in the council's social care case management system, Mosaic, to ensure accuracy and completeness. Improved data quality will support more effective monitoring of service demand and help identify gaps in service provision.
- Build on existing good practice in the use of evidence to inform commissioning decisions, for example in health services, and embed across the strategic partnership for quality assurance of decisions.