

# ISLINGTON JSNA: FOCUS ON SPECIAL EDUCATIONAL NEEDS AND DISABILITIES

**AUGUST 2018**

Pupils with Special Educational Need or Disabilities (SEND) face barriers that make it harder for them to learn than most pupils of the same age. In addition, they often experience poorer outcomes than their peers in educational achievement, physical and mental health status, social opportunities, and transition to adulthood.

The legal definition of Special Educational Needs (SEN) is set out in the 2014 Children and Families Act. Children have a SEN if they have a learning difficulty or disability, which calls for special educational provision to be made for them.

Islington has agreed the following working definition in relation to childhood disability:

“A child should be regarded as disabled if he or she has special needs in the area of health, education, or physical, intellectual, emotional, social, or behavioural development due to any disability that is:

- Substantial, with a marked adverse impact on daily life and unlikely to be able to participate in normal activities for the foreseeable future;

and/or

- Where a child’s normal development is significantly impaired and they need to receive significantly more personal care and supervision than children without disabilities of similar age and circumstance.”

## Education, Health and Care Plans

An Education, Health and Care Plan (EHCP) is for children and young people aged up to 25 who need more support than is available through the school’s special educational needs support.

## Facts and figures

- 4,845 pupils in Islington schools have SEN (January 2018), 18.7% of all pupils.
- 1,008 pupils in Islington schools have an EHCP (3.9% of all pupils, January 2018).
- 3,837 pupils in Islington schools receive SEN Support from the school but don’t have an EHCP (14.8%, January 2018).
- 1,113 pupils had a statement or EHCP maintained by Islington in January 2018.
- 100% of Islington statements were transferred to EHCPs by the Government’s April 2018 deadline.

## Local Vision

- Every child and young person with SEND in Islington will have the opportunity to:
  - Be happy, healthy, safe and confident about their future.
  - Become successful, resilient adults who achieve their aspirations in all aspects of their lives.
  - Live fulfilling lives in their communities.
- Islington parents of children with SEND have identified three key aims: “Do nothing about us without us’: (Access and empowerment), ‘Right support for the right children in the right place at the right time’: (Responsiveness and Timely Support) and ‘A better informed workforce’: (Improving Service Quality and Capacity).

## SETTING THE SCENE: THE ISLINGTON PICTURE

### How many children & young people have disabilities / special education needs (SEN)?

- Estimates of the prevalence of disability among children in England range from about 3% up to about 7% depending on the survey methods used and the definition of disability. Estimates of childhood disability from the Family Resources Survey (2013/14) suggest that there are over 5,000 disabled children and young people aged 0-25 in Islington in 2018.

### Estimated numbers of disabled children and young people, Islington, 2018

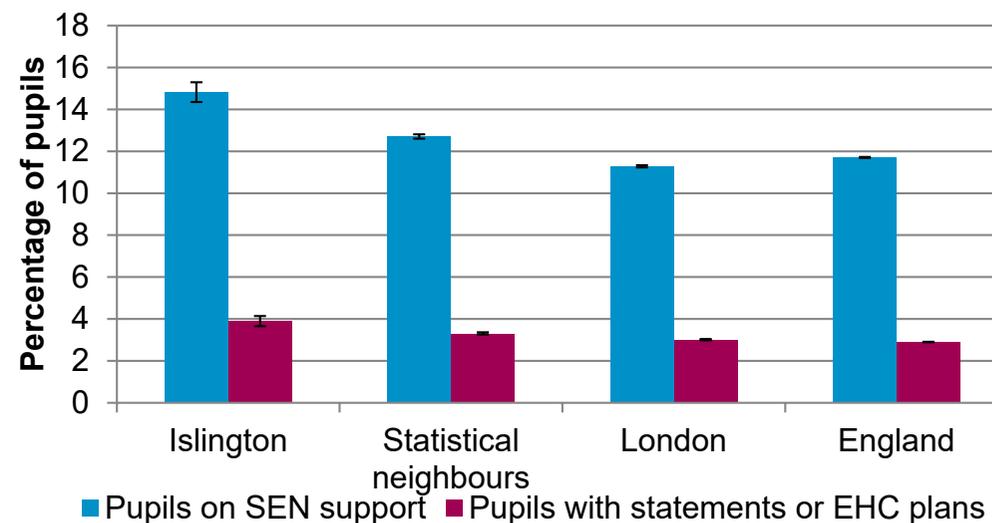
Age group (years)	Male population	% disabled	Disabled males	Female Population	% disabled	Disabled females	Total disabled
0-4	6,826	3%	205	6,347	4%	254	459
5-9	6,358	7%	445	6,257	6%	375	820
10-14	5,355	10%	536	5,113	7%	358	894
15-19	5,404	10%	540	5,595	10%	560	1,100
20-24	11,218	9%	1,010	12,192	9%	1,097	2,107
Total	35,161	8%	2,736	35,504	7%	2,644	5,380

Source: GLA population estimates, Family Resources Survey 2013/14

- SEN data remains the most reliable single measure of children and young people with disabilities. However, not all children with disabilities and long-term life limiting conditions have SEN.

### Prevalence of SEN in Schools

- Islington had a statistically higher percentage of pupils with a special educational need, both with and without a statement or EHC Plan, Compared to other areas with similar population characteristics (statistical neighbours), London and England, as at January 2018.
- In recent years, the proportion of pupils in Islington schools with a Statement or EHCP has increased, whilst the proportion at SEN Support Has fallen. A similar change has occurred across England as a whole.

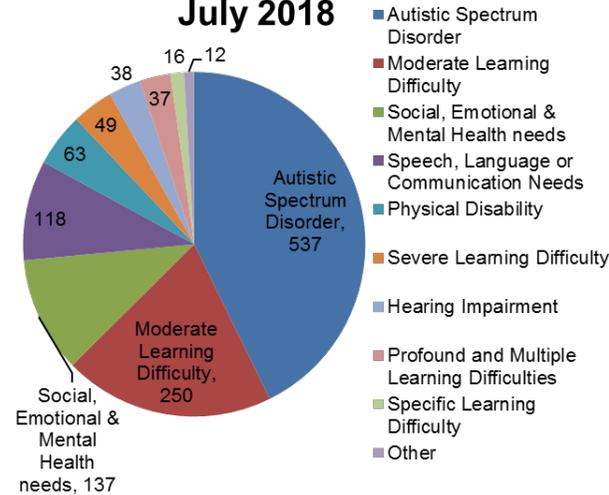


# SETTING THE SCENE: THE ISLINGTON PICTURE

## Education, Health and Care Plans maintained by Islington

1,113 pupils had a statement or EHCP maintained by Islington in January 2018. However, this has increased to over 1,200 by the end of the 2017/18 academic year.

### EHCPs by Primary Need, July 2018



The most common primary needs for EHCPs maintained by Islington are Autistic Spectrum Disorders, Moderate Learning Difficulties and Social, Emotional & Mental Health needs, as at the end of the 2017/18 academic year.

Under changes introduced under the Children and Families Act (2014), statements of Special Educational Needs were replaced by a single EHC Plan that covers the needs of 0 – 25 year olds. Also, the single category ‘SEN Support’ replaced the ‘School Action’ and ‘School Action Plus’ levels of support previously used.

**100%**  
of Islington statements were transferred to EHCPs by the Government’s April 2018 deadline

**97%**  
of young people with an EHCP maintained by Islington were attending settings judged good or outstanding by Ofsted (July 2018)

## Children in Need

Under Section 17 (10) of the Children Act 1989, a child is a Child in Need if:

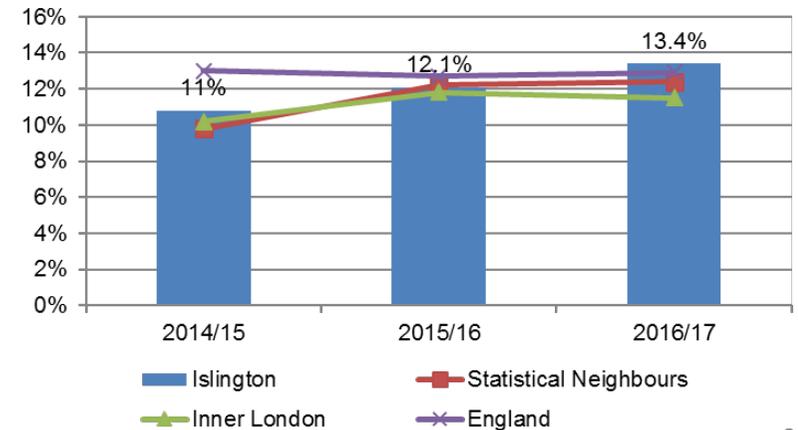
- The child is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services by a local authority;
- The child’s health or development is likely to be significantly impaired, or further impaired, without the provision of services for the child; or
- The child is disabled.

Islington tends to have relatively high rates of Children in Need, compared to the size of the 0 to 17 year old population.

The proportion of Islington’s Children in Need who have a disability recorded has increased in the last few years and has risen above the England average.

The most common disabilities recorded for Islington’s Children in Need are learning disabilities and autism (both affecting around 6% of all children in need).

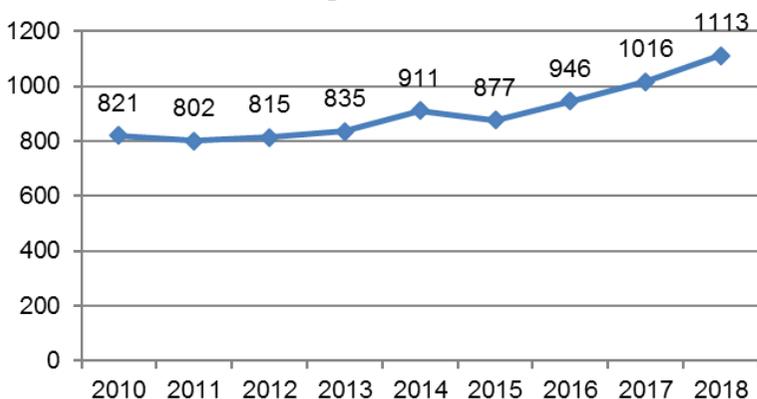
% children in need with a disability recorded, 2014/15 - 16/17



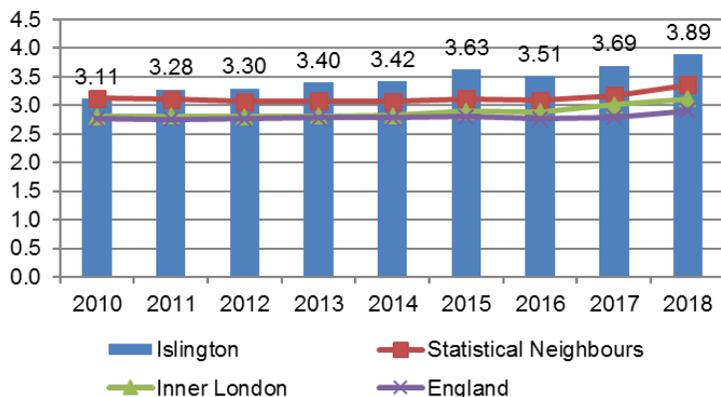
# FUTURE NEED

A useful way of estimating future need is to look at recent trends in the number of children and young people with SEN and/or disabilities. However, it is important for services to be mindful of further changes in the future, especially as children who are not yet born will need services in the future. Strong partnerships with Bright Start services for early years children and health services ensure that Islington is prepared to respond to unexpected changes in the profile of children with SEND.

**No. statements / EHCPs maintained by Islington, 2010-18**



**% pupils with statements / EHCPs by location of school, 2010-18**



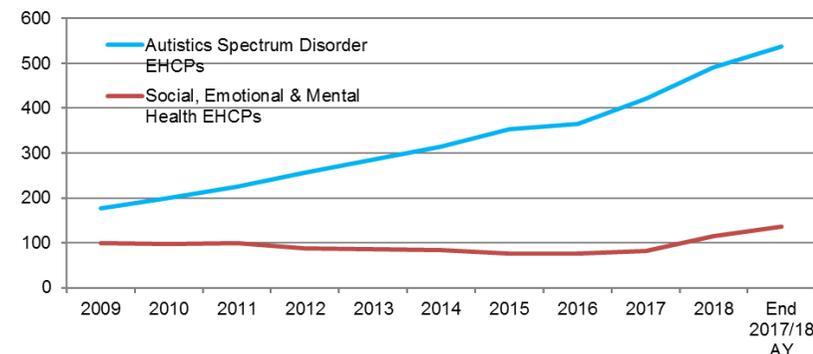
The number of statements or EHCPs maintained by Islington has increased by more than a quarter over the last three years, faster than the increase in the Islington population of children and young people over the same period.

The number of statements or EHCPs for Autistic Spectrum Disorders has been gradually increasing over recent years. The number for Social, Emotional & Mental Health needs had been falling slightly, but in the last few years numbers have increased significantly.

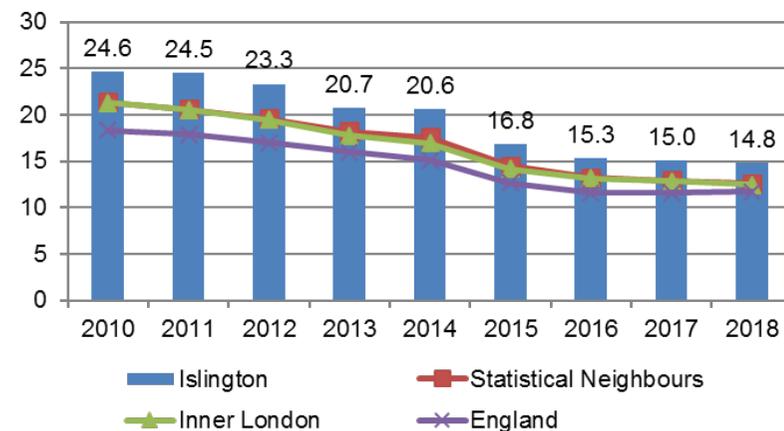
The proportion of pupils with statements / EHCPs has increased across the country in the last few years, although the Islington proportion is increasing at a slightly faster rate.

The proportion of pupils at SEN Support, on the other hand, is falling across the country, although the rate at which it is falling is slowing down. The proportion of pupils in Islington schools at SEN Support remains above the comparator rates, although the gaps are narrower than in the past.

**No. pupils with a statement or EHC Plan maintained by Islington for an Autistic Spectrum Disorder or Social, Emotional & Mental Health needs, 2009-2018**



**% pupils at SEN Support by location of school, 2010-18**



## WHAT INFLUENCES THIS TOPIC?

### Health Determinants of SEND

Good quality maternity care provides the opportunity to offer advice on lifestyle behaviours such as smoking, alcohol, medication and diet; advice which can help to reduce the risk of poor outcomes for children with disabilities. Postnatal care provides opportunities to encourage initiation and maintenance of breastfeeding, and to offer postnatal screening.

Effective  
maternal care

Smoking

Substance misuse

Maternal diet & obesity

Maternal age

Birth defects

Smoking in pregnancy increases the risk of having a child with certain disabilities and is associated with low birth weight (where a baby weighs less than 2,500 grams at birth), premature birth and placental complications. Maternal prenatal smoking is also associated with both antisocial behaviour and ADHD in children and adolescents.

Regular or heavy alcohol consumption in pregnancy is associated with behavioural disorders and impaired brain development. Addiction or substance abuse interferes with parenting and contributes to developmental, behavioural, and health problems

A mother's pre-birth diet is known to influence foetal growth, normal development and gestational weight gain. Maternal obesity is associated with an increased risk of a number of poorer outcomes, including late foetal loss, stillbirth, congenital anomalies (such as spina bifida), cardiovascular anomalies, septal anomalies, and limb reduction anomalies.

Teenage pregnancy and pregnancy at advanced maternal age (35 years and over) are both associated with adverse pregnancy outcomes such as premature delivery and low birth weight.

Birth defects among live births was estimated to be 205 per 10,000 total births in England and Wales in 2015, or 1 in every 49 births.

### Social Determinants of SEND

Short-term adverse outcomes associated with deprivation include an increased risk of premature birth, birth defects and low birth weight. Over the longer term, adverse outcomes include impaired cognitive growth and development, poor emotional and mental wellbeing, and long-term impacts on the ability to flourish in life. Families with a child with a SEN or disability are more likely to live in poor housing and poverty, lack employment, face social isolation and discrimination; these are associated with poorer health and educational outcomes. Despite having pockets of affluence, Islington has a high level of child poverty. There is also evidence to show that young carers are 1.5 times more likely to have a special educational need or disability.

## WHAT WORKS?

Theme	Description
Early identification and assessment	<p>Early intervention ensures families get support when they really need it quickly and with the minimum of fuss. This is particularly important for families with children with SEN and disabilities.</p> <p>Research has found that, in authorities with identification systems where children with SEN were less likely to be missed as reported by interviewees, there was more likelihood of integrated services and good communication between education and their partner agencies, a specific focus on developing practitioner skills and raising awareness through training and opportunities for practitioners to raise concerns with specialists and support staff.</p>
Giving parents control	<p>The SEND Code of Practice states that 'Local authorities must ensure that children, their parents and young people are involved in discussions and decisions about their individual support and about local provision.'</p> <p>Parent Partnership Services (PPS) offer advice and support to parents and carers of young people with SEN. Evaluation shows that they are valued by parents and enhance local SEN provision.</p> <p>One of the key aims identified by Islington parent's of children with SEND to 'do nothing about us without us' – ensuring access and empowerment.</p>
Learning and achieving	<p>High quality teachers trained to support a range of SEN is effective in driving up attainment. Those with specialist knowledge and experience can help to develop the skills of their colleagues. For teaching assistants and support staff to have a positive impact, they need to be trained, supported, deployed and managed effectively in order to make a difference to the achievement of children with SEN. The Achievement for All approach identified a range of factors that are important in raising achievement, including leadership, high standards, constructive parental involvement, clear target setting and tracking pupils' progress.</p>
Preparing for adulthood	<p>The SEND Code of Practice states that preparing for adulthood means preparing for higher education and/or employment, independent living, participating in society and being as healthy as possible in adult life.</p> <p>Well-coordinated planning and advice, along with appropriate and tailored work experience opportunities can be crucial to the success of transition for young people with disabilities or SEN.</p> <p>The 'top tips' for SEND services, learnt from the Preparing for Adulthood programme, were to develop and implement a shared strategy, personalise your approach and improve post-16 options and support</p>
Services working together for families	<p>A streamlined service facilitates clear and accessible information for parents and carers. Services working together make a real difference to families' experience and the quality of support.</p>

## ASSETS AND SERVICES

### Islington Additional Needs and Disability Service (IANDS)

Islington Additional Needs and Disability Service (IANDS) is a multi-agency service, for all children with additional needs in Islington, which includes speech and language therapy, occupational therapy, physiotherapy, paediatricians, clinical psychology, family therapy, specialist nursing, social work, and key workers.

A central referral system screens all new referrals for assessment and diagnosis. Where there are safeguarding concerns, children and families are referred directly for an assessment from the Disabled Children's Team (DCT) which works jointly across IANDS.

### Schools

The Special Educational Needs Coordinator (SENCO) in each primary and secondary school has responsibility for SEN within the school.

There are three maintained special schools in Islington:

- **Richard Cloudesley School**, for children aged 2 to 19 years with severe/complex physical disabilities;
- **Samuel Rhodes School**, for children with difficulties in learning and cognition; and
- **The Bridge School**, for children with severe learning difficulties, profound and multiple learning difficulties and Autistic Spectrum Disorders.

The Courtyard is a special free school that opened in September 2013 by the trustees of St Mary Magdalene Academy, providing personalised education for up to 36 students aged 14-18 with Autistic Spectrum Disorders or Speech Language and Communication Needs.

The Family School opened in September 2014 run by the Anna Freud Centre for children at risk of exclusion. The Bridge Integrated Learning Space is a special free school that opened in January 2015 for pupils with autism and/or severe learning difficulties.

The Bridge Satellite Provision is a free school that opened in September 2017. It is based at four sites in Islington, providing education and support for pupils who find it difficult to manage in a mainstream environment but who do not need a special school placement.

Within Islington, specialist services such as the Educational Psychology Service and the Special Educational Needs Team are provided centrally to support schools and pupils with SEN and manage the process of assessing pupils for additional support (i.e. Education Health and Care Plans).

### Other services

Islington Council's Safeguarding and Family Support services are responsible for supporting and caring for some of the most vulnerable children and young people in the borough, including children with disabilities, some of whom are looked after children.

The Joint Agency Panel is the multi-agency body by which Islington children's health, education and social care services consider, determine and review the joint-funding of specialist services for those children with the most severe and complex needs.

Other services who provide support for children with SEN and / or disabilities include the Early Years Inclusion Team, The Under Fives Advisory Group, the Short Breaks service, the Child and Adolescent Mental Health Service, the Youth Careers Team and the Transition Team.

# TARGETS & OUTCOMES

Priority	What will success look like?	How will we measure success?
<p>Strategic plan for managing High Needs so that our local offer is attractive affordable and sustainable [Cost Effective]</p>	<ul style="list-style-type: none"> <li>• Funding and decision making are open and transparent</li> <li>• Resources managed effectively and equitably through a transparent approach that is fair</li> <li>• High quality services that deliver good value for money</li> <li>• Strategy co-produced with parents and young people as experts by experience</li> <li>• Communication is good and leads to trust, confidence and respect for each other</li> </ul>	<ul style="list-style-type: none"> <li>• % population 0-25 with EHCPs</li> <li>• Confidence of stakeholders (through survey and feedback)</li> <li>• Finance data</li> <li>• Funding framework</li> <li>• Outcomes (in national top quartile)</li> <li>• % providers attended by children with EHCPs rated good / outstanding</li> </ul>
<p>Improving the SEND Support Offer [Strengthening inclusion]</p>	<ul style="list-style-type: none"> <li>• Most SEND needs met in mainstream settings, supported by good inclusive practice</li> <li>• All schools provide quality provision to meet the needs of children with SEND locally</li> <li>• Schools work collaboratively to share good practice and make best use of resources</li> <li>• Children, young people and parents have confidence in the local SEND Support offer</li> <li>• Support services that help schools build ability to meet SEND</li> </ul>	<ul style="list-style-type: none"> <li>• Number of Early Years children transferring to mainstream school</li> <li>• % population 0-25 with EHCPs</li> <li>• % with EHCPs home educated</li> <li>• % appeals to First Tier SEND Tribunal</li> <li>• % pupils attending state funded schools</li> </ul>
<p>Improving provision for learners with Social, Emotional and Mental Health (SEMH) needs – [Developing local provision]</p>	<ul style="list-style-type: none"> <li>• Continuum of provision matched to need with as many as possible having needs met at mainstream settings</li> <li>• Reduced number of exclusions and improved attendance</li> <li>• Local choice</li> <li>• Co-ordinated, timely and preventative intervention delivered through partnership working and joint commissioning</li> </ul>	<ul style="list-style-type: none"> <li>• % population 0-25 with EHCPs</li> <li>• Rate for all children for overall absence, persistent absence, fixed period and permanent exclusions in line with inner London</li> </ul>
<p>Preparing for adulthood [Best Outcomes]</p>	<ul style="list-style-type: none"> <li>• Improved progression and attainment at all ages</li> <li>• Person-centred and personalised planning that focuses on building independent and resilient children, young people and families</li> <li>• All young people over 14 with an EHCP have their own personalised transition plan</li> <li>• Number of young people with SEND in Education, Employment or Training continue to increase</li> <li>• Increase GP practices offering 14 plus learning difficulty health checks</li> </ul>	<ul style="list-style-type: none"> <li>• Increase number of young people age 16 to 25 who take up internships or volunteering</li> <li>• % population 16 to 25 with EHCPs</li> <li>• % young people post KS4 in Education, Employment and Training</li> </ul>

## TARGETS & OUTCOMES

### Early Years

- 13% of Islington pupils with an EHCP achieved a Good Level of Development in the Foundation Stage in 2017.
- This is a rise from 2% in 2014.
- Nationally, there has only been a small rise from 3 to 4% over the same period.

### Phonics

- In Islington, 55% of pupils at SEND Support met the expected standard of phonic decoding, below Inner London (58%) but above national (48%).
- 18% of Islington pupils with statements / EHC plans met the standard, compared with 25% in Inner London and 19% nationally.

### Key Stage 2 (age 11)

- In Islington, 31% of pupils at SEND Support met the expected standard in Reading, Writing & Maths in 2017, in line with Inner London (32%) but above national (21%).
- 9% of Islington pupils with statements / EHC plans met the standard, in line with the 8% nationally.

### GCSEs - Attainment 8

- Islington pupils at SEN Support were ranked 34th in the country for their Attainment 8 score of 34.5 in 2017
- Islington pupils with statements of EHCPs were ranked in the bottom quartile for their Attainment 8 score in 2017, after being above average the previous year.

### GCSEs - Progress 8

- Islington pupils at SEN Support were ranked 27th in the country for their Progress 8 score in 2017.
- Islington pupils with statements of EHCPs had a Progress 8 score of -1 in 2017, in line with the national average for this group of pupils.

### Absence

Absence for children with statements or EHCPs was lower in Islington than for England as a whole (7.3% absence for those with an EHCP compared with 8.2% for England in 2016/17), whilst Islington pupils at SEN Support had the same level of absence as the national average (6.3%).

21.7% of Islington children with a statement or EHCP were defined as a persistent absentee in 2016/17 (i.e. having 10% or higher absence). This is lower than the national average of 23.8%. 17.2% of Islington pupils at SEN Support were persistently absent in 2016/17, compared to 17.8% in England overall.

### Exclusions

Regarding fixed period exclusions, the Islington rate in 2016/17 for children with statements / EHCPs was much lower than the England average (7.44% for Islington compared with 15.93% for England). The rate for Islington pupils at SEN Support was also lower than the national average (13.10% compared to 14.76%). There were too few permanent exclusions involving Islington pupils with statements or EHCPs for any figures to be published (due to the sensitive nature of this type of information). However, the rate of permanent exclusions involving Islington pupils at SEN Support was higher than the national average in 2016/17. The Islington rate for pupils at SEN Support was 0.63%, compared to the national average of 0.35%.

# THE VOICE: WHAT DO LOCAL PEOPLE THINK ABOUT THIS ISSUE?

- The views of children and young people and their parents and carers are a core part of the SEND Code of Practice, as local authorities **must** ‘consult with children with SEN or disabilities, and their parents and young people with SEN or disabilities when reviewing local SEN and social care provision’ and consult them in developing and reviewing their Local Offer’ (published information setting out what support is available for 0-25 year olds with SEN or disabilities).

Examples of ways parents and carers give their views on local SEND services include:

## Parents Forum

The group is facilitated by Centre 404, a local voluntary organisation. There are six sessions a year.

## Parent Consultants

Islington Clinical Commissioning Group (Health) in partnership with the local authority, have recruited and trained six local parents of children with SEND to enable them to undertake ‘parent to parent’ consultation to inform local commissioning arrangements.

## Parent Parliament

Members give their views in a number of ways, e.g. responding to online consultations, taking part in ‘task and finish’ groups and voting on and approving content for the Local Offer.

Feedback from young people is highly valued and used to inform improvement, and practitioners across the partnership are skilled in using creative ways to gather children and young people’s views. Children and young people with SEND are included in school councils and the borough-wide Youth Council. Young people with SEND have made presentations to Chief Officers and elected Members, and have been involved in interview panels. Where children are unable to express their views directly, their views are contributed by those who know them well.

Our young people have identified some principles for participation including ‘make sure adults don’t take over the consultation’, ‘listen’ and ‘explain’. Young people report that they feel informed, involved and supported during assessment and planning, with a better understanding and local knowledge.

For those with an EHCP/statement, feedback participation is high and the vast majority is positive. Out of 133 interviews in 2016/17:

the areas where we score highest are:

the areas where we do less well are:

**90%** of parents tell us their views have been included in the development of their child’s EHC assessment, compared with **73%** nationally (Personal Outcomes Evaluation Tool survey)

Effective co-production is increasingly embedded in practice, as evidenced by our low rate of First Tier Tribunal appeals [**5.3** per 10,000 in 2016/17, lower than for inner London (**6.3**), statistical neighbours (**7.2**) and national (**5.5**)].

**76.1%** agreed their views were taken into account

**76.1%** satisfaction with people including the parent in the assessment and writing of the EHCP

**63.4%** satisfaction with how well professionals ‘joined up’

**62.4%** agreed they were involved in the planning and writing of the post-assessment annual support plan

## GAPS: PRIORITIES FOR DEVELOPMENT

Overall, our Self Evaluation of SEND services has identified many strengths, including strong leadership, effective co-production with parents/carers and young people, high quality provision and good outcomes for young people. Nevertheless, there are a number of areas for development to meet our strategic and operational priorities.

### Strategic priorities

#### Preparing for Adulthood

Progress in this area has not been fast enough, and the Local Area has not yet created a clear and cohesive strategy to underpin successful transition to adult services for a significant number of young people with more complex needs.

#### SEND Support, achievement and progress

More work is needed to embed a consistent understanding across the local area of needs, their impact, and outcomes (parents and providers).

#### Social Emotional and Mental Health needs

Evidence / data tells us that increasing social challenges faced by our children and young people continue to impact on their social, emotional and mental health and well-being.

#### High Needs Funding

The budget for high level SEND is considerable (£27m in 2018-19). However, in the current economic climate, we must make informed decisions about priorities for expenditure.

#### Pathways for children and young people with Autism

A detailed programme of work has been developed in response to the significant local increase in referrals for assessments for Autistics Spectrum conditions. A steering group is looking at several workstreams: diagnosis; education; health and social care; partnership working; and workforce development.

### Operational priorities

#### Ensuring an integrated approach

Lessons learned interviews with families when things have not gone well suggest that integrated working approaches need to be more consistently applied.

#### Improving performance towards meeting timescales

Our objective is to complete all Education, Health and Care assessments within 20 weeks and keep parents informed if there are any delays.

#### Young people's voice

Although children and young people are appropriately involved in their own assessment, planning and review, there are ongoing challenges to build in their routine engagement and co-production at a strategic level.

#### Parent engagement

Although we have developed effective co-production, we need to engage a wider group of families in the planning and evaluation of our services.

#### High quality Advice and Information

The Local Offer website is evolving - we must continue to work with parents so that it becomes the first point of reference and 'go-to' place for information on local provision available. We want our Local Offer to be the best in the Country!

## FURTHER INFORMATION

Further information on this topic can be found at the following locations:

- The full Children and Families Act 2014 is available at [the legislation.gov.uk website](https://www.legislation.gov.uk)
- The Special Educational Needs and Disability Regulations are also available at [this part of the legislation.gov.uk website](#)
- The Special Educational Needs and Disability Code of Practice is available from the [Gov.uk website](https://www.gov.uk)
- The Islington Local Offer is available at the [Islington.gov.uk site](https://www.islington.gov.uk)
- The Department for Education regularly publish Statistical First Releases about pupils with SEN. These are available at the [Department for Education's Statistics website](https://www.gov.uk/government/statistics)

## About Islington's JSNA

[Islington's Evidence Hub](#) brings together information held across the organisations into one accessible place. It provides access to evidence, intelligence and data on the current and anticipated needs of Islington's population and is designed to be used by a broad range of audiences including practitioners, researchers, commissioners, policy makers, Councillors, students and the general public.

This factsheet was produced by Adam White, Special Projects Analyst and approved for publication by Candy Holder, Head of Pupil Services in August 2018.

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