

Children and Young People with Special Educational Needs and Disabilities In Derbyshire

Executive Summary

March 2021



Tameside and Glossop
Clinical Commissioning Group



Derby and Derbyshire
Clinical Commissioning Group



List of Abbreviations

ASC	Autism Spectrum Condition
ASD	Autistic Spectrum Disorder
CCG	Clinical Commissioning Group
CQC	Care Quality Commission
DFE	Department for Education
DLA	Disability Living Allowance
EHCP	Education, Health and Care Plan
FSM	Free School Meals
GRIP	Graduated Response for Individual Pupil
HI	Hearing Impairment
IDACI	Income Deprivation Affecting Children Index
IMD	Index of Multiple Deprivation
JSNA	Joint Strategic Needs Assessment
LA	Local Authority
LCP	Locality Children's Partnership
LDD	Learning Difficulties and Disabilities
MAT	Multi-Agency Team
MLD	Moderate Learning Difficulty
MSI	Multi-Sensory Impairment
NEET	Not in Employment, Education or Training
NSA	No Specialist Assessment of needs
ONS	Office of National Statistics
PD	Physical Disability
PIP	Personal Independence Payment
POET	Personal Outcomes Evaluation Tool
PMLD	Profound and Multiple Learning Difficulties
SEMH	Social, Emotional and Mental Health
SEN	Special Educational Needs
SLCN	Speech, Language and Communication Needs
SLD	Severe Learning Difficulty
SPLD	Specific Learning Difficulty
SSEN	Support Service for Special Educational Needs
VI	Visual Impairment

Introduction

This document forms part of Derbyshire's Joint Strategic Needs Assessment. It considers the health, care and education needs of children and young people aged 0-25 years with special educational needs and disabilities (SEND) in Derbyshire. It updates the previous SEND Needs Assessment published in November 2017.

The Special Educational Needs Code of Practice (2015) states that a child or young person has Special Educational Needs (SEN) if they have a learning difficulty or disability which calls for special educational provision to be made for him or her.

A child of compulsory school age or young person has a learning difficulty or disability if he or she:

- has a significantly greater difficulty in learning than the majority of others of the same age, or
- has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.

A child under compulsory school age has special educational needs if he or she is likely to fall within the definition above when they reach compulsory school age or would do so if special educational provision was not made for them.

Many children and young people who have SEN may have a disability under the Equality Act 2010 – that is '...a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities'. 'Long-term' is defined as 'a year or more' and 'substantial' is defined as 'more than minor or trivial'. This definition includes sensory impairments such as those affecting sight or hearing, and long-term health conditions such as asthma, diabetes, epilepsy, and cancer. Children and young people with such conditions do not necessarily have SEN, but there is a significant overlap between disabled children and young people and those with SEN.

The type of support that children and young people with SEN receive may vary widely, as the types of SEN that they may have are very different. The severity of need will also differ from child to child. However, two broad levels of support are in place; SEN Support and Education, Health & Care Plans (EHCP).

SEN Support

This is support given to a child or young person in their early years setting, school or college that is additional or different to the help provided by the usual curriculum differentiation - Teachers or SEN Co-ordinators receive advice or support from external specialists when needed to support some, but not all, of this group.

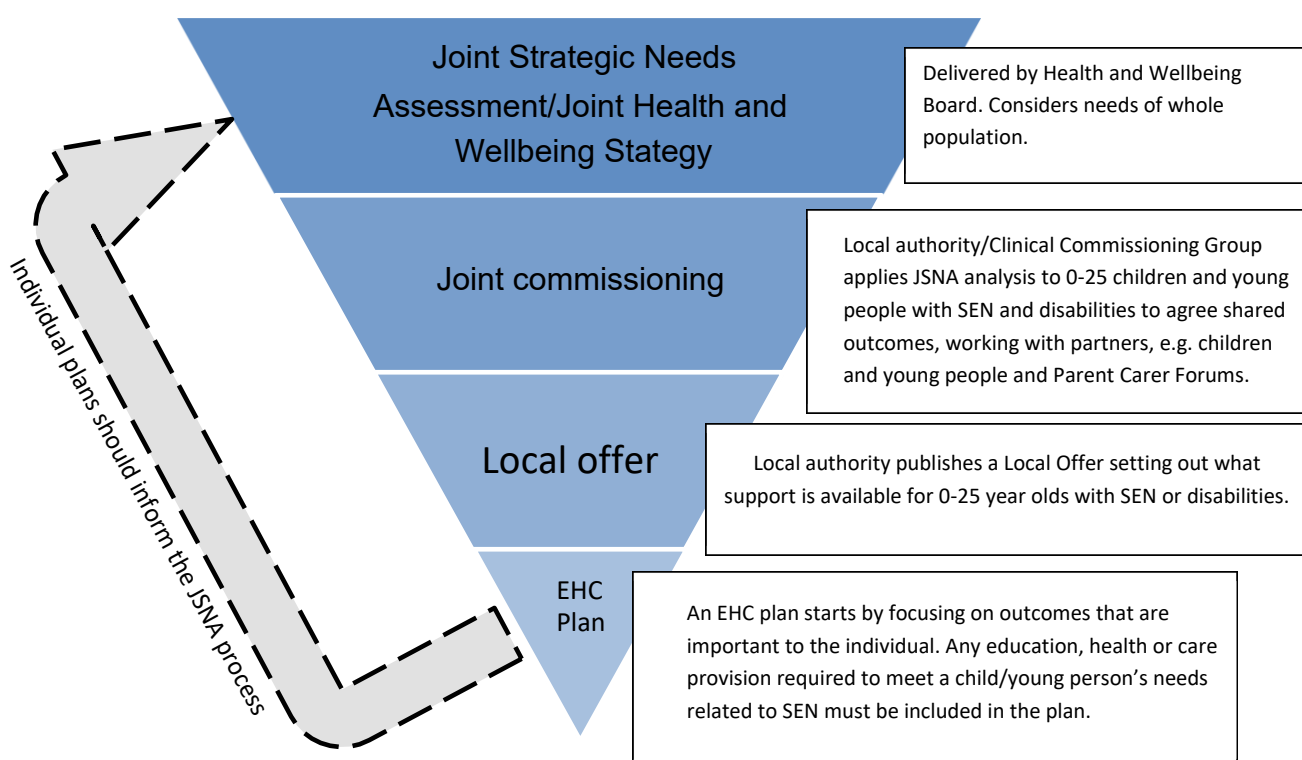
Education, Health and Care Plan (EHCP)

An EHCP may be created as the result of formal assessment for children who require further help at an exceptionally high level. It is a legal document which sets out the needs of an individual child and the extra support required to meet their particular needs. EHC Plans replaced Statements of SEN in 2014.

The Special Educational Needs Code of Practice places a legal duty on local authorities to assess the needs of children and young people with SEND and to ensure that those needs are met appropriately through joint working relationships across different local partners including, education, health and social care.

The Joint Strategic Needs Assessment (JSNA) is the platform by which the current and future health and care needs of local populations informs and guides the planning of health, well-being and social care services within a local authority area. It identifies current and future needs for the whole population and is expected to influence commissioning decisions.

Figure 1: How the JSNA influences SEND commissioning and service delivery¹



¹ Department of Health and Department for Education (2015) 'Special educational needs and disability code of practice: 0 to 25 years: statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities'

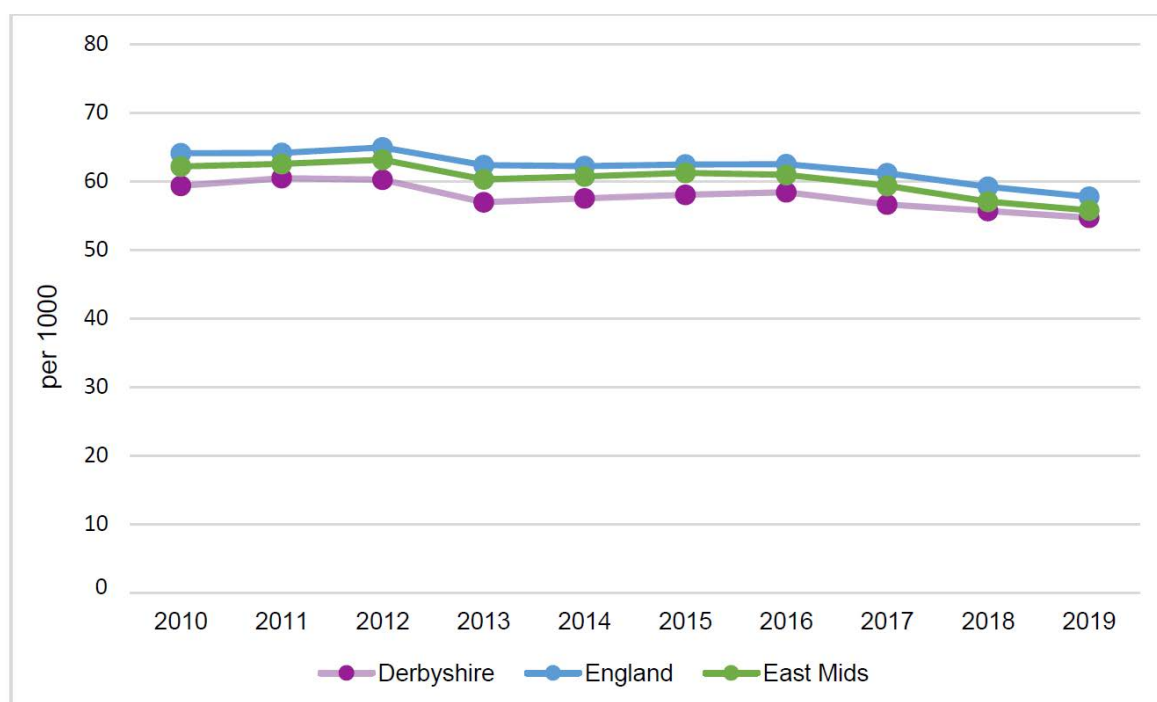
Population Overview

Births

There were 7,336 live births in Derbyshire in 2019, a decrease of 1.1% since 2018 and a 13.5% decrease since the most recent peak in 2011.

In 2019, the birth rate per 1,000 females aged 15 to 44 years, known as the general fertility rate, was 54.7 in Derbyshire. This was significantly lower than the England average (57.7 per 1,000) but similar to the East Midlands regional average (55.8 per 1,000). In Derbyshire, rates have been declining since a high of 60.5 per 1,000 in 2011.

General fertility rate for Derbyshire



Source: Office for National Statistics

Child Population

There are currently 209,407 children and young people aged 0-24 in Derbyshire. This equates to 26.1% of the total population, lower than the proportion both regionally (29.7%) and nationally (29.8%).

2019	Derbyshire	East Midlands	England
Live Births	7,336	48,986	610,505
Children aged 0 to 4 years	39,928 5.0%	269,828 5.6%	3,299,637 5.9%
Children aged 5 to 9 years	44,849 5.6%	294,934 6.1%	3,538,206 6.3%
Children ages 10 to 14 years	44,351 5.5%	282,350 5.8%	3,354,246 6.0%
Children ages 15 to 19 years	40,088 5.0%	274,032 5.7%	3,090,232 5.5%
Young People ages 20 to 24	40,191 5.0%	314,895 6.5%	3,487,863 6.2%
Total Children and Young People ages 0 to 24	209,407 26.1%	1,436,039 29.7%	16,770,184 29.8%
Total Population	802,694	4,835,928	56,286,961

Source: Office for National Statistics

Over the next 5 years, the 0-24 population is expected to decrease by 1.1% to 207,100. However, there is considerable variation amongst age groups. For example, the population in the 10-14 and 15-19 age groups is expected to grow by 6.2% and 6.9% respectively while for 20-24 year olds the population is expected to decrease by 12.2%.

Population Projections for 0-24 year olds in Derbyshire

Age	2019 mid Year estimate	2020	2021	2022	2023	2024	% Change
0-4	39,928	39,526	39,155	38,873	38,862	39,079	-2.1%
5-9	44,849	44,608	44,350	43,785	43,241	42,762	-4.70%
10-14	44,351	45,118	45,756	46,691	46,858	47,084	6.20%
15-19	40,088	39,637	40,396	41,182	42,303	42,870	6.90%
20-24	40,191	39,150	37,938	36,747	35,958	35,305	-12.20%
0-24	209,407	208,039	207,595	207,278	207,222	207,100	-1.10%
All Ages	802,694	806,253	811,233	816,080	820,749	825,257	2.80%

Source: Office for National Statistics

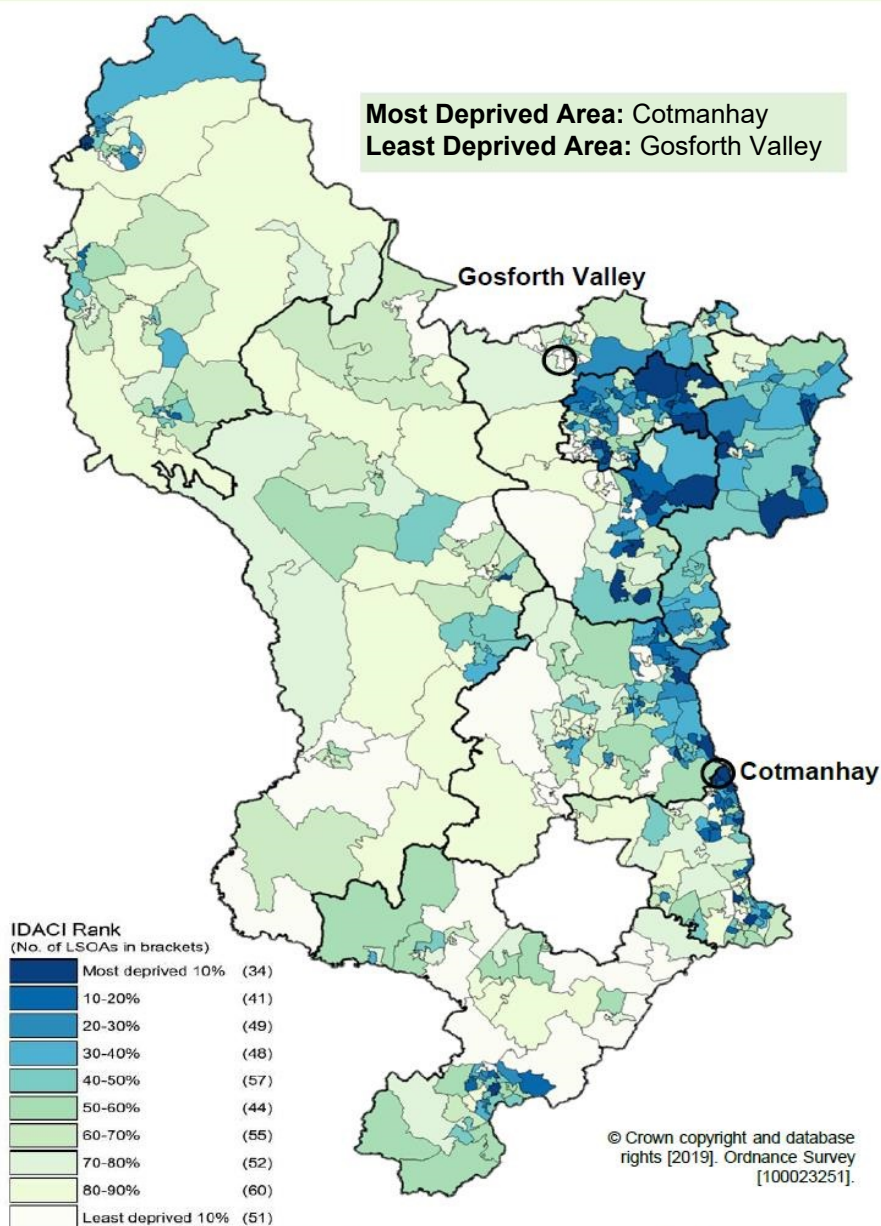
Deprivation

Derbyshire lies in the centre of England and forms the north-west part of the East Midlands region. The county is a place of geographical and social contrasts with more densely populated areas in the east and more rural, sparsely populated areas in the south, west and north. Pockets of deprivation has contributed to a number of inequalities in the region.

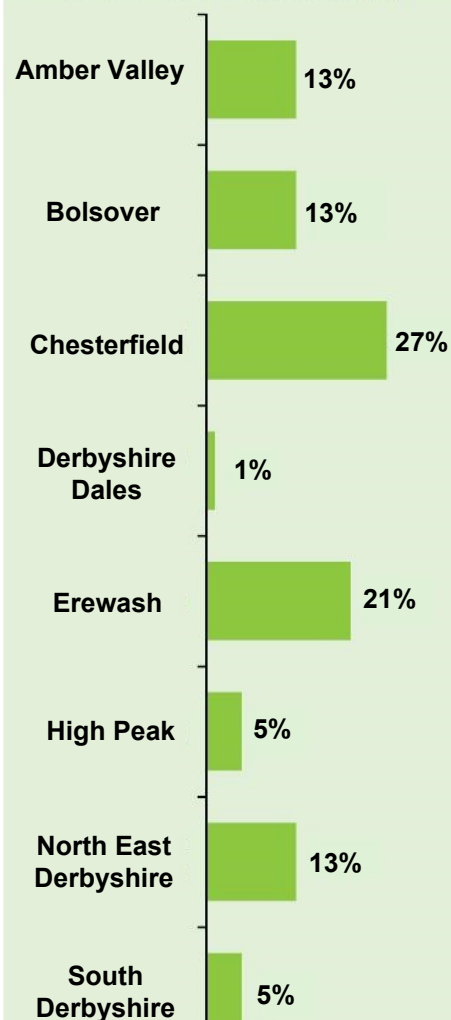


Income Deprivation Affecting Children in Derbyshire 2019

The income Deprivation Affection Children Index (IDACI) measures the proportion of all children aged 0 to 15 living in income deprived families (those receiving Child Benefit).



Spread of the 20% most deprived LSOAs across districts (%)



20,500 children

live in income
deprived
households in
Derbyshire

34 areas (7%)

are in the most
deprived 10%
nationally

75 areas (15%)

are in the most
deprived 20%
nationally

51 areas (10%)

are in the least
deprived 10%
nationally

Policy & Research - October 2019

Source: Ministry of Housing, Communities & Local Government, English Indices of Deprivation 2019



The number of children and young people with Special Educational Needs and Disabilities.

There are a variety of sources of information on the numbers of disabled children that measure disability in different ways for different purposes. Data is collected across a range of agencies including education, health and social care but challenges in linking these datasets and the different ways in which needs are captured means that it is difficult to identify a single cohort group. It is estimated that there are between 6747 and 9450 children and young people aged 0-17 with special educational needs and/ or disabilities in Derbyshire (Thomas Coram Research Institute methodology). This does not account for the 18-25 group also covered by the SEN Code of Practice.

The school census provides information on the number of children with special educational needs (SEN) attending schools in Derbyshire. In January 2020, there were 17,567 pupils with SEN in Derbyshire. This equates to 15.6% of all pupils in Derbyshire; similar to the proportion nationally (15.5%) but 1.2 percentage points higher than the average for our statistical neighbour group.

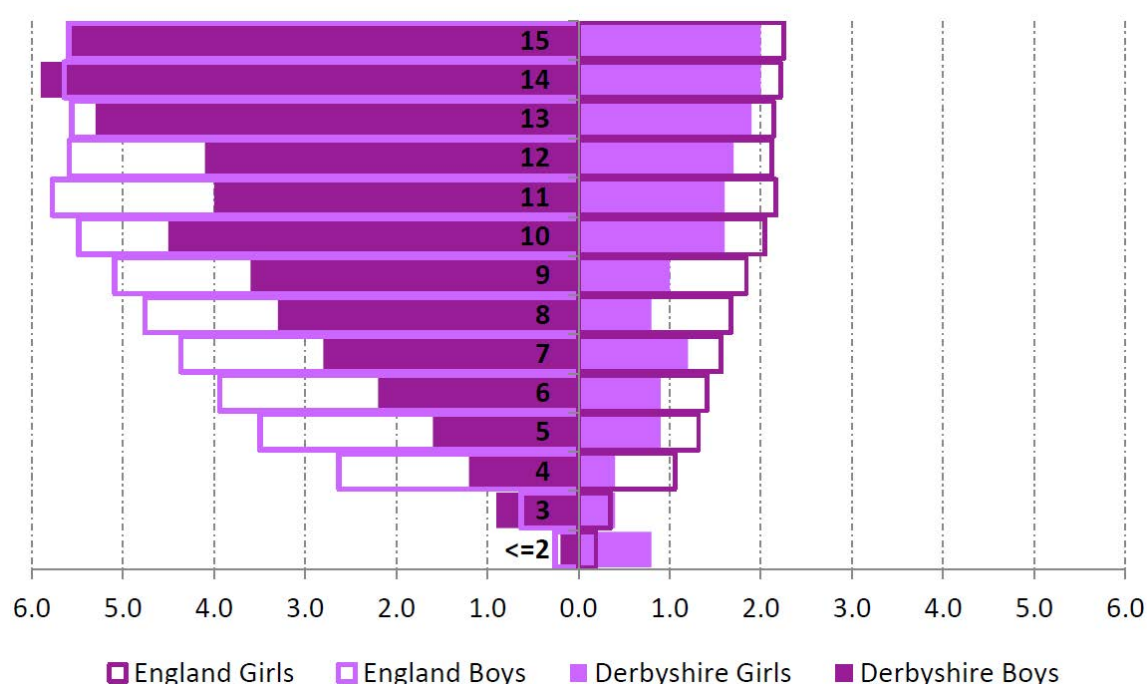
Since 2016, school census data shows that the number and proportion of pupils with SEN in Derbyshire has steadily increased; the rate in 2020 being 1.2 percentage points higher than in 2016 (14.4%). This mirrors the national trend. In Derbyshire, the increase is the result of more pupils categorised as requiring SEN Support; between 2016 and 2020 the rate increased by 1.5 percentage points from 11.4% to 12.9% and is now higher than the England average (12.1%). Increases have been greatest amongst primary phase pupils and are the result of Derbyshire's innovative approach to funding schools. Graduated Response for Individual Pupil (GRIP) is an initiative that allows mainstream schools to access high needs funding for pupils with significant barriers to learning. Funding is designed to help settings meet need sooner, giving pupils access to specialist resources, without the need for a statutory plan, EHCP. The Early Years Inclusion Fund, a statutory early intervention fund to support children aged 0-5 with SEND, is also likely to have contributed to increased numbers of children accessing SEN support.

**% Pupils on SEN Support by age and gender in state-funded primary, secondary and special schools:
January School Census 2020**



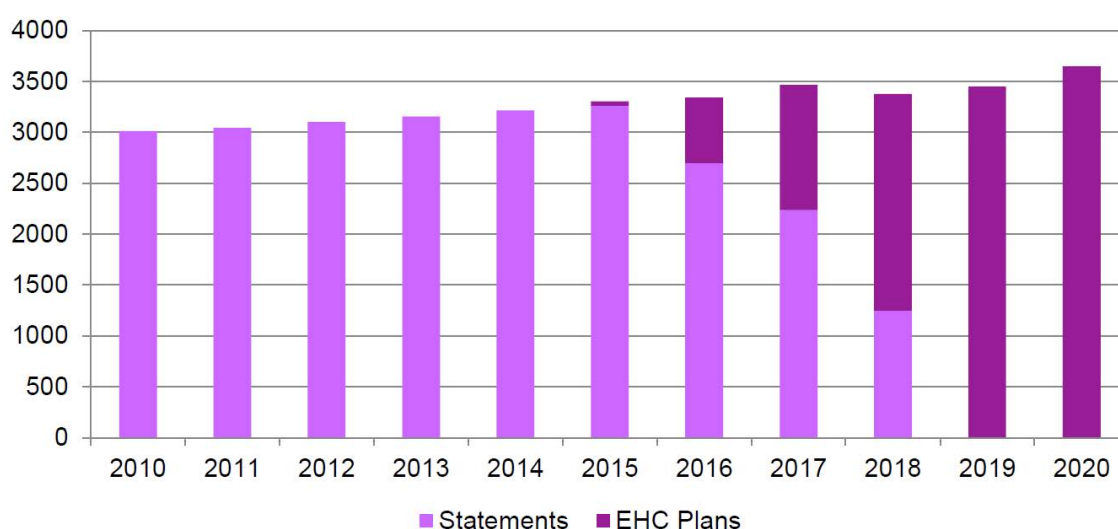
In the same period, the proportion of pupils with an EHCP in maintained settings in Derbyshire has decreased slightly from 3.0% to 2.7%. Nationally, the rate has increased by 0.5 percentage points from 2.8% to 3.3%. Almost every age group in Derbyshire has a lower proportion of pupils with an EHCP compared to pupils nationally. This is the result of the funding mechanism in place providing support earlier, without the need for an EHCP.

**% Pupils with an EHC Plan by age and gender in state-funded primary, secondary and special schools:
January School Census 2020**



However, the overall *number* of EHCP's maintained by Derbyshire County Council continues to grow; the number maintained in Jan 2020 (3,646) was 9% higher than the number maintained in Jan 2016 (3,341). As a proportion of the 0-24 population however, rates have remained stable at around 1.6% to 1.7%. Nationally, rates have increased from 1.5% in 2016 to 2.3% most recently.

Number of Statements and EHC plans Maintained by Derbyshire Local Authority (children & young people aged 0-25)



Recent increases are due, in large, to increases in the number of EHCP's for young people aged 16 and above. However, the number of plans for children under the age of five², although small in number, are also showing a notable increase. Between July 2018 and July 2020 the number of plans for children in this age group increased by 42% from 145 to 206. Much of the rise is for children in the second year of nursery.

It is difficult to accurately predict if these trends will continue and how other aspects of the SEND profile may change over the next few years. If numbers continue at their current rate (1.7%), the overall number of EHCPs maintained by the council may start to decrease in line with the overall population decrease expected for 0-24 year olds in Derbyshire. The number of EHCPs for secondary age pupils may increase however, as population numbers for this age group are expected to increase. There are also plans to build approximately 25,000 homes across Derbyshire in the next few years which could suggest a further rise of around 10,000 school age pupils to the base population. A proportion of these pupils will require an EHCP but initiatives such as GRIP may help to offset any large increases. The predicted size of the SEND population is discussed further in the council's SEND Sufficiency Document.

² Age is taken at the end of August. Children at the end of Reception are still included in the figures for children under the age of 5.

How Many Children and Young People have SEND in Derbyshire?



17,567 pupils* overall with **SEN** (15.6%)

Similar to the proportion nationally (15.6%)



14,545 pupils with **SEN Support** (12.9%)

significantly higher than the national average (12.1%)



3,022 pupils with **EHCP** (2.7%)

significantly lower than the England average (3.3%)

*attending all settings in Derbyshire

Source: School Census Jan 2020

3,646 EHC Plans maintained by Derbyshire Local Authority (1.7% of the 0-24 population compared to 2.3% nationally)



Numbers have **gradually increased** and are now 9% higher than in 2016.

Source: SEN2 2020

9,208 children and young people in Derbyshire, **4.4%** of the total 0-24 population were in receipt of either **DLA or PIP** in November 2019



Using a combination of DLA/PIP as a lower bound estimate and DLA/PIP/EHCPs as an upper bound estimate, there could be between



6,747 and 9,450 disabled children in Derbyshire. This represents **4.4 - 6.1%** of 0-17 year olds in Derbyshire.

Source: Thomas Coram Research Unit (0-17 year olds)

The National Autistic Society estimate that 1.1% of the UK population may have Autism & between 44-52% of people with Autism may also have a learning disability.

Around **2,304** children & young people ages 0-24 may have **Autism** in Derbyshire. Of those, 1000 - 1200 may also have a **learning disability**.

Other Neurodevelopmental Disorders

Impairment/Condition	Estimated National Prevalence (%)	Derbyshire 0-19 Estimate (number) ¹
Any neurodevelopmental disorder	3.0 - 4.0	5,076 - 6,768
ADHD ²		
DSM IV	3.0 - 9.0	5,076 - 15,228
ICD10	1.0 - 2.0	1,692 - 3,384
Cerebral Palsy	0.2	338
Epilepsy	0.3	508

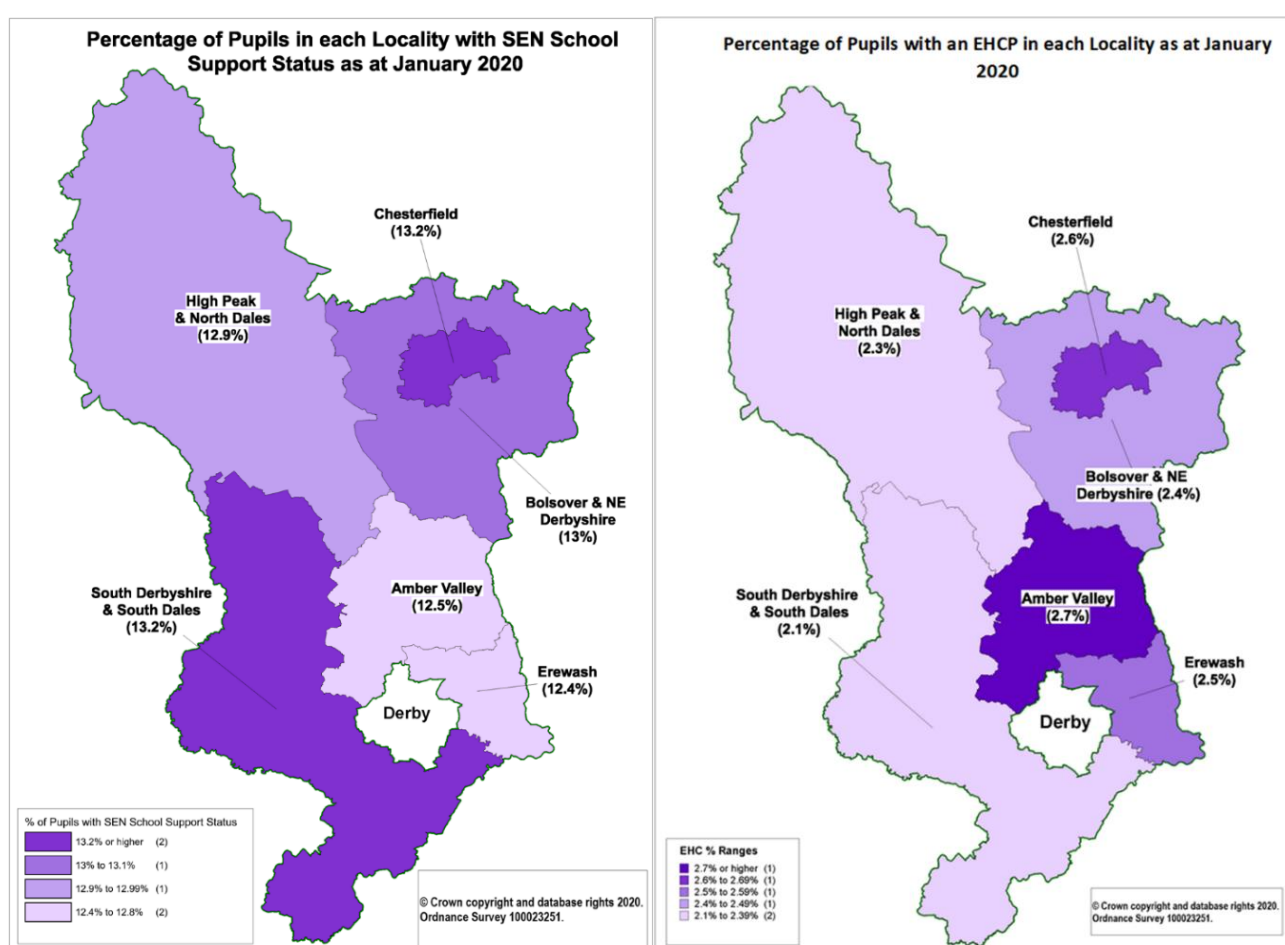
¹ Estimated national prevalence applied to 2019 ONS mid-year population estimates for 0-19 year olds in Derbyshire

² To be diagnosed with ADHD a child should meet clear diagnostic criteria outlined in the Diagnostic and Statistical Manual of Mental Disorders (DSM) or International Classification of Diseases (ICD-10). The ICD-10 definition makes reference to hyperkinetic disorder

Identification of Needs

Childrens Services in Derbyshire are delivered through 6 geographical localities. The overall proportion of pupils with SEN is similar across each locality. However, a significantly lower proportion of pupils living in South Derbyshire and South Dales have an Education, Health and Care Plan compared to the Derbyshire average. For pupils that attend a Derbyshire school but who live outside the local authority boundary, a significantly higher proportion have an EHC Plan.

Percentage of pupils having their needs met through SEN Support or an EHCP by Locality



Pupils identified with special educational needs are often more likely to be eligible for free school meals. In 2020, 32.5% of pupils on SEN Support (4,405 pupils) and 38.9% of pupils with an EHC Plan (1,040 pupils) were eligible for and claiming free school meals. This compares to 15.6% of pupils with no identified SEN. The same pattern emerges nationally, although the proportions for all three groups of pupils in Derbyshire were significantly higher than the equivalent England averages.

Primary Need

A significantly higher proportion of Derbyshire pupils identified as SEN Support have a primary need of Moderate Learning Difficulty (MLD), compared with the England average (25.8% in Derbyshire compared to 21.4% nationally). This remains the most common type of need for SEN Support pupils in Derbyshire, although the proportion has declined by 7.9 percentage points since 2016.

For pupils with an EHC Plan, Autism remains the most common type of need for both pupils in Derbyshire (35.5%) and in England overall (30.2%). Since 2016, the rate in Derbyshire has increased by 7.5 percentage points; greater than the increase seen nationally (4.3 percentage points). Autism has also seen increased prevalence amongst pupils receiving SEN Support, accounting for 8.6% of needs in 2020, 4.4 percentage points higher than in 2016 (4.2%) and significantly higher than the England average (6.8%).

A significantly lower proportion of SEN pupils in Derbyshire have Speech, Language and Communication Needs (SLCN) as their primary need compared to the England average. This may be, in part, connected to the higher levels of autism diagnosis and recognition of social and emotional needs seen within secondary aged pupils which were less clear or without diagnosis in younger children

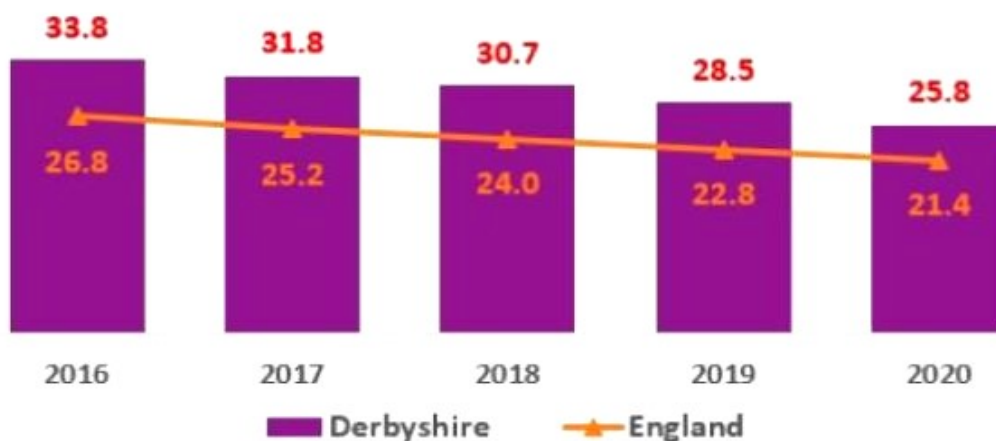
A significantly higher proportion of pupils with SEN in Derbyshire have Social, Emotional and Mental Health needs identified, compared to the national average. This difference is particularly marked for pupils receiving SEN Support.

There is some variation between localities in the type of needs being identified. For example, the proportion of pupils receiving SEN Support for Social, Emotional and Mental Health needs ranges from a high of 22.9% for pupils living in Chesterfield to a low of 17.2% for pupils living in Erewash. For pupils with an EHCP, rates for those with a diagnosis of Autism ranged from a high of 44.3% for pupils living in South Derbyshire and South Dales to a low of 30.5% in High Peak and North Dales.

Primary Need—SEN Support

Moderate Learning Difficulty is the most common type of need for pupils with SEN Support in Derbyshire, accounting for **25.8%** of needs in 2020, **significantly higher** than the **England average**. Prevalence has steadily **declined** since 2016 however.

% of SEN Support Pupils with MLD as a Primary Need



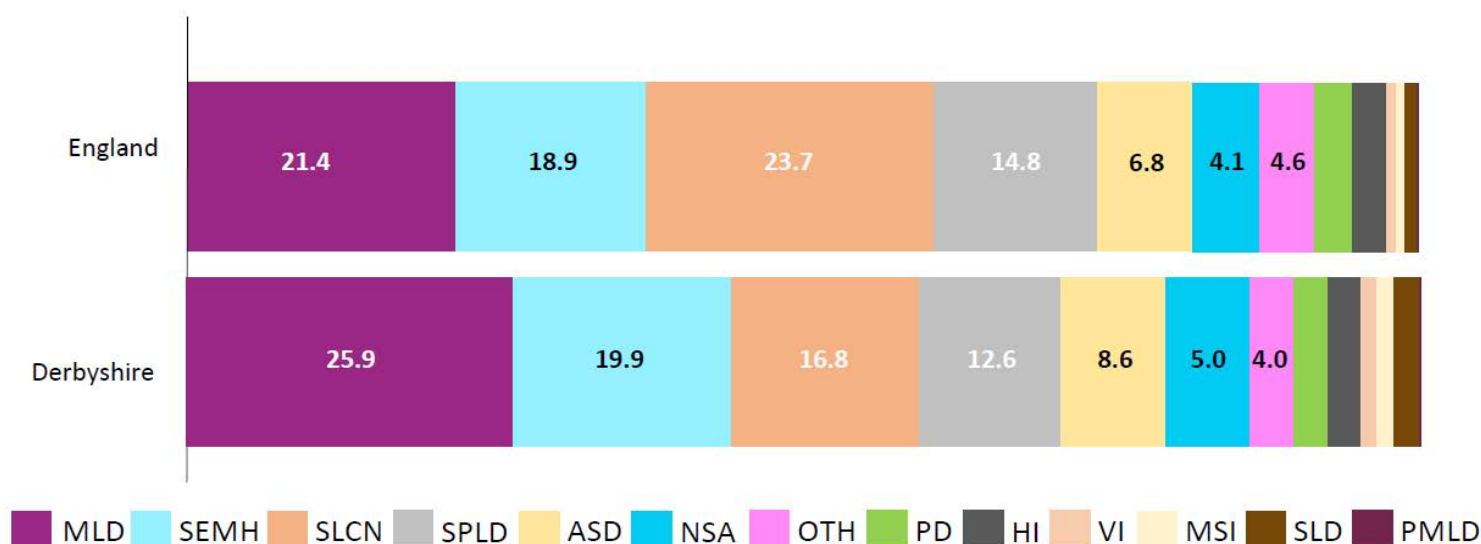
Social, Emotional & Mental Health Needs remain the second most common type of need in Derbyshire; **19.9%** of pupils with SEN Support had this type of need in 2020.

The following needs have all seen a notable increase in prevalence since 2016:



The proportion of pupils with Speech, Language and Communication Needs (16.8%), although rising, remain significantly lower than the England average (23.7%). This need is the most common type of need for SEN Support pupils nationally.

% Pupils with SEN Support by Type of Need (Jan 2020)

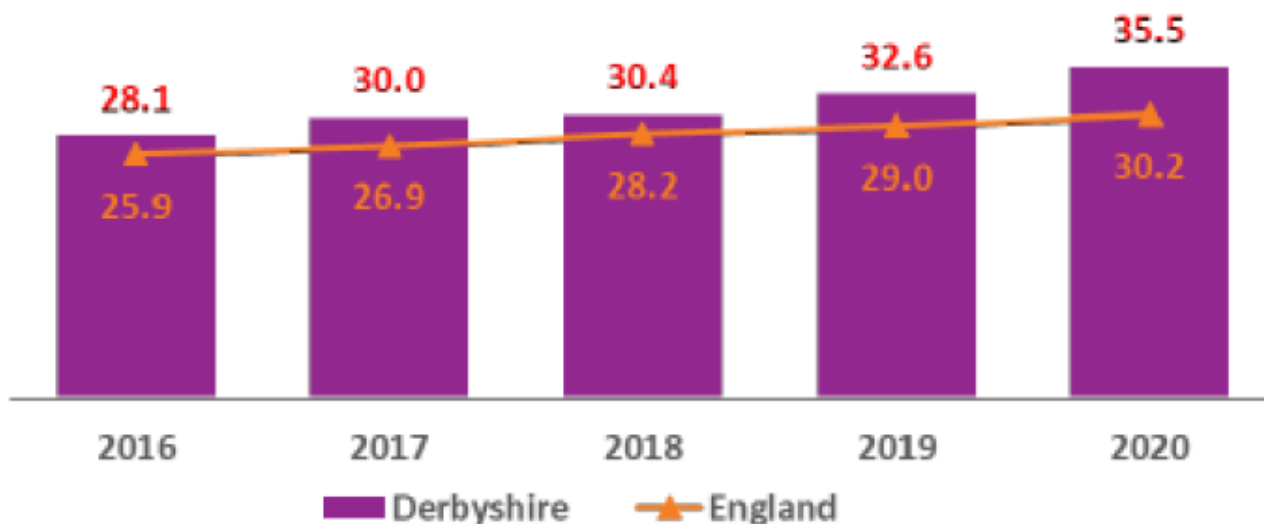


Primary Need — EHCP

Autism is the most common type of need for pupils with an EHCP, accounting for **35.5%** of needs in Derbyshire and 30.2% nationally.

Since 2016, rates have been steadily **increasing**.

% of EHCP Pupils with Autism as a Primary Need

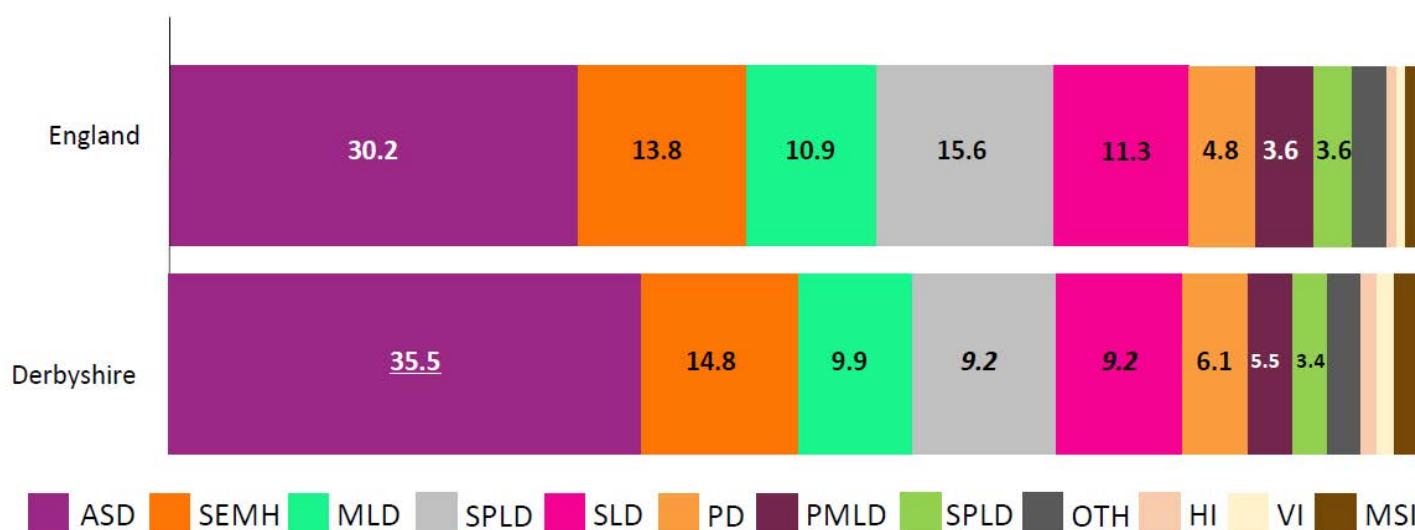


In Derbyshire, **Social, Emotional & Mental Health Needs** remain the second most common type of need for pupils with an EHCP although prevalence has **decreased** by 3.2 percentage points since 2016 from **18.0%** to **14.8%**.

Nationally, prevalence has **increased** from 12.3% to **13.8%** and is the third most common type of need after Speech, Language and Communication Needs (15.6%)

In Derbyshire, **Moderate Learning Difficulties** have seen a **drop** in prevalence From 13.3% of needs in 2016 to **9.9%** in 2020. This follows the trend seen nationally.

% Pupils with an EHCP by Type of Need (Jan 2020)



Figures underlined are statistically, significantly higher than the England average; figures in italics are statistically, significantly lower. (95 percent confidence level).

Social Care Needs

Identifying the social care needs of a child or young person with a learning difficulty or disability does not necessarily require an assessment by a social worker. In most cases needs can be met through universal services or early help without the need of a formal assessment, provided there is a good understanding of those needs and families have access to clear information about what support is available and how to get it. In circumstances where social care input is required for the completion of an EHCP a Locality SEND officer would liaise with the allocated social worker with the intention of completing section D of the EHC assessment. The advice for completion must be provided within 6 weeks from the point of request and should include the context behind services provided and the most current assessment of needs. In 2019/20, 100% of EHCP's requiring social care input were completed within timescale.

For children and young people with significant, enduring or permanent disabilities or impairments, Derbyshire's Specialist Disabled Children's Service is able to offer support for identified needs. Services are provided as part of an agreed plan following a single social care assessment. During 2019/20, 519 single assessments were completed by the Disabled Children's Service in Derbyshire. This was lower than in 2018/19 (580) but considerably higher than the preceding 3 years (290 in 2015/16, 340 in 2016/17 and 303 in 2017/18). 83.6% of single assessments were completed within timescale (45 working days), higher than in 2018/19 (82.9%).

As at 31st March 2020, there were 620 children in need³ either supported by or waiting to be assessed by the Disabled Children's Team in Derbyshire. This is lower than the number in 2019 (685) and 2018 (630).

Where a child or young person is assessed as needing additional and individual support outside school or college, parents/carers or the young person themselves have the right to request a Personal Budget. This is an amount of money identified to deliver certain aspects of provision set out in a support plan. The aim is to provide a more person-centred package of support and can be used for example, to buy a specific piece of equipment or to hire a personal assistant to support the child or young person. Personal Budgets may be delivered through either a direct payment, where individuals receive cash to contract, purchase and manage services themselves, or through an arrangement with the local authority, Health, school, college or other third party, which hold and manage the funds on behalf of the child or young person. As at January 2019, there were 158 personal budgets in place for children and young people with an Education, Health and Care Plan in Derbyshire. 138 budgets had a direct payment for social care while the remaining 20 were for education.

We have a duty to provide short break services to young people and their families in order to support families in their caring role and to make sure young people have opportunities outside of their family home. Short breaks are provided to give disabled children and young

³ Under the Children Act 1989, disabled children are regarded as 'children in need'.

people enjoyable experiences away from their primary carers, thereby contributing to their personal and social development and reducing social isolation and provide parents and families a necessary and valuable break from caring responsibilities. Short breaks can include day care in the child's own home and elsewhere, overnight care in the child's own home and elsewhere, educational or leisure activities for children outside their own home; or services in the evenings, at weekends and during school holidays. In 2018/19 the council spent £24.21 per child (aged 0-17)⁴ on respite and other support for disabled children, compared to £26.87 in the previous period. For Derbyshire's statistical neighbours, the average was £29.40 per child, a decrease since the previous period (£31.23).

The Council has a framework of providers in place to help identify and arrange services for disabled children, young people and families needing support. In January 2020, we asked for views on the activities and services future arrangements should include. The results of the survey will be used to inform our [short break statement](#).

Health Needs

Clinical Commissioning Groups (CCGs) commission most of the hospital and community NHS services in the local areas for which they are responsible. There are 2 CCGs covering Derbyshire – Derby and Derbyshire, and Tameside and Glossop.

Tameside and Glossop

Services involved in supporting children and young people with SEND in Tameside & Glossop report that they are dealing with increasing demands on their services, in excess of any increase in the SEND population itself. This suggests an increase in the complexity of needs within this group. For services such as occupational therapy, portage and Children's speech and language therapy there has been increases in referrals. Child and Adolescent Mental Health services (CAMHS) have seen an average 17% increase in referrals over the last three years (Appendix 1).⁵

Increased demand leads to increased waiting lists and times to access some services. Waiting times for children's therapy services are monitored against a 12 and 18 week standard. Data from Tameside & Glossop CCG shows that although some services are coping with demand and children and young people are seen within standard times, a high proportion of services have considerably longer waiting times (Appendix 2). Children waiting long periods to see specialist services and professionals can have a significant impact on outcomes for children and young people and their family. The lack of early

⁴ This figure is calculated by taking expenditure on direct payments, short breaks and other support for disabled children and dividing this by the number of 0-17 year olds in the local authority area. Source: Local Area SEND report Derbyshire: Department for Education [online] https://lginform.local.gov.uk/reports/view/send-research/local-area-send-report?mod-area=E10000007&mod-group=NearNeighboursChildrenServices_Derbyshire&modify-report=Apply&mod-type=namedComparisonGroup

⁵ Joint Strategic Needs Assessment for Tameside & Glossop – Special Educational Needs and Disability, May 2020. [online] <https://www.tameside.gov.uk/TamesideMBC/media/policy/Special-Educational-Needs-and-Disability-JSNA.pdf>

intervention could translate into more complex issues later – that means more of an impact on schools or added costs in later years due to mental health issues or educational impacts.

Derby and Derbyshire

Within Derby and Derbyshire Clinical Commissioning Group (DDCCG) there are four main NHS providers that provide NHS hospital based and community services: Chesterfield Royal Hospitals NHS FT, University of Derby and Burton Teaching Hospitals NHS FT, Derbyshire Healthcare NHS FT and Derbyshire Community Health Services NHS FT.

As with Tameside and Glossop CCG, services involved in supporting children and young people with SEND in Derby and Derbyshire report that they are dealing with increasing demands on their services, in excess of any increase in the SEND population itself. For services, most notably Autism/ ADHD (Neuro Development) and Learning Development Health checks there has been a large increase in referrals (Appendix 3). System wide work is underway, particularly regarding neuro development need, to understand this demand and the graduated response to address gaps and weaknesses as a system.

Increased demand has led to increased waiting lists and times to access some services. Although some services are coping with demand and children and young people are seen within standard times (a target of 18 weeks is aimed for across all services), a high proportion of services have considerably longer waiting times (Appendix 4). In 2020/21, waiting lists and times are expected to have significantly increased with the impact of COVID. The NHS is under national direction to recover services post-pandemic and prioritisation processes are being established to support this.

Derbyshire Wide Health Needs

The learning disabilities health check scheme is one of a number of GP enhanced services. In 2019-20, within the Derby and Derbyshire CCG, there were 662 patients aged 14-18 identified as having a diagnostic learning disability under the Quality and Outcomes Framework (QOF). This represents 1.5% of all registered patients aged 14-18, higher than for England as a whole (0.7%). In Quarter 4 2019-20, 22% of these patients had taken up the annual health check and had a health action plan, lower than the rate for England (28.2%). For Tameside and Glossop CCG, of the 161 patients aged 14-18 with learning disabilities (1.5% of all registered patients), 38.5% had, in the same period, taken up the annual health check and had a health action plan.⁶

School Census data shows Social, Emotional and Mental Health Needs are the second most prevalent need identified in schools across Derbyshire, accounting for 19.1% of SEN needs in 2020; significantly higher than the England average. Hospital admissions for self-

⁶ NHS Digital: Learning Disability Health Check Scheme England, Quarter 4 2019-20 [online] <https://digital.nhs.uk/data-and-information/publications/statistical/learning-disabilities-health-check-scheme/england-quarter-4-2019-20> [accessed 03/08/2020]

harm and substance misuse, risk factors for poor mental health and wellbeing, are significantly higher for young people in Derbyshire when compared to regional and national averages. However, hospital admissions for mental health conditions, despite a rise in 2017/18, remain in line with national averages.

In England all looked after children should complete a Strengths and Difficulties Questionnaire (SDQ) once a year, to keep track of rates of emotional difficulties. A score of 14-16 indicates cause for concern, a score of 17 and over is likely to indicate poor mental wellbeing. In 2018/19 there were 151 looked after children aged between 5 and 16 who had an SDQ score of 17 or over; 48.1% of all completed SDQ's. The proportion in Derbyshire was statistically, significantly higher than both the East Midlands (40.3%) and England averages (38.6%).⁷ Data for the last 4 years shows that Derbyshire's rate is consistently higher than these comparator groups.

Commissioning initiatives such as the Future in Mind Programme are helping to transform the ways in which mental health services are delivered and promoted to children and young people. In 2015, the number of children with diagnosable mental health conditions who accessed services provided by Derby and Derbyshire CCG was approximately 25%. By March 2019 this had risen to 35.8%. It is hoped that services will help to reduce further the numbers of children requiring Tier 4 provision by providing effective alternatives within the local community.

During 2018/19, 39 children were admitted to Tier 4, with a total length of stay of 3,116 bed days. This compares with 83 children admitted in 2015/16 with a total length of 6,996 bed days⁸.

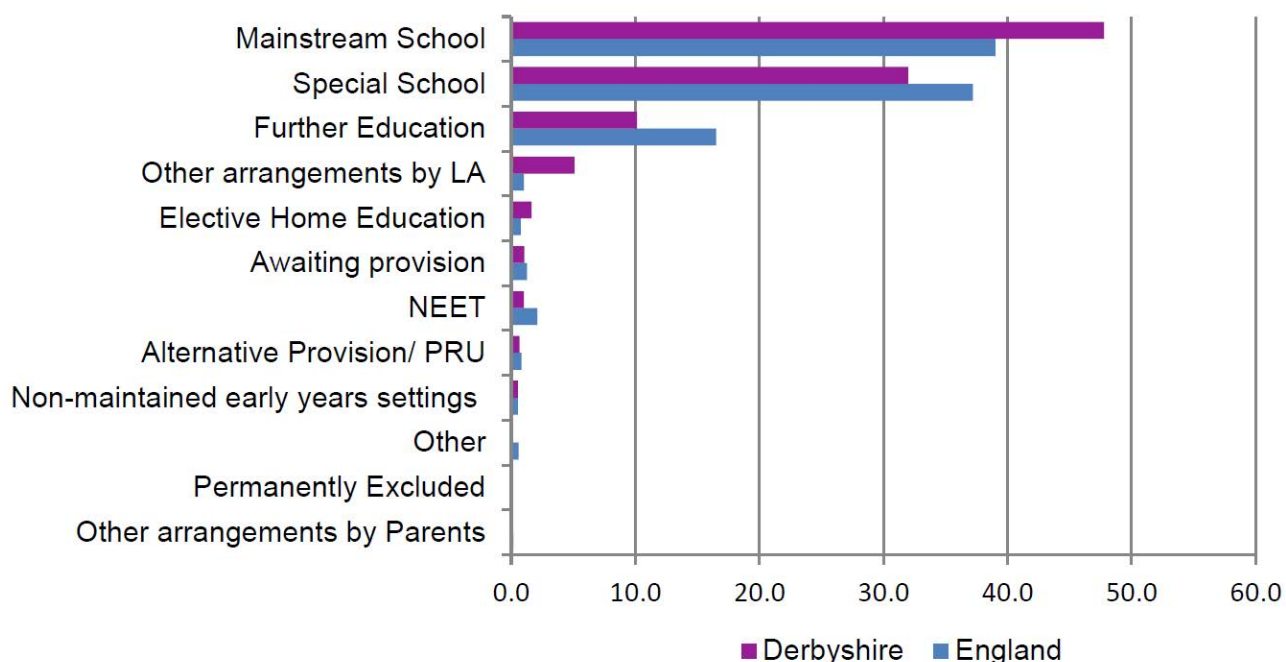
How well are we at meeting children and young people's needs in Derbyshire and improving outcomes?

In 2020, 47.8% of children and young people (aged 0-25) for whom the council maintains an EHCP were placed within mainstream schools. A further 10.1% were in further education. Nationally, the proportions were 39.0% and 16.5% respectively. The proportion of pupils attending a Special School in Derbyshire (32.0%) was significantly lower than the proportion nationally (37.2%). This suggests that many children and young people with EHCPs in Derbyshire are having their needs met within a mainstream setting.

⁷ Public Health England. Public Health Profiles. 2020 [online] <https://fingertips.phe.org.uk> [accessed 30/06/2020]

⁸ Future in Mind Local Transformation Plan Refresh 2019 [online] <https://www.derbyandderbyshireccg.nhs.uk/resources/assets/attachment/full/0/8421.pdf>

Percentage of Children & Young People for whom the Authority Maintains an EHC Plan by Placement Type (Jan 2020) ⁹



Early Years

All children should receive a health and development review when they reach 2 – 2 ½ years of age. Disparities in child development can be recognisable in the second year of life and the review is one of the earliest points at which SEND can be identified.

In 2018/19, 93.9% of children in Derbyshire received a review at 2 – 2 ½ years. This was higher than the proportion in 2017/18 (91.7%) and higher than both the East Midlands (75.5%) and England averages (77.6%)¹⁰. Of those children receiving a development review using the Ages and Stages Questionnaire-3 in Derbyshire, 88.2% achieved a good level of development at 2 – 2 ½ years¹¹ in 2018/19. This was significantly higher than the England average (84.1%). Outcomes were higher than those reported for 2017/18.

In 2019, 29.4% of pupils on SEN Support in Derbyshire achieved a good level of development in the Early Years Foundation Stage. This was higher than the East Midlands (25.6%), Statistical Neighbour (26.0%) and England (28.9%) averages and was an improvement on 2018 outcomes. For pupils with an EHCP, 1.4% of pupils in Derbyshire secured a good level of development in 2019. This compares to 4.5% of EHCP pupils nationally.

⁹ Source: Department for Education. Education, health and care plans: England, 2020. [online] <https://explore-education-statistics.service.gov.uk/find-statistics/education-health-and-care-plans> [accessed 02/07/2020]

¹⁰ Public Health England. Public Health Profiles 2020. [online] <https://fingertips.phe.org.uk> © Crown copyright 2020 [accessed 28/08/20]

¹¹ The percentage of children who received a 2-2½ year review who were at or above the expected level in the in all five Ages and Stages Questionnaire-3 (ASQ-3) domains.

School Age Pupils

Data for the last 4 years shows that persistent absence rates are lower for pupils on SEN Support in Derbyshire (17.4% in 2019), compared with pupils on SEN Support nationally (17.9% in 2019). For pupils with an EHCP, the latest published data (2019) shows that Derbyshire (24.1%) performed better than the England average (24.6%).¹² This is an improvement on previous years' data when pupils with an EHCP in Derbyshire had a higher persistent absence rate than EHCP pupils nationally.

The overall percentage of sessions missed by children with SEN in Derbyshire (7.0%) has been increasing in recent years and is now 0.7 percentage points higher than it was in 2016 (6.2%). The same pattern emerges nationally, although the rate of increase (0.5 percentage points) is lower than that seen in Derbyshire. Both pupils with SEN Support (6.6%) and EHCP's (9.0%) in Derbyshire have an overall absence rate that is higher than the England averages; 6.5% and 8.7% respectively.¹³

Data for the last 4 years shows that pupils with SEN Support in Derbyshire have a significantly higher permanent exclusion rate (0.46% in 2019) than SEN Support pupils nationally (0.32% in 2019). For pupils with an EHCP, rates have been declining since a high in 2017 (from 0.57% to 0.31%) and while still higher than the England average (0.15%), the difference is not statistically significant.¹⁴

Pupils with an EHC Plan have the highest rate of fixed term exclusions from schools (7.48% in 2019), over 5 times higher than the rate for pupils with no identified SEN (1.48%) and higher than the rate for pupils with an EHC Plan nationally (6.51%). However, the rate is lower than it has been in any of the last 5 years. For pupils with SEN Support, the fixed term exclusion rate (6.03%) was closer to the national average (6.17%).

Exclusion rates vary by type of need. The latest data from the Department for Education (DfE) show that pupils with Social, Emotional and Mental Health needs (SEMH) have the highest rate of exclusions and that pupils with Specific (SPLD) and Moderate Learning Difficulties (MLD) and Autism (ASD) also have high rates. The same pattern is seen in Derbyshire. With the exception of SPLD, the proportion of pupils in Derbyshire with these types of need is also significantly higher than the England averages. A literature review¹⁵ published in response to the Timpson Review of School Exclusion noted that certain vulnerabilities, individually or combined, increased a child's risk of exclusion. These included SEND, including social, emotional and mental health (SEMH) needs, poverty, low attainment, being from certain minority ethnic groups, being bullied, poor relationships with teachers, life trauma and challenges in their home life. While the potential drivers for exclusion are numerous and layered, the importance of SEND and SEMH needs in

¹² Department for Education. Pupil absence in schools in England: 2018 to 2019

¹³ Ibid

¹⁴ Department for Education. Permanent and fixed-period exclusions in England: 2018 to 2019

¹⁵ Graham.B. *et al* (2019) School exclusion: a literature review on the continued disproportionate exclusion of certain children [online] <https://www.gov.uk/government/consultations/school-exclusions-review-call-for-evidence> [accessed 23/10/2020]

particular should be noted with regard to the higher rates of exclusion for SEN pupils in Derbyshire.

Academically, there is a mixed pattern of performance for pupils with SEN. At Key Stage 2, both pupils with SEN Support and EHCP's in Derbyshire have similar performance to the same groups nationally. As for all pupils, progress remains an area of concern, although there is evidence of an improving trend; pupils with an EHCP in Derbyshire now make more progress than pupils with an EHCP nationally (-2.7 compared to -3.6 in reading, -2.8 compared to -4.3 in writing and -3.6 compared to -4.0 in maths¹⁶).

At KS4, outcomes for pupils with SEN have improved since 2018 with average Attainment 8 scores for pupils with an EHCP (16.2) now considerably higher than the average for EHCP pupils nationally (13.7). Similarly, Progress 8 scores for EHCP pupils in Derbyshire are better than the progress scores for EHCP pupils nationally, while for SEN Support pupils, scores are slightly lower. For other key stages, and with the exception of Phonics, performance is generally in line with national averages.

Post 16 Students

In Derbyshire, by the end of August 2019, 36.5% of 19 year olds on SEN Support and 15.3% of 19 year olds with an EHCP were qualified to Level 2¹⁷ including English and Maths. Proportions were similar to the England averages; 35.9% and 14.9% respectively.

By the end of August 2019, 28.1% of 19 year olds on SEN Support and 14.6% of 19 year olds with an EHCP in Derbyshire were qualified to Level 3¹⁸. This represents an improvement since 2018. Nationally, the rates were 30.7% and 12.5% respectively.

In 2018/19, the latest year for which data is available¹⁹, 89% of pupils with SEN Support and 91% of pupils with an EHCP in Derbyshire were in a sustained education and/ or employment/ training destination after completing Key Stage 4. This compares to national averages of 89% and 90% respectively. Since 2017/18, the proportion of pupils in a sustained destination in Derbyshire has decreased by 3 percentage points for pupils with SEN Support and increased by 1 percentage point for pupils with an EHCP.

In 2019, 91% of school students in Derbyshire with identified SEN were in a sustained education, employment or apprenticeship destination after 16-18 study, a 1 percentage point increase when compared to 2018. The rate in Derbyshire was 4 percentage points higher than the rate for SEN pupils in state-funded schools nationally (87%).

¹⁶ KS2 progress scores compare pupils' KS2 results with the results of pupils with similar prior attainment nationally. A positive score indicates that performance is above average while a negative score indicates that performance is below average.

¹⁷ Attainment at Level 2 equates to achievement of 5 or more GCSEs at grades 9-4/ A*-C or equivalent.

¹⁸ Level 3 qualifications are those equivalent in size to an A Level.

¹⁹ There is a time lag between students completing their study and destination measures being published. This is because a year needs to elapse during which young people are participating in their chosen destination, and then datasets combined before measuring sustained participation.

Adults

Information about outcomes in adulthood is very limited; however the Adult Social Care Outcomes Framework (2018-19) indicates that 77.8% of adults with a learning disability in Derbyshire who were known to Adult Care were living in their own home or with their family. This is similar to the England average of 77.4%. However, the proportion of adults with a learning disability in paid employment continues to be very low; just 1.0% in 2018-19 compared to 5.9% nationally. For those adults in contact with secondary mental health services, outcomes were more positive with 82.0% living independently (58.0% nationally) and 11.0% in paid employment (8.0% nationally).

Vulnerable Groups

Looked after children

Nationally, looked after children are almost four times more likely to have an identified special educational need (SEN) than all children and are almost nine times more likely to have an Education, Health and Care Plan (EHCP).²⁰ In Derbyshire 59.9% of children looked after for 12 months or more have some form of identified SEN (3.8 times higher than the rate for all children), with 29.8% having an Education, Health and Care Plan (11 times higher than the rate for all children).

As at June 2020, 14.7% or 126 children in care out of 858 had a recorded disability. This compares to 14.0% of children as at June 2019. Of those with a disability recorded, the most prevalent need was Autism (38.1%) followed by ADHD (32.5%), Learning Disability (33.3%) and challenging behaviour (15.9%).

Children in need

In Derbyshire, 29.0% of school-aged children in need²¹ receive SEN Support while 16.1% have an EHC Plan. Nationally, the overall rate of SEN is very similar although the split between SEN Support (24.4%) and EHCP's (21.6%) is very different; Derbyshire has a significantly higher rate of children in need with SEN support and a significantly lower rate of children in need with an EHCP.²²

In 2019, there were 5,691 children in need at 31 March. Of these, 777 (13.7%) had a disability recorded. This was statistically, significantly higher than the England average (12.4%). Since 2015, the proportion with a disability recorded has decreased year on year and is now 5.3 percentage points lower than the 2015 rate. In both Derbyshire and England,

²⁰ Department for Education: Outcomes for children looked after by local authorities in England, 31 March 2019

²¹ A child in need is defined under the Children Act 1989 as a child who is unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired without the provision of services, or the child is disabled.

²² Department of Education. Characteristics of children in need: 2018 to 2019

the most common disability recorded was learning, accounting for 41.4% of cases in Derbyshire and 43.2% of cases nationally.

Electively home educated

As at January 2020, 60 children with an EHC Plan were electively home educated. This represents 1.6% of all EHC Plans maintained by Derbyshire Local Authority, 0.3 percentage points higher than the rate in 2017 (1.3%) and 0.8 percentage points higher than the rate for England (0.8%). 29% of parents/carers in Derbyshire cited problems with SEN provision as the reason for home education.

Young Offenders

In Derbyshire there are currently 185 young people with open interventions with the Youth Offending Team. Of these, 54 (29.2%) had some form of identified special educational need. The majority of these young people (63.0%) had social, emotional and mental health concerns as their primary need.

Quality and Satisfaction of Services

There are a range of services which support schools, settings and providers to meet the needs of the SEND population.

Overall, school and parent/carer satisfaction with the Specialist Service for Special Educational Needs (SSSEN) is very high; 100% of schools reported that teaching, strategies, training & support and the impact of provision were good or outstanding. 99.8% of parents/carers knew what their child was learning with their SSSEN support teacher while 91.4% of children thought that the activities they did with their support teacher helped them to get better at their work.

Evaluation feedback for the Early Years SEN Service is largely positive with 100% of parents rating the portage service as very good or excellent in 5 of the 6 areas assessed. Early Years Specialist Teacher evaluations were also positive with 97% rated as either good or excellent for the service's involvement, child progress & explanation of processes.

A recent pilot questionnaire sent to parents/ carers of children with newly issued EHCP's found the assessment process in Derbyshire to be positive; parents and carers felt engaged in the process, that they had been listened to, and appropriate provision made for their child. The questionnaire is to be continued and developed further with results collated monthly until December and then on a quarterly basis thereafter.

The July 2019 POET survey collected the viewpoints of 31 parents, 35 practitioners and 27 young people in Derbyshire. The survey revealed that choice and control over support was a concern for respondents in Derbyshire, with 52% of parents and 45% of practitioners rating this area as poor. Flexibility of support was also an area of concern with 39% of parents and 33% of practitioners giving a poor rating. Conversely, the majority of both

practitioners (58%) and parents (47%) believed that the help and support children received was good in helping them to take part in school and learning.

The Personal Social Services Adult Social Care Survey (ASCS) seeks opinions on a range of social care outcome areas. The survey covers all service users aged 18 and over in receipt, at the time of the data extract, of long-term support services funded or managed by social services. In 2018-19, 100% of respondents aged 18-24 in Derbyshire, agreed that the care and support services they received helped them to have a better quality of life. 100% of respondents also agreed that care and support services helped them to have control over their daily life.

The NHS Derby and Derbyshire CCG have used an "In my shoes" survey to look at experiences of using health, education and social care services. Feedback was largely positive but it did provide some key learning around teams working more collaboratively and some specifics around the neurodevelopment diagnosis pathway.

In July 2020, the SEND Improvement Group in Tameside & Glossop commissioned an independent survey to gather information about the lived experiences of families in Glossop and suggestions on how SEND services might be improved. Parents and carers were invited to participate in the survey if they had a child or young person aged 0-25 with special educational needs and/ or a disability in receipt of health support commissioned by Tameside and Glossop CCG. The survey received responses from 30 families; two thirds of these families (19) had a child with an Education, Health and Care Plan. Headline findings reveal high levels of dissatisfaction from families about not knowing where to get help when they first needed it; not receiving support at the right time and a lack of regular updates on their child's progress and development. A Local Offer working group is in place to develop the site and as a result of this work, parents from the Glossop area have become involved. Derbyshire Parent carer Voice have also begun direct activity to improve communication and support for Glossop.

In January 2021, Derbyshire Parent Carer Voice conducted a survey to elicit the views of parents and carers across Derbyshire in relation to the Learning Disability Health Check. Of the 30 responses, 20 parents/ carers indicated that their young person (aged 14 years or over) had not accessed an annual health check. 16 respondents (80%) indicated that this was because of a lack of awareness or because an annual health check had not been offered. Of those young people attending a health check, 9 provided feedback. Most reported a positive/neutral experience with just 2 reporting a negative experience.

In the 2019/20 financial year, the council received 103 complaints in relation to SEND. Just 25% of complaints were responded to within timeframe. Since November 2019, officers have looked at the emerging themes from complaints and actioned a change of practice. There are now regular weekly meetings between the SEND head of service and complaints' manager to ensure communication and a timely response to complainants. As a result, there has been a significant reduction in lower level complaints with a greater proportion of responses within timescale (72% in the period April to December 2020).

How well does the SEND assessment process work?

In 2019 there were 705 new requests for assessments for an EHC Plan in Derbyshire. Of these, 269 (38.2%) did not proceed to a formal assessment of needs. Statistically, this was significantly higher than both the East Midlands (16.1%) and England averages (22.8%).²³ Since 2016, the rate has decreased by 11.2 percentage points.

In Derbyshire, over the last 4 years, the number of new requests for assessment have steadily increased and are now more than double the number requested in 2016 (334).

In Derbyshire there were 547 children and young people formally assessed during the 2019 calendar year. Of these, 519 (94.9%) had new EHC Plans made during the 2019 calendar year. Nationally, 94.1% of assessments completed resulted in an EHC plan.

In Derbyshire, of the new EHC Plans issued during the 2019 calendar year (excluding cases where exceptions apply), 43.4% were issued within the 20 week time limit, an increase from 34% in 2018. When including cases where exceptions apply, 50.1% were issued within the 20 week time limit, an increase from 33.9% in 2018. These rates were significantly lower than the England averages. However, recent improvements to performance tracking has led to a considerable improvement in timeliness with 71% of assessments (including exceptions) completed within timescale during 2020.

In Derbyshire, there were 43 mediation cases held during the 2019 calendar year. Of these mediation cases, 14 (32.6%) were followed by appeals to tribunal during the 2019 calendar year. This is a decrease since 2018 (41.8%) but remains higher than the national average (25.1%).

Strategic themes and areas for development

Derbyshire has formulated a three year strategy through which to deliver a renewed vision for children and young people with SEND.

Our vision is that all children and young people with SEND will be empowered to make choices which lead to fulfilled lives where they are included in their local community socially, access meaningful employment, are physically and emotionally healthy and live as independently as possible.

There is a joint local transformation plan in place which includes six strategic themes through which this vision will be delivered and a SEND Strategic Board which monitors progress bi-monthly.

²³ Department for Education. Education, health and care plans [online] <https://explore-education-statistics.service.gov.uk/find-statistics/education-health-and-care-plans>

Theme one: Strategic partnership working and co-production with parents and young people
Theme two: Integrated working and joint commissioning across education, health and care
Theme three: Identification and assessment of needs, information and access to support
Theme four: Inclusive capacity in mainstream schools and settings, and providing targeted support for inclusion
Theme five: Responsive, effective local specialist provision
Theme six: Preparation for a fulfilling and successful adult life

Appendices

1. Referral to SEND health and care services in Tameside & Glossop²⁴

Referrals to Services	2015/15	2015/16	2016/17	2017/18	2018/19	Trend
Paediatrics	4474	5087	6089	6527	6235	
Paediatric Audiological Medicine	927	1105	1094	1224	1254	
Physiotherapy	1192	1242	1272	1027	917	
Ophthalmology	923	961	1011	916	988	
Neurology	253	258	494	411	361	
Cardiology	325	374	313	257	317	
Pain Management	237	183	201	119	75	
Occupational Therapy	28	67	87	77	86	
Dietetics	54	130	74	93	65	
Diabetic Medicine	55	25	40	46	16	
Rheumatology	130	136	91	122	108	
Clinical Neurophysiology	205	281	217	220	196	
Child and Adolescent Psychiatry/Mental Health	65	53	35	24	32	
Portage	28	49	36	46	51	
Learning Disability Health Checks (all ages)			262	253	260	
CAMHS			2205	2845	3270	
Speech and Language Therapy (Children <18)		929	1068	1398	1454	
Speech and Language Therapy (adults)		1199	1237	1327	1155	
Autism Assessment		31	34	53	32	
ADHD Assessment		112	122	162	169	

2. Referral waiting times for services that support the SEND population in Tameside and Glossop (2019/20)

Waiting times for SEND support services	Annual Average 2019/20
Average waiting time for Hospital Paediatrics assessment (Weeks)	5
% of Hospital Paediatric referrals seen within 18 weeks	98%
Average waiting time for Community Paediatrics assessment (Weeks)	8
% of Community Paediatric referrals seen within 18 weeks	97%
Average waiting time for Multi-Agency Autism Team (MAAT) assessment (Weeks)	64
% of MAAT referrals commenced within 12 weeks	29%
Average waiting time for ADHD assessment (weeks)	42
% of ADHD referrals seen within 18 weeks of referral to pathway	84%
Average waiting time for SALT assessment (Weeks)	21
% of SALT referrals seen within 18 weeks	52%
Average waiting time for Physio assessment (Weeks)	16
% of Physio referrals seen within 18 weeks	55%
Average waiting time for OT assessment (Weeks)	25
% of Occupational Therapy referrals seen within 18 weeks	29%
Average waiting time for Healthy Young Minds (HYM) assessment (Weeks)	5
% of CYP seen within 18 weeks in HYM	91%

²⁴ Joint Strategic Needs Assessment for Tameside & Glossop – Special Educational Needs and Disability, May 2020.
[online] <https://www.tameside.gov.uk/TamesideMBC/media/policy/Special-Educational-Needs-and-Disability-JSNA.pdf>

3. Referrals to SEND health and care services in Derby and Derbyshire²⁵

Referrals to Services	Area	15/16	16/17	17/18	18/19	19/20	Trend
Paediatrics	CRH	1,983	1,889	1,614	2,680	1,044	
Paediatric Audiological Medicine	CRH	949	916	978	1,529	792	
Ophthalmology	CRH	1,239	1,754	1,610	3,306	1,368	
Neurology	CRH	0	0	0	<5	<5	
Cardiology	CRH	499	487	557	0	401	
Paediatrics	UHDB	12,998	13,761	12,872	14,101	15,076	
Paediatrics Audiological Medicine	UHDB	0	6,149	5,882	6,530	6,232	
Paediatric Neuro-Disability	UHDB	31	496	833	972	752	
Ophthalmology	UHDB	6,623	6,138	6,105	6,391	6,143	
Neurology	UHDB	8	0	0	0	36	
Cardiology	UHDB	<5	<5	<5	76	1,400	
Diabetic Medicine	UHDB	2,940	3,030	2,959	2,759	0	
Rheumatology	UHDB	0	0	0	0	99	
CAMHS	DHcFT/CRH	-	-	-	88	54	
Clinical Psychology	DHcFT/CRH	-	-	-	27	20	
Community Paediatric	DHcFT/CRH	-	-	-	210	206	
Clinical Neurodevelopmental	DHcFT/CRH	-	-	-	111	64	
MAAT	DHcFT/CRH	-	-	-	89	47	
Paediatric Occupational Therapy	DHcFT/CRH	-	-	-	0	18	
Paediatric Physical Therapy	DHcFT/CRH	-	-	-	<5	<5	
SALT (Speech and Language)	DHcFT/CRH	-	-	-	39	9	
CAMHS	DHFT/UHDB	-	-	-	47	29	
Clinical Psychology	DHFT/UHDB	-	-	-	29	28	
Community Paediatric	DHFT/UHDB	-	-	-	221	192	
Clinical Neurodevelopment	DHFT/UHDB	-	-	-	73	42	
MAAT	DHFT/UHDB	-	-	-	61	36	
Paediatric Occupational Therapy	DHFT/UHDB	-	-	-	<5	7	
SALT (Speech and Language)	DHFT/UHDB	-	-	-	39	9	
Physiotherapy	DHcFT and CRH	-	-	398	364	405	
Occupational Therapy	DHcFT and CRH	-	-	1,035	823	600	
LD Health Checks	DHcFT and CRH	-	-	152	129	173	
Autism + ADHD (Neuro Development)	DHcFT and CRH	-	-	534	482	1137	
Community Peads	DHcFT and CRH	-	-	3,307	2,881	3,338	
Continence	DHcFT and CRH	-	-	449	466	306	
CIC	DHcFT and CRH	-	-	297	278	213	
LD Health Checks	DHFT/UHDB	45	91	101	85	246	
Paediatric Physical Therapy	DHFT/UHDB	-	-	-	0	0	
Pain Management	CRH	-	-	-	-	-	
Dietetics	CRH	-	-	-	-	-	
Diabetic Medicine	CRH	-	-	-	-	-	
Rheumatology	CRH	-	-	-	-	-	
Clinical Neurophysiology	CRH	-	-	-	-	-	
Pain Management	UHDB	-	-	-	-	-	
Dietetics	UHDB	-	-	-	-	-	
Clinical Neurophysiology	UHDB	-	-	-	-	-	

Cells containing (-) denote that data was requested but is not available in the main due to DDCCG only forming in 2019 with the merging of 4 CCGs

²⁵ The Following abbreviations have been used: CRH (Chesterfield Royal Hospital NHS FT), UHDB (University Of Derby and Burton Teaching Hospitals NHS FT), DHcFT (Derbyshire Community Health Services NHS FT), DHFT (Derbyshire Healthcare NHS FT).

4. Referral waiting times for services that support the SEND population in Derby and Derbyshire (2019/20)

Waiting times for SEND support services	Annual average 2019/20
Average waiting time for Hospital Paediatrics assessment (Weeks)	-
Average waiting time for Community Paediatrics assessment (Weeks)	21.7
Average waiting time for Multi-Agency Autism Team (MAAT) assessment (weeks)	-
Average waiting time for ADHD assessment (weeks)	10.5
Average waiting time for SALT assessment (Weeks)	34.37
Average waiting time for Physio assessment (Weeks)	20.8
Average waiting time for OT assessment (Weeks)	16.1